

**FINANCIALS:** Enter the name of the person you want to handle your financial matters listed below in the event of incapacitation or death.

Name:

**Financial Planner / Wealth Manager**

Name of institution and contact information:

Are they aware of the person you've named to handle your financial matters?

Yes

No

Account number(s):

Do you have any bill payments, direct deposits or recurring transfers in place? If so, give details including accounts and amounts:

Anything else to note:

## **Personal / Private Banker**

Name of institution and contact information:

Are they aware of the person you've named to handle your financial matters?

Yes

No

Account number(s):

Do you have any bill payments, direct deposits or recurring transfers in place? If so, give details, including accounts and amounts:

Anything else to note:

## **Pensions**

Pensions?

Yes

No

Name of pension plan:

Contact name and information for pension plan:

Payment information:

## **Tax Returns**

Name of CPA or your tax software:

Contact information for your CPA or login information for your software:

Location of tax returns:

## **Credit Card(s)**

**Card Name:**

Account number & expiration date:

Payment due date:

Payment information:

Automatic bill payments linked to card?

Yes

No

If yes, list the names of the bills that are charged to the card, the frequency and the amount:

**Card Name:**

Account number & expiration date:

Payment due date:

Payment information:

Automatic bill payments linked to card?

Yes

No

If yes, list the names of the bills that are charged to the card, the frequency and the amount:

**Card Name:**

Account number & expiration date:

Payment due date:

Payment information:

Automatic bill payments linked to card?

Yes

No

If yes, list the names of the bills that are charged to the card, the frequency, and the amount:

**Card Name:**

Account number & expiration date:

Payment due date:

Payment information:

Automatic bill payments linked to card?

Yes

No

If yes, list the names of the bills that are charged to the card, the frequency, and the amount:

### **Loan(s)**

Type of loan:

Account number:

Name of financial institution and contact information:

Location of loan documents:

Payment frequency, amount and method of payment:

Other information to note:

### **Online money management accounts (Examples: PayPal, Mint, Venmo, Google Wallet)**

**Name:**

Website:

Login username and password:

Associated phone number (if any):

Instructions or other items to note:

**Name:**

Website:

Login username and password:

Associated phone number (if any):

Instructions or other items to note:

**Name:**

Website:

Login username and password:

Associated phone number (if any):

Instructions or other information to note:

**Property / Real Estate (owned and/or rented)**

Enter the name of the person you want to handle your property listed below in the event of incapacitation or death.

Primary home address (if owned):

Location of deed:

Property tax information:

Mortgage?

Yes

No

Mortgage company and name of agent:

Contact information:

Location of mortgage paperwork:

Account number:

Payment information and online account login information:

Primary home address (if rented):

Landlord's name and contact information:

Location of lease:

Monthly rent and payment information:

Security deposit:

Lease end date:

Additional information to note:

**Homeowner's (or renter's) insurance:**

Name of Insurance Company:

Name of agent (if any) and contact number:

Location of policy documents:

Policy numbers and types (home/renter's, flood, umbrella, etc):

Payment method, frequency and amount:



Online login information (if any):

Anything else to note (i.e. claims in process, disputes, etc.):

**Security Company (if any)**

Name of Security Company:

Contact information:

Account number:

Master password:

Phone safe word:

Instructions for entering home:

Extra key location:

Anything else to note:

**Other Property Owned**

Address:

Location of deed:

Property tax information:

Mortgage?

Yes

No

Mortgage Company name and name of agent:

Contact information:

Location of mortgage paperwork:

Account number:

Payment information and online account login information:

Anything else to note:

**Insurance information for other property (if not linked to master insurance policy)**

Name of agent (if any) and contact number:

Location of policy documents:

Policy number and type:

Online login information (if any):

Anything else to note: (i.e. claims in progress, disputes, etc.):

Any other items to note related to your finances?

---

**Household Utilities and Services:** Enter the name of the person you want to handle your financial matters listed below in the event of incapacitation or death.

Name:

**Electricity**

Account number:

Online access information:

Contact name and number (if applicable):

Payment information (include frequency and approximate amount):

**Water / Sewer**

Account number:

Online access information:

Contact name and number (if applicable):

Payment information (include frequency and approximate amount):

**Trash / Recycling**

Account number:

Online access information:

Contact name and number (if applicable):

Payment information (include frequency and approximate amount):

**Internet / Cable / Phone**

Account number:

Online access information:

Contact name and number (if applicable):

Payment information (include frequency and approximate amount):

Wi-Fi name and password:

**Gas**

Account number:

Online access information:

Contact name and number (if applicable):

Payment information (include frequency and approximate amount):

**Heat / Oil / Propane**

Account number:

Online access information:

Contact name and number (if applicable):

Payment information (include frequency and approximate amount):

**HVAC / Electrician**

Name and contact information:

Account number and online access information (if applicable):

Payment information:

## **Landscaping**

Name and contact information:

Account number and online access information (if applicable):

Payment information (include frequency and approximate amount):

## **Cleaner(s)**

Name and contact information:

Account number and online access information (if applicable):

Payment information (include frequency and approximate amount):

## **Pest Control**

Company name and contact information:

Account number and online access information (if applicable):

Payment information (include frequency and approximate amount):

**Pool Care**

Company name and contact information:

Account number and online access information (if applicable):

Payment information (include frequency and approximate amount):

**Plumber**

Company name and contact information:

Account number and online access information (if applicable):

Payment information (include frequency and approximate amount):

**Handyman / Painter / Anyone Else**

Company name and contact information:

Account number and online access information (if applicable):

Payment information (include frequency and approximate amount):



**Vehicles:** Enter the name of the person you want to handle your financial matters listed below in the event of incapacitation or death.

Name:

**Vehicle #1**

Make and model:

Ownership status (owned, leased, or financed):

Location of title:

If leased or financed, give the details of the bank, contact information, payment method, frequency, and amount as well as any online access information:

Car insurance location:

Insurance Company name and contact information:

Anything else to note:

**Vehicle #2**

Make and model:

Ownership status (owned, leased, or financed):



Location of title:

If leased or financed, give the details of the bank, contact information, payment method, frequency, and amount as well as any online access information:

Any other items to note related to your household utilities and services?

---

**Valuables (list any family heirlooms or items of importance here):** Enter the name of the person you want to handle your financial matters listed below in the event of incapacitation or death.

Name:

**Safe deposit box**

Safe deposit box?

Yes

No

Name of bank, branch and location:

Account and box number(s):

Key location:

Authorized user's contact information:

Any other items to note:

**Artwork**

Description of item:

Location:

Special instructions:

**Artwork**

Description of item:

Location:

Special Instructions:

**Jewelry**

Description of item:

Location:

Special Instructions:

**Jewelry**

Description of item:

Location:

Special Instructions:

**Wine**

Specific bottle information (wine, year, etc.):

Location:

Special Instructions:

Any other items to note related to your valuables?

---

**Other Household Items (this includes anything not already listed that you might want a different friend or family member to handle for you):** Enter the name of the person you want to handle your financial matters listed below in the event of incapacitation or death.

Name:

**Item Description**

Location:

Instructions:

**Item Description**

Location:

Instructions:

**Item Description**

Location:

Instructions:

**Item Description**

Location:

Instructions:

Any other items to note related to your other household items?

---

**Storage Unit:** Enter the name of the person you want to handle your financial matters listed below in the event of incapacitation or death.

Name:

Name of Storage facility and address:

Key location or lock combination:

Payment method, frequency and amount:

Special instructions:

---

**Digital Devices:** Enter the name of the person you want to handle your financial matters listed below in the event of incapacitation or death.

Name:

### **Phone**

Unlock / access code:

Note anything that should be saved on the device, prior to all information being deleted and restored to factory settings. This includes any documents you might have saved in a PDF or some other type of reader, photos, music, etc. *(Online subscription service information will be included in another section, so don't include that here.)*

### **Computer**

Login or sign-in information:

Instructions - Determine if there are any items you'd like to have saved from your computer or if everything should be deleted and the hard drive reformatted. To help you with this, go through any photos, music, Word documents, spreadsheets, and any other files you have saved on your hard drive and/or desktop. *(Online account information will be covered in another section, so don't include that here.)*

## Tablet

Unlock / Passcode:

Instructions - Note anything that should be saved on the device, prior to all information being deleted and restored to the factory settings. This would include any documents you might have saved in a PDF or some other type of reader, photos, music, etc. (*Online subscription service information will be included in another section, so don't include that here.*)

---

**Online Accounts / Digital Footprint:** Enter the name of the person you want to handle your financial matters listed below in the event of incapacitation or death.

Name:

**Password Manager** - Many people use a password manager to store all of their online account information, i.e., their usernames and passwords. If you use a password manager, note the name and the login information here. Otherwise, you want to list the various online accounts you have and note their usernames and passwords. (*Note: You might want to consider setting up a password manager as the number of websites we use continues to grow each year. Some examples are LastPass, Keeper, Password Boss, etc.*)

Provider name and website:

Username and password:

## Email

Provider name and website:

Username and password:

Instructions - State whether there are any items you'd like kept or if everything should be deleted and accounts closed:

**Cloud Storage (examples: Dropbox, iCloud, Microsoft One, Box)**

Website:

Login username and password:

Instructions - State whether there are any items you'd like kept or if everything should be deleted and accounts closed:

Note if the storage is free or a paid membership. If paid, include details.

**Social Media, Blogging, and Website Services (examples: Facebook, Instagram, LinkedIn, Twitter, WordPress, GoDaddy, Tumblr)**

Website:

Username and password:

Instructions - State whether there are any items you'd like kept or if everything should be deleted and accounts closed, or if you'd like the site to carry on in your memory:

**Shopping/ Food Services (examples: Amazon, eBay, Target, Costco, Fresh Direct)**

Website:

Username and password:

Automatic delivery/subscription service?

Yes

No

If yes, which services and details (frequency, amount, etc.):

**Digital Storefront(s) (examples: Etsy, eBay, OfferUp, Poshmark)**

Website:

Username and password:

Instructions - Include how you'd like to handle outstanding orders and if you'd like to notify any of your customers of your passing (depending on type of storefront):

**Travel / Ticketing (examples: Airlines, rental car companies, AirBnb, Ticketmaster)**

Company name:



Website:

Username and password:

Instructions or items to note:

**Video Streaming (examples: Netflix, Hulu, Vudu, Amazon Prime, Sling)**

Name:

Website:

Username and password:

Instructions or items to note:

**Music and/or Gaming (examples: iTunes, Spotify, Pandora, Xbox Live)**

Name:

Website:

Username and password:

Instructions or items to note:

**Software Licenses / Services (examples: Microsoft Office, Adobe, Norton)**

Name:

Website:

Username and password:

Instructions or items to note:

**Messaging Services / VOIP (examples: Skype, WhatsApp, Messenger)**

Name:

Website:

Username and password:

Associated phone number (if any):

Instructions or items to note:

Any other items to note related to your online accounts / digital footprint?

---

**Death Notices and Obituaries:** These can have varying amounts of information and what they include is completely up to you. Death notices are paid announcements in a newspaper that give the name of the person who died and details about the funeral service, as well as where donations can be made. Obituaries are articles written by a newspaper's staff offering a detailed biography of the person who died.

Death notice:

Yes

No

If yes, name of publication:

Obituary:

Yes

No

If yes, name of publication:

How would you like your name reflected? This can include maiden name and/or any nicknames:

Do you have a specific photo you'd like to have used?

Yes

No

If yes, list details:

Would you like to have your cause of death listed?

Yes

No

Birthdate, birthplace, name of parents:

Names of any pre-deceased family members (optional):

Educational history - including schools attended and degrees or honors received:

Military service (if any) including honors and awards received:

Employment history - including positions held, awards received or other special achievements:

Special accomplishments:

Hobbies and Interests:

Personality, character and other notable aspects you'd like people to know:

Names of surviving family members (optional):

Details of the funeral / memorial service (public or private):

Name of charity to which donations should be made:

Any information you would like to have included OR excluded from your obituary:

---

**Pre-Planned Funeral / Final Arrangements:** If you already have pre-paid funeral arrangements, list those below. Include all the information you've already paid for and note the funeral home contract, location of the contracts, cost, etc. This would also include information regarding any funeral insurance and/or funds you've set aside specifically for your final arrangements. Then, look over the rest of the list to see if anything is missing from what you've already planned and paid for.

### **Information for coordination of final arrangements**

Name and contact information:

Secondary name and contact information in the event that your primary contact is not available:

How would you like your remains to be handled?

Buried

Cremated

Entombed

If choosing cremation, how would you like your cremated remains to be handled?

Family

Friends

Buried

Mausoleum niche

Scattered

Other

If you chose Scattered, do you have a preference as to where you'd like them scattered?

Any other preferences:

**Any events you'd like in coordination before the service?**

Viewing before the funeral?

Yes

No

Wake before the funeral?

Yes

No

Visitation before the funeral?

Yes

No

Reception or gathering after the service?

Yes

No

Mourning events per religious beliefs?

Yes

No

If yes, please specify:

**Provided you'd like a service, choose the location for your service (or say none)**

Ideal location:

Alternative location:

If you don't have a specific location in mind, you can choose one of the following:

- Funeral home
- Religious facility
- Cemetery chapel
- Outdoor location
- Personal residence
- National cemetery chapel

What mood or feel would you like?

- Traditional service
- Life celebration

Any specific religious rituals that you'd like to have observed?

- Yes
- No

If yes, please specify:

**Officiant:** If you choose to hold your service at a religious place of worship, those religious leaders will typically lead the service. However, if you choose another type of location, you can specify who you'd like to officiate your service.

Name of officiant:

If named officiant above is not available, please name an alternate officiant:

Would you like anyone else to speak?

- Yes
- No

If yes, please provide names and contact information:

**For a casket funeral, name your pallbearers:** typically six pallbearers are named to carry or walk with a casket.

Pallbearer 1:

Pallbearer 2:

Pallbearer 3:

Pallbearer 4:

Pallbearer 5:

Pallbearer 6:

**Eulogies:** You can name any family members, friends, religious leaders or funeral conductors to give a eulogy.

Name and contact information:

Name and contact information:

Name and contact information:

Name and contact information:



**Readings and/or prayers:** Please make note of any specific readings or prayers you'd like to have delivered below, along with the person you'd like to deliver it.

Name, contact information, reading and/or prayer:

Name, contact information, reading and/or prayer:

Name, contact information, reading and/or prayer:

Name, contact information, reading and/or prayer:

## **Music**

Would you like any specific recordings to be played?

Yes

No

If so, please list the details here (include artist name, song title, and any other specifics):

Would you like any live music to be sung by the attendees?

Yes

No

If so, please list them here:

Would you like any specific musicians to perform?

Yes

No

If so, please list their names and contact information here:

Are there any other final honors you'd like to have performed?

Yes

No

If so, please list them here:

Do you have any personal items you'd like to display at your ceremony?

Yes

No

If so, please list the details for them here:

Any other service related preferences should be noted here:

Floral Arrangements?

Yes

No

List any specifics here:

**Charitable Donations:** Many people would like to have their memories honored by having donations made in their honor to organizations or causes that are important to them. If this is something you'd like, fill out below.

Charity or organization's name and anything you'd like to share about them:

Charity or organization's name and anything you'd like to share about them:

Charity or organization's name and anything you'd like to share about them:

**Attendees:** Depending on who you are, you might want a small service or a large service open to the public. Please make note of any specific people you want to ensure are notified and invited to your service that your family might not know. Also include the names of any organizations, groups, or clubs that you'd like to notify and invite (examples include sports and/or alumni clubs, veterans' groups, etc.) Sometimes people would like to have an open invitation to their community and post it in the local newspaper too.

Name and contact information:

Name and contact information:

Name and contact information:

Name and contact information:

Name and contact information:

Name and contact information:

Group / organization name and contact information:

Group / organization name and contact information:

Group / organization name and contact information:

Group / organization name and contact information:

Notify and invite the public?

Yes

No

If yes, name(s) of publication(s) you'd like to place a notification and invitation in:

### **Service**

Would you also like to have a service at the site of your resting place?

Yes

No

If yes, who would you like to attend?

Public

Close friends

Family

No preference

Would you like to specify who will officiate?

Yes

No

If yes, name and contact information:

Secondary name and contact information:

Would you like to specify any individuals to speak at your resting place service?

Yes

No

If yes, list their names and contact information here:

Would you like any religious material, poems, or other passages read at your resting place service?

Yes

No

If yes, list the details here:

List any other preferences you'd like to make here:

Would you like to have a reception?

Yes

No

Location:

Secondary location:

If no set location, please choose the type of venue:

Funeral home

Hotel

Personal residence

Restaurant

Bar or club

Private Property

Religious facility

Any additional preferences regarding type of venue:

Who would you like to attend your reception?

Public

Close friends

Family

No preference

If there are any personal items that you wish to have displayed at your reception, please list them here:

If you have any other reception related preferences, please list them here:

Any other items to note related to your final arrangements?