

IMPORTANT PERSONAL PAPERS

This form was designed to help you organize and locate your important papers. The information will be extremely helpful to your family and friends if you die or become unable to manage your personal affairs. As with any document that contains personal information, you are encouraged to keep this form in a safe place.

Name _____

Social Security number _____

1. Retirement Accounts

Company	Account numbers	Beneficiaries
_____	_____	_____
_____	_____	_____

Where are the statements kept? _____

2. Will

Where is it? (yours) _____ (your spouse's) _____

Who has copies? _____

When was it last updated? (yours) _____ (your spouse's) _____

Who is the executor or executrix? (yours) _____ (your spouse's) _____

Who is named as guardian of your children, if any? _____

3. Living Will

Where is it? (yours) _____ (your spouse's) _____

Who has copies? _____

When was it last updated? (yours) _____ (your spouse's) _____

4. Durable Power of Attorney for Health Care

Where is it? (yours) _____ (your spouse's) _____

Who has copies? _____

When was it last updated? (yours) _____ (your spouse's) _____

5. Life Insurance

Company	Policy number	Who is covered	Beneficiaries	Agent
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Where are the policies kept? _____

6. Health Insurance

Company	Policy number	Who is covered	Premium	Agent
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Where are the policies kept? _____

7. Long-Term Care Insurance

Company	Policy number	Who is covered	Premium	Agent
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Where are the policies kept? _____

8. Automobile Insurance

Company	Policy number	Premium	Agent
_____	_____	_____	_____
_____	_____	_____	_____

Where are the policies kept? _____

9. Liability and Property Insurance

Company	Policy insured	Policy number	Premium	Agent
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Where are the policies kept? _____

10. Birth Certificates

Whose	Where located	Who has copy
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. Marriage License

Where is it located? _____

Where are the copies kept? _____

12. Titles and Deeds to Property

House

Where is the original? _____

Where are the copies? _____

Car(s)

Where is the original? _____

Where are the copies? _____

Other property or real estate

List individually: _____

Where is the original? _____

Where are the copies? _____

13. Military Records

Where are the originals? _____

Where are the copies? _____

14. Bank Records

Name and address of bank or other institutions	Type of account	Account number	Names on account	Location of records
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

15. Safe-Deposit Box

Name and address of institution	Box number	Who has access	Location of keys
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

16. Valuables

Description	Appraised value	Serial number	Location
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

17. Investments

Type	ID number	In whose name	Location of papers
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

18. Debts

Type	Owed to whom	Payments	Due date	Paid off when
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

19. Credit Cards and Charge Accounts

Name of card or store	ID number	If card is lost or stolen, contact	Card is under names of
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

20. Tax Returns

Where are they located? _____

21. Names, Addresses and Phone Numbers of Professional Advisors

Name of doctors	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of dentists	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of lawyers	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of insurance agents	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of tax consultant	Address	Phone
_____	_____	_____

Name of accountant	Address	Phone
_____	_____	_____

Name of broker	Address	Phone
_____	_____	_____

Name of clergy	Address	Phone
_____	_____	_____