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SERVING NORTHWEST YEARLY MEETING OF FRIENDS CHURCH WITH DEFERRED GIVING PLANS

Dear Friend:

Being a good steward of worldly possessions is one of the primary calls of the Christian faith. Because you are reading this, we are confident Christian stewardship is important to you.

Most of us have heard stories about family members or other survivors who have had great difficulty settling the personal and financial affairs of someone close to them following a death.

Perhaps they couldn't locate the key to a safe deposit box, or important documents were never found. Sometimes valuable insurance policies are completely overlooked because the survivors are not even aware they exist. Not only are these survivors dealing with the stress of grief, they are sometimes placed in difficult legal situations because of lost records.

This form can help you avoid these problems in the event of your death or incapacity, but only if you act without delay. Not all of the items will apply to you. Simply complete the things that are important for your personal situation. Follow this easy process:

- Fill out your Estate Inventory Form completely and accurately.
- Review and update it at least once a year.
- Inform the appropriate people that you have established this record and tell them where it is located.
- Store it in a home filing unit, desk or safe rather than in a bank safe deposit box.

By recording all your personal stewardship information in one place, you can give your survivors an immeasurable gift - a gift that will stand as a legacy to the principles you believed in during your life.

Brendon Connelly  
Executive Director, NWYM Foundation

October 2009

Estate Inventory Form

# ESTATE INVENTORY FORM

**Offered to You as a Gift From** ...

**“PLANNING MAKES THE DIFFERENCE”**

DATE

First Name	Spouse	Last Name
Address		
City	State	Zip

His	Soc.	Birthday	Email Address
H e r s			

His	Home	Cell #	Work #
H e r s			

What law firm do you use?

Firm's Name	Attorney's Name	Phone #

What CPA firm do you use?

Firm's Name	CPA's Name	Phone #

Do you have a net-worth statement from your CPA or attorney?  Yes  No  Maybe

Do you have long-term care insurance?  Yes  No

## Estate Inventory Form

### I. STOCK, BONDS, MUTUAL FUNDS, CHECKING AND SAVINGS ACCOUNTS

Name	# Shares/Units	Cost Basis	Current Value

### II. PENSIONS & IRAS

Type	Name	Account Value

### III. NOTES & ACCOUNTS RECEIVABLE

Description	Initial Value	Remaining Payoff

### IV. NOTES & ACCOUNTS PAYABLE

Description	Initial Value	Remaining Payoff

### V. REAL ESTATE

Description	Current Mortgage Balance	Current Value



## Estate Inventory Form

### XI. PERSONAL

Do you currently have a will or living trust? (Check One)	<input type="checkbox"/> Will	<input type="checkbox"/> Trust	<input type="checkbox"/> None
Which instrument would you like to use?	<input type="checkbox"/> Will	<input type="checkbox"/> Trust	<input type="checkbox"/> None
Who would you like to become the executor of your estate? (i.e. A Personal representative if you choose a Will or a Successor Trustee if you choose a Living Trust).			
Who would you like to name as an alternate executor in the event your first choice cannot/will not serve?			
Beyond your spouse, who should be your alternate power of attorney for healthcare?	His		
	Hers		
Who should become your secondary power of attorney for healthcare in the event your alternate is not able to serve?	His		
	Hers		
Beyond your spouse, who should become your general power of attorney?			
Do you have a secondary general power of attorney in the event your alternate is not able to serve?			
Have you completed an "Advanced Healthcare Directive" form?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
What are your wishes?			

#### E. Disposition of your Body? (Check all that apply)

	Buried	Cremated	Vital Organs Harvested, Then Buried	Vital Organs Harvested, Then Cremated	Body used for Medical Research Indefinitely	Other
<b>His</b>						
<b>Hers</b>						

### XII. CHILDREN

What are your Children's Names?	DOB
1.	
2.	
3.	
4.	
5.	

## Estate Inventory Form

In the event of your premature death, who should be your children's guardian?

Name		Phone # where they can be reached
Address		
City	State	Zip

Who do you select as your alternate guardian, in the event your primary guardian does not survive you, is incapacitated, or chooses not to serve?

Name		Phone # where they can be reached
Address		
City	State	Zip

Who should serve as trustee of the minor children's trust your estate would create during the period before your children reach the age of majority?

Name		Phone # where they can be reached
Address		
City	State	Zip

How would you like them to receive their inheritance? (Check one)

- Large lump sum all at once. Please explain: \_\_\_\_\_
- Over a period of time. Please explain: \_\_\_\_\_
- A combination of these two. Please explain: \_\_\_\_\_
- Haven't decided

### XII. GRANDCHILDREN

List Your Grandchildren's Names	DOB
1.	
2.	
3.	
4.	
5.	
6.	
7.	

**Estate Inventory Form**

**XIII. CHARITABLE BEQUESTS**

Do you have an interest in supporting a charitable cause(s) through your estate?  Yes  No

Please list charities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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Special instructions. . . \_\_\_\_\_

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