

# Organizing My AFFAIRS

## INTRODUCTION

We can leave a very special gift to our spouse, partner, children and other very important people in our lives by organizing our affairs and expressing our wishes for end of life matters. The following is a suggested format. You may also contact your accountant, attorney or funeral director, who will likely be able to provide similar materials. You are encouraged to complete these materials, keep them up to date, store them in a safe place and let your loved ones know where the information can be found. Your loved ones responsible for managing your estate will be able to do so efficiently and in accordance with your wishes.

## PART I – PERSONAL & BUSINESS INFORMATION

DATE PREPARED

or UPDATED: \_\_\_\_\_

## PERSONAL INFORMATION

*Full Name*

\_\_\_\_\_

*Maiden name*

*Address*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Phone*

\_\_\_\_\_

*Email*

*Social Security#*

\_\_\_\_\_

*Date of Birth*

*Birth Place*

\_\_\_\_\_

*Father's Name*

\_\_\_\_\_

*Mother's Name*

\_\_\_\_\_

*Maiden Name*

*Occupation*

\_\_\_\_\_

*Retired from*

\_\_\_\_\_

*Religious Affiliation*

\_\_\_\_\_

*Church /Synagogue/  
Mosque*

\_\_\_\_\_

*Phone*

*Organ Donation  
(Specify Requests)*

\_\_\_\_\_

\_\_\_\_\_

# Organizing My AFFAIRS

## MARITAL INFORMATION

Spouse's Full Name \_\_\_\_\_

Date of Marriage _____	City /State _____	Location _____
Marriage _____	Marriage License _____	
Performed by _____	Location _____	

## PREVIOUS MARRIAGES

(This information is vital for Social Security Benefits.)

Former Spouse's Name \_\_\_\_\_

Divorce Decree Location \_\_\_\_\_

Attorney's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

## CHILDREN

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

# Organizing My AFFAIRS

## **GRANDCHILDREN**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

# Organizing My AFFAIRS

## **RELATIVES**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

# Organizing My AFFAIRS

## HEALTH INFORMATION

## Health Issues

## Physicians

Name \_\_\_\_\_ Specialty \_\_\_\_\_ Phone \_\_\_\_\_

*Name* \_\_\_\_\_ *Specialty* \_\_\_\_\_ *Phone* \_\_\_\_\_

# Organizing My AFFAIRS

## MILITARY INFORMATION

<i>Branch of Service</i>	<i>Rank</i>	<i>Service #</i>
<i>Date of Enlistment</i>	<i>Date of Discharge (Attach Copy of DD214)</i>	<i>VA #</i>
<i>Service During War or Conflict</i>		
<i>Preference for Military Funeral</i>		
<i>Honors, Awards</i>		
<i>Additional Information</i>		
<i>Location of Military Awards, Medals, etc.</i>		

## EDUCATIONAL INFORMATION

<i>High School</i>	<i>Year of Graduation</i>
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<i>Location</i>
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<i>University</i>	<i>Dates Of Attendance</i>
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<i>Location</i>	<i>Area of Study</i>
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<i>Degree Granted</i>	<i>Year</i>
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<i>University</i>	<i>Dates Of Attendance</i>
-------------------	----------------------------

<i>Location</i>	<i>Area of Study</i>
-----------------	----------------------

<i>Degree Granted</i>	<i>Year</i>
-----------------------	-------------

<i>University</i>	<i>Dates Of Attendance</i>
-------------------	----------------------------

<i>Location</i>	<i>Area of Study</i>
-----------------	----------------------

<i>Degree Granted</i>	<i>Year</i>
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<i>Special Honors/Recognitions</i>	
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# Organizing My AFFAIRS

## EMPLOYMENT HISTORY

*Employer* \_\_\_\_\_

*Position* \_\_\_\_\_ *Dates* \_\_\_\_\_

*Pension/Retirement Information* \_\_\_\_\_

*Employer* \_\_\_\_\_

*Position* \_\_\_\_\_ *Dates* \_\_\_\_\_

*Pension/Retirement Information* \_\_\_\_\_

*Employer* \_\_\_\_\_

*Position* \_\_\_\_\_ *Dates* \_\_\_\_\_

*Pension/Retirement Information* \_\_\_\_\_

## CLUBS AND ORGANIZATIONS

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## SPECIAL ACHIEVEMENTS or RECOGNITIONS

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## HOBBIES AND PERSONAL INTERESTS

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# Organizing My AFFAIRS

## LOCATION of IMPORTANT DOCUMENTS

**SAFETY DEPOSIT BOX:** The bank will likely seal the box when the death becomes known to them.

<i>Location</i>	<i>Location of Keys</i>
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## IMPORTANT DOCUMENTS

<i>Will</i>	
<i>Trust</i>	
<i>Birth Certificate</i>	
<i>Driver's License</i>	
<i>Passport</i>	
<i>Marriage Certificate</i>	
<i>Divorce Decree</i>	
<i>Children's Birth Certificates/Adoption Papers</i>	
<i>Deeds/Titles</i>	
<i>Mortgages/Notes</i>	
<i>Annuities</i>	
<i>Retirement Accounts</i>	
<i>Stocks/Bonds</i>	
<i>Tax Records</i>	
<i>Insurance Policies</i>	
<i>Military Discharge</i>	
<i>Personal Address Book</i>	
<i>E-Mail &amp; Password</i>	
<i>On-line Account Information (Including IDs and Passwords)</i>	
<i>Living Will</i>	
<i>Powers of Attorney – Financial, Medical</i>	
<i>Immigration/Naturalization Papers</i>	
<i>Other</i>	

# Organizing My AFFAIRS

## FINANCIAL MATTERS *(See location of documents listed on Page 8.)*

### BUSINESS CONTACTS

<b>Attorney</b>		<i>Phone</i>	
<i>Address</i>		<i>Email</i>	

<b>Accountant</b>		<i>Phone</i>	
<i>Address</i>		<i>Email</i>	

<b>Financial Advisor</b>		<i>Phone</i>	
<i>Address</i>		<i>Email</i>	

<b>Business Associate</b>		<i>Phone</i>	
<i>Address</i>		<i>Email</i>	

### BANK ACCOUNTS

*Name of Bank* \_\_\_\_\_ *Phone* \_\_\_\_\_

*Address* \_\_\_\_\_

*Account Type* \_\_\_\_\_ *Account #* \_\_\_\_\_

*Name of Bank* \_\_\_\_\_ *Phone* \_\_\_\_\_

*Address* \_\_\_\_\_

*Account Type* \_\_\_\_\_ *Account #* \_\_\_\_\_

*Name of Bank* \_\_\_\_\_ *Phone* \_\_\_\_\_

*Address* \_\_\_\_\_

*Account Type* \_\_\_\_\_ *Account #* \_\_\_\_\_

# Organizing My AFFAIRS

## CREDIT CARDS

<i>Issuer</i>	<i>Account #</i>	<i>Phone</i>

## MORTGAGES/LOANS/NOTES PAYABLE

*Mortgagor* \_\_\_\_\_ *Loan ID#* \_\_\_\_\_

*Address* \_\_\_\_\_ *Phone* \_\_\_\_\_  
*Property Description* \_\_\_\_\_

*Mortgagor* \_\_\_\_\_ *Loan ID#* \_\_\_\_\_

*Address* \_\_\_\_\_ *Phone* \_\_\_\_\_  
*Property Description* \_\_\_\_\_

*Loan/Note Payable to* \_\_\_\_\_ *Loan ID#* \_\_\_\_\_

*Address* \_\_\_\_\_ *Phone* \_\_\_\_\_

*Purpose* \_\_\_\_\_

*Loan/Note Payable to* \_\_\_\_\_ *Loan ID#* \_\_\_\_\_

*Address* \_\_\_\_\_ *Phone* \_\_\_\_\_

*Purpose* \_\_\_\_\_

# Organizing My AFFAIRS

## OTHER DEBTS

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## STOCKS AND BONDS

Stock Broker Name		E-mail	
Firm Name		Phone	
Address		Fax	
Account Name		Account Number	
Holdings (name, number of shares, face value, location of certificates)			

Stock Broker Name		E-mail	
Firm Name		Phone	
Address		Fax	
Account Name		Account Number	
Holdings (name, number of shares, face value, location of certificates)			

Stock Broker Name		E-mail	
Firm Name		Phone	
Address		Fax	
Account Name		Account Number	
Holdings (name, number of shares, face value, location of certificates)			

# Organizing My AFFAIRS

## RETIREMENT ACCOUNTS

<i>Type of Account (IRA, 401k, etc.)</i>		<i>Account#</i>	
<i>Financial Institution Name</i>		<i>Phone</i>	
<i>Contact</i>		<i>Email</i>	

<i>Type of Account (IRA, 401k, etc.)</i>		<i>Account#</i>	
<i>Financial Institution Name</i>		<i>Phone</i>	
<i>Contact</i>		<i>Email</i>	

<i>Type of Account (IRA, 401k, etc.)</i>		<i>Account#</i>	
<i>Financial Institution Name</i>		<i>Phone</i>	
<i>Contact</i>		<i>Email</i>	

## TRUSTS

<i>Type of Trust</i>		<i>Trust Name</i>	
<i>Trustee</i>		<i>Phone</i>	
<i>Address</i>		<i>Email</i>	

<i>Type of Trust</i>		<i>Trust Name</i>	
<i>Trustee</i>		<i>Phone</i>	
<i>Address</i>		<i>Email</i>	

<i>Type of Trust</i>		<i>Trust Name</i>	
<i>Trustee</i>		<i>Phone</i>	
<i>Address</i>		<i>Email</i>	

# Organizing My AFFAIRS

## LIFE INSURANCE POLICIES

<i>Company</i>		<i>Policy #</i>	
<i>Agent</i>		<i>Phone</i>	
<i>Insured</i>		<i>Amount</i>	
<i>Beneficiary</i>			

<i>Company</i>		<i>Policy #</i>	
<i>Agent</i>		<i>Phone</i>	
<i>Insured</i>		<i>Amount</i>	
<i>Beneficiary</i>			

<i>Company</i>		<i>Policy #</i>	
<i>Agent</i>		<i>Phone</i>	
<i>Insured</i>		<i>Amount</i>	
<i>Beneficiary</i>			

## HEALTH INSURANCE (Supplement, Prescription)

<i>Company</i>		<i>Member ID#</i>	
<i>Contact</i>		<i>Phone</i>	
<i>Insured</i>		<i>Premiums Auto-Deducted?</i>	

<i>Company</i>		<i>Member ID#</i>	
<i>Contact</i>		<i>Phone</i>	
<i>Insured</i>		<i>Premiums Auto-Deducted?</i>	

# Organizing My AFFAIRS

## HOME OWNER'S INSURANCE

<i>Company</i>		<i>Policy #</i>	
<i>Agent</i>		<i>Phone</i>	

## AUTOMOBILE INSURANCE

<i>Company</i>		<i>Policy #</i>	
<i>Agent</i>		<i>Phone</i>	
<i>Insured</i>			

## OTHER INSURANCE

<i>Company</i>		<i>Policy #</i>	
<i>Agent</i>		<i>Phone</i>	
<i>Insured</i>		<i>Amount</i>	
<i>Beneficiary</i>			

<i>Company</i>		<i>Policy #</i>	
<i>Agent</i>		<i>Phone</i>	
<i>Insured</i>		<i>Amount</i>	
<i>Beneficiary</i>			

# Organizing My AFFAIRS

## VEHICLES (Autos, ATV's, Watercraft, Aircraft, Etc.)

<i>Description (Make/Model)</i>	<i>Location of Title</i>

## REAL ESTATE

<i>Description</i>	<i>Location of Deed</i>

## IMPORTANT INFORMATION NOT PREVIOUSLY RECORDED

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# Organizing My AFFAIRS

## PART II - FUNERAL / CREMATION PREFERENCES

DATE PREPARED

or UPDATED: \_\_\_\_\_

**PRE-ARRANGEMENT** Attach copies of completed forms, agreements and paid receipts.

Funeral plans have been made with \_\_\_\_\_ funeral home.

Address

Phone

Funeral Director

Payments Made for Pre-arranged Services  
 (Amount and Dates of Payments)

### **Cemetery Property**

Cemetery Name &  
 Address

Description of property

(Crypt/Space or Section & Lot)

Payments Made for Cemetery Property  
 (Amount and Dates of Payments)

### I HAVE NOT MADE PRE-ARRANGED SERVICE PLANS. THE FOLLOWING ARE MY PREFERENCES.

Funeral Home

Funeral Director

Address

Phone

Place of Religious or  
 Memorial Service

Officiating

Clergy/Celebrant

Family Member Participation in Service

Scripture, Poetry or Other Readings  
 (Include Title and Author or Attach Copies)

Musical Selections

Vocalist (Name and  
 Contact Information)

Organist/Musicians (Name  
 and Contact Information)

Pallbearers

Honorary  
 Pallbearers

# Organizing My AFFAIRS

**I HAVE NOT MADE PRE-ARRANGED SERVICE PLANS; MY PREFERENCES continued from previous page.**

*Visitation Requests (hours,  
wake or vigil services, etc.)*

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*Memorial Tributes*

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*Flowers*

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*Casket and/or Urn (Type,  
Color, Other Preferences)*

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*Type of Disposition (Burial,  
Entombment or Cremation)*

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*If Cremation,  
Memorialization Preference  
(Inurnment, Burial, Scattering)*

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*Military Services*

*See page 5 under Military Information*

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*Instructions for Clothing,  
Jewelry, Glasses, etc.*

*(Attach a Photo to Assist*

*Funeral Director with Hair*

*Styling and Cosmetics.)*

*Specify Jewelry to*

*Remain or be Removed*

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*Monument/Marker Type*

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*Emblem*

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*Inscription*

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*Newspapers to Contact*

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*Photo to be Included*

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*Alumni Association and  
Contact Information*

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*Other Special Wishes and Instructions*

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