

Greetings!

I want to commend you on your interest in estate planning. This document, and the pages that follow, will help you know a little more about what your Conference Trust Department offers you as a member of this Conference.

Creating an estate plan through the Trust Department is a no-cost service designed for those who want to care for their families, and who also have a specific desire to benefit the Lord's work here in Upper Columbia Conference in a significant and meaningful way. We collect \$100 up front, and then as long as individuals get their documents signed within 6 months (very easy to do), we refund the entire \$100 to them.

We cover all processing fees, attorney's fees through the conference lawyer, etc. (though we encourage anyone who wishes to talk to their own attorney to do so as well if they choose). In return for this, we ask individuals to have a thought-out plan designed to impact Upper Columbia Conference or one of its entities (a school, church, MiVoden, UCA, etc.) in their Will.

What "a thought-out plan" is, is up to each individual or couple and can be developed and refined in our appointment. It just needs to include the very real potential of blessing Upper Columbia Conference in some way. In the unlikely event that something should happen while there are small children in the home, we recommend that all resources be left for their care.

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*Would you take a moment to consider an unrestricted donation to the Conference as part of your plan, which is kind of like type-O blood from a donor—it can be used for so many vital needs!*

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Following are 3 pages (#1, 2, and 8 of a larger set of sheets) that will be helpful if you can fill them out by hand and have them available for your meeting with a Trust Officer. **Note:—if you'd like to fill the form out on your computer, please download the alternate form from our website marked "Adobe Acrobat Version."**

Page 1—Bio is some family information that is helpful to have. This is fairly straight forward. If you have questions, you can fill in as best you think, or ask questions at your appointment.

Page 2—Assets deals with the basics of your estate, and is helpful in several ways. One of those ways is that it helps the attorney in drafting the documents for you, to make sure he doesn't miss something with an eye to estate taxes or anything else that might be impacted by the assets you hold. How assets are held—who is on the account—is also helpful information in terms of distribution of an estate as well. And, having this information—especially for the assets that don't change often—can be helpful to an executor settling an estate to at least be aware of an asset's existence. So, what you put down on this sheet is helpful in several ways. Having said that, we want you to be comfortable, and so you may put as much or as little detail as you wish. The name of the institution and a rounded figure to the nearest \$1,000 or even \$5,000 for larger assets is quite fine—estimates are all that the attorney needs. If you want to put more detail, including all names on the account can be helpful, but how much information you include is up to you.

Page 8—Beneficiary provides contact information for anyone you indicate should receive any part of your estate. These would be individuals to whom you leave specific items or a percentage of your belongings or assets.

Here are the key things that will be helpful to have thought through or discussed as a couple before your appointment:

- Do you have specific items you want to leave to specific individuals?
- Likely when you have children in the home, if something happened to you, you'd likely want all resources to go to them for a **"Care and Education Trust."** If that is the case, at what age would you like that Trust to end (anywhere from 18-30, but typically about the time you figure they'd be reasonably independent, and often around the time they finish some educational milestone)?
- Who do you want to nominate to be the **Guardian** of your children (usually a first and second choice)? These are the individuals who would open their home to your children and provide care for them.
- Do you want the Guardian to also manage the funds you leave for your children or someone else? (**Trustee** for Care & Education Trust). Usually you'll select a 1st & 2nd choice. Often this person would be the same as the guardian, but it is possible you would have someone else who you would select to manage the funds for your children's care. If so, this person and the guardian should be people who can communicate and work well with each other, since they will be working together for the care of your kids. Ideally, they wouldn't be separated by a huge distance, but sometimes things like that can't be avoided.
- Once the need for a Care & Education Trust is done (all your children are independent and past the age you specified), how do you want to divide up your estate or what is left following the Care & Education Trust (usually given in percentages—e.g. family, friends, ministry such as Upper Columbia Conference/church/school entity)?
- Who would you like to have deal with your finances if you were incapacitated for a length of time, preventing you from dealing with financial and legal affairs--**Durable Power of Attorney** (usually spouse first, then two other nominations)?
- Who would you like a physician to look to with regards to your care if you are incapacitated--**Power of Attorney for Health Care** (usually spouse first, then two other nominations)?
- Who would you like for your **Personal Representative/Executor** for your Will—the one who is responsible for settling your estate (usually spouse first, then two other nominations)?

Thinking through those decisions will help facilitate your appointment. If you have questions, don't hesitate to call our office beforehand, or we're happy to try to answer your questions at the appointment.

A meeting typically takes 60-90 minutes, depending on the situation (and how long we visit).

# ESTATE PLANNING INFORMATION

## FAMILY INFORMATION

All Names should be complete with middle name or initial – NO "nicknames"

Trust Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_  
First Middle (or initial) Maiden if Wife Last

Permanent Address: \_\_\_\_\_  
Street City State Zip County

Date of Birth Home Phone Work Phone Cell Phone

Marital Status:  Single  Married – date: \_\_\_\_\_  Widowed – date: \_\_\_\_\_  Divorced – date: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_  
First Middle (or initial) Maiden if Wife Last

Permanent Address:  Same  Other: \_\_\_\_\_  
Street City State Zip County

Date of Birth Home Phone Work Phone Cell Phone

COMMUNICATE AS MUCH AS POSSIBLE BY EMAIL OR FAX AT: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Spouse's Citizenship: \_\_\_\_\_

List of all children whether **living or deceased**. If no children, list brothers and sisters (do not provide birthdates) and check here:

*Reminder: All Names should be complete with middle initial if known – NO "nicknames"*

Full Name	Date of Birth	Circle One	Check if Deceased*
1. _____	_____	his hers ours	<input type="checkbox"/>
2. _____	_____	his hers ours	<input type="checkbox"/>
3. _____	_____	his hers ours	<input type="checkbox"/>
4. _____	_____	his hers ours	<input type="checkbox"/>
5. _____	_____	his hers ours	<input type="checkbox"/>
6. _____	_____	his hers ours	<input type="checkbox"/>

\*List the names of any deceased child's children: \_\_\_\_\_

Name of Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Brothers and Sisters: \_\_\_\_\_

Name of spouse's Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Brothers and Sisters: \_\_\_\_\_

Burial Plans: Funeral: \_\_\_\_\_ Cemetery: \_\_\_\_\_ Contract?  Yes  No

Employment: \_\_\_\_\_ Spouse's Employment: \_\_\_\_\_

Other Family Information: \_\_\_\_\_

## ASSETS (use additional Asset page if necessary)

### Accounts: (Checking, Savings, Credit Union, CD, Money Market, Revolving Fund)

Name of Institution	Type of Account (see above) & Number	List <u>all</u> Name(s) on Account	Amount
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

### Investments other than IRAs or Retirement Plans: (Security Accounts, Stocks, Bonds, Mutual Funds)

Name of Investment	Type of Investment (see above) & Number	List <u>all</u> Names on Investment	Amount
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

### IRAs and QUALIFIED RETIREMENT PLANS:

Custodian/Employer	Participant (Husband or Wife)	Type (IRA or Plan)	Primary and Contingent Beneficiaries	Amount
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____

### Money owed to YOU: (Personal loan, mortgage, Note, etc.)

Name of person who owes	Terms of Payment	Collateral? (Mortgage, auto)	Balance owed	Documents Signed?
_____	_____	_____	\$ _____	_____
_____	_____	_____	\$ _____	_____

### Real Estate: (Residence, vacation, business, bare land, etc.)

Address	Type (see above)	Market Value	Amount Owed	Net Value
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____

Do you have a reverse mortgage?  No  Yes Amount \$ \_\_\_\_\_

### Insurance and Annuities: (Term, whole, annuity, etc.)

Company	Insured	Type (see above)	Primary and Contingent Beneficiaries	Amount
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____

### Personal Property:

Household Furnishings	Automobiles	Camper/RV/Boat	Antiques	Special Tools	Jewelry/Other	Total Value
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Do you own your own business? \_\_\_\_\_ If "yes," describe whether corporation, LLC, Partnership or Sole Proprietorship and state name and nature of business on reverse side.

Additional Assets: (List on reverse side if necessary)	Value
_____	\$ _____

**Total Value of Estate:** \$ \_\_\_\_\_

# BENEFICIARY INFORMATION UPDATE

Client Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone No. \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Relationship \_\_\_\_\_  
SDA Church Member       Yes       No

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone No. \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Relationship \_\_\_\_\_  
SDA Church Member       Yes       No

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone No. \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Relationship \_\_\_\_\_  
SDA Church Member       Yes       No

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone No. \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Relationship \_\_\_\_\_  
SDA Church Member       Yes       No

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone No. \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Relationship \_\_\_\_\_  
SDA Church Member       Yes       No

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone No. \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Relationship \_\_\_\_\_  
SDA Church Member       Yes       No

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone No. \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Relationship \_\_\_\_\_  
SDA Church Member       Yes       No

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone No. \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Relationship \_\_\_\_\_  
SDA Church Member       Yes       No

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_