



# **A Last Gift for My Loved Ones**

**Important information and “last words”  
to serve as a guide  
for my family and friends.**

**Given by:**

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# A Last Gift for My Family and Friends

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This document gathers in one place important information for my family and friends for such time as I reach the end of my life. In it you will find details about my financial accounts, persons I would like contacted and how to reach them, how I would like my funeral or memorial service to be conducted, and some details about me—including some “last words” or “final wishes” of mine.

## The Last Gift of:

Name \_\_\_\_\_

Other names or nicknames \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Mailing Address if different from physical address \_\_\_\_\_

This document was \_\_\_\_ created or \_\_\_\_ updated on \_\_\_\_\_

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For God so loved the world that he gave his only Son,  
so that everyone who believes in him may not perish but have eternal life. (John 3: 16)



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## Prologue

Often, we reach our final days without having prepared for those who are asked to complete the final details of our lives. We may have wills, we may have medical directives and powers of attorney, but the little things, the things that whoever follows will need to know, are usually not reduced to writing. To help bridge that gulf, this booklet has been prepared. The intent is to ask a series of questions, which, when answered, will give specific directions about our wishes. The booklet does not ask every question possible. Space is left at the end for anything not covered. But this guide does address the recurring questions that those who follow ask.

The booklet is constructed to lead you through a process in which you can provide as much or as little information as you wish. You may even leave sections blank. It is your document. The content is totally yours. The information provided should be reviewed at least annually and updated should your circumstances change.

Because the information is so personally private, the finished project should be stored safely, but not in a lock box. The place of storage should be shared with one or two who will not divulge its location until it is needed. The storage location chosen should be accessible when the time comes to complete your affairs.

This document is not meant to take the place of working with a lawyer regarding the distribution of your estate. It is intended only to supplement whatever legal planning you have done and to serve as a guide for those issues rarely covered in estate planning or final illness documents. The information given as preamble or elsewhere in a particular Section is not meant as legal advice, but is offered generally to point to what is commonly available and well known apart from Virginia law.

There is a time for everything and a season for every activity under the heavens,  
a time to be born and a time to die . . . . (Ecclesiastes 3:1-2a)



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## Personal Data

List your full name: \_\_\_\_\_

Name you usually go by: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone numbers: (cell) \_\_\_\_\_ (land line) \_\_\_\_\_

Birth date: \_\_\_\_\_ Place of your birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Military Service Number: \_\_\_\_\_

Military Service: (Branch) \_\_\_\_\_ (Years) \_\_\_\_\_ (Grade/Rank) \_\_\_\_\_

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

Marital Status: \_\_\_\_\_

Name of spouse or significant other: \_\_\_\_\_

Relatives (if living, include a location for each):

Parents:

\_\_\_\_\_  
\_\_\_\_\_

Brothers/Sisters:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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### Personal Data--continued

Children:

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Grandparents:

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Other Close Relatives or Special Friends:

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Do you have anyone living with you who is under your care, for whom you have made arrangements should you die first?

\_\_\_ yes \_\_\_ no If yes, what are those plans? \_\_\_\_\_

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Do you have any pets under your care for which you have made arrangements should you die first?

\_\_\_ yes \_\_\_ no If yes, what are those plans? \_\_\_\_\_

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### **Funeral Plans**

Few people leave a record of what they want to be included or excluded in their funeral. Often, the officiant of the funeral must glean from family members or friends what an individual might have wanted done or said. Use the questions below to address your specific wishes. Note that a funeral usually is held soon after a death, and generally includes the deceased person's casket or cremated remains. A memorial service can be held at any time after a death, and does not include the remains.

I desire to have a funeral or memorial service:  yes  no

I prefer to have:  funeral  memorial service

I have you made arrangements with a funeral provider:  yes  no

If yes, name of the provider: \_\_\_\_\_

Provider's city/county/location or address: \_\_\_\_\_

Provider's telephone number: \_\_\_\_\_

Name of a contact person at the provider's: \_\_\_\_\_

Location of contract with provider: \_\_\_\_\_

Are your plans:  prepaid  not prepaid

If you have not made arrangements, list recommended provider: \_\_\_\_\_

Where do you wish to have your funeral or memorial service held:

church  graveside

funeral home  other

Name of the place where you would like the service to be held: \_\_\_\_\_

Address: \_\_\_\_\_



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### **Funeral Plans--continued**

I wish to have a committal service (burial) as part of the larger service:    \_\_\_ yes    \_\_\_ no

Type of service:    \_\_\_ religious    \_\_\_ secular

Requested approximate length of service: \_\_\_\_\_

Preference for how much time should be given to the service leader: \_\_\_\_\_

Preferred service leader(s) (list name and contact information):

\_\_\_\_\_  
\_\_\_\_\_

Have you discussed your service with the service leader?    \_\_\_ yes    \_\_\_ no

If not, are there things you want included or excluded:

Bible verses: \_\_\_\_\_

Music: \_\_\_\_\_

Readings: \_\_\_\_\_

I would like others to participate in the service:    \_\_\_ yes    \_\_\_ no

If yes, name(s) and contact information or location:

\_\_\_\_\_  
\_\_\_\_\_

I would like to have pall bearers:    \_\_\_ yes    \_\_\_ no    \_\_\_ in-person    \_\_\_ honorary

Pall bearers' names and contact information or location:

\_\_\_\_\_  
\_\_\_\_\_



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### Wills, Powers of Attorney, and Final Directive/Medical Directive

These three documents are among the most important of your Last Words.

A **Will** provides for the orderly closure of your estate and names the designees of your estate. A will is not a necessity for every person. Virginia Law provides for an orderly transfer of your estate, but the scheme and provisions might not be what you want. You are highly recommended to discuss whether to have a will or not with an attorney whose practice is devoted to Wills, Trusts and Administration. If you decide then that a will is in order, have that attorney prepare it for you. (A copy of Virginia's law of descents and other practical transfer information is on page 18.)

A **Power of Attorney** authorizes another to act for you when you are unable legally to act for yourself during your life. A Power of Attorney expires at death. It is highly recommended that you have a Power of Attorney that will go into effect upon the occurrence of some event that prevents you from acting on your own behalf and will remain in effect until you can resume your own care.

A **Final Directive** is a document which empowers another to make decisions for you should you not be able to make them for yourself. It is effective only during times that appear final in your life. Should you recover, the Final Directive will become inoperative until another life crisis arises. You can include whatever directives you want in the document. Again, this is a document you should have and it too requires an attorney's preparation.

I have a will:  yes  no

Location of original document: \_\_\_\_\_

I have a power of attorney:  yes  no

Location of original document: \_\_\_\_\_

I have a Final Directive:  yes  no

Location of original document: \_\_\_\_\_

(Do not keep the originals in your lock box, as they will be inaccessible and of no use there.)



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## Accounts/Numbers

Most of us have a number of accounts, but we forget to list them in one central location.

### Bank Accounts

Name of bank: \_\_\_\_\_

Location (Branch) used: \_\_\_\_\_

Name(s) on account(s): \_\_\_\_\_

\_\_\_\_\_

Account numbers: \_\_\_\_\_

\_\_\_\_\_

Authorized signatories: \_\_\_\_\_

### Credit Cards

1<sup>st</sup> Card:

Name on card: \_\_\_\_\_

Credit card company: \_\_\_\_\_

Card number: \_\_\_\_\_

(For security reasons, do not list the security code or the maturity date for any of these)

2<sup>nd</sup> Card:

Name on card: \_\_\_\_\_

Credit card company: \_\_\_\_\_

Card number: \_\_\_\_\_



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3<sup>rd</sup> Card:

Name on card: \_\_\_\_\_

Credit card company: \_\_\_\_\_

Card number: \_\_\_\_\_

4<sup>th</sup> Card:

Name on card: \_\_\_\_\_

Credit card company: \_\_\_\_\_

Card number: \_\_\_\_\_

### Other Accounts

Name on card: \_\_\_\_\_

Company: \_\_\_\_\_

Card number: \_\_\_\_\_

When Jacob had finished giving his final instructions to his sons, he drew his feet up into the bed,  
breathed his last, and was gathered to his people. (Genesis 48:33)



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### Burial/Cremation

Often people make choices about the place where they wish to rest. Sometimes these plans are prepaid, sometimes they are just wishes.

My preference for disposing of my remains:

Burial  Donor

Cremation  Other

If you intend to donate some or all of my body:  Yes  No

I have made arrangements:  Yes  No

Location of the document(s) that establish the arrangements: \_\_\_\_\_

If you have not completed the arrangements, state here what you intend to donate and to what organization:

I have selected a cemetery or crematorium:  Yes  No

Name of facility: \_\_\_\_\_

Location of facility: \_\_\_\_\_

I own a cemetery plot or a place for my ashes:  Yes  No

Identify the place: \_\_\_\_\_

I have a contract:  Yes  No

Location of contract: \_\_\_\_\_

Contract is prepaid in whole or in part:  Yes  No



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## **Contacts**

Usually, there are a number of people who should be advised of your death, and it is often difficult to determine all of their names and to acquire contact information. The list below is not exhaustive but should help.

Family (Indicate the person's relationship to you):

_____	_____
_____	_____
_____	_____

Attorney (here and below, list address and/or phone number, if known):

\_\_\_\_\_

Employer:

\_\_\_\_\_

Accountant:

\_\_\_\_\_

Church:

\_\_\_\_\_

Other:

\_\_\_\_\_

Dear children, let us not love with words or speech,  
but with actions and in truth. (1 John 3: 18)



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### **Documents—and Where to Find Them**

Having certain essential documents is very important. Equally important is informing your loved ones of where to locate these documents.

Will: \_\_\_\_\_

Birth certificate: \_\_\_\_\_

Marriage certificate: \_\_\_\_\_

Passport: \_\_\_\_\_

Deeds: \_\_\_\_\_

Tax records: \_\_\_\_\_

Social Security records: \_\_\_\_\_

Medicare records: \_\_\_\_\_

Military records: \_\_\_\_\_

Divorce records: \_\_\_\_\_

Other record: \_\_\_\_\_

Other record: \_\_\_\_\_

When they [Israel] had crossed the Jordan, Elijah said to Elisha, “Tell me what I can do for you [leave for you] before I am taken from you.” Elisha replied, “Let me inherit a double portion of your spirit.” (2 Kings 2:9)



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### **Insurance Policies**

We all have insurance for different risks. Here, list each insurance company, answer a few preliminary questions, and state where the policy is physically located.

1<sup>st</sup> Policy:

Insurance company: \_\_\_\_\_

Type of insurance: \_\_\_\_\_

Policy number: \_\_\_\_\_

Agent: \_\_\_\_\_

Location of policy: \_\_\_\_\_

2<sup>nd</sup> Policy:

Insurance company: \_\_\_\_\_

Type of insurance: \_\_\_\_\_

Policy number: \_\_\_\_\_

Agent: \_\_\_\_\_

Location of policy: \_\_\_\_\_

3<sup>rd</sup> Policy:

Insurance company: \_\_\_\_\_

Type of insurance: \_\_\_\_\_

Policy number: \_\_\_\_\_

Agent: \_\_\_\_\_

Location of Policy \_\_\_\_\_



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## Passwords

Daily, we are asked to create or update passwords for access to organizations, services, social media, and computers. Many have resorted to a book with all of our access codes. A book is recommended over a computer file because computers have to be opened to access the passwords, and even that act will require a password.

I have a book with all of my passwords: \_\_\_\_ Yes \_\_\_\_ No

If yes, location of the book: \_\_\_\_\_

If no, and if passwords are in my computer:

Location of computer: \_\_\_\_\_

Password for computer: \_\_\_\_\_

If neither a book nor storage of passwords on computer exists, list here important passwords and what they are for:

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But all things should be done decently and in order. (1 Corinthians 14: 40)



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### **Employment**

Here, list any schools you may have attended, degrees earned, and the year of your graduation.

1<sup>st</sup> School (or College, or University):

Name: \_\_\_\_\_

Degree: \_\_\_\_\_

Year: \_\_\_\_\_

Person or Office to be notified: \_\_\_\_\_

2<sup>nd</sup> School (or College, or University):

Name: \_\_\_\_\_

Degree: \_\_\_\_\_

Year: \_\_\_\_\_

Person or Office to be notified: \_\_\_\_\_

Other education (certification, licensure, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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### Obituary

Preparing an obituary in advance is probably the most neglected task of those listed in this “Last Gift” document. You are encouraged to write your own and attach it to this document. That way, you get to say what is left for posterity to consider about you.

I have an obituary:  Yes  No

Location of obituary: \_\_\_\_\_

I do not have an obituary but I would like one:  Yes  No

Person(s) I would like to write it: \_\_\_\_\_

I would like to have my obituary published:  Yes  No

Place(s) for publication: \_\_\_\_\_

\_\_\_\_\_

Day(s) of the week: \_\_\_\_\_

I have you selected a photo of myself to be used:  Yes  No

Location of the photo: \_\_\_\_\_

Yes, even if I walk through the valley of the shadow of death, I will fear nothing,  
for you my God come with me. (Psalm 23)





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### **Information about some Virginia laws that may pertain at the time of a death**

The following sections of the Virginia Code are included at the end of this booklet:

VA Code Section 64.2-200:

“Course of descents generally; right of Commonwealth if no other heir.”  
(page 20)

VA Code Section 64.2-509:

“List of Heirs.”  
(page 21)

VA Code Section 64.2-635:

“Optional form of transfer on death deed.”  
(pages 22-23)

VA Code Section 46.2-635:

“Surrender of certificates for vehicles to be demolished; securing new title certificates.”  
(page 24)

“Deceased Owners Title Transfer Guide”

[https://lenchlaw.com/2021/wp-content/uploads/2021/06/deceased\\_owner\\_title.pdf](https://lenchlaw.com/2021/wp-content/uploads/2021/06/deceased_owner_title.pdf)



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## Signatures

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Signature

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Date

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Witness signature

§ 64.2-200. Course of descents generally; right of Commonwealth if no other heir.

A. The real estate of any decedent not effectively disposed of by will descends and passes by intestate succession in the following course:

1. To the surviving spouse of the decedent, unless the decedent is survived by children or their descendants, one or more of whom are not children or their descendants of the surviving spouse, in which case, two-thirds of the estate descends and passes to the decedent's children and their descendants, and one-third of the estate descends and passes to the surviving spouse.

2. If there is no surviving spouse, then the estate descends and passes to the decedent's children and their descendants.

3. If there is none of the foregoing, then to the decedent's parents, or to the surviving parent.

4. If there is none of the foregoing, then to the decedent's siblings, and their descendants.

5. If there is none of the foregoing, then one-half of the estate descends and passes to the kindred of one of the decedent's parents and one-half descends and passes to the kindred of the other of the decedent's parents in the following course:

a. To the decedent's grandparents, or to the surviving grandparent.

b. If there is none of the foregoing, then to the decedent's uncles and aunts, and their descendants.

c. If there is none of the foregoing, then to the decedent's great-grandparents.

d. If there is none of the foregoing, then to the siblings of the decedent's grandparents, and their descendants.

e. And so on, in other cases, without end, passing to the nearest lineal ancestors, and the descendants of such ancestors.

B. If there are no surviving kindred of one of the decedent's parents, the whole estate descends and passes to the surviving kindred of the other of the decedent's parents. If there are no kindred of either parent, the whole estate descends and passes to the kindred of the decedent's most recent spouse, if any, provided that the decedent and the spouse were married at the time of the spouse's death, as if such spouse had died intestate and entitled to the estate.

C. If there is no other heir of a decedent's real estate, such real estate is subject to escheat to the Commonwealth in accordance with Chapter 24 (§ 55.1-2400 et seq.) of Title 55.1.

Code 1950, § 64-1; 1956, c. 109; 1968, c. 656, § 64.1-1; 1977, c. 474; 1982, c. 304; 1985, c. 189; 1990, c. 831; 2012, c. 614; 2020, c. 900.

§ 64.2-509. List of heirs.

A. Every personal representative of a decedent, whether the decedent died testate or intestate, shall, at the time of his qualification, and every proponent of a will where there is no qualification of a personal representative, shall, at the time the will is presented for probate, furnish a list of heirs under oath in accordance with a form provided to each clerk of court by the Office of the Executive Secretary of the Supreme Court or a computer-generated facsimile thereof to the court or clerk where the personal representative qualifies and to the clerk of the circuit court for the jurisdiction where any real estate that is part of the decedent's estate is located.

B. If there has been no qualification of a personal representative within 30 days following the decedent's death, a list of heirs, made under oath in accordance with the form provided to each clerk or a computer-generated facsimile thereof, may be filed by any heir at law of a decedent who died intestate.

C. The clerk shall record the list of heirs in the will book and index the list in the name of the decedent and the heirs. A list of heirs made under oath and recorded pursuant to this section shall be prima facie evidence of the facts contained in the list. The cost of recording the list shall be deemed a part of the cost of administration and be paid out of the estate of the decedent.

D. The personal representative shall not receive any compensation for his services until the list of heirs is filed unless he files an affidavit before the commissioner of accounts that the heirs are unknown to him and that after diligent inquiry he has been unable to ascertain their names, ages, or addresses, as the case may be.

E. The list of heirs filed pursuant to this section shall reflect the heirs in existence on the date of the decedent's death. If there are any changes as to who should be included on the list of heirs, an additional list of heirs shall be filed that includes such changes.

§ 64.2-635. Optional form of transfer on death deed.

The following form may be used to create a transfer on death deed. The other sections of this article govern the effect of this or any other instrument used to create a transfer on death deed:

THIS DEED MUST BE RECORDED BEFORE THE DEATH OF THE OWNER(S), OR IT WILL NOT BE EFFECTIVE.

THIS DEED IS EXEMPT FROM RECORDATION TAXES UNDER § 58.1-811(J) OF THE CODE OF VIRGINIA OF 1950, AS AMENDED.

REVOCABLE TRANSFER ON DEATH DEED

THIS REVOCABLE TRANSFER ON DEATH DEED, dated as of the \_\_\_\_\_ day of \_\_\_\_\_, is made by TRANSFEROR or TRANSFERORS (the Grantor(s)), whose address is \_\_\_\_\_.

This Revocable Transfer on Death Deed is made pursuant to the provisions of the Uniform Real Property Transfer on Death Act, Virginia Code § 64.2-621 et seq. In accordance with the provisions of the Uniform Real Property Transfer on Death Act, at my death, I transfer and convey my interest in the below described property to my designated beneficiaries as follows:

PRIMARY BENEFICIARY

I designate \_\_\_\_\_ as the designated beneficiary of the property if \_\_\_\_\_ survives me.

ALTERNATE BENEFICIARY -- Optional

If my primary designated beneficiary does not survive me, I designate \_\_\_\_\_ as my alternate designated beneficiary if my alternate designated beneficiary survives me.

PROPERTY:

The legal description of the real property that shall be transferred at my death pursuant to this Revocable Transfer on Death Deed is as follows:

INSERT LEGAL DESCRIPTION

RIGHT TO REVOKE AND METHOD TO REVOKE DEED:

Before my death, I have the right to revoke this deed.

Under the Uniform Real Property Transfer on Death Act, an instrument is effective to revoke a recorded transfer on death deed, or any part of it, only if the instrument:

1. Is one of the following:

- a. A transfer on death deed that revokes the transfer on death deed or part of the transfer on death deed expressly;
- b. A transfer on death deed that names a designated beneficiary that is inconsistent with the designated beneficiary in a prior transfer on death deed;
- c. An instrument of revocation that expressly revokes the transfer on death deed or part of the transfer on death deed; or
- d. An inter vivos deed that expressly revokes the transfer on death deed or part of the transfer on death deed.

2. Is acknowledged by the transferor after the acknowledgment of the transfer on death deed being revoked and recorded before the transferor's death in the land records of the clerk's office of the circuit court where the deed is recorded.

After this transfer on death deed is recorded, it can be revoked only by an effective revocatory instrument recorded prior to the death of the transferor and may not be revoked by a revocatory act taken against or on the original or a copy of the recorded transfer on death deed.

The execution and recordation of this transfer on death deed does not limit the effect of an inter vivos transfer of the property.

At my death, a beneficiary takes the property subject to all conveyances, encumbrances, assignments, contracts, mortgages, liens, and other interests to which the property is subject at my death.

Witness the following signature and seals:

\_\_\_\_\_ (SEAL)  
 TRANSFEROR

COMMONWEALTH OF VIRGINIA

CITY/COUNTY OF \_\_\_\_\_, to wit:

The foregoing instrument was acknowledged before me in the City/County of \_\_\_\_\_, Virginia this \_\_\_\_\_ day of \_\_\_\_\_, by TRANSFEROR.

\_\_\_\_\_  
 Notary Public

My commission expires: \_\_\_\_\_

Registration number: \_\_\_\_\_

2013, c. 390.

§ 46.2-635. Surrender of certificates for vehicles to be demolished; securing new title certificates.

Every person disposing of a motor vehicle, trailer, or semitrailer which is to be demolished shall make an assignment of title to the transferee as provided in § 46.2-628. The assigned certificate of title, when available, however, shall be delivered to the Department, accompanied by a form provided by the Commissioner, stating that the vehicle is to be demolished. On receipt of this form and the assigned title, the Commissioner shall forward to the transferee a receipt for them.

If the person, in lieu of demolishing the vehicle, sells, transfers, or operates the motor vehicle, trailer, or semitrailer, he shall first secure a certificate of title from the Department. Before issuing the new certificate of title, the Department shall inspect, or have inspected, the reconstructed vehicle.

If a motor vehicle, trailer, or semitrailer obtained for use or resale, is subsequently demolished, the owner shall immediately surrender its certificate of title to the Department.

1968, c. 156, § 46.1-98.1; 1978, c. 605; 1989, c. 727.