

NEUBERGER | BERMAN

# Family Love Letter

How Every Family Can Prepare

# Today

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- You
- Your Family
- Your Story

## How Every Family Can Prepare

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### THE JUNK DRAWER ...

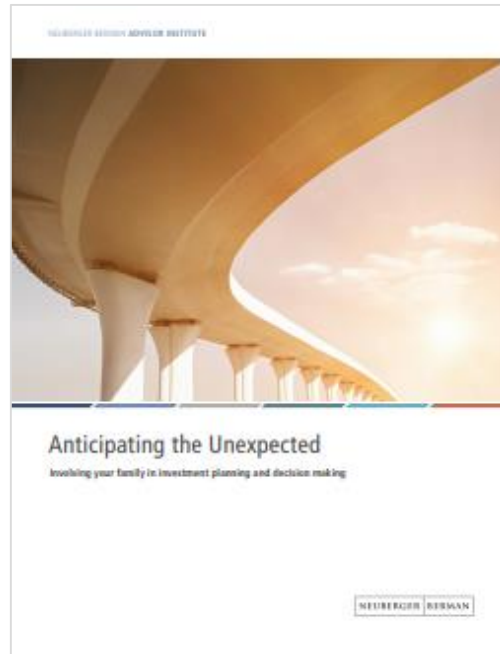
- How many of you would admit to having one or two?
- Imagine your kids coming in to put the paper trail together
- Now imagine during a time of grief, stress, and confusion

### LOSS of a LOVED ONE?

- Even with all the information in one place it's not an easy process

# Anticipating the Unexpected

## Engaging the Family



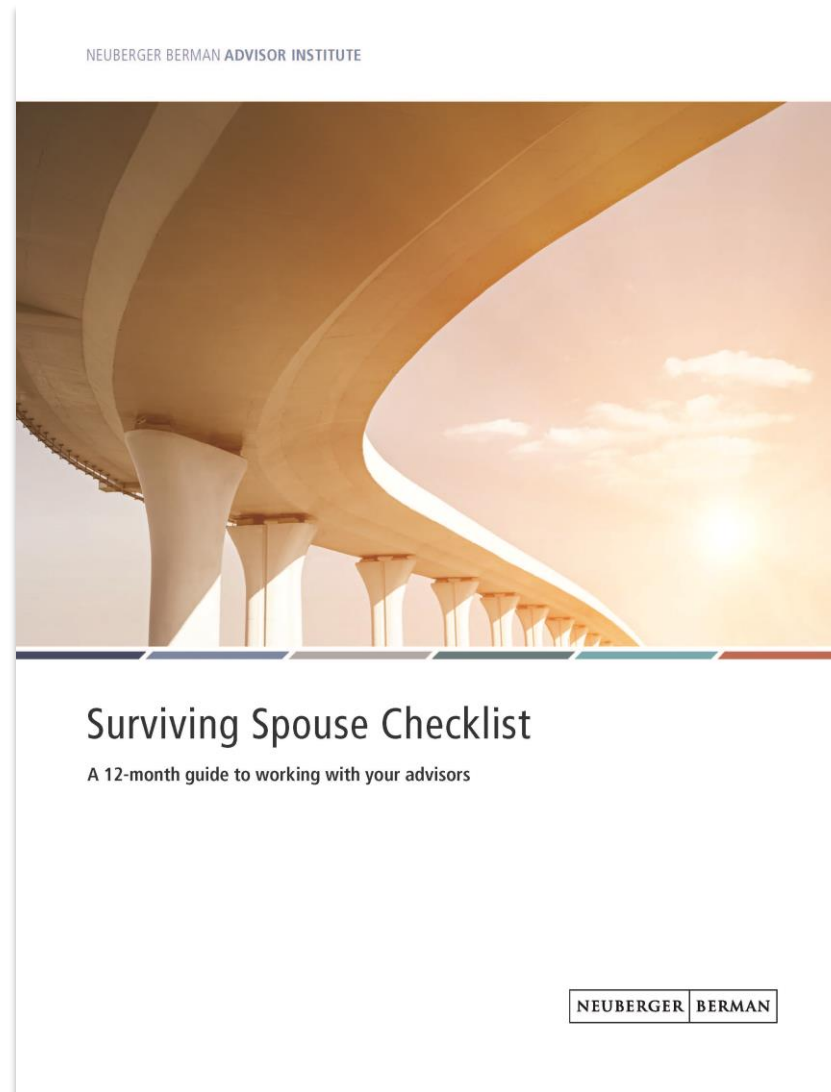
WHAT DO YOU  
HAVE?

WHERE IS IT  
LOCATED?

WHO DO YOU  
CONTACT?

# Surviving the Spouse Checklist

## 12 Month Guide to Working with your Advisors



# Family Love Letter

## Roadmap For Next Generation

### Family Love Letter

- Estate Planning Attorney – Jeff Scroggin, AEP, JD, LL.M.
- Financial Advisor – Donna Pagano, CFP

### WHAT IS IT?

- Gift of information
- Roadmap for the next generation
- Stories, hopes & desires ... in the event of incapacity or loss
- The Link – “voice of family dynamics”

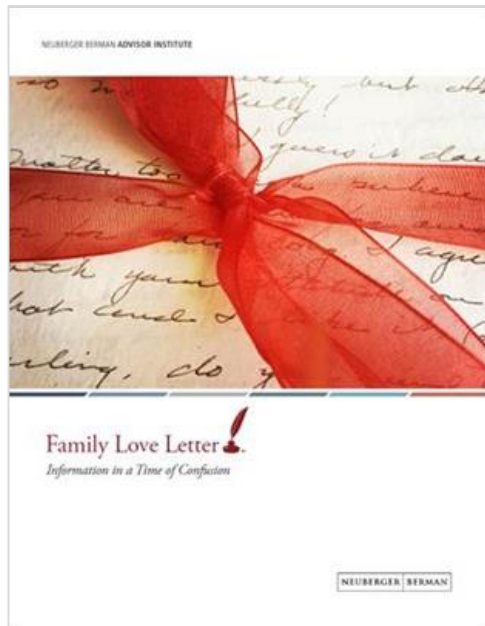
### PURPOSE

- Preserve relationships
- Provide security
- NOT a legal document but a SYSTEM to gather pertinent info
- Longer we live, the longer, deeper and wider our paper trail



# Family Love Letter

## Roadmap For Next Generation



### SECTION IV DOCUMENTS & OTHER INFORMATION

#### MY DOCUMENTS

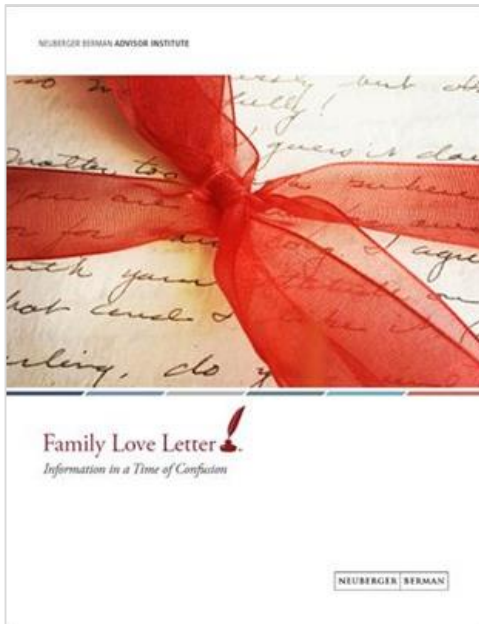
I have executed each of the following documents and you may find them where noted:

Document	Date Signed	Location of Original
Last Will and Testament		
Living Trust		
Living Will		
Medical Power of Attorney		
General Power of Attorney		
Limited Power of Attorney		
Life Insurance Trust		
Charitable Trust		
Minor's Trust		
Section 529 or Other Education Plan		
Custodial Account		
Guardianship Papers		
Organ Donation Form		

Any views or opinions expressed may not reflect those of the firm as a whole.

# Family Love Letter

## Roadmap For Next Generation



**MY ETHICAL WILL**

I have  have not  attached a more comprehensive Ethical Will.

When I am gone, I hope my family will learn from my experiences: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I believe that the most important things in life are: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The most important thing I have done in my life is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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# Family Check-up

## Life Events Check List

### Household Formation Events

- Marriage/Birth/ Divorce/Last Child Leaves Home
- Adult Child Divorces or Separates/Birth of Grandchild

### Inheritance Events

- IRA/Life Insurance

### Career Events

- Spouse Begins/Stops Work/Start Up New Business

### Retirement Events

- Selling of Home/Purchase of Other Property

### Health/Dependency Events

- Parent/Other Relative Moves In With You
- Disability or Chronic Illness of Adult Child



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### Life Events Checklist

Any of the events listed below could have significant implications for your present or future financial situation, needs or plans. Please let me know which of these events you have experienced recently or expect to experience in the near future. I am available to discuss at your convenience.

**LIFE EVENTS**  
Check the boxes of events you have experienced recently or expect to in the near future:

<input type="checkbox"/> Marriage	<input type="checkbox"/> Retirement
<input type="checkbox"/> Birth of a Child	<input type="checkbox"/> Loss of Job
<input type="checkbox"/> Birth of a Grandchild	<input type="checkbox"/> Sale of Business
<input type="checkbox"/> Divorce or Separation	<input type="checkbox"/> Refinance of Business
<input type="checkbox"/> Remarriage	<input type="checkbox"/> Failure of Business
<input type="checkbox"/> Children Go to College	<input type="checkbox"/> Relocation for Retirement
<input type="checkbox"/> Last Child Leaves Home	<input type="checkbox"/> Parent / Other Relative Moves in with You
<input type="checkbox"/> Child Marries	<input type="checkbox"/> Disability or Chronic Illness of Self or Spouse
<input type="checkbox"/> Adult Child Divorces or Separates	<input type="checkbox"/> Disability or Chronic Illness of Parent / Grandparent
<input type="checkbox"/> Adult Child Remarries	<input type="checkbox"/> Disability or Chronic Illness of Adult Child
<input type="checkbox"/> Purchase of a Home	<input type="checkbox"/> Relocation of Parent, Spouse or You to Assisted Care Facility
<input type="checkbox"/> Sale of a Home	<input type="checkbox"/> Death of Parent / Grandparent
<input type="checkbox"/> Sale or Purchase of Other Property	<input type="checkbox"/> Death of Child or a Child's Spouse
<input type="checkbox"/> Leaving a Legacy	<input type="checkbox"/> Death of Spouse
<input type="checkbox"/> Inheriting an IRA, Life Insurance or Other Assets	
<input type="checkbox"/> New Employer / New Career	
<input type="checkbox"/> Spouse Begins Work	
<input type="checkbox"/> Spouse Stops Work	
<input type="checkbox"/> Relocation for a New Job	
<input type="checkbox"/> Start a New Business	

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