



An Estate Planning Guide

1. ESTATE PLAN – (add another sheet as necessary) My Will/Living Trust

Location _____

Attorney _____

Date of Last Update _____

I have a separate list of personal items to distribute: ___ NO ___ YES Location _____

Name of Executor/Trustee Named in My Will

Name _____

Phone/e-mail _____

Name _____

Phone/e-mail _____

2. Important Documents – (add another sheet as necessary) Location of:

Birth Certificate _____

Marriage Certificate _____

Children's Birth Certificates _____

Advance Directive _____

Durable Power of Attorney for Healthcare _____

Durable Power of attorney for Finances _____

Divorce Decree _____

Income Tax Records

Accountant _____

Address _____

Phone/Web site/e-mail _____

City _____

State _____

Zip _____

Social Security Number _____

Special S.S.I. Benefits _____

Veteran Benefits ___ NO ___ YES

VA Claim Number _____

Location of Discharge Document _____

IRA/KEOGH/401(k)/403(b)/Pension Plan

Type _____

Custodian _____

Address _____

Phone/Web site/e-mail _____

City _____

State _____

Zip _____

Type _____

Custodian _____

Address _____

Phone/Web site/e-mail _____

City _____

State _____

Zip _____

3. Assets – (add another sheet as necessary)

Life Insurance Policies

Name	Policy Number	
Company	Agent	
Address	Phone/Web site/e-mail	
City	State	Zip
Owner	Amount	

Location of Policy Information

Commercial Annuities

Company Name	Contract Name	
Address	Phone/Web site/e-mail	
City	State	Zip

Real Estate

Real Estate Owned		
Location of Deed, Mortgage and Documents		
Insurance Company Name		
Address	Phone/Web site/e-mail	
City	State	Zip
Location of Policy		

Automobile Insurance Policy

Company Name	Policy Number	
Address	Phone/Web site/e-mail	
City	State	Zip

Bank Accounts

Bank Name		
Address	Phone/Web site/e-mail	
City	State	Zip
Account Type	Number	

Certificates of Deposit

Bank Name

Address

Phone/Web site/e-mail

City

State

Zip

Account Type

Number

Bank Name

Address

Phone/Web site/e-mail

City

State

Zip

Account Type

Number

Safe Deposit Box

Number

Bank Name

Address

Phone/Web site/e-mail

City

State

Zip

Securities/Mutual Funds

Broker Name

Address

Phone/Web site/e-mail

City

State

Zip

Location of Stock Certificates

Broker Name

Address

Phone/Web site/e-mail

City

State

Zip

Location of Stock Certificates

Government Bonds

Business/Other Assets

4. Memorial Service/Funeral Plan – (add another sheet as necessary)

Basic Instructions

Burial Cremation Other _____

Preferred Funeral Home _____

Address _____ Phone/Web site/e-mail _____

City _____ State _____ Zip _____

Service Location

Church/Temple Funeral Home Other _____

Flowers _____

Hymns/Songs _____

Pallbearers _____

Scripture Readings _____

Other Readings _____

Church/Temple Information

Name _____

Address _____ Phone/Web site/e-mail _____

City _____ State _____ Zip _____

Officiant _____

Other People to Contact

Name _____ Relationship _____ Phone/e-mail _____

Name _____ Relationship _____ Phone/e-mail _____

Name _____ Relationship _____ Phone/e-mail _____

Memorial Contributions

I would like gifts to be directed in my memory to the following organizations/charities:

Name

Name

Name

This **Estate Planning Guide** is provided courtesy of Doorstep, Inc., 1119 SW 10th Ave., Topeka, KS 66604. **It is intended to be a useful tool for you in your estate planning.**