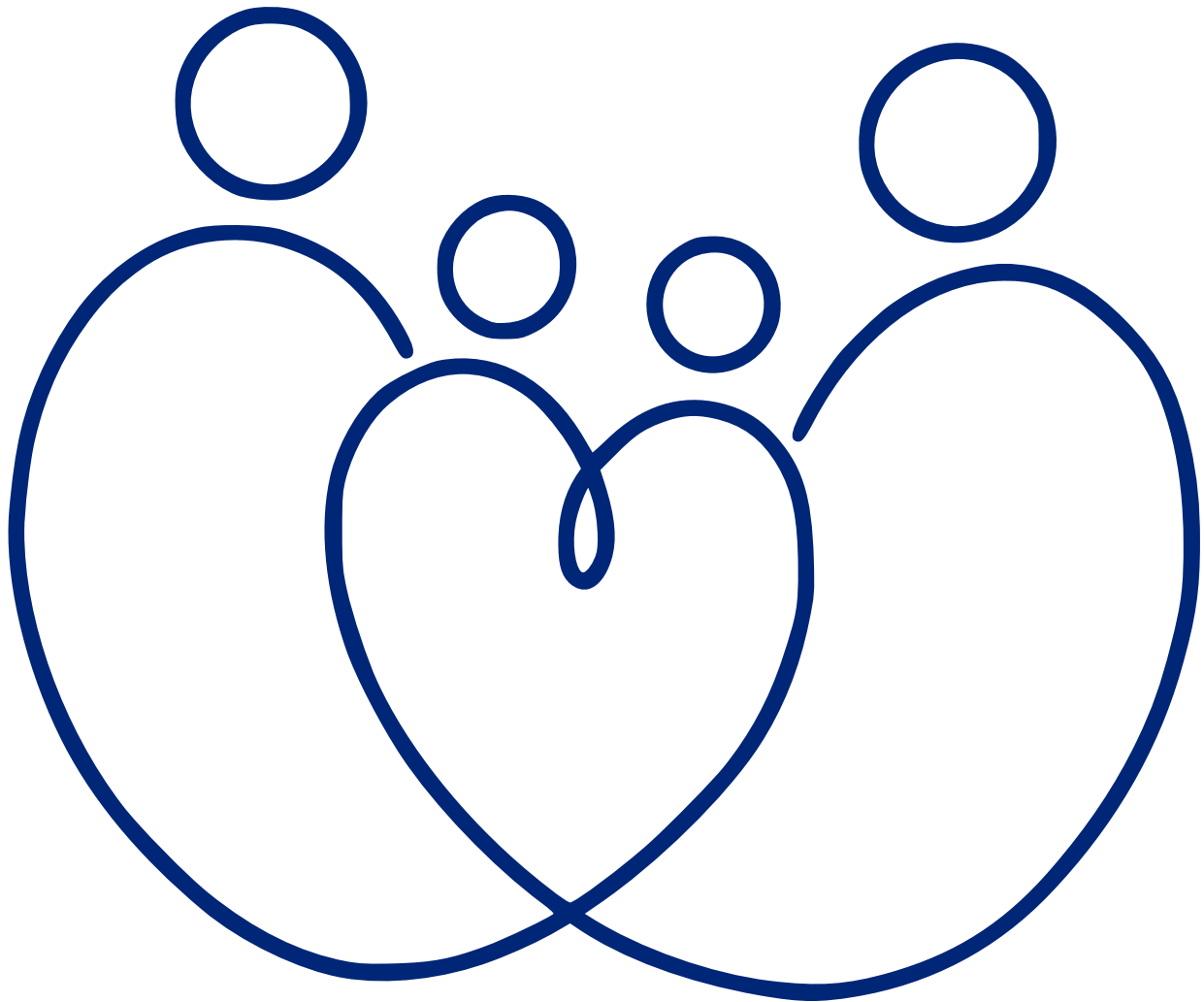




The Future of Our Family Discussion Guide[®]





Share your love

For over 20 years, we've been working with clients across generations, helping them live their lives with courage, strength and wisdom. We've used those traits to help clients like you pursue your goals and live fulfilling lives. And, we will rely on those attributes to help you create a legacy that's most meaningful for you and your loved ones.

Preparing for the inevitable is a challenging conversation. Many individuals find it hard to address this topic, particularly with their nearest and dearest. The Future of Our Family Discussion Guide is designed to foster an open and thoughtful dialogue with your family as you make plans for the future and express your final wishes. It goes beyond just a basic list of instructions and encompasses a variety of subjects, including:

- Locations of important documents and key contacts
- Designation of caregivers for loved ones and minors
- Appointment of individuals to make decisions in case of incapacitation

Taking the time to plan now can alleviate future burdens for your loved ones, ensuring your wishes are fulfilled as intended. Additionally, it can relieve your executor(s) and beneficiary(ies) from added stress, providing them with clear guidance for asset distribution and minimizing potential conflicts. In this guide, we present a brief overview of documents and tasks your loved ones will need to manage according to your preferences such as:

- Contact the funeral home for burial arrangements and costs.
- Obtain will/trust documents from an attorney.
- Collect tax information from an accountant. Request 10 to 25 copies of the death certificate from the vital records office.
- Contact banks and financial institutions for account details.
- Locate keys to safety deposit boxes and safes.
- Compile lists of credit cards, monthly bills, and outstanding debts.
- Gather key phone numbers, access codes, and passwords for services and social media.
- Collect all insurance policies.

We hope this The Future of Our Family Discussion Guide helps you create a plan that will put your mind at ease so you, and your family, can live your lives with courage, strength and wisdom.

Helpful Terms to Know

As you begin to inventory your life, there are a variety of documents and people that can assist in documenting your life and your future wishes.

- A will or living trust – A will is a legal document that designates your executor(s) and directs how your assets should be distributed after you have passed on. If you have minor dependents, it also names the guardians for those individuals. A living trust is also a legal document. However, the designated person or trustee is given responsibility for managing your assets for the benefit of your beneficiary(ies).
- Living will – This is a written statement that expresses what you want regarding your medical treatment if you are no longer able to express informed consent.
- Medical power of attorney (also called a durable healthcare power of attorney or healthcare proxy) – This grants someone the power to make medical decisions for you if you become incapacitated.
- Durable general power of attorney – This document gives authority to a trusted friend or relative to manage your assets if you are unable to do so.
- This booklet of information – Helps prepare your family for your later life by providing the information they need to make important decisions.

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Keep this booklet safe

Make sure to keep this booklet in a locked location, such as a fire-resistant safe or bank safety deposit box. You should only give it to people you can trust with your most personal information.



Key contacts and advisors

About you and your spouse/partner

Your full name	Spouse/partner full name	Birthday	Current address
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Key contacts

In an emergency, please contact:

Name	Phone #	Email	Relationship
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Phone numbers and access codes

Include your cell phones, computers, tablets, work and home landlines, home and office alarm codes, Wi-Fi access, etc.

Item	Number (if applicable)	Access code or password
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

Your medical doctors

Include medical doctors, specialists, dentists, physical therapists, etc.

Doctor's name	Specialty	Phone #	Location
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Your pharmacy

Name	Address	Phone #
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

Mail-in pharmacy

Name	Address	Phone #
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

Personal property

Include belongings such as artwork, collectibles, antiques, jewelry, etc. and how you'd like them to be distributed. If you can, and where appropriate, include appraisals and photos.

Description	Location	Photo?	Appraisal?	Person to receive property

Rewards programs

Program name/company	Account #	Password	Phone #

Other assets

Include partnerships/business ownerships, as well as any foreign and unclaimed assets.

Type of asset	Company/location	Account #	Phone #

Please note: To check for unclaimed assets, you can visit unclaimed.org.

Digital assets

Include email, social media, cloud-based backups and other accounts, apps or software that include your sensitive or personal information. For some platforms, such as Facebook, many profiles of deceased loved ones have stayed active and become **In Memorial** pages. As you consider your legacy, you should discuss with family and friends whether you want to live on in social media, and if so, who would maintain the pages, oversee privacy and legal issues, etc.

Account	User ID	Password or PIN	Security questions/answers

Safety deposit box

Location	Key location

The following people have authority to open the box:

Storage unit/facility

Location	Site contact

The following people have authorization to access the unit/facility:

Personal safe

Location

Combination

Assets you've loaned to others

Object

Person/place holding object

Phone #

Object	Person/place holding object	Phone #

Money owed to you

Include debts that are owed to you and if you plan to forgive them.

Who owes you/phone #

Amount loaned

Balance due (as of)

Details

Who owes you/phone #	Amount loaned	Balance due (as of)	Details



Your financial responsibilities

Liabilities

Include mortgages, loans such as home equity loans, lines of credit and student loans, liens and borrowed items. For details, include a copy of a statement.

Type of debt	Creditor	Amount owed (as of)	Payment due date

Credit/debit cards

Include whether each card is your own or a joint card with someone else. Also, include a statement for each card.

Creditor	Account #	Website	ID/password	Phone #	Joint?

If you have automatic debits from any of these cards, list them here (which card/debit details):

Please note: Some credit cards may include a policy that pays of the balance at your death. You should investigate this before cancelling a card.

Leases

Include any assets you currently lease from others.

Asset	Leased from	Payment/ due date	Expiration date	Contact/phone #

Other financial obligations

Include any ongoing personal financial responsibilities you have.

Obligation for	Amount owed/ payment method	Payment frequency	Details

Subscriptions

Include memberships, professional services, online or print newspapers, magazines, periodicals, ID protection, software and backup services, movie/TV streaming, etc.

Subscription for	Expiration date	Account #	ID/password	Phone #

Lawsuits

Include information about any lawsuits in which you are currently involved.

I am a plaintiff I am a defendant

Case details:

Attorney's contact information:

Name	Phone #	Email
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>



Insurance and other benefits

Advances in medicine have increased average life expectancy dramatically. Our mission is to help you live a long, fulfilling life. Our wish is that it's a healthy one. However, life is filled with uncertainty. Living where you want and being self-sufficient is ideal. Having a backup plan in case that changes is smart. We can help you design a financial strategy that protects you and your family if your circumstances shift so that everything you have built over your lifetime is secure.

Life insurance

Include what happens if you are disabled or need long-term care. Can you use a portion of the death benefit for long-term care expenses? If you are disabled, can you stop making premium payments? For details, include a copy of the policy.

Carrier	Policy #	Benefit amount	Primary beneficiary	Secondary beneficiary	Cost/ how paid*	What happens if I am disabled?

* You should confirm whether the policy is paid annually by check, monthly by debit from a bank account (list bank account number, too), etc.

Other insurance coverage

Include long- and short-term disability, long-term care, medical, dental, vision, prescription drug and Medicare and Medigap policies you have.

Carrier	Policy #	Premium	Cost/how paid	Phone #

Household insurance

Include policies you own to cover your auto, home, boat, airplane, valuables (art, jewelry, wine), as well as umbrella (excess liability), etc.

Type of policy/carrier	Policy #	Premium	Cost/how paid	Phone #
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Employer benefits

Include any benefits you have through a current or previous employer.

Type of benefit/amount	Employer	Phone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

Veteran (VA) or government benefits

For a list of National Service Officers (Veteran Advocates) in your state, you can visit www.purpleheart.org. For information on Veterans Compensation and Benefits, you can visit www.va.gov.

Military branch of service	SVS#	Grade or rank	Dates of service
_____	_____	_____	_____

Military status: Veteran Retired veteran

Copy of separation or military discharge form (DD214) is located: _____

Your military records are located: _____

If you have a National Service Officer to assist you with VA benefits, you can list their information here:

Name: _____ Contact information: _____

If you receive other government benefits, you can list them here: _____

Family forms

Include marriage license, domestic partner agreement, cohabitation agreement, pre- or post-nuptial agreement, divorce or separation agreement, child support agreement, birth certificates, adoption papers, guardianship papers, citizenship papers, burial or pre-need agreement, and life insurance beneficiary forms.

Document	Date signed	Location (of original)	Contact	Phone #

Employment or contractor contract

Tax returns

Additional information or instructions: _____

They are: Personal returns Business returns

My tax accountant is:

Name	Address	Phone #

Business documents

If you are an owner or co-owner of a business, please include information about any ownership or buy-sell agreements.

Business	Date signed	Location of business	Partner(s)/ co-owners	Contact info
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<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

For buy-sell or buy-out and overhead expense agreements, please list the life insurance used.

Carrier	Policy #	On the life of...	Primary beneficiary	Secondary beneficiary
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

If you become incapacitated

Appointment	Name	Phone #
Power of attorney for medical decisions: <hr/>	<hr/>	<hr/>
Power of attorney over my assets: <hr/>	<hr/>	<hr/>
Guardian of my person: <hr/>	<hr/>	<hr/>
Guardian of my property: <hr/>	<hr/>	<hr/>

Would you like to live in your own home as long as possible? Yes No

Additional information or instructions:



Loved ones who will need care

Special needs family member or friend

If you become incapacitated or pass away, someone will need to look after the people for whom you currently care for. Include information about that person below.

Name	Relationship to you	Nature of disability
------	---------------------	----------------------

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Services they receive	From whom?	Phone #
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Primary physician	Phone #
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Is there a trust set up for this person? Yes No

Location of trust documents: _____

If you are the legal guardian for this person, who is your successor guardian?

Name: _____ Phone #: _____

Accounts you handle for this person	Information
-------------------------------------	-------------

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--	--

Pets

Include information about the pets you currently own.

Type of pet	Pet name	Age as of (date)	Notes, dietary needs, medical concerns, etc.
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Veterinarian name	Address	Phone #
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

Pet insurance information

Who will take care of your pets

Name	Phone #
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>



Funeral arrangements

It's natural for people to focus solely on their loved ones and providing for them, but there are costs associated with how you want to be laid to rest. It's best if you decide where and how you would like to be remembered.

Arrangement details	Name/location	Phone #
Funeral home		
Cemetery, if you wish to be buried		
Cemetery, if you wish to be cremated		

Item	Cost
Plot	
Casket	
Headstone and engraving	
Plaque	

Military funeral honors

Military branch of service	SVS#	SS#	Dates of service	Military status

Medal of honor: Recipient General

Upon my death, I would like the American flag presented to: _____

Ethical will

One of the most meaningful tasks you'll do as you plan for your future is to define your legacy. How do you want family, friends and even someone new to know you? This is an opportunity to tell your story. It's a chance to express to your loved ones what you want them to share about your connection with them. Include your thoughts and feelings on topics that you'd like your family to know and understand after you're gone.

The most important things in life are:

I am most grateful for:

The most important things I've done in my life are:

I'd like my heirs to use their inheritance to:

The most important values I'd like to pass on to my loved ones are:

The most important traditions I'd like my loved ones to continue are:

I'd like to be remembered as:

The people who have influenced me the most are:

I'd like my loved ones to learn from my experiences:

Children

Name	Address	Phone #	Birth date
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Grandchildren

Name	Address	Phone #	Birth date
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Great-grandchildren

Name	Address	Phone #	Birth date
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Memberships and affiliations

Additional facts about my family history

Family mission statement

The disclosure below applies to bank distribution entities.

Investment and insurance products are: not FDIC insured, not insured by any federal government agency, not a deposit or other obligation of, or guaranteed by, the bank or any of its affiliates; subject to investment risks, including possible loss of the principal amount invested.

Securities and advisory services offered through LPL Financial, a registered investment advisor.
Member FINRA/SIPC.

