



**GEORGETOWN
LAWLEY**
GROUP

JUST IN CASE

Personal Estate Planning Blueprint

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Financial Blueprint

Personal Asset Inventory & Personal Accounts

Name: _____

Date: _____

Type of Account	Institution Name	Registration	Account #	Value	Beneficiaries
<i>Checking</i>					
<i>Savings</i>					
<i>CDs</i>					
<i>Money Markets</i>					
<i>Cyber Accounts</i>					

Financial Blueprint Continued...

Type of Account	Institution Name	Registration	Account #	Value	Beneficiaries
<i>IRA/SEP</i>					
<i>401(k)</i>					
<i>Individual Securities</i>					
<i>Trust Accounts</i>					
<i>Other</i>					

Vested Retirement Interests

Type of Account	Company	Comments
<i>Pension</i>		
<i>Profit Sharing</i>		
<i>Stock Options</i>		
<i>Military Benefits</i>		
<i>Other</i>		

Loans

Loans to be Paid

Type of Account	Institution Name	Registration	Account #	Value
<i>Auto Loans</i>				
<i>Educational Loans</i>				
<i>Personal Loans</i>				
<i>Credit Cards</i>				
<i>Other</i>				

Loans Owed to Me

Name of Debtor	Address	Phone Number	Location of Agreement	Value

Insurance Policy Checklist

Type of Insurance	Insurance Company	Registration	Policy Number	Value (if applicable)	Beneficiaries (if applicable)
<i>Whole Life</i>					
<i>Term Life</i>					
<i>Health</i>					
<i>Homeowner</i>					
<i>Liability</i>					
<i>Long-Term Care</i>					
<i>Auto</i>					
<i>Other</i>					

Real Estate Holdings & Mortgages

Type of Property	Address	Mortgage/Home Equity	Ownership	Value
<i>Primary Residence</i>				
<i>Vacation Residences</i>				
<i>Rental Properties</i>				
<i>Time Share</i>				
<i>Other Properties</i>				

Document Checklist

	Location	Date	Comments
Vital Documents			
<i>Living Will</i>			
<i>Will</i>			
<i>Letter of Instruction</i>			
<i>Health Care Proxy</i>			
<i>Power of Attorney</i>			
Living Documents			
<i>Birth Certificates</i>			
<i>Yours</i>			
<i>Spouse/Significant Other</i>			
<i>Children</i>			
Social Security Cards			
<i>Yours</i>			
<i>Spouse/Significant Other</i>			
<i>Children</i>			
Social Security Records			
Marriage License			
Prenuptial Agreement			
Postnuptial Agreement			
Divorce Papers			

Document Checklist Continued...

	Location	Date	Comments
Residential Documents			
<i>Deed</i>			
<i>Title</i>			
<i>Survey Mortgage Information</i>			
Miscellaneous Information			
<i>Military Service Records</i>			
<i>Motor Vehicle Title</i>			
Income & Tax			
<i>Tax Returns</i>			
<i>W-2 Forms</i>			
<i>Pension Records</i>			
<i>Disability Records</i>			
<i>Workers Compensation Records</i>			
Other			

Legal Judgement Checklist

Type of Judgement	Name	Address	Phone Number	Amount	Location of Judgement
<i>Pending Claim Against Me</i>					
<i>Pending Claim in My Favor</i>					
<i>Uncollected Judgement Against Me</i>					
<i>Uncollected Judgement in My Favor</i>					
<i>Pending Lawsuit Against Me</i>					
<i>Pending Lawsuit in My Favor</i>					

Business Interests

Company	Ownership (Single, Joint, Custodian, Trust)	Comments

Business Name: _____

Date: _____

Document	Location	Date	Comments
<i>Incorporation/Partnership Papers</i>			
<i>Federal Tax ID Information</i>			
<i>State Sales Tax ID Information</i>			
<i>Contracts</i>			
<i>Tax Records</i>			
<i>Financial Records</i>			
<i>Other</i>			

Business Bank Accounts

Type of Account	Institution Name	Registration	Account Number	Value	Beneficiaries
<i>Checking</i>					
<i>Savings</i>					
<i>CDs</i>					
<i>Cyber Accounts</i>					
<i>Line of Credit</i>					
<i>SEP IRA</i>					
<i>401(k)</i>					

Business Insurance Policies

Type of Insurance	Insurance Company	Registration	Policy Number	Value (if applicable)	Beneficiaries
<i>Liability</i>					
<i>Whole Life</i>					
<i>Term Life</i>					
<i>Buy-Sell Agreements</i>					
<i>Other</i>					

Funeral Checklist

Funeral Arrangements

- Funeral Home/Director: _____
- Address: _____
- Phone: _____

Is your funeral pre-paid with the funeral home? YES _____ NO _____

If yes, where is the paperwork? _____

Did you want a burial or a cremation? _____

What type of service do you want?

- Funeral Service- having the body present at the service
- Memorial Service- the absence of the body at the service
- Graveside Service- services (either cremation or casket burial) that takes place at the grave site
- Celebration of Life- as a gathering of friends and family without religious ceremonies
- No Funeral Service

Where will the service take place?

- Name of location: _____
- Address: _____
- Phone: _____

Do you want anyone special to speak? _____

Who will conduct the services? _____

Funeral Checklist Continued...

Items to consider for wake or memorial service

- Families are welcome to bring in memorabilia or pictures of a person's life. Tables to display any or all memorabilia as the family chooses can be provided.
- Families may also create display boards or collages using cork boards to display photographs or other memorabilia on easels.
- Enlarged pictures of your loved ones can serve as centerpieces for service.

Veteran's Funeral additional information

- A copy of DD-214 is needed to file for veteran's benefits and military honors.
- Benefits available to include: an American flag, some form of military honors provided by the branch of service or local VFW or American Legion, burial in a National Cemetery, government-issued grave marker and Presidential Memorial Certificate.

Clothing (applicable for services with viewing)

- Full set of clothing, including any undergarments appropriate to outer garment chosen. Shoes are optional.
- Glasses, rings, necklaces, watches, tie tacks, pins, or any other jewelry. Tell the funeral director if these items should be returned prior to burial or creation.

Death Certificate Information: *It is recommended that at least 10 copies of the death certificate be ordered.*

Full Legal Name: _____

Date, city and state or foreign country of birth: _____

Social Security Number: _____

Home Address: _____

Occupation (job description and business): _____

Marital Status: _____

Name of Spouse (needed even if widowed): _____

Parents' Names (including mother's maiden name): _____

Last year of education completed (just a number): _____

Obituary Information*

Name: _____ Nickname(s): _____

Date and place of marriage (if applicable): _____

Occupation and name(s) of businesses: _____

Date of retirement (if applicable): _____

If a Veteran: branch, rank and dates of service: _____

Degrees or other special training: _____

Organizations and Memberships: _____

Church membership or faith: _____

Awards and Honors received: _____

Other information of Interest and Hobbies: _____

Children and their spouses/partners, plus city and state of residence: _____

Siblings and their spouses/partners, plus city and state of residence: _____

Grand and great-grandchildren (note: Some newspapers will not print names, only numbers): _____

Family members who have preceded in death: _____

Newspapers in which the obituary is to be printed (note: Many newspapers do not provide free obituaries): _____

**Be sure to include a recent photograph to accompany the obituary.*

Upon Death Notice Checklist*

*After informing family and friends, the following checklist may be helpful. Use this list as a tool to help, but it may not be a complete list of the persons to be informed after death.

	Name	Phone Number	Date Notified	Comments
Doctors				
	<i>Primary Physician</i>			
	<i>Specialist</i>			
	<i>Dentist</i>			
	<i>Other</i>			
Employment				
	<i>Employer</i>			
	<i>Employer Benefits Department</i>			
	<i>Pension Payers</i>			
	<i>Other</i>			
Financial				
	<i>Financial Advisor</i>			
	<i>Accountant</i>			
	<i>Credit Monitoring Agencies</i>			
	<i>Other</i>			
Legal				
	<i>Attorney</i>			
	<i>Executor</i>			

Upon Death Notice Checklist Continued...

	Name	Phone Number	Date Notified	Comments
Religious				
	<i>Clergy</i>			
	<i>Church</i>			
	<i>Other</i>			
Utilities				
	<i>Gas</i>			
	<i>Electric</i>			
	<i>Water</i>			
	<i>Cable</i>			
	<i>Phone</i>			
	<i>Cell Phone</i>			
	<i>Internet</i>			
Other				
	<i>Landlord</i>			
	<i>Post Office</i>			
	<i>Social Security Administration</i>			
	<i>Veterans Affairs Department</i>			
	<i>Home Security Company</i>			
	<i>Newspaper/Magazine Subscriptions</i>			
	<i>Charities/Volunteer Groups/Organizations</i>			

Online Profiles

<i>Account Name</i>	
<i>User ID</i>	
<i>Password</i>	
<i>Other Information</i>	

<i>Account Name</i>	
<i>User ID</i>	
<i>Password</i>	
<i>Other Information</i>	

<i>Account Name</i>	
<i>User ID</i>	
<i>Password</i>	
<i>Other Information</i>	

<i>Account Name</i>	
<i>User ID</i>	
<i>Password</i>	
<i>Other Information</i>	

<i>Account Name</i>	
<i>User ID</i>	
<i>Password</i>	
<i>Other Information</i>	

<i>Account Name</i>	
<i>User ID</i>	
<i>Password</i>	
<i>Other Information</i>	

<i>Account Name</i>	
<i>User ID</i>	
<i>Password</i>	
<i>Other Information</i>	

<i>Account Name</i>	
<i>User ID</i>	
<i>Password</i>	
<i>Other Information</i>	

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