



Document Checklist & Family Organizer Worksheet

Life's emergency situations require advance preparation and planning. The first step is knowing where your documents are. Our **Document Checklist** will help you identify your important documents and where they are located. Knowing where your official records are located as well as having copies of these important financial, legal and health documents can save you countless hours of time spent tracking down records.

Preparation is key, which is why for years we have encouraged our own families, friends, and clients to use our **Family Organizer Worksheet**. This document is designed to make it easier for your loved ones to manage things when you're gone.

Document Location Checklist

The purpose of this checklist is to organize this information so that you, or others who might have to manage your affairs, know where to find all records and whom to contact

me:	
sidence:	
fe Deposit Box:	

	Residence	Safe Deposit Box	Office	Other:	Other:	Other:
Will (original)						
Powers of attorney						
Burial instructions						
Spouses will (original)						
Spouses will (copy)						
Cemetery plot deed						
Doc. Appointing children's guardian						
List of special bequests						
Safe combination, business						
Safe combination, home						
Trust agreements						
Life insurance, group						
Life insurance, individual						
Property and casualty insurance						
Health insurance policy						
Homeowners insurance policy						
Partnership agreements						
List of checking and savings accts						
Bank statements and canceled checks						
List of credit cards						
Certificate of deposits						
Checkbooks						
Savings passbook						
Investment securities						
Brokerage account records						
Stock certificates						
Mutual fund shares						
Bonds						
Other securities						

Document Location Checklist

	Residence	Safe Deposit Box	Office	Other:	Other:	Other:
Corporate retirement plan						
Keogh or IRA plan						
Annuity contracts						
Stock option plan						
Stock purchase plan						
Profit sharing plan						
Income and gift tax return						
Titles and deeds to real estate & land						
Rental property agreements						
Notes and other loan agreements, including mortgages						
Stored and valuable possessions						
Auto ownership records						
Boat ownership records						
Birth certificate						
Citizenship papers						
Adoption papers						
Military discharge papers						
Marriage certificate						
Children's birth certificates						
Divorce/separation records						
Names & addresses of relatives & friend	s					
Listing of professional & fraternal						
organization memberships						
Other						

Key professionals to be contacted

Accountant	
Phone	
Address	
Attorney	
Phone	
Address	
Life Insurance Agent	
Phone	
Address	
Auto Insurance Agent	
Phone	
Address	
Bank	
Phone	
Address	
Clergyman/Rabbi	
	Church/Synagogue
Address	
Doctor	
Phone	Hospital
Address	
Employer	
Phone	Company
Address	
Financial Advisor	
Phone	Firm
Address	

Life insurance

Insurance Company	
Policy Number	Type*
Insured	
	Policy Date
Premium	
*Term, whole life, variable life, universal life	e, survivorship, group life, split dollar, annuity
Insurance Company	
Policy Number	Type*
Insured	
Death Benefit	Policy Date
Premium	
	e, survivorship, group life, split dollar, annuity
Insurance Company	
	Type [*]
Insured	
Owner	
Beneficiary	
	Policy Date
Premium	

 * Term, whole life, variable life, universal life, survivorship, group life, split dollar, annuity

Life insurance

Company
Account Number
Type of Account
Owner
Account Representative
Phone Number
Company
Account Number
Type of Account
Owner
Account Representative
Phone Number
Company
Account Number
Type of Account
Owner
Account Representative
Phone Number
Company
Account Number
Type of Account
Owner
Account Representative
Phone Number
Company
Account Number
Type of Account
Owner
Account Representative
Phone Number

Bank, brokerage & annuity accounts

Company
Account Number
Type of Account
Owner
Account Representative
Phone Number
Company
Account Number
Type of Account
Owner
Account Representative
Phone Number
Company
Account Number
Type of Account
Owner
Account Representative
Phone Number
Company
Account Number
Type of Account
Owner
Account Representative
Phone Number
Company
Account Number
Type of Account
Owner
Account Representative
Phone Number

Long-term care insurance information

Insurance Company	
	Type
	Policy Date
Disability income insurance	
Insurance Company	
	_ Type
Contingent Beneficiary	
	_Policy Date
Premium	

Funeral expense policy

Insurance Company	
Policy Number	_Type
Insured	
Owner	
Beneficiary	
Contingent Beneficiary	
Death Benefit	Policy Date
Premium	

Relatives & close friends to be contacted

Name	
Relationship	
Phone Number	
Address	
Name	
Relationship	
Phone Number	
Address	
Name	
Phone Number	
Address	
Name	
Relationship	
Phone Number	
Address	
Name	
Phone Number	
Address	
Name	
Relationship	
Phone Number	
Address	
Name	
Relationship	
Phone Number	
Address	
Name	
Relationship	
Phone Number	
Address	

Funeral instructions

I have attached as Exhibit "B" to this letter my personal wishes regarding my last rites and burial services.

Other instructions to my family





your address goes here | 123.456.7891 | fax 123.456.7891 | www.website.com

We are an independent Financial services firm helping individuals create retirement strategies using a variety of insurance products. This document is not intended to provide tax, legal, investment, or accounting advice. Please consult a qualified professional in regards to a specific situation. YLH_OrgKit-SC2005-2254