

Checklist for My Loved Ones

FROM: _____ (effective: _____)

Dear Loved Ones:

To simplify matters for you, I have prepared this checklist to provide you with information that will be necessary for you when the time arises:

Documents:

Document	Date Signed (if applicable)	Location
Will		
Healthcare Proxy		
Power of Attorney		
Medical Directive		
Trust Information		
Organ Donation		
Marriage Agreement		
Citizenship Papers		
Burial Agreement		

General Information:

I (do/do not) have a safety deposit box. It can be found at _____ and the key can be found _____.

I (do/do not) have a personal safe found at _____. The combination is / key is at _____.

My driver's license number can be found _____.

Passport can be found _____. Please shred it.

Social Security card can be found _____.

Services/Burial:

Plot address: _____. Paperwork: _____.

Services held at: _____; my requests found _____.

Advisors:

Some of the people you will need to contact are listed below:

Attorney:

Name: _____

Address: _____

Phone: _____

Accountant:

Name: _____

Address: _____

Phone: _____

Mortgage Holder:

Name: _____

Address: _____

Phone: _____

Insurance Broker (type _____):

Name: _____

Address: _____

Phone: _____

Insurance Broker (type _____):

Name: _____

Address: _____

Phone: _____

Additional Notes:

Employer or Pension Information:

Name: _____

Address: _____

Phone: _____

Financial Planner:

Name: _____

Address: _____

Phone: _____

Bank Account Rep. :

Name: _____

Address: _____

Phone: _____

Insurance Broker (type _____):

Name: _____

Address: _____

Phone: _____

Other:

Name: _____

Address: _____

Phone: _____

Signed _____

Date _____