

## WILL PLANNING GUIDE

As you plan your legacy, you will likely name loved ones as beneficiaries on your accounts, assets, and insurance policies.

You also have the option of designating The Open Door as a beneficiary of select assets and continue to fight hunger across Dakota County.



Before you visit an estate planning attorney, complete each of the four sections below to the best of your knowledge. Doing this basic homework ahead of time will set you up for success and save time and money as you meet with your attorney.

Take your time as you complete this form to ensure you walk away with peace and confidence about the financial decisions you've made. Jot down questions for your attorney as they come to mind and leave any question blank that you're unsure about or that doesn't apply to you.

When you're finished simply provide a copy of this document to your attorney to keep on file.

## STEP 1: YOUR FAMILY

### YOU

Full Name: \_\_\_\_\_

Other names by which you have been known: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Status (circle one):    Single            Married            Widowed            Separated

                                 Divorced            Re-married            Unmarried, cohabitating

Existing Will? (circle one):    Yes                    No

If yes, what is the date of that will? \_\_\_\_\_

**SPOUSE**

Full Name: \_\_\_\_\_

Other names by which you have been known: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Status (circle one):    Previously Widowed                  Previously Divorced

Existing Will? (circle one):    Yes                  No

If yes, what is the date of that will? \_\_\_\_\_

**CHILDREN (include predeceased or children by other marriages)**  
**Child #1**

Full Name: \_\_\_\_\_

Nature of Relationship: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City/State: \_\_\_\_\_

Special Needs (circle one):    Yes                  No

If married, spouse's name: \_\_\_\_\_

Any children born of this child's marriage? (circle one):    Yes                  No

If yes, list names and ages: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Child #2**

Full Name: \_\_\_\_\_

Nature of Relationship: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City/State: \_\_\_\_\_

Special Needs (circle one):    Yes                    No

If married, spouse's name: \_\_\_\_\_

Any children born of this child's marriage? (circle one):    Yes                    No

If yes, list names and ages: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Child #3**

Full Name: \_\_\_\_\_

Nature of Relationship: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City/State: \_\_\_\_\_

Special Needs (circle one):    Yes                    No

If married, spouse's name: \_\_\_\_\_

Any children born of this child's marriage? (circle one):    Yes                    No

If yes, list names and ages: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Child #4**

Full Name: \_\_\_\_\_

Nature of Relationship: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City/State: \_\_\_\_\_

Special Needs (circle one):    Yes                    No

If married, spouse's name: \_\_\_\_\_

Any children born of this child's marriage? (circle one):    Yes                    No

If yes, list names and ages: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Child #5**

Full Name: \_\_\_\_\_

Nature of Relationship: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City/State: \_\_\_\_\_

Special Needs (circle one):    Yes                    No

If married, spouse's name: \_\_\_\_\_

Any children born of this child's marriage? (circle one):    Yes                    No

If yes, list names and ages: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## More Children

If you have more than five children, list their information on an additional attached page.

## STEP 2: THE PEOPLE YOU TRUST

### Guardianship

Who would you want to be the guardian of any minor children if both you and your spouse are deceased?

First Choice: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Contact Information: \_\_\_\_\_

### Trustee

If you and your spouse died leaving minor children, who would you want to manage their property until they are old enough to handle it on their own?

First Choice: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Contact Information: \_\_\_\_\_

How and when would you like the assets of the Children's Trust distributed? \_\_\_\_\_

\_\_\_\_\_

Examples:

- All paid out when my youngest is 25 years old
- 1/3 when my youngest is 21, 1/3 at 26, and 1/3 at 30
- 1/2 when my youngest is 25 and 1/2 at 30

Other instructions? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Executor or Personal Representative**

Who would you want to supervise the execution of your will and final distribution of your property?

First Choice: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Do you want to compensate your Executor or Personal Representative? (circle one):

Yes                      No

**Power of Attorney**

Who do you want to handle your affairs if you're unavailable or unable to do so?

*Financial/Business Matters*

First Choice: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Contact Information: \_\_\_\_\_

*Health Care Decisions*

First Choice: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Contact Information: \_\_\_\_\_

*Special Instructions:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## STEP 3: YOUR MONEY AND BELONGINGS

### What You Own (Assets)

#### *Checking*

Primary Institution Name: \_\_\_\_\_

Primary Institution Address: \_\_\_\_\_

Name(s) on Primary Account: \_\_\_\_\_

\$ Value: \_\_\_\_\_

If you have more than one checking account, list the institution name and address, name(s) on account (s) and \$ value here: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### *Savings*

Primary Institution Name: \_\_\_\_\_

Primary Institution Address: \_\_\_\_\_

Name(s) on Primary Account: \_\_\_\_\_

\$ Value: \_\_\_\_\_

If you have more than one savings account, list the institution name and address, name(s) on account (s) and \$ value here: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### *Certificates of Deposit:*

Primary Institution Name: \_\_\_\_\_

Primary Institution Address: \_\_\_\_\_

Name(s) on Primary Account: \_\_\_\_\_

\$ Value: \_\_\_\_\_

If you have more than one Certificate of Deposit, list the institution name and address, name(s) on account (s) and \$ value here:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Securities (stocks, bonds, mortgages, notes, or trust deeds)*

Type of Account: \_\_\_\_\_

Institution Name: \_\_\_\_\_

Institution Address: \_\_\_\_\_

Name(s) on Account: \_\_\_\_\_

\$ Value: \_\_\_\_\_

If you have more than one Securities account, list the institution name and address, name(s) on account (s) and \$ value here: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*Annuities*

Institution Name: \_\_\_\_\_

Institution Address: \_\_\_\_\_

Name(s) on Account: \_\_\_\_\_

\$ Value: \_\_\_\_\_

If you have more than one annuity, list the institution name and address, name(s) on account (s) and \$ value here: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



*Retirement Accounts*

Type of Account: \_\_\_\_\_

Institution Name: \_\_\_\_\_

Institution Address: \_\_\_\_\_

Name(s) on Account: \_\_\_\_\_

\$ Value: \_\_\_\_\_

If you have more than one retirement account, list the institution name and address, name(s) on account (s) and \$ value here: \_\_\_\_\_

\_\_\_\_\_

*Additional Assets (business property, limited partnerships, notes receivable, etc.)*

Description: \_\_\_\_\_

\_\_\_\_\_

Owner: \_\_\_\_\_

\$ Value: \_\_\_\_\_

If you have additional assets, provide the description and \$ value here: \_\_\_\_\_

\_\_\_\_\_

*Life Insurance*

Life Insurance Company: \_\_\_\_\_

Beneficiaries: \_\_\_\_\_

Face Value: \_\_\_\_\_

If you more than one life insurance policy, list the company, beneficiaries and face value here: \_

\_\_\_\_\_

*Homes and Real Estate*

Home/ Real Estate Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_

Name(s) on Title: \_\_\_\_\_

Approximate \$ Value: \_\_\_\_\_

If you more than one home property, list the home/real estate description, address, name(s) on title, and approximate \$ value here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Vehicles (automobile, RB, motorcycle, watercraft, etc.)*

Vehicle Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Owner: \_\_\_\_\_

\$ Value: \_\_\_\_\_

If you have more than one vehicle, list the description, owner name, and \$ value here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Household Items (furnishings, antiques, jewelry, collectibles)*

Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Owner: \_\_\_\_\_

\$ Value: \_\_\_\_\_

List other significant household items here – including description, owner, and \$ value: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## What you Owe (Liabilities)

*Loans, mortgages, credit cards and other debts:*

Description: \_\_\_\_\_

\$ Amount: \_\_\_\_\_

Description: \_\_\_\_\_

\$ Amount: \_\_\_\_\_

Description: \_\_\_\_\_

\$ Amount: \_\_\_\_\_

Description: \_\_\_\_\_

List any additional debts here – provide the description and \$ amount: \_\_\_\_\_

\_\_\_\_\_

## STEP 4: PEOPLE AND ORGANIZATIONS YOU CARE ABOUT

Not only does a will protect and provide for your family, it also communicates what matters most to you. For many, a gift from the will (called a “bequest”) is the largest donation they will ever make – impacting people for generations to come. The most common approaches for bequests are:

- **Add a “child” to your family.** Some families treat charitable organizations like one additional child. For example, if a family has three children, they might add a fourth “child” and divide the assets in their will into four equal parts. Each child receives 25% and the remaining 25% would be given to their favorite charitable organization.
- **Percentage of your estate.** Other families commit a percentage of their estate to the organizations they love, dividing the remaining percentage among their heirs.
- **Set a cap.** Others decide on a “cap” for their children’s inheritance, leaving the rest of their assets to advance the causes that are close to their hearts.

**List the people and organizations to whom you wish to make a bequest:**

Name of Person or Charitable Organization: \_\_\_\_\_

City/State: \_\_\_\_\_

Percentage or dollar amount of your estate you wish to leave: \_\_\_\_\_

Description of property you wish to leave (land, home, jewelry, collectibles, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Person or Charitable Organization: \_\_\_\_\_

City/State: \_\_\_\_\_

Percentage or dollar amount of your estate you wish to leave: \_\_\_\_\_

Description of property you wish to leave (land, home, jewelry, collectibles, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Person or Charitable Organization: \_\_\_\_\_

City/State: \_\_\_\_\_

Percentage or dollar amount of your estate you wish to leave: \_\_\_\_\_

Description of property you wish to leave (land, home, jewelry, collectibles, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Person or Charitable Organization: \_\_\_\_\_

City/State: \_\_\_\_\_

Percentage or dollar amount of your estate you wish to leave: \_\_\_\_\_

Description of property you wish to leave (land, home, jewelry, collectibles, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Person or Charitable Organization: \_\_\_\_\_

City/State: \_\_\_\_\_

Percentage or dollar amount of your estate you wish to leave: \_\_\_\_\_

Description of property you wish to leave (land, home, jewelry, collectibles, etc.): \_\_\_\_\_

\_\_\_\_\_

Name of Person or Charitable Organization: \_\_\_\_\_

City/State: \_\_\_\_\_

Percentage or dollar amount of your estate you wish to leave: \_\_\_\_\_

Description of property you wish to leave (land, home, jewelry, collectibles, etc.): \_\_\_\_\_

\_\_\_\_\_

## **Congratulations! You've finished the Will Planning Guide!**

**Print a copy of this document for your records and a duplicate copy for your estate planning attorney.**