

# DATA FORM: PLANNING YOUR LEGACY

## Samford University

DATE \_\_\_\_\_

Please use the back of sheets or additional sheets to provide information.

### GENERAL INFORMATION

*About Me*

*My Spouse*

Full Legal Name		
Nickname		
Address		
City, State ZIP		
Home Phone		County _____
Work Phone		
Cell Phone		
Email Address		
Occupation		
Date of Birth		
Social Security #		
Father's Full Name		
Mother's Full Name		

Circle each parent that is deceased.

Previous Marriage?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Marital Status	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Single	<input type="checkbox"/> Widowed <input type="checkbox"/> Divorced

### INFORMATION ABOUT CHILDREN

*Child #1*

*Child #2*

*Child #3*

Name of Child			
City and State			
Birthday			
Marital Status			
# of Grandchildren			
Comments			

(disabled, from previous marriage, etc.)

**OTHER GENERAL INFORMATION**

1. To what do you credit the assets that you have been able to accumulate?

\_\_\_\_\_

\_\_\_\_\_

2. Name any people (not listed above) you wish to remember in your estate plan (also list their relationship to you, their address and phone number).

Name of Individual	Relationship	Amount or %
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Name the charities or ministries that you want to remember in your estate plan.

Name of Charity	Amount or %	Any designation?
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Would you prefer to leave money to your charities as (check one)

- Outright     After you receive income from them

5. If you had an unlimited supply of money, how much would you want to leave your children (assume no tax concerns)? \$ \_\_\_\_\_

6. Would you prefer to leave money to your children (or others) as (check one)

- Outright     Income for lifetime or period of years     Some of both

7. Do you have a safe deposit box? If so, please give bank name and location, as well as the names of the people who are allowed to open it? \_\_\_\_\_

\_\_\_\_\_

8. If you are you expecting an inheritance, how much approximately? \$ \_\_\_\_\_

# NET WORTH STATEMENT

Account Title or Ownership (and beneficiaries) can be abbreviated as follows: H = Husband, W = Wife, JTROS = Jointly owned with Rights of Survivorship, JTC = Joint Tenancy in Common, etc.

## WHAT I (WE) OWN

<i>Financial Institution (Bank and Investment Accounts)</i>	<i>Owner</i>	<i>Approx. Amount</i>	<i>Retirement?</i>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>

## *Individual Certificates Held (stocks, bonds, U.S. savings bonds, etc.)*

<i>Name of Asset</i>	<i>Owner</i>	<i>Shares</i>	<i>Approx. Value</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## *Real Estate Owned*

<i>Description</i>	<i>Owner</i>	<i>Shares</i>	<i>Approx. Value</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## *Life Insurance Policies*

<i>Description</i>	<i>Owner</i>	<i>Beneficiary</i>	<i>Face Amount</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Other Assets (business interests, mineral interests, etc.)*

<i>Description</i>	<i>Owner</i>	<i>Approx. Value</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**WHAT I (WE) OWE**

<i>Description of Indebtedness</i>	<i>Owner</i>	<i>Approx. Debt Amount</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**ESTATE DISTRIBUTION** (Use the back of page for additional information.)

This is an area that may need more exploration, but here are some possible options (please check those that you believe might apply to you)

- I wish to leave all my assets to my spouse if I predecease him/her. Include estate tax planning if needed. If checked, please check one of the following:
  - I want to leave this outright to my spouse.
  - I want to leave this in trust for my spouse managed by my trustees below.
- I wish to leave specific gifts to charities at my death. We will need to discuss which charities, whether you wish to leave a percentage or a certain amount/asset, and whether you wish to leave an outright gift or an endowment gift.
- I wish to leave specific gifts (other than personal property gifts which may be given through the use of a memorandum) to individuals at my death.
- I wish to leave the rest of my assets to my children (or their share to their children if a child predeceases me).
- Other (The above are simply common options. Write out in your words any other desires) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Common disaster (If all the above beneficiaries predecease me, then what?) \_\_\_\_\_  
\_\_\_\_\_

**ESTATE ADMINISTRATION**

1. Who will handle the administration of your estate at your death (executor/executrix)?

- \_\_\_\_\_
- a. Who will be the alternate administrator? \_\_\_\_\_
- b. Who will be the second alternate? \_\_\_\_\_

2. Will these administrators also be the trustees of trusts you may establish at death?  Yes  No

If "NO", then list trustees in order \_\_\_\_\_

3. a. Who do you want to be authorized to sign for you under a durable power of attorney?

\_\_\_\_\_

b. Do you want this power to be given immediately or only when two doctors declare you to be incompetent to handle your own affairs?

- Immediately  Only when declared incompetent ("springing" power)

4. If you have minor children, who is your first choice as guardians for them (assuming both parents die)?

\_\_\_\_\_

Who is your second choice? \_\_\_\_\_

5. If you leave money to minor children, the trustees would normally manage the funds for your children through their years of development and academic training (i.e., age 21). At what age do you want the child's share to be given outright to him/her? \_\_\_\_\_

6. Do you prefer to utilize a living revocable trust, where assets which normally would be probated could be distributed without legal process?  Yes  No If "Yes", then would you want to be your initial trustee (often with a spouse) and then have the above trustees assume their responsibility at death?  Yes  No (Please note that a revocable trust may cost more than a will. Also, it requires additional efforts to correctly fund the trust.)

7. Do you want a Living Will, which is a medical directive to your physician to avoid the use of extraordinary measures to simply prolong your life if your condition is determined to be terminal, or if you are in a permanently comatose state?  Yes  No

**I (we) hereby state that the above information is true and correct to the best of our knowledge.**

**Signatures** \_\_\_\_\_

(Internal Office Use Only)									
<input type="checkbox"/> Will	<input type="checkbox"/> Codicil	<input type="checkbox"/> Ind. RT	<input type="checkbox"/> JRT	<input type="checkbox"/> Amend	<input type="checkbox"/> DPOA	<input type="checkbox"/> Sprng	<input type="checkbox"/> LW	<input type="checkbox"/> PPM	<input type="checkbox"/> Deed

# **CONTACT INFORMATION ON BENEFICIARIES OF YOUR ESTATE**

Include name, address and phone number of beneficiaries of any personal property memos.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_
5. \_\_\_\_\_  
\_\_\_\_\_
6. \_\_\_\_\_  
\_\_\_\_\_
7. \_\_\_\_\_  
\_\_\_\_\_
8. \_\_\_\_\_  
\_\_\_\_\_
9. \_\_\_\_\_  
\_\_\_\_\_
10. \_\_\_\_\_  
\_\_\_\_\_

# YOUR ESTATE PLANNING CHECKLIST

Before you meet with your attorney, check each item completed or in-hand.

1. Legal name, permanent address, date of birth \_\_\_\_\_
2. Date and place of marriage; if divorced or separated, provide details \_\_\_\_\_
3. Pre- or post-marital agreements \_\_\_\_\_
4. Current wills and codicils \_\_\_\_\_
5. Living trust agreements (revocable and irrevocable) \_\_\_\_\_
6. Names and addresses of children and other heirs \_\_\_\_\_
7. Employment information \_\_\_\_\_
8. Names and addresses of person to be your personal representatives, guardian or trustee \_\_\_\_\_
9. Income tax returns for last three years \_\_\_\_\_
10. Gift tax returns \_\_\_\_\_
11. Life insurance policies \_\_\_\_\_
12. Information on pensions, profit sharing and deferred compensation plans \_\_\_\_\_
13. Business agreements related to corporations, partnerships and sole proprietorship interests \_\_\_\_\_
14. Listing of all real estate including type of ownership, present fair market value and mortgages \_\_\_\_\_
15. Listing of personal property including ownership, location and value \_\_\_\_\_
16. Outline of objectives and disposition of your estate \_\_\_\_\_
17. Legal names and addresses of charitable organizations you wish to benefit \_\_\_\_\_