



United Way of Rutherford
& Cannon Counties

LEGACY SOCIETY Estate Planning Workbook

You and Your Family

Your Personal Information:

Date _____

Your Full Legal Name _____

Date of Birth _____ Gender: Male Female

Present Marital Status:

Married Single Divorced Legally Separated Widowed

If you are widowed, what date did this occur? _____

Home Address _____

City _____ State _____ Zip _____

Phone _____

E-mail _____

Property Assets

Real Estate Owned (Main Residence/Second Residence/Vacation Home)

Type of Property & Location	Cost When Acquired	Title*	Current Value	Debt/Lender

*Husband, wife, trust, jointly (indicate other joint tenant if not spouse)

Personal Property

Type of Property	Title*	Cost Basis	Date of Investment	Current Value
Furniture/Household Furnishings				\$
Jewelry				\$
Antiques/ Collections				\$
Tools & Equipment				\$
Musical Instruments				\$
Automobiles				\$
				\$

*Husband, wife, trust, jointly (indicate other joint tenant if not spouse)

Financial Assets

Investments

(Cash, Bank Accounts, Stocks, Bonds, Certificates of Deposit, Mutual Funds, etc.)

Name of Bank/Broker	Cash Amount	Stock Value	Mutual Fund Value	CD Value

*Husband, wife, trust, jointly (indicate other joint tenant if not spouse)

Location of any Stock Certificates, Bonds, Options, etc., that are not held in Brokerage Accounts

Safe Deposit Boxes

Box Location	Box #	Location of Keys	Names of Others with Authorized Access

Insurance

Life Insurance you own (on your own life)

Company	Type of Policy	Beneficiary	Amount
			\$
			\$
			\$
			\$
			\$

Companies or Organizations that own insurance policies on your life

Company	Type of Policy	Beneficiary	Amount
			\$
			\$
			\$

Insurance owned by you on the lives of others

Company	Type of Policy	Policy #	Coverage
			\$
			\$
			\$

Location of Life Insurance Policies

Other Insurance

Company	Type of Policy	Policy #	Coverage
			\$
			\$
			\$
			\$

Benefits

Individual Retirement Accounts, Pensions, Retirement or Death Benefit Plans

Fund Name & Company	Account #	Beneficiary	Telephone	Amount
				\$
				\$
				\$
				\$
			Total	\$

Location of any employment contracts or business agreements relating to interests in corporations, partnerships and sole proprietorships

What you owe

Mortgage/Auto/Installment Contracts/Charge Accounts/Other Loans

To Whom Debt or Mortgage is Owed	Address	Payment Date	Current Amount Owed
			\$
			\$
			\$
			\$
			\$
Total Approximate Indebtedness			\$

*Husband, wife, trust, jointly (indicate other joint tenant if not spouse)

Money owed to you

Money invested in Mortgages, Personal Loans Trust Deeds

With Whom & Address	Cost When Acquired	Title*	Current Value
			\$
			\$
			\$
			\$
			\$
			\$
			\$

*Husband, wife, trust, jointly (indicate other joint tenant if not spouse)

I am currently I expect to be the beneficiary of a bequest.

Testator's Name _____

Approximate value \$ _____

Total approximate value of estate \$ _____

I am currently I expect to be the beneficiary of other income or assets.

Source's Name _____

Approximate value \$ _____

Trusts

Location of any trusts and any amendments to trusts that you have created, or under which you are a beneficiary and names of trustees.

Name _____ Telephone _____

Address _____

Tax Records

Location of tax records

Name _____ Telephone _____

Address _____

Key Contacts

Executor

Name _____ Telephone _____

Address _____

Alternate Executor

Name _____ Telephone _____

Address _____

Guardian for Your Children

Name _____ Telephone _____

Address _____

Alternative Guardian for Your Children

Name _____ Telephone _____

Address _____

Trustee for Children’s Interest

Name _____ Telephone _____

Address _____

Your Accountant

Name _____ Telephone _____

Address _____

Your Attorney

Name _____ Telephone _____

Address _____

Your Financial Planner

Name _____ Telephone _____

Address _____

Your Faith Based Institution

Name _____ Telephone _____

Address _____

CHARITABLE PLANNED GIVING PARTNER, i.e., United Way and/or another charitable organization of choice:

United Way of Rutherford & Cannon Counties

3050 Medical Center Pkwy, Floor Two

Murfreesboro, TN

615-893-7303

EIN: 58-1341880

yourlocaluw.org

and/or

