

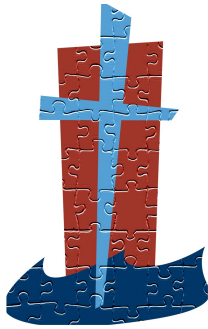
# Lakeside Lutheran High School

231 Woodland Beach Road  
Lake Mills, WI 53551  
(920) 648-2321

Estate Planning  
Worksheet For

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**Lakeside Lutheran High School**  
231 Woodland Beach Road  
Lake Mills, WI 53551

## Fact Finding

Date Of Visit \_\_\_\_\_

Husband's Full Legal Name:

Wife's Full Legal Name:

\_\_\_\_\_

\_\_\_\_\_

Date of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Work #: \_\_\_\_\_

Work #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address:

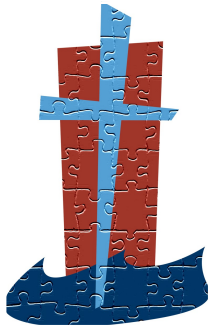
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Church Membership: \_\_\_\_\_

Church Name

City





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### General Questions

Retirement Goals:

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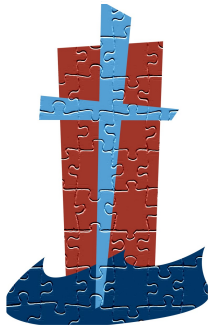
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	<u>Husband</u>		<u>Wife</u>	
Do you presently have a will	Y	N	Y	N
Do you have an executor of your will	Y	N	Y	N
If yes, Name: _____				
Do you have a designated power of attorney	Y	N	Y	N
If yes, Name: _____				
Do you presently have a trust	Y	N	Y	N
Do you own a farm or business	Y	N	Y	N
If yes, do any of your children work in the business with you _____				

Form of business (LLC, S-Corp, etc.) \_\_\_\_\_

Have you entered into any agreement with your spouse (pre-nuptial, community property) \_\_\_\_\_

Do you own a long-term care policy	Y	N	Y	N
Do you have a prepaid burial plan	Y	N	Y	N
Do you have a family attorney	Y	N	Y	N
Do you have a family accountant	Y	N	Y	N



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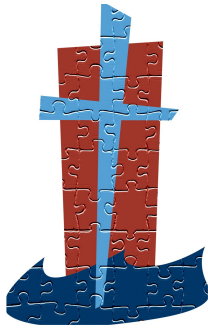
### Assets and Liabilities

**Description of Assets**

	Husband	Wife
1. Home	\$ _____	\$ _____
2. Other Real Property (list)		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
3. Checking Accounts	\$ _____	\$ _____
4. Savings Accounts	\$ _____	\$ _____
5. CD's	\$ _____	\$ _____
6. Money Market Accounts	\$ _____	\$ _____
7. Brokerage Accounts	\$ _____	\$ _____
8. Other Securities	\$ _____	\$ _____
9. Annuities	\$ _____	\$ _____
10. Other Cash	\$ _____	\$ _____
11. Life Insurance	\$ _____	\$ _____
12. Retirement Accounts	\$ _____	\$ _____
13. Pension Plans	\$ _____	\$ _____
14. Automobiles	\$ _____	\$ _____
15. Collectibles	\$ _____	\$ _____
16. Burial Lots	\$ _____	\$ _____
17. Other Assets	\$ _____	\$ _____
<b>SUB-TOTAL</b>	<b>\$ _____</b>	

**Description of Liabilities**

Mortgage	\$ _____
Car Loans	\$ _____
Other	\$ _____
<b>Total</b>	<b>\$ _____</b>
<b>NET WORTH</b>	<b>\$ _____</b>



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### Plan of Distribution

- If my spouse survives me:  
    \_\_\_\_\_ All to my spouse  
    \_\_\_\_\_ As follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- If my spouse does not survive me:  
    Personal and Household Effects -  
\_\_\_\_\_  
    Charitable Gifts -  
\_\_\_\_\_  
    Remaining Assets -  
\_\_\_\_\_  
\_\_\_\_\_
- If neither my spouse, children nor other named beneficiaries survive me:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_