



Personal Estate Planning RECORD BOOK

THIS BOOK BELONGS TO:

Provided Courtesy of
Catholic Community Foundation of SW Florida
FOR GOOD, FOR GOD, FOREVER

Getting Organized

Why it's important to begin using this Record Book right away

“Therefore, stay awake! For you do not know on which day your Lord will come. Be sure of this: if the master of the house had known the hour of night when the thief was coming, he would have stayed awake and not let his house be broken into.” (Matthew 24:42-43)

This record is intended to help you collect and organize your important information and to serve as a valuable tool for your estate planner and loved ones. By being prepared, you will save both time and money. You will also simplify the process for those you love when they need to access your important life documents.

The Catholic Community Foundation is also available to assist you with any charitable intentions while you are completing this record or after you have completed it.

1 Your record provides important information about you and your family that will be helpful to your personal representative (referred to as your executor in some states) or Trustee when it comes time to settle your estate. Your personal representative will easily be able to locate beneficiaries, your safe deposit box, titles, stock or bond certificates, your Will, Trust Agreements and other important documents.

2 Your record serves as the basis for creating your estate plan or reviewing your estate plan and providing for the future well-being of your loved ones and the causes about which you care most. It will show you what constitutes your estate and what your beneficiaries can inherit. It will prompt you to consider the disposition of your assets. If you have not yet made a Will, you will find it easier to do so with this information in hand. It will also help you decide if a Trust is right for you.

3 Your record also serves as a basis from which to determine what your estate taxes would be (if any) under various plans of distribution. Knowing the assets and the values to be considered will help you and your advisors find ways to minimize estate taxes and identify liquid assets to cover estate settlement expenses.

Important to Know!

- As you move forward with your estate planning, please consult with your attorney and have them draft all legal documents.
- Since this Record Book will contain personal and private information, you should keep it stored safely with your other valuable papers.
- If you are married, you and your spouse should prepare separate Record Books. While some sections contain shared information, other sections are focused on you as an individual.

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Personal Information (You)

Your name (Please print full legal name and other names used below)

Address City, State, Zip

Home phone/cell phone(s)

Email(s)

Date of birth/birthplace

Location of birth certificate

Location of adoption documents

Social Security number/location of card

Driver's license number and state

Location of tax records

Location of titles, abstracts and leases

Location of stock and bond certificates

Military service, branch, years of service

Location of military documents

Personal Information (You)

Your first spouse's name (Please print full legal name and other names used below)

Date of first marriage/location of certificate

Prenuptial agreement/location of document

Date of divorce, annulment, legal separation or death

Location of documents

Your second spouse's name (Please print full legal name and other names used)

Date of second marriage/location of certificate

Prenuptial agreement/location of document

Date of divorce, annulment, legal separation or death

Location of documents

“Lord, you have probed me, you know me: you know when I sit and stand; you understand my thoughts from afar. You sift through my travels and my rest; with all my ways you are familiar. Even before a word is on my tongue, Lord, you know it all. Behind and before you encircle me and rest your hand upon me.” (Psalm 139:1-5)

Your Parents

Your mother's name (Complete applicable portions)

Your mother's maiden name

Address City, State, Zip

Home phone/cell phone(s)

Email

Date of birth/birthplace

Date of death/resting place

Social Security number

Your father's name (Complete applicable portions)

Address City, State, Zip

Home phone/cell phone(s)

Email

Date of birth/birthplace

Date of death/resting place

Social Security number

Your Spouse

Your spouse's name (Please print your spouse's full legal name and other names used below)

Address City, State, Zip

Home phone/cell phone(s)

Email

Date of birth/birthplace

Location of birth certificate/adoption documents

Social Security number/location of card

Driver's license number and state

Date of marriage/location of certificate

Maiden name

“Love is patient, love is kind. It is not jealous, love is not pompous, it is not inflated, it is not rude, it does not seek its own interests, it is not quick-tempered, it does not brood over injury, it does not rejoice over wrongdoing but rejoices with the truth. It bears all things, believes all things, hopes all things, endures all things. Love never fails.”

(1 Corinthians 13:4-8)

Your Children

First child's name/phone number

Email

Date of birth/birthplace

Location of birth certificate/adoption documents

Social Security number

Driver's license number and state

Second child's name/phone number

Email

Date of birth/birthplace

Location of birth certificate/adoption documents

Social Security number

Driver's license number and state

“Let the children come to me; do not prevent them, for the kingdom of God belongs to such as these.” (Mark 10:14)

Your Children

Third child's name/phone number

Email

Date of birth/birthplace

Location of birth certificate/adoption documents

Social Security number

Driver's license number and state

Fourth child's name/phone number

Email

Date of birth/birthplace

Location of birth certificate/adoption documents

Social Security number

Driver's license number and state

“Amen, I say to you, whoever does not accept the kingdom of God like a child will not enter it.” (Mark 10:15)

Your Pets

First pet's name

Species and coloring

Vet's contact information

Food/other care

Second pet's name

Species and coloring

Vet's contact information

Food/other care

Third pet's name

Species and coloring

Vet's contact information

Food/other care

Employer Information (Current/Retired/Former)

Are you retired? ☐ Yes ☐ No

Company name/phone/supervisor

Current benefits and location of documents

Position/start date/end date (if retired)

Ownership interest ☐ Yes ☐ No

Company name/phone/supervisor

Current benefits and location of documents

Position/start date/end date

Ownership interest ☐ Yes ☐ No

Company name/phone/supervisor

Current benefits and location of documents

Position/start date/end date

Ownership interest ☐ Yes ☐ No

Advisor Information

Primary Doctor

Address

Phone number

Attorney

Address

Phone number

Accountant

Address

Phone number

Investment Planner/Financial Advisor

Address

Phone number

Life Insurance Agent

Address

Phone number

Document Information (Wills & Trusts)

Do you have a will?

☐

Yes

☐

No

Are you the creator or beneficiary of any trusts?

☐

Yes

☐

No

PLEASE RECORD DOCUMENT(S) BELOW

Document title

Date prepared

Prepared by (name, title, contact information)

Location of original document

Location of copies (it is suggested that you attach a copy to this Record Book)

Personal Representative/Executor or Trustee

Alternate Personal Representative/Executor or Trustee

Document title

Date prepared

Prepared by (name, title, contact information)

Location of original document

Location of copies (it is suggested that you attach a copy to this Record Book)

Personal Representative/Executor or Trustee

Alternate Personal Representative/Executor or Trustee

Document Information (Power of Attorney)

Have you signed a financial durable power of attorney?

☐

Yes

☐

No

Document title

Date prepared

Prepared by (name, title, contact information)

Name of person appointed to act on your behalf

Name of alternates to act on your behalf

Effective date of power holder to act:

Immediately

Upon your incapacity

Location of original document

☐☐

Location of copies (it is suggested that you attach a copy to this Record Book)

Additional notes

Document **Information** (Health Care Directives)

Have you signed a Living Will/Advance Medical Directive? ☐ **Yes** ☐ **No**

Document title

Date prepared

Prepared by (name, title, contact information)

Location of original document

Location of copies (it is suggested that you attach a copy to this Record Book)

Name of contact person(s) in Living Will/Advance Directive

Do you have a Health Care Surrogate/Health Care Power of Attorney? ☐ **Yes** ☐ **No**

Document title

Date prepared

Prepared by (name, title, contact information)

Location of original document

Location of copies (it is suggested that you attach a copy to this Record Book)

Name of person appointed to act on your behalf

Name of alternates to act on your behalf

Additional Health-related Information

Long-Term Care

Do you have a long-term care insurance policy?

☐

Yes

☐

No

Insurance company name

Insurance agent and contact information

Policy number

Body, Organ and Tissue Donations

Do you wish to donate your body, organ or tissues?

☐

Yes

☐

No

First donation (identify the particular organ or tissue, or indicate the entire body)

Receiving organization's name and contact information

Location of documents

Second donation (identify the particular organ or tissue)

Receiving organization's name and contact information

Location of documents

Third donation (identify the particular organ or tissue)

Receiving organization's name and contact information

Location of documents

Secure Location Information

Safe-Deposit Box

Do you have a safe deposit box?

☐ **Yes**

☐ **No**

Bank name, branch location and contact information

People with authorized access

Box number and location of keys

Contents

Passwords

First product/service, account name, user name or account number/password

Second product/service, account name, user name or account number/password

Third product/service, account name, user name or account number/password

Fourth product/service, account name, user name or account number/password

Fifth product/service, account name, user name or account number/password

Sixth product/service, account name, user name or account number/password

Seventh product/service, account name, user name or account number/password

Funeral Instructions

These pages are a documentation of your thoughts regarding the preparation of funeral services. When the day arrives, your family will lovingly appreciate your proactive nature and concern for them as well.

Funeral Services

Please check one or more of the following:

- ☐ I desire to have a Funeral Mass and Rite of Committal offered at my grave
- ☐ I desire a Funeral Liturgy (not a Mass) at the funeral home with Rite of Committal offered at my grave
- ☐ I desire to have a Vigil Prayer Service at the funeral home
- ☐ Other (please describe): _____

Type of preparation: ☐ Burial ☐ Cremation ☐ Donation of Body

Church name and phone number

Church address, city, state and zip

Name and location for memorial service if other than a church

Funeral home preference (name and location) - *Please note if pre-paid arrangements have been made*

Cemetery preference (name and location) - *Please note if pre-paid arrangements have been made*

Type of disposition: ☐ Ground burial ☐ Ground plot ☐ Cremation
 ☐ Mausoleum ☐ Custom Chamber ☐ Other: _____

Casket and vault preferences

Headstone/memorial marker preference

Favorite flowers

Burial clothing preference

Funeral Instructions

Individuals to be Involved in My Funeral if Possible

Pastor/Priest/Minster

Lectors (two are recommended)

Soloist and/or organist

Fraternal, military or Parish organizations

Casket bearers (up to six)

Favorite Scriptures

Reading 1

Reading 2

Reading 3

Reading 4

Music Preferences

Song/Hymn 1

Song/Hymn 2

Song/Hymn 3

Song/Hymn 4

Charitable Considerations

How You, Your Family and Your Favorite Causes Can Benefit

As part of your estate planning, you may also wish to establish your Catholic legacy and leave a gift to your Parish, school, favorite ministry or other charity. Maybe you haven't been able to make sizeable gifts from your income during your lifetime, but you want to plan a larger gift from your assets when you pass away. No matter your circumstance or stage of life, there are many ways to make a meaningful gift that reflects the Catholic Faith you hold dear.

It is surprisingly easy to plan for a legacy gift. It is recommended that you work with your financial advisor to determine which gift type is most appropriate for you. Depending on the type of gift you choose, you may potentially reap benefits from your philanthropy that have very practical and desirable outcomes, such as the following:

- Ability to leave a Catholic Legacy
- Income tax benefits
- Income for the rest of your life
- Reduce or eliminate capital gains tax
- Personal satisfaction

Professionals from the Catholic Community Foundation of Southwest Florida are available to discuss these and other options, including:

Bequest—a gift that can be made simply in your will or trust. You specify a specific dollar amount or a percentage of your estate.

Retirement Plans—you can name a charity, such as your Parish, School, Catholic Charities or other Diocesan ministries as beneficiaries of a retirement plan.

Life Insurance—you can designate the Church as a beneficiary of a life insurance policy this is no longer needed.

Charitable Gift Annuity—you can make a gift now, receive an immediate income tax deduction, received income for the remainder of your life (mostly tax-free), and benefit the Church at your death.

Named Endowment Fund—you create a permanent fund in your name (or to honor a loved one) either now or at your death, which will provide perpetual support for your Parish, Catholic education, college scholarships, or other Diocesan programs or ministries.

Donor Advised Fund (DAF)—establishing a DAF is like opening a “charitable check book.” You make one tax-deductible donation, then decide over time where and when to send charitable gifts. You no longer need to track multiple donation receipts and you can choose to remain anonymous and stay off of mailing lists.

Whatever your objective, the Catholic Community Foundation can help match your needs with the right giving tool to provide the most benefits for you, your family and organizations about which you care most.

Other Matters that Need **Attention**

These matters will need to be addressed by your family/friends after your death

Please check all items that apply to you so that your family/friends can take care of them later:

- ☐ **Contact the attorney and tax advisor** to see what has to be done in regard to estate settlement and to have the will read.
- ☐ **Contact the Social Security Administration.** Social Security pays a lump sum death benefit. A surviving spouse can get survivor's benefits as early as age 60—earlier if a surviving spouse is disabled. Children under age 18 may also be entitled to survivor's benefits when a parent dies.
- ☐ **Call the Veterans Administration (VA).** A surviving spouse and dependent children may be entitled to a small pension if the deceased served in the Armed Forces. The VA will pay partial burial expenses and provide a headstone or marker as well as an American flag to drape over the casket, without charge. If burial is in a national cemetery, the VA will provide a grave site and pay burial costs.
- ☐ **Notify organizations where the deceased held memberships.** Some offer memorial services. They may have life insurance and may return part of dues paid. Organizations to notify:

- ☐ **Contact former employers for benefits** resulting from that employment. Refer to the list in the employer information section of this Record Book (page 10).
- ☐ **Collect life insurance policies and call the companies and ask for death claim forms.** The beneficiary can choose to take proceeds in a lump sum or spread them out as payments over years.
- ☐ **Contact companies holding retirement plans.** There may be money left in them to be paid out to survivors. Like life insurance, proceeds can be paid out in a lump sum or in installments. Tax advisors should be consulted before beneficiaries make that decision.
- ☐ **Consult with the health insurance company.** It may pay some expenses of your last illness. Future premiums may also be less if the policy has covered two or more people and now there will be one less person covered. Some health insurance policies are also combination policies that provide some death benefits.

Estate Calculation

Sole and Joint Property—How to Tell “Mine” from “Ours”

Sole property is anything that belongs to you alone. **Joint property** are items that are shared. To determine whether or not you can pass all or part of an asset by your will, you should know the form of title. There are four ways property can be owned jointly.

1. **Joint tenancy with right of survivorship.** When one of you dies, the surviving joint owner owns the entire asset.
2. **Tenancy in common.** You and others have an individual interest in an asset. You can pass your interest by will. The surviving joint tenant doesn't automatically take title to your interest.
3. **Tenancy by the entirety.** This form of ownership is recognized in many states. It is limited to married couples and generally to real property.
4. **Community property.** This is a form of property ownership between spouses in select states. Generally, all property acquired during marriage is community property, regardless of which spouse holds the title. You can will only half the property; the other half belongs to the surviving spouse.

What is Your Estate Really Worth?

Your estate's value from an estate planning perspective is different than your net worth, which is a snapshot of what you own and what you owe. Fortunately, most people find they have much more in their estate than they thought when they account for savings, employer and personal life insurance, retirement plan benefits, and perhaps even a future inheritance. For estate planning purposes, you need an inventory of your assets and liabilities that will enable you to accomplish these objectives:

1. To determine what you can leave to your heirs and beneficiaries after your lifetime.
2. To calculate your potential estate taxes.
3. To provide for the distribution of your estate and the minimization of estate taxes.

Make an Inventory of Your Assets

If you are married, be sure to include your spouse's assets and all jointly owned or community property. Use the current market value for everything you own and the face value (not cash value) for any life insurance. Don't strive for exact amounts; round numbers will do.

Make Property Decisions

Once you have made an inventory of your property, you are ready to decide where you want it to go. The following pages can help you organize your plans. Once the worksheets are complete, it is important that you keep this record in a safe place and let your family members, personal representative (executor) of your Will or Trustee of your trust know its location. If you have not already put your written estate plan in place, you are ready to meet with your attorney for important counsel and the drafting of necessary documents.

Estate's Worth

List Your Assets

1. Cash (savings, money market & checking accounts, CDs, brokerage accounts)

TYPE OF ACCOUNT	INSTITUTION	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE	OWNED JOINTLY OR COMMUNITY
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____

2. Real Estate

DESCRIPTION & LOCATION OF PROPERTY	DATE OF PURCHASE	COST BASIS	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE	OWNED JOINTLY OR COMMUNITY
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____

3. Individual stocks, bonds mutual funds

DESCRIPTION	DATE OF PURCHASE	COST BASIS	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE	OWNED JOINTLY OR COMMUNITY
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____

4. Obligations due me (mortgages held, notes receivable, accounts receivable)

NAME OF DEBTOR	ADDRESS	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE	OWNED JOINTLY OR COMMUNITY
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____

Estate's Worth

List Your Assets

5. Personal assets (automobiles, jewelry, furniture, boats, paintings, collections, etc.)

DESCRIPTION	DATE OF PURCHASE	COST BASIS	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE	OWNED JOINTLY OR COMMUNITY
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$

6. Life insurance—FACE AMOUNT (note any policy loans)

NAME OF COMPANY	INSURED	BENEFICIARY	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE	OWNED JOINTLY OR COMMUNITY
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$

7. Annuities—PRESENT VALUE

DESCRIPTION	ANNUITANT	BENEFICIARY	COST BASIS	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE	OWNED JOINTLY OR COMMUNITY
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$

8. Retirement benefits (pension, profit-sharing, IRAs, Keogh plans, etc.)

DESCRIPTION	BENEFICIARY	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

Estate's Worth

List Your Assets

9. Business interests owned (proprietorships, partnerships, LLC, corporation) - VALUE OF INTEREST

BUSINESS NAME & ADDRESS	COST BASIS	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE	OWNED JOINTLY OR COMMUNITY
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____

10. Other assets potentially includable in estate because of your interest in them (interest in a trust or estate, royalties, patents, copyrights, trademarks, etc.) - CURRENT VALUE

DESCRIPTION	COST BASIS	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE	OWNED JOINTLY OR COMMUNITY
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____

	OWNED BY YOU ALONE	OWNED BY YOUR SPOUSE	OWNED JOINTLY OR COMMUNITY
TOTAL OF ALL ASSETS	\$ _____	\$ _____	\$ _____

“Everyone who listens to these words of mine and acts on them will be like a wise man who built his house on rock. The rain fell, the floods came, and the winds blew and buffeted the house. But it did not collapse; it had been set solidly on rock. And everyone who listens to these words of mine but does not act on them will be like a fool who built his house on sand.” (Mathew 7:24-26)

Estate's Worth

List Your Liabilities

1. Mortgages

DESCRIPTION OF PROPERTY	NAME OF CREDITOR	OWED BY YOU ALONE	OWED BY YOUR SPOUSE	OWED JOINTLY
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____

2. Loans, installment debts (bank, auto and personal loans, insurance loans, etc.)

DESCRIPTION	NAME OF CREDITOR	OWED BY YOU ALONE	OWED BY YOUR SPOUSE	OWED JOINTLY
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____

3. Current bills (department store and other charges, credit cards, etc.)

DESCRIPTION	NAME OF CREDITOR	OWED BY YOU ALONE	OWED BY YOUR SPOUSE	OWED JOINTLY
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____

4. Taxes owed (estimated state and federal income tax, property tax, etc.)

DESCRIPTION	OWED BY YOU ALONE	OWED BY YOUR SPOUSE	OWED JOINTLY
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____

Estate's Worth

List Your Liabilities

5. All other liabilities

DESCRIPTION	OWED BY YOU ALONE	OWED BY YOUR SPOUSE	OWED JOINTLY
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

	OWED BY YOU ALONE	OWED BY YOUR SPOUSE	OWED JOINTLY
TOTAL OF ALL LIABILITIES	\$ _____	\$ _____	\$ _____

Net Estate

	YOU	YOUR SPOUSE	JOINTLY
TOTAL OF ALL ASSETS	\$ _____	\$ _____	\$ _____
MINUS TOTAL OF ALL LIABILITIES	(_____)	(_____)	(_____)
NET ESTATE (ESTIMATE)	\$ _____	\$ _____	\$ _____

Congratulations! Now that you have completed this Record Book, you should be comforted by the fact that you are now better organized and are giving your family and loved ones the tools and information needed to more easily settle your estate and fulfill your wishes. If you already have completed your estate plans, you should review them now that you have a complete picture of your estate. If you have not yet made your estate plans, or if you would like to make changes in your existing plan, please consult with your attorney and tax advisor.

“As each one has received a gift, use it to serve one another as good stewards of God’s varied grace.” (1 Peter 4:10)

*Helping Catholics serve the Mission of Christ
in the Diocese of Venice and beyond.*



CATHOLIC COMMUNITY FOUNDATION OF SOUTHWEST FLORIDA

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