GENERAL PERSONAL INFORMATION



WORKSHEET

Full Legal Name			Date of E	Birth		Social Security Number	
IMPORTANT LEGAL DO	DCUMENTS		<i>'</i> • • • •	• •			
Document		Person You		orized	Dho	ne Number	Location*
Document		III Docume	:110		PIIC	nie Number	Location
Durable Power of Att	torney						
Medical Power of Attorney							
Last Will and Testam	ent						
		l					ı
Medical Papers	Importa	nt Info		Notes		Locat	ion
Organ Donor Card	Are you	an organ Do	nor?				
	☐ Yes						
	□ No						
Living Will	Have you	ı signed a Liv	ving Will?				
	□ Yes						
	□ No						

'Executor for Last Will and Testament.' e.g. desk drawer, safety deposit box, file cabinet, etc.





Other Papers	Location	Other Papers	Location
Birth Certificate			
Marriage Certificate			
Divorce/Separation Papers			
Copies of Tax Returns			
Mortgage Documents			
Business Agreements			
Military Papers			



PROPERTY TITLES



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Be sure to note whether property is owned jointly or only by you. Property Address/Description How Owned? Location Home Other Real Estate Automobiles



Other



BANKS AND BROKERAGES						
Location refers to where the account documentation is kept.						
Account	Name	Account #	Ownership	Phone #	Location	
		Checking	y/Savings		·	
	J	Credit Card	s & Charges			
	I	CDs, Money M	arket Accounts			
		Brokerage	Accounts**			

^{*}All of them, please, especially the offshore tax dodge. **Do not include IRAs here, they go below.





RETIREMENT ACCOUNTS							
Account	Account #	Contact	Phone #	Beneficiary	Location		
IRAs*							
	1	Employer-pro	vided Retirement	t Plans			
Other							



^{*}Include 401(k) and other employer plans that you rolled into a self-directed IRA. *401(k), 403(b), pension, profit-sharing, and deferred compensation plans



WORKSHEET

INSURANCE POLICIES Be sure to list beneficiaries where applicable **Policy Payment Due** Contact Phone # Location Account # Health Disability Homeowner Auto Life **Beneficiary** Other





DEBITS						
"Due When" means monthly or monthly intervals.						
Debt	Account	Contact	Phone #	Due When?		





FUNERAL ARRANGEMENTS						
List your wishes with regards to your funeral and burial. If you have already bought a burial plot, or made other arrangements, provide contacts.						
Wishes						
Contact	Phone #	For What				





PERSONAL ADVISORS						
Title	Name	Address	Phone #	Email		
Emergency Contact						
Attorney						
Accountant						
Primary Physician						
Guardian for Children						
Minister/ Priest/ Rabbi/Yogi						
Electrologist						
Other						

