Will Planning Guide

4 Easy Steps to a God-Honoring, Money-Saving Will



rockford rescue mission

PO Box 7489
Carol Stream, IL 60440-7489
(815) 965-5332
rockfordrescuemission.legacywill.org



Will Planning Guide

4 Easy Steps to a God-Honoring, Money-Saving Will

Congratulations! You are on your way to getting your financial house in order. It's a great feeling knowing you are honoring God, your family, and the ministries you love while planning for your future.

We've created this guide to help you think through various aspects of what it means to leave a legacy. Not only will it help you consider important questions, but it will also save you time and money as you prepare to meet with an estate planning attorney. Simply fill in the blanks below as best you can in each of the four sections. If a question does not apply to you, just leave it blank.

Also, jot down any questions that come to mind as you fill in the blanks and take them with you to your meeting with the attorney. When you are finished, print a copy of this document for your records and a duplicate for the estate planning attorney.

Step 1. Our Family

You				
Full Name:				
Other names by	which you have	been known:		
Citizenship:				
Date of birth:				
Social Security N	umber:			
Status:	☐ Single	☐ Married	☐ Widowed	
Status.	\square Separated	☐ Divorced	\square Re-Married	
Existing will?	□ Yes	\square No		
If yes, what is th	e date of that w	vill?		



Spouse (if applicable)
Full Name:	
Other names by	which you have been known:
Citizenship:	
Date of birth:	
Social Security N	umber:
Status:	☐ Single ☐ Married ☐ Widowed ☐ Separated ☐ Divorced ☐ Re-Married
Existing will?	□ Yes □ No
If yes, what is the	e date of that will?
Children	(including legally adopted, predeceased, or children by other marriages)
Child #1	
Full name:	
Relationship:	
Date of birth:	
City/State:	
Special needs?	□ Yes □ No
If married, spous	e's name:
Any children bor	n of this child's marriage? $\ \square$ Yes $\ \square$ No
If yes, list names	and ages:



Child #2

Full name:
Relationship:
Date of birth:
City/State:
Special needs?
If married, spouse's name:
Any children born of this child's marriage? \square Yes \square No
If yes, list names and ages:
Child #3
Full name:
Relationship:
Date of birth:
City/State:
Special needs?
If married, spouse's name:
Any children born of this child's marriage? \square Yes \square No
If yes, list names and ages:



More Children

If you have more than four children, you may list their information here.



Step 2. The People We 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 mitheir property until they are old enoug	nor children, who would you want to manage th to handle it on their own?
First choice:	
Contact information:	
Second choice:	
Contact information:	
How and when would you like the assets in 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? $\ \square$ Yes $\ \square$ 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. Our Money and Belongings

What You Own (Assets)

Savings

Institution name and address:

Name(s) on account:

\$ value:

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



Certificates of Deposit

Institution name and address:
Name(s) on account:
\$ value:
If you have more than one Certificate of Deposit, list the institution name and address, name(s) on account, and \$ value here:
Securities (stocks, bonds, mortgages, notes, or trust deeds)
Type of account:
Institution name and address:
Name(s) on account:
\$ value:
If you have more than one securities account, list the type of account, institution name and address, name(s) on account, and \$ value here:
Annuities
Institution name and address:
Name(s) on account:
\$ value:
If you have more than one annuity, list the institution name and address, name(s) on account, and \$ value here:



Retirement Accounts

Type of account:
Institution name and address:
Name(s) on account:
\$ value:
Type of account:
Institution name and address:
Name(s) on account:
\$ value:
If you have additional retirement accounts, list the type of account, institution name and address, name(s) on account, and \$ value here:
Additional Assets (business property, limited partnerships, notes receivable, etc.) Description:
Description.
Owner:
\$ value:
If you have additional assets, provide the description, owner, and \$ value here:



Life Insurance
Life insurance company:
Beneficiaries:
Face value:
If you have 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 have more than one home or property, list the home/real estate description, address, name(s) on title, and approximate \$ value here:
Vehicles (automobile, RV, motorcycle, watercraft, etc.)
First vehicle description:
Owner:
\$ value:
Second vehicle description:
Owner:



\$ value:
If you have additional vehicles, 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:
\$ amount: Description:
· ·
Description:
Description: \$ amount:
Description: \$ amount: Description:
Description: \$ amount: Description: \$ amount:



Step 4. The People and Ministries We Want to Bless

Not only does a will protect and provide for your family, but it also communicates your values to them and your heart for ministry. For many Christians, a gift from their will (called a "bequest") is the largest contribution they will ever make to ministry, impacting people for Christ for generations to come. The most common approaches for ministry bequests are:

- Add "Charity" 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 named "Charity" and divide the assets in their will into four equal parts. Each of their children would receive 25%, and the remaining 25% would be divided among their favorite charitable organizations.
- Percentage of your estate. Other families commit a percentage of their estate to the ministry organizations they love, dividing the remaining percentage among their heirs.
- **Set a cap**. Others prayerfully decide on a "cap" for their children's inheritance, leaving the rest of their assets to advance Christian ministry. This approach is used when the parents want to provide a modest gift to bless their children and eliminate concerns of creating dependence or giving too much too soon.

Use the following pages to list the people, churches, and charitable organizations to whom you wish to make a bequest.

This Will Planning Guide (or legacy planner) is a free resource provided by Rockford Rescue Mission. If you wish to leave a legacy through a gift in your will to us, our legal name and Tax ID number are:

Legal Name: Rockford Rescue Mission

Federal Tax ID Number: 36-6132381



1

Name of Person or Charitable Organization:

City/State:

Percentage or dollar amount of your estate you wish to leave to this person or organization:

Tax ID #:

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

2

Name of Person or Charitable Organization:

City/State:

Percentage or dollar amount of your estate you wish to leave to this person or organization:

Tax ID #:

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

3

Name of Person or Charitable Organization:

City/State:

Percentage or dollar amount of your estate you wish to leave to this person or organization:

Tax ID #:

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



Name of Person or Charitable Organization:

4

City/State:

Percentage or dollar amount of your estate you wish to leave to this person or organization:

Tax ID #:

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

Name of Person or Charitable Organization:

5

City/State:

Percentage or dollar amount of your estate you wish to leave to this person or organization:

Tax ID #:

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

Congratulations on completing this important planning document. Print a copy for your records and a duplicate copy for your estate planning attorney.

May you experience the peace that comes from knowing your financial affairs are in order. Your future planning will help your family, advance the work of Christ around the world, and impact lives for generations.