# **Christian Will Guide**

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



PO Box 80, Zeeland, MI 49464 (616)-499-4905 www.paradisebound.org

## **Christian Will Guide**

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

Congratulations! You are on your way to getting your financial house in order. And that is a great feeling, knowing that you have honored God, your family, and the ministries you love, while planning for your future.

Before you visit an estate planning attorney, fill in the blanks below as best you can in each of the four sections.

Doing this basic homework ahead of time will be efficient and less costly for you as you prepare to meet with an attorney. It also helps you think things through at your own pace, so you can have confidence and peace about your decisions. 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, simply print a copy for your attorney and for your records.

#### Step 1. Our Family

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

Spouse (	if applicab	le)	
Full Name:			
Other names by	which you have	been known:	
Citizenship:			
Date of Birth:			
Social Security N	umber:		
Status:	☐ Single ☐ Separated	☐ Married☐ Divorced	<ul><li>□ Widowed</li><li>□ Re-Married</li></ul>
Existing will?	□ Yes	□ No	
If yes, what is the	e date of that w	vill?	
Children	(including le	gally adopte	ed, 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?	Yes 🗆 No
If yes, list names	and ages:		

## Child #2 Full Name: Relationship: Date of Birth: City/State: ☐ Yes ☐ No Special needs? If married, spouse's name: Any children born of this child's marriage? $\Box$ Yes $\Box$ No If yes, list names and ages: Child #3 Full Name: Relationship: Date of Birth: City/State: Special needs? ☐ Yes ☐ No If married, spouse's name: Any children born of this child's marriage? $\Box$ Yes $\Box$ No If yes, list names and ages:

Child #4
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 #5
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 five children, you may list their information here or attach a separate sheet of paper.

#### **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 mi their property until they are old enoug	nor children, who would you want to manage the 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?	<ul> <li>Examples:</li> <li>All paid out when my youngest is 25 years old</li> <li>1/3 when my youngest is 21, 1/3 at 26, and 1/3 at 30</li> <li>1/2 when my youngest is 25 and 1/2 at 30</li> </ul>

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?   Yes  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)
Checking
Institution Name and Address:
Name(s) on account:
\$ Value:
If you have more than one checking account, list the institution name and address, name(s) on account, and \$ value here:
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: If you have more than one retirement account, 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: 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.) Vehicle Description:
Owner:
\$ Value:
If you have more than one vehicle, 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:
Description:
\$ Amount:
Description:
\$ Amount:
List any additional debts here – provide the description and \$ amount:

## **Step 4.** The People and Ministries We Want to Bless

Not only does a will protect and provide for your family, it also communicates your values to them and your heart for the Lord's work. 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 the Lord's work here and around the world. 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.

# List the people, churches, and ministry organizations below to whom you wish to make a bequest:

Name of Person or Charitable Organization: City/State: Percentage or dollar amount of your estate you wish to leave to this person or organization: Description of property you wish to leave (land, home, jewelry, collectibles, etc.) Name of Person or Charitable Organization: City/State: Percentage or dollar amount of your estate you wish to leave to this person or organization: Description of property you wish to leave (land, home, jewelry, collectibles, etc.) Name of Person or Charitable Organization: City/State: Percentage or dollar amount of your estate you wish to leave to this person or organization: Description of property you wish to leave (land, home, jewelry, collectibles, etc.)

C	City/State:
	Percentage or dollar amount of your estate
	you wish to leave to this person or organization:
	Description of property you wish to leave (land, home, jewelry, collectibles, etc.)
	Name of Person or Charitable Organization:
	City/State:
_	Percentage or dollar amount of your estate
	you wish to leave to this person or organization:
	Description of property you wish to leave (land, home, jewelry, collectibles, etc.)  Name of Person or Charitable Organization:
	Name of Person of Charitable Organization.
	City/State:
	Percentage or dollar amount of your estate
	you wish to leave to this person or organization:
	Description of property you wish to leave (land, home, jewelry, collectibles, etc.)

Congratulations! You did it! Print a copy of this document for your records and a duplicate copy for your estate planning attorney.

May the Lord bless you as you faithfully follow His leading in your life and use the resources He has given you to leave an eternal legacy – spreading the joy of the Lord for generations to come!