



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

Name:	
Residence:	
Safe 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 cancelled 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

Keogh or IRA plan □ □ □ □ □ Annuity contracts □ □ □ □ □ Stock option plan □ □ □ □ □ □	
Annuity contracts	
Stock option plan	
Stock purchase plan	
50500 par 51 mas 5 par 1.	
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 \Box \Box \Box \Box \Box \Box	
Military discharge papers	
Marriage certificate	
Children's birth certificates	
Divorce/separation records	
Names & addresses of relatives & friends	
Listing of professional & fraternal	
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	
Phone	_ Church/Synagogue
Address	
Doctor	
Phone	_ Hospital
Address	
Employer	
Phone	Company
Address	
Financial Advisor	
Phone	_ Firm
Address	

Life insurance

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

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

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
Premium	
Disability income insurance	
Insurance Company	
	Type
Insured	
	Policy Date
Premium	
Funeral expense policy	
Insurance Company	
Policy Number	Type
Insured	
Owner	
Beneficiary	
Contingent Beneficiary	
	Policy Date
Premium	

Relatives & close friends to be contacted

Name	
Relationship	
Phone Number	
Address	
Name	
Relationship	
Phone Number	
Address	
Name	
Relationship	
Phone Number	
Address	
Name	
Relationship	
Phone Number	
Address	
Name	
Kelationship	
Phone Number	
Address	
Name	
Relationship	
Phone Number	
Address	
Name	
Relationship	
Phone Number	
Address	
Name	
Name	
Relationship	
Phone NumberAddress	
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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