



HOPE
of the
GENERATIONS CHURCH

Be in 
Health®



Planning for the End of your Life

INTRODUCTION

If you haven't made a will, you are not alone. Over 50% of Americans have not yet written one. Writing a will is essential if you want to care for your family and your possessions after death. Appointing trustees and executors, naming guardians for young children and dependents, and deciding how you would like your worldly goods distributed will give you peace of mind and relieve your loved ones of the burden of those decisions.

Possessions—and how we use them—may be used as part of the witness we have as a son or daughter of God stewarding over this planet. We hope this material will help you make important decisions to guide your friends and loved ones, so they will know who you were and what was important to you.

At Be in Health®, we believe that our estate and end of life plans should reflect our values. That is why we suggest you consider the following three sections in the sequence presented below.

- **“Issues to Consider in a Medical Directive”** gives you some health care issues that you may want to consider – namely, whether to name a person to make health care decisions for you when you cannot communicate your wishes (sometimes called a health care “proxy” or “agent”) and what treatment options you prefer if you end up in certain conditions (e.g., coma, terminal disease, etc.).
- **“Planning Your Memorial Service”** We suggest you design your memorial alongside writing your will. The memorial service should be a celebration of your life, a message to loved ones about your values and the last thoughts you want people to hear.
- **“Preparing to Write Your Will”**. Once you have expressed your values through writing your memorial service, then write or amend your will so that it reflects those values. This section gives you some issues to consider as you prepare to write your will

Setting your affairs in order and creating a plan in advance is an expression of love in itself. It will ensure that your already grieving loved ones don't have to carry any further unnecessary burdens. Passivity will tempt us to wait till later, to shove it off or to not think about it. It will try to rob us of the opportunity to express our heart and our wishes to our loved ones. That is why we need to always consider now as “the appointed time” and an opportunity that we may not have again later.

IMPORTANT NOTICE:

You should understand that neither Be In Health, nor any of its ministries, provides tax, financial or legal advice, and the information in this booklet is not, and shall not be, interpreted as such advice. The information provided herein is for general informational purposes, as well as to help you organize your thoughts, goals and objectives before you meet with a qualified attorney to assist you in creating the documents you need for estate planning, health care decision-making and charitable giving.

Completing any part of this booklet does NOT create an enforceable document.

You should consult a qualified attorney to assist you in creating and implementing an estate plan (including a will and perhaps other estate planning documents) as well as any other document (such as a medical directive) that this booklet references or countenances.





Planning for the end of your life

INFORMATION COLLECTION AND ENTRY

The information collected in this booklet was entered by:

Name (please print)

Street Address, PO Box, and/or Apartment #

City State Zip Code

Signature and Date

This brochure is purely informational.
Be in Health® is not engaged in offering legal or medical advice.
As laws vary from state to state, we urge you to consult your
financial planner, attorney and/or healthcare provider for those
issues specific to your situation.

ISSUES TO CONSIDER IN A MEDICAL DIRECTIVE

NOTE: THE FOLLOWING IS NOT A MEDICAL DIRECTIVE;

rather, it is designed to help you to think through the health care issues that are typically addressed in a medical directive and you should consider discussing these health care issues with your physician. You may also wish to discuss these issues with your family, friends or pastor.

Please note that many states have enacted legislation on advanced directives for healthcare; therefore, in order to create a medical directive that is effective according to the laws of the state in which you live, you should seek the assistance of your own attorney.

As part of a person's right to self-determination, every adult may accept or refuse any recommended medical treatment. Decision-making is relatively easy when people are well and can communicate their instructions. Unfortunately, during serious illness individuals are often unconscious or otherwise unable to communicate their wishes—at the very time when many decisions are critical.

A Medical Directive (known by different names, such as "advance directive for health care", "health care power of attorney", etc.) allows you to record your wishes regarding various types of medical treatments in several representative situations so that your desires can be respected. It also lets you appoint a "proxy" or "agent", which is someone to make medical decisions in your place if you should become unable to make them on your own.

The Medical Directive comes into effect only if you become incompetent (unable to make decisions and too sick to make your wishes known). You can change it at any time until then. While you are fully competent, you should be directly asked your preferences and you should discuss your care directly with your physician.

Severe Illness Situations.

The state of which you are a resident will have its own description under its medical directive legislation of severe illness situations where you are unable to express your health care preferences. In Georgia, for instance, two (2) sets of circumstances are referenced as circumstances where your proxy can be given authority to speak for you (those are a "terminal condition" and "state of permanent unconsciousness") and where you can express end-of-the-line treatments preferences. You will want to discuss this with your attorney, your health care provider and perhaps your pastor.



Stating Your Treatment Preference.

Your wishes for treatment options (“I want this treatment;” “I want this treatment tried but stopped if there is no clear improvement;” “I am undecided;” “I do not want this treatment”) should be indicated on the medical directive you finally sign. If you choose a trial of treatment, you should understand that this indicates you want the treatment withdrawn if your physician and proxy believe that it has become futile.

Personal Statement.

Some states’ medical directives have a section for a personal statement by you that allows you to explain your choices and say anything you wish to those who may make decisions for you concerning the limits of your life and the goals of intervention.

Organ and Body Donation.

Different states’ medical directives permit you to express your preferences concerning organ and body donation.



Planning for the end of your life

Naming a Proxy (also known as a Surrogate or Agent).

Finally, you want to give thought to the person or persons in whose hands you are willing to entrust your health care when you are not able to communicate your preferences for yourself. Your proxy must understand that this role usually involves making judgments that you would have made for yourself had you been able—and making them by the criteria you have outlined. Proxy decisions are ideally made in discussion with your family, friends and physician. The following allows you to assemble the information you will need to name a proxy:

Person(s) to Serve as Proxy/Proxies. You can choose a single person or several who serve together.

Name and Address and Telephone number(s)
AND

Name and Address and Telephone number(s)
AND

Name and Address and Telephone number(s)

NOTE: If you choose more than one person to serve as co-proxies, you will want to think about how you want decisions made if one or more of the people are not available. Can the remaining one(s) decide?

If you appoint more than one proxy and there is disagreement between their wishes, who has final authority?

If you name only one person to serve at a time, you want to think about a back-up (or more than one) to serve if your first choice is not available or is in some way unable to serve:

Back-Up Proxy

Name and Address and Telephone number(s)

Guidelines for How Your Proxy Makes Health Care Decisions.

- The proxy should make healthcare decisions based on his/her assessment of your personal wishes.
 - If your personal desires are unknown, your proxy is to make healthcare decisions based on his/her best assessment of what you would choose if you were able to communicate your wishes.
 - Your proxy shall have the authority to make all healthcare decisions for you, including decisions about life-sustaining treatment, if you are unable to make them yourself.
 - You can place limits on the proxy's authority.
 - My proxy's authority becomes effective if my attending physician determines in writing that I lack the capacity to make or to communicate healthcare decisions.
-

PLANNING YOUR MEMORIAL SERVICE

A WAY TO EXPRESS YOUR VALUES



I am the resurrection and the life, he that believeth in me, though he were dead, yet shall he live; and whosoever liveth and believeth in me shall not die."

John 11:25

Every believer should take joy in sharing the gospel, even in death, because of the new life that God the Father gives in Christ.

We have prepared this booklet to help you and your family prepare in advance. It will enable your family and your pastor(s) to understand your wishes and preferences. Your pastor(s) will help plan the service and will stand ready to assist in any way.

Consider planning a memorial rather than a funeral because when believers die, they fly to their everlasting home. Strategize to celebrate your life and all of the good things that God has done in you and through you. This is the last time to personally express your faith and love for God and His great and precious promises towards you and towards all that love Him.



Grace and peace be multiplied unto you through the knowledge of God, and of Jesus our Lord, According as his divine power hath given unto us all things that pertain unto life and godliness, through the knowledge of him that hath called us to glory and virtue: Whereby are given unto us exceeding great and precious promises: that by these ye might be partakers of the divine nature, having escaped the corruption that is in the world through lust."

2 Peter 1:2-4 KJV

Boldly attest of Christ's victory over death and the grave and your hope and expectation for what lies before you in eternity.



So when this corruptible shall have put on incorruption, and this mortal shall have put on immortality, then shall be brought to pass the saying that is written, Death is swallowed up in victory. O death, where is thy sting? O grave, where is thy victory? The sting of death is sin; and the strength of sin is the law. But thanks be to God, which giveth us the victory through our Lord Jesus Christ."

1 Corinthians 15:54-57 KJV

Leave your loved ones with sweet memories and happy thoughts of you and also express your love and heart towards them. Tell your testimony and words of wisdom that have helped you in your life so that you can pass on to them, not only a physical legacy, but a spiritual legacy, it is of far greater value.



Blessed be the God and Father of our Lord Jesus Christ, which according to his abundant mercy hath begotten us again unto a lively hope by the resurrection of Jesus Christ from the dead, To an inheritance incorruptible, and undefiled, and that fadeth not away, reserved in heaven for you, Who are kept by the power of God through faith unto salvation ready to be revealed in the last time."

1 Peter 1:3-5 KJV

However you desire to move forward, let it be through prayerful consideration of what God would want to bring forth from your life. Ask Him for wisdom; He will give it to you. As in everything, this does not need to be a perfectly choreographed production. Don't be afraid of failing in this but submit it to God and ask Him to lead you by His Holy Spirit in what you prepare and also to lead your memorial service by His Holy Spirit.

Remember, you are important. What you have to say matters. And in a time of loss and grief for your loved ones, what you leave for them will be a salve and a hope.

Christian burial is marked by three characteristics. First and foremost, it is an act of worship wherein we glorify God the Father for the gift of eternal life in Jesus Christ, our Lord. Second, it is a time when members of the Body of Christ gather to comfort one another and to offer mutual assurance of God the Father's abiding love. Third, it is a celebration whereby we give thanks for a deceased loved one and commend that person to the care of God the Father.

The earliest records of Christian burial tell us that the following elements included:

- Prayer in the home before the burial
- A gathering of the community for a burial service, consisting of thanksgivings, psalms, hymns, readings from Scripture, and prayers of those who mourn
- A procession to the place of burial
- The interment of the remains



Planning for the end of your life

MY Memorial INSTRUCTIONS

Final directions and instructions upon the death of:

Full Name (please print)

Date

File this information where it will be found easily upon your death. It is suggested that you file this with your will and your local church or your attorney and notify your heirs that this form has been completed for their information.

Your Information

Your Spouse's Information

Full Name (please print)

Spouse's Full Name

Street Address, PO Box, and/or Apartment #

Street Address, PO Box, and/or Apartment #

City State Zip Code

City State Zip Code

Date of Birth

Date of Birth

Place of Birth

Place of Birth

Date of Baptism

Date of Baptism

Occupation

Employer

Date of last executed will

Location of will

Executor's name and address



Planning for the end of your life

Your Parents' Information

Father's Full Name (please print)

Date/Place of Birth

Living: Yes No

Mother's Full Name (please print)

Date/Place of Birth

Living: Yes No

Your Siblings' Information

Full Name

Street Address, PO Box, and/or Apartment #

City/State/Zip Code

Phone Number

Other Persons to Notify upon My Death

Attach additional pages if necessary.

Full Name

Street Address, PO Box, and/or Apartment #

City/State/Zip Code

Phone Number



Planning for the end of your life

MY INSTRUCTIONS FOR FINAL DISPOSITION OF MY REMAINS

Please fill out this form and provide a copy to your church or pastor(s).

Full Name (please print) _____

(Street Address, PO Box, and/or Apartment #) _____

(City/State/Zip Code) _____

I request that my service be conducted at: _____

Name, City and State of Church

or at: _____

The pastor(s) of said congregation shall be in charge of the services.

I want this pastor(s) to be in charge of the services: _____

The memorial service is whatever you would like it to be. However, we will present you with some options for your consideration:

I request (*check one*):

A funeral service with my body or urn present.

A Memorial Service with my body or urn not present.

A teaching or sermon that includes the good news of the Gospel of Christ.

I want an open time for friends and family to share during the service.

Other: _____

Other arrangements as follows:

Altar flowers: _____

Musicians: _____

Ushers: _____

Pall bearer: _____



Planning for the end of your life

Speakers (if desired): _____

Below are some scriptures that you may choose to have read at your funeral service:

Old Testament

- Isaiah 25:6–9 (He will swallow up death in victory)
- Isaiah 61:1–3 (To comfort all that mourn)
- Lamentations 3:22–26, 31–33 (The Lord is good unto them that wait for him)
- Wisdom 3:1–5, 9 (The souls of the righteous are in the hand of God)
- Job 19:21–27a (I know that my Redeemer liveth)
- Psalms 42, 46, 90, 121, 130, 139
- Other: _____

New Testament

- Romans 8:14–19, 34–35, 37–39 (The glory that shall be revealed)
- 1 Corinthians 15:20–26, 35–38, 42–44, 53–58 (Raised in incorruption)
- 2 Corinthians 4:16–5:9 (Things which are not seen are eternal)
- 1 John 3:1–2 (We shall be like him)
- Revelation 7:9–17 (God shall wipe away all tears)
- Revelation 21:2–7 (Behold, I make all things new)
- Other: _____

Gospel

- John 5:24–27 (He that believeth hath everlasting life)
- John 6:37–40 (All that the Father giveth me shall come to me)
- John 10:11–16 (I am the good shepherd)
- John 11:21–27 (I am the resurrection and the life)
- John 14:1–6 (In my Father’s house are many mansions)
- Other: _____

I request that the following songs be sung: _____



Planning for the end of your life

Burial, Cremation or Donation. I prefer to be:

Buried: Location of cemetery plot deed, crypt deed, columbarium contract

Coffin specifications: Least expensive Mid-range Elaborate

Cremated... Before Memorial Service After Memorial Service

Ashes may be placed in _____ . (These niches may be purchased in advance.)

- Donate entire body or certain organs (See Organ Donation Form):
- Arrangements have been made
- Please make appropriate arrangements

Comments _____

Place of interment: _____

Full address: _____

I prefer the following funeral home: _____ ;
however, my family or attorney may make this decision.

- I wish to have my coffin open at the funeral home; OR
- I do not wish to have my coffin open at the funeral home.



Planning for the end of your life

In lieu of flowers, I request that donations be made in my name to: _____

or for [SPECIFY]: _____

or to: _____

Name of Institution or Charity: _____

Full Address: _____

A copy of these burial instructions are on file with:

Name of church and/or Pastor

Address

Telephone

Other information for my survivors: _____

Signature: _____ Date: _____

PREPARING TO WRITE YOUR WILL

DOES YOUR ESTATE PLAN REFLECT YOUR VALUES?

Writing a will is a loving and responsible act for the sake of your family. Here are a few helpful suggestions to consider before you write your will.

BEFORE SEEING AN ATTORNEY...

- Make a list of everyone for whom you are responsible.
- List everyone that you would like to remember in your will.
- List all of your material assets and, if you are married, list such assets in three (3) columns, to reflect the owner of the asset: (1) yours, (2) your spouse's and (3) jointly held.
- After subtracting your debts, match the names with the assets or consider giving a portion of your total estate to each individual.
- Take care of your family first, remembering that Scripture directs us to do so. ***"A good man leaveth an inheritance to his children's children:" Proverbs 13:22***
- Consider whether you may want to establish a trust to take care of children and other persons who should not or cannot (due to incapacity, including minority) receive what you want to give to them. Ask your attorney whether this is the right thing to do in light of your circumstances.
- Ask the persons you want to administer your estate (known by different names, such as "executor" or "personal representative") if they willing to serve. Try to pick a back-up person to serve if your first choice is unable to serve.
- Ask the people you would like to take care of your dependents (whether minor children or other dependents) if they would be willing to serve as guardians. Try to pick back-up persons to serve if your first choices are unable to serve.
- This is also the time to consider special friends and your church.
- Talk with your Pastor to explore the ministries of the church that could best be funded with a gift from your will.
- Consider establishing a trust for the benefit of your church or other ministry. Discuss this with your attorney.

BEQUESTS (I.e., GIFTS) IN YOUR WILL CAN TAKE SEVERAL FORMS ...

- An outright monetary bequest.

- A percentage of an estate.
- A specific asset, such as personal or real property.
- A testamentary trust created in a will.
- A contingent beneficiary receives the assets if all the other beneficiaries you have identified are gone. One possibility is your church and do remember: a bequest to a church is deductible from the value of your estate for tax purposes.

AFTER MAKING YOUR WILL WITH AN ATTORNEY...

- Make sure someone knows where your will is located. **Never** leave your will in a safe-deposit box. Banks are reluctant and sometimes will refuse to open the box for anyone other than the person in whose name the box has been held. While the executor/personal representative named in the will is authorized to open the account after being appointed by the probate court, that person has no authority to do so until that appointment.
- Do not place funeral instructions in a safe-deposit box. Generally, services will be over by the time your administrator checks your bank box. Instead, leave a copy of your funeral plans and wishes with your Pastor, church and a member of your family.
- Review your will from time to time with your legal advisor. Laws, assets, and personal interests often change over time.





Planning for the end of your life

INCLUDING A CHRISTIAN PREAMBLE IN YOUR WILL

A Christian preamble to your will provides a significant opportunity to share your faith with family and friends. Through this personal statement of your faith, an important message will be delivered to those who love and know you best. This message of faith comes at a time of grief and loss and serves as a reminder to them to place their trust in Jesus Christ as you have. Remember, this may be the last document they read about you, their loved one.

As you, together with your attorney, prepare your will/estate plan, give prayerful consideration to adding a Christian preamble such as:

I _____, of the City of _____, County of _____, and State of _____, being of sound mind and memory and being under no restraint, do make, declare and publish this my last will and testament, hereby revoking all wills and codicils heretofore made by me. I thank God our Father for placing each one of you in my life. I want you to know my heart is to express my love and gratefulness for you even in my passing. May God be your source of peace and comfort even in this season of grief and I pray that you might find joy in knowing that I have begun the next season of eternity with our loving Heavenly Father. I look forward to the day that I may see you again here in glory according to God's grace and timing. I encourage you, my loved ones, to continue to grow in love and faith towards Father God. Just as He provided for us in my lifetime, so I know He will continue to do so and more after my passing. May He guide your steps and remind you continually of His goodness and love. May He be your source of life and strength even in your weakest moments. Know that I love you deeply. You are treasured by me and so much more by Father God.

[The particulars of the will would follow, leaving gifts to family and friends, but also an articulation of the gifts you might leave to the various ministries of the Church].

SAMPLE FORMS OF BEQUEST

Specific Amount:

I, _____, hereby give, devise, and bequeath to Be in Health®, 4178 Crest Highway, Thomaston, Georgia 30286, EIN 20-3532218, the sum of \$XX,XXX to be used at the discretion of its management to assist in the ministries of the Church.

Percentage Amount:

I, _____, hereby give, devise, and bequeath to Be in Health®, 4178 Crest Highway, Thomaston, Georgia 30286, EIN 20-3532218, XX% of the rest, residue, and remainder of my estate, to be used at the discretion of its management to assist in the ministries of the Church.

Contingency Bequest:

In the event the beneficiaries of bequests and devises herein predecease me, or, in the case of charitable institutions, cease to be organizations described in section 501(c)(3) of the Internal Revenue Code, I, _____, hereby give, devise, and bequeath to Be in Health®, 4178 Crest Highway, Thomaston, Georgia 30286, EIN 20-3532218, the rest, residue and remainder of my estate, to be used at the discretion of its management to assist in the ministries of the Church.





Planning for the end of your life

INFORMATION NEEDED FOR MAKING A WILL

1. Full Legal Name:

_____	_____	_____/_____/_____
Name	Date of Birth	Social Security Number
_____		_____
Street Address, PO Box, and/or Apartment #		County
_____	_____	_____
City	State	Zip Code
_____		_____
Armed Forces Date of Service		Discharge Certificate Location

Serial Number		

Marital Status:

Single Married Partner/Civil Union Divorced Remarried Separated Widowed

2. Do you have a will? Yes No (If no, go to Family Information)

3. Since making your last will, have you:

Moved to another state? Yes No

Sold or bought property? Yes No

Celebrated the birth of a child or grandchild? Yes No

Changed your marital status? Yes No

Changed your mind about your personal representative (executor)? Yes No

Changed your mind about the guardian for your child? Yes No

Done family financial and charitable gift planning? Yes No

If the answer is "yes" to any of the above, your Will may need to be updated. Complete the following questions, then consult with your attorney.



Planning for the end of your life

FAMILY INFORMATION

1. Legal Name of Spouse:

_____	_____	____/____/____
Name	Date of Birth	Social Security Number
_____		_____
Street Address, PO Box, and/or Apartment #		County
_____	_____	_____
City	State	Zip Code
_____		_____
		Email Address

Does your spouse have a will? Yes No

2. Children (List your children, including those legally adopted):

Full Name	Street Address, PO Box, and/or Apartment #	City/State/Zip Code	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Other Dependents:

4. Other Loved Ones:



Planning for the end of your life

5. Person(s) to be the Guardian(s) of My Child(ren):

_____	_____	_____/_____/_____
Name	Date of Birth	Social Security Number

_____	_____
Street Address, PO Box, and/or Apartment #	County

_____	_____	_____
City	State	Zip Code

Email Address

_____	_____	_____/_____/_____
Name	Date of Birth	Social Security Number

_____	_____
Street Address, PO Box, and/or Apartment #	County

_____	_____	_____
City	State	Zip Code

Email Address

6. Executor (Person(s) to be the personal representative of my estate):

_____	_____	_____/_____/_____
Name	Date of Birth	Social Security Number

_____	_____
Street Address, PO Box, and/or Apartment #	County

_____	_____	_____
City	State	Zip Code

Email Address

_____	_____	_____/_____/_____
Name	Date of Birth	Social Security Number

_____	_____
Street Address, PO Box, and/or Apartment #	County

_____	_____	_____
City	State	Zip Code

Email Address



Planning for the end of your life

7. Location of My Records:

Will

Living Will

Birth Certificate

Social Security Card

Tax Records

Safe-Deposit Box and Key

Insurance Policies

Durable Power of Attorney

Durable Power of Attorney for Healthcare

Funeral Directions

8. Beneficiary Information (Persons, Church/Mission, or charitable associations you wish to thank for being part of your life):

Name

Name

Name

9. Residual Beneficiary

After you make gifts of specific pieces of property (whether personal property or real property) and gifts of funds to specific individuals (whether named individually or identified as a group (e.g., "my children"), you will need to decide to whom all the rest of your property – often called the "residuary" – should be given and your attorney will include a provision for all of that property. You can name individuals or charities and, if you name a charity, please consider naming Be in Health® as a residual beneficiary.



Planning for the end of your life

FINANCIAL INFORMATION

1. Present Annual Income:

Salary	\$ _____
Investment Income	\$ _____
Other	\$ _____
TOTAL	\$ _____

2. Property (Real Estate):

Description and Location	Original Cost	Present Market Value	Amount of Mortgage
1. _____			
2. _____			
3. _____			
4. _____			

3. Notes and Mortgages :

Name of Debtor	Description	Amount	Interest Rate	Rate of Payment
1. _____				
2. _____				
3. _____				
4. _____				

4. Leases:

1. _____
2. _____
3. _____
4. _____

5. Bank Accounts/Retirement Accounts (IRA, etc.)/Other Income-Producing Accounts:

Name of Institution	Type	Account Number
1. _____		
2. _____		
3. _____		
4. _____		



Planning for the end of your life

6. Stocks:

Corporation	# of Shares	Original Cost	Market Value
1.			
2.			
3.			
4.			
5.			

7. Insurance Policies:

Company	Policy #	Face Value	Cash Value
1.			
2.			
3.			
4.			

8. Other Assets:

Description	Location	Cost	Present Value
1.			
2.			
3.			
4.			
5.			

Notes:



Planning for the end of your life

PLANNING FOR THE FUTURE

1. Monthly Expenses:

Mortgage/Rental	\$ _____
Insurance	\$ _____
Utilities	\$ _____
Taxes	\$ _____
House expenses and repairs	\$ _____
Auto expenses	\$ _____
Clothing and personal care	\$ _____
Education	\$ _____
Pledge and charitable gifts	\$ _____
Birthdays/Holidays/Allowances	\$ _____
Medical and Dental	\$ _____
Vacation and Recreation	\$ _____
Other	\$ _____
Total	\$ _____

2. Projected Retirement Income:

	Estimated Amount	Continues to spouse		
		Yes	No	Half
Social Security	\$ _____	_____	_____	_____
Pension Plans	\$ _____	_____	_____	_____
Retirement Accounts (IRA, 401K, etc.)	\$ _____	_____	_____	_____
Charitable Trusts	\$ _____	_____	_____	_____
Stock Dividends	\$ _____	_____	_____	_____
Gift Annuities	\$ _____	_____	_____	_____
Pooled Income Fund	\$ _____	_____	_____	_____
Mortgages	\$ _____	_____	_____	_____
Royalties	\$ _____	_____	_____	_____
Other (describe below)	\$ _____	_____	_____	_____

Total	\$ _____			



Planning for the end of your life

3. Advisors:

Name

Full Address

Accountant:

Attorney:

Banker:

Broker:

Insurance Agent:

Pastor:

Trust Officer:

4. Notes:



For here have we no continuing city, but we seek one to come. By him therefore let us offer the sacrifice of praise to God continually, that is, the fruit of our lips giving thanks to his name. But to do good and to communicate forget not: for with such sacrifices God is well pleased.”

—HEBREWS 13:14-16



Be in Health®

4178 Crest Highway, Thomaston, GA
30286, EIN 20-3532218

706.646.2074 Option 5 or
E-mail: Partners@BeinHealth.com