

PERSONAL INVENTORY AND RECORD BOOK

THE FIRST STEP IN AN ESTATE PLAN

This booklet is a tool to provide you with a clear, precise record of your personal and financial information. It can be used to prepare an estate plan and is also a convenient way of organizing information for your loved ones. You may wish to provide a copy to a family member and to your executor as a safeguard against loss.

PERSONAL INFORMATION

Date of Birth _____

Birth Certificate Yes No Located _____

Citizenship—date/place of naturalization if not US citizen by birth _____

Social Security # _____

Father’s Full Name _____

Mother’s Full Name _____

Religious Affiliation _____

Place of Worship _____

Address _____

Marital Status

Single Married Widowed

Divorced Separated

Spouse’s Name _____

Date & State married _____

Certificate located _____

Previous marriage Yes No

Date _____ Marriage _____

Marriage ended by Death Divorce

Children _____

Name _____

Address _____

Children _____

Name _____

Address _____

Military Service—Dates _____

Service Serial # _____

Discharge papers located _____

LIVING WILL DIRECTIVE & ORGAN DONATION

I have a living will directive stating my wishes for medical care and treatment. The document is dated _____ and located _____

Individuals having copies:

Name _____ Phone _____

Address _____

Name _____ Phone _____

Address _____

Name _____ Phone _____

Address _____

I have agreed to donate organs to (organization)

Papers are located _____

I have given the following person durable power of attorney which will go into effect upon my inability to act for myself

Name _____ Phone _____

Address _____

LAST WILL AND TESTAMENT

Will written _____ Located _____

Executor of will _____

Address _____

Attorney _____

Address _____

In my will, I have left the following charitable bequests

Charity _____

Bequest Amount _____

Charity _____

Bequest Amount _____

FUNERAL AND BURIAL ARRANGEMENTS

I have given instructions regarding my funeral in

Will Letter Other

I own Cemetery plot Cemetery vault None

Name _____

Location _____ Section # ____ Plot # _____

Location of Deed _____

Other funeral arrangements _____

BANK ACCOUNTS AND SAFE DEPOSIT BOX

Bank Name _____

Checking Savings Account # _____

Joint Individual

Bank Name _____

Checking Savings Account # _____

Joint Individual

Bank Name _____

Checking Savings Account # _____

Joint Individual

RETIREMENT ACCOUNTS

Company Name _____

Address _____

Account # _____

Beneficiary _____

Company Pension _____

Social Security _____

Indiv. Retirement Acct. _____

Annuities _____

Beneficiary(ies) _____

Other Retirement Benefits _____

Beneficiaries _____

INVESTMENTS

I own various stocks and bonds, held in street name, which are located at _____

Stocks/Bonds/Mutual Funds

Company _____

Shares ____ Date Purchased _____ Cost Basis _____

Company _____

Shares ____ Date Purchased _____ Cost Basis _____

Company _____

Shares ____ Date Purchased _____ Cost Basis _____

Records of purchase and sale are located _____

U.S. Savings Bonds—I own under the following ownership registrations My name alone

Joint with _____

Type _____ Face Value _____

Issue Date _____ Maturity _____

Serial Number _____

Type _____ Face Value _____

Issue Date _____ Maturity _____

Serial Number _____

Certificates of Deposit _____

Amount _____ Date of Redemption _____

Certificates of Deposit _____

Amount _____ Date of Redemption _____

Partnerships _____

TRUST FUNDS

Description of my Trusts_____

Testamentary Trust_____

Trustee_____

Assets in Trust_____

Beneficiaries_____

Attorney of Record_____

Firm_____

Address_____

Charitable Remainder Trust_____

Trustee_____

Assets in the trust_____

Income Recipients_____

Charitable Beneficiaries_____

Papers are located_____

Existing Trust_____

I have created a trust for the benefit of _____

Date established_____

Trust Agreement located_____

Attorney who drafted the Trust Agreement

Firm_____

Address_____

I am a beneficiary under a Trust established by_____

Papers are located_____

PERSONAL EMPLOYMENT

My Employer_____

Address_____

I participate in the following benefit plans_____

Other business interests_____

LIFE INSURANCE

All policies owned by me on my life

Insurance Company_____

Policy #_____ Amt. of policy_____

Location_____

Beneficiaries_____

Policies owned by others on my life (incl. charities)

Policies which I own on the lives of others_____

Location

Person Insured_____ Amount_____

Address_____

Insurance Agents or Brokers

Name_____

Company_____

Address_____ Ph._____

Name_____

Company_____

Address_____ Ph._____

I have unpaid loans against these policies

Policy #_____ Amount Due_____

OTHER INSURANCE

Company _____
Coverage _____
Insurance Agent _____
Phone _____ Policy # _____
Location of Policy _____

RESIDENCE AND OTHER REAL ESTATE

Residence Address _____

I own residence Yes No

Ownership title is held in

My name alone

Joint with _____

Mortgage on property Yes No

Held by _____

Documents concerning this property located _____

I own other real estate located at _____

Homeowner's insurance broker _____

Firm _____ Phone _____

Address _____

TANGIBLE PERSONAL PROPERTY

Automobile(s) _____

Jewelry, Art, Antiques, Collectibles _____

Complete Inventory of my personal property is lo-
cated _____

PERSONAL DEBTORS AND CREDITORS

Name of Debtor _____

Address _____

Amount owed to me _____

Name of Debtor _____

Address _____

Amount owed to me _____

I have the following outstanding loans

Creditor _____

Loan # _____

Amount of Loan _____ Date final Pymnt _____

Creditor _____

Loan # _____

Amount of Loan _____ Date final Pymnt _____

Credit Card Debt

Company _____

Account # _____

Phone _____

Company _____

Account # _____

Phone _____

TAX RETURNS

My tax preparer _____

Firm _____

Address _____

Phone _____

Copies of my income tax returns are located at _____

PERSONAL ADVISORS

Physician _____

Address _____

Specialty _____ Phone _____

Physician _____

Address _____

Specialty _____ Phone _____

Clergy person _____

Address _____

Phone _____

Attorney _____

Address _____

Phone _____

Accountant _____

Address _____

Phone _____

Insurance Agent _____

Address _____

Phone _____

Trust Officer _____

Address _____

Phone _____

Investment Broker _____

Address _____

Phone _____

Other _____

Address _____

Phone _____

LOCATION OF IMPORTANT PAPERS

Vital Statistics _____

Trust Agreements _____

Last Will & Testament _____

Bonds and Securities _____

Bank Books _____

Insurance Policies _____

Business Agreements _____

Titles and Deeds _____

Tax Papers _____

Charitable Documents _____

Military Service Documents _____

Others _____