INVENTORY AND Planning Guide



AN INVENTORY BOOKLET For Your Important Estate Planning Information

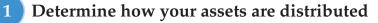
Provide your family and loved ones with a one-stop guide that can help identify and locate all your important documents when it comes time to settle your affairs. Once you have completed this guide, give a copy to your executor and attorney, keep the original with your other important papers, and update it at least every two to three years. If you are married, have your spouse complete his or her own separate guide.

Your legal name
Legal name of spouse
Maiden name
Address
City/State/Zip
Phone
Email
Social Security Number
Birth date
Today's date

For additional copies of this booklet, please contact Elizabeth Góral-Makowski at emakowski@soar-usa.org or call (202) 529-7627. You can also download a copy at www.soar-usa.org/guide.

Will

Do you have one? \Box Yes \Box No			
Location of original document			
Date created			
Name of attorney who prepared the document			
Phone			
Email			
Name of executor			
Phone			
Email			
Top Five Reasons to Make a Will			



- 2 Designate who will care for your dependents
- 3 Provide for the charities you love
- 4 Reduce the costs of probate
 - Select who will oversee your affairs

Funeral and Burial Preferences

Funeral home
Name of funeral director
Address
City/State/Zip
Phone
□ Military funeral requested
Cemetery plot or vault was prearranged
Cemetery name and location
Section number
Plot number
Location of deed to plot
Cremation? \Box Yes \Box No
If yes, instructions for your remains
Other specific instructions
Memorial gifts should be made to

Power of Attorney

With a power of attorney, you allow someone to act on your behalf in the event that you are unable to do so. For example, you could be on an extended vacation or affected by a temporary medical condition. The power of attorney allows the holder of the power to transact business, including buying, selling, and gathering assets; discharging debts; and handling real estate.

Do you have one?	□Yes □No		
Location of original	document		
Name of person given the power to act			
	-		
Address			
City/State/Zip			
Phone			

Health Care Power of Attorney/Living Will

A power of attorney for health care designates a person to make health care decisions if you are unable to do so, and sets down guidelines for levels of treatment and life-sustaining devices. It may also encompass or be accompanied by a living will, directing whether life-sustaining procedures should be used to prolong life when it's medically determined that no hope of recovery remains.

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Do you have a health care power of attorney? \Box Yes \Box No						
Do you have a living will? \Box Yes \Box No						
Location of original document(s)						
Name of person given the power to act						
Address						
City/State/Zip						
Dhone						

Safe Deposit Box

Bank name
Address
City/State/Zip
Box number
Key location

Keep in a Safe Deposit Box:

- Originals of birth, marriage, and death certificates; adoption papers; and divorce decrees
- Deeds, titles, mortgage papers, and lease contracts
- Military records and citizenship papers
- Stock and bond certificates
- Insurance photos of the contents of your home
- Valuable collectibles

Don't Keep in a Safe Deposit Box:

- Your will
- A living will
- Originals of power of attorney authorization
- An inventory of the contents in your safe deposit box

Important Documents

Property Deeds
Do you own any real property? \Box Yes \Box No
Location of deed(s)
Address(es) of real estate you own
Trusts
Type of trust
Location of trust
Attorney who drafted the trust
Phone
Email

Life Insurance Policies

Company	
Policy number	
Type of policy _	
Beneficiary/ies	

Employee Benefits and Business Interests

Pensions/Profit Sharing/401(k)/403(b) Plans

Brief description
Location
Beneficiary/ies
Brief description
Location
Beneficiary/ies
Deferred Compensation Plan
Brief description
Location
Beneficiary/ies

Individual Retirement Accounts (IRAs)

IRA administrator
Phone
Email
Brief description
Location
Beneficiary/ies
Group life insurance Face amount \$
Payable to
Other employee benefits

Buy-Sell Agreement for Business Interests

General description _____

Location of professional and business arrangements _____

Financial Accounts

(CDs, Stocks, Bonds, Mutual Funds & Money Market Accounts)

Name of Bank			
Address			
City/State/Zip _			
Phone			
Type of account			□Other
In name of			
Account number			
Type of account	\Box Checking	□Savings	□Other
In name of			
Account number			
Location			
Beneficiary/ies _			
Name of Bank			
Phone			
Type of account	□ Checking	□Savings	□Other
In name of			
Account number			
Type of account	\Box Checking	□Savings	□Other
In name of			
Account number			
Location			
Beneficiary/ies _			
Stockbroker's Nar	ne		
Address			
In name of			
Account number			

Important Phone Numbers

Organ Bank or Hospital (if organ donor)			
Are you an organ donor?	□ Yes	□No	
Organization			
Phone			
Family Members			
Name		Phone	
Email			
Name		Phone	
Email			
Name		Phone	
Email			
Name		Phone	
Email			
Name		Phone	
Email			
Name		Phone	
Email			
Friends			
Name		Phone	
Email			
Name		Phone	
Email			
Name		Phone	
Email			
Name		Phone	
Email			

Clergy

Name	Phone
Email	
Name	
Email	
Employer/Business Associates	
Name	Phone
Email	
Name	
Email	

Consider a Memorial Gift

The passing of someone close to you is rightfully a time for remembrance, reflection, and recognition. Many people search for ways to commemorate the life of a husband, wife, dear friend, or family member—to make a lasting statement about what that person meant to them.

You can make a gift that will stand as a memorial to a loved one and at the same time, advance our mission in a meaningful way. It is hard to imagine a more thoughtful, satisfying plan. How you decide to honor this special person is up to you. Possibilities include immediate gifts, bequests from wills or living trusts, and gifts from which you or family members keep lifetime benefits.

Please consider:

- Naming us in your will or living trusts
- Naming us as a full or partial beneficiary of your life insurance
- Naming us as a full or partial beneficiary of a retirement account, IRA, CD, or bank account

Your financial advisor or estate planner can assist you with the many tax benefits you may also be able to take advantage of with a planned gift. We would be pleased to discuss with you the many ways you can remember SOAR! in your estate plan.

Passwords

Passwords for your computer log-in screen, email, and social media accounts, and other password-protected accounts



Pets

Pet type/name		
Feeding instructions		
Special instructions		
• 		
Veterinarian business name		
Veterinarian name		
Address		
City/State/Zip		
Phone		
Email		
Person designated to continue pet care		
Phone number of designee		

Notes



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