**YOUR ESTATE PLANNING LIST**

***Please enter the information that best fits your estate planning needs***

**WHO DO YOU WANT TO LEAVE GIFTS TO IN YOUR WILL?**

 **BENEFICIARIES (Family, Friends, Charities)**Name:
Address:

Name:
Address:

Name:
Address:

Name:
Address:
Name:
Address:

Name:
Address:

Name:
Address:

Name:
Address:

**WHAT IS IN YOUR ESTATE?**

**What do you want to gift to your family, friends or charities?**

 **Note whether any apartments are Cooperatives or Condominiums**

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**WHO WILL HANDLE YOUR AFFAIRS?**

**EXECUTOR (of your Will)**
Name:

Address:

ALTERNATE (back up)
Name:

Address:

**TRUSTEES (for Testamentary Trusts, Special Needs and other Living Trusts)**Name:

Address:

ALTERNATE (back up)
Name:

Address: **ATTORNEY IN FACT = POWER OF ATTORNEY**Name:

Address:

ALTERNATE (back up)
Name:

Address:

**GUARDIAN FOR MINORS (through Surrogate or Family court)**
Name:

Address:

ALTERNATE (back up)
Name:

Address:

***Be sure to obtain current/accurate names, addresses, phone numbers and email addresses***

**LIST ANY PROFESSIONALS WHO SHOULD BE CONTACTED TO ASSIST WITH HANDLING YOUR AFFAIRS? (only those that apply to your situation)**

**ACCOUNTANT**Name:

Address:

**BANK (banker)**Name:

Address: **LIFE INSURANCE AGENT/COMPANY**Name:

Address:

**REAL ESTATE AGENT**Name:

Address:

**NURSING HOME/AGENCY**Name:

Address: **CHURCH**Name:

Address:

**FUNERAL HOME**Name:

Address:

**CEMETERY**
Name:

Address:

**- - - - END OF ESTATE PLANNING LIST - - - -**