# Personal Vital Record Keeper

for Paper Documents and Summary of Financial Accounts

Name:	
Emergency Contacts:	
Name	Phone

#### **HOW TO USE THIS ORGANIZER**

This organizer is meant to help you organize your important personal records. While you are living, it provides a convenient reference to the documents which you need to lay your hands on from time to time. When you pass away, the organizer enables your loved ones to quickly access all of the papers which they will need to deal with your funeral and estate.

You can use a "key" to indicate where each important document is located. For example, you might have three locations plus a safety deposit box in which you keep your documents and records. In this case, your "key" might look like the example which follows. If you do not currently have your documents and records organized, this is a good opportunity to gather them together and make sure you can locate all of your critical documents.

Example "key":

Key	Location
Α	Top drawer/green file cabinet in den
В	Second drawer/green file cabinet in den
С	Top left desk drawer
D	Safety deposit box

Take a moment now and record the primary locations of your important documents.

KEY	Location	

The next step is to go through the organizer and verify and then note the location of each of your critical documents. You may want to write down the phone numbers, contact names, account numbers, and other items shown as you locate and record the location of each document. This can be of great assistance to you when you need to locate information in a hurry.

#### Information needed in case of death

Document/Contact	Location/Info
Final instructions/Funeral Instructions	
Will	
Living Trust	
Additional copies of Will	
Additional copies of Living Trust	
Attorney name	
Executor Name	
Deed and Mortgage Info	
Cemetery Plot Records	
Life Insurance Policy	
Life Insurance Policy	
Other Death Benefit Info	
Pension info for Beneficiary/Survivor	
Auto title/Registration	

Information needed in case of incapacity

Document	Location
Power of Attorney for Health Care	
Power of Attorney for General Affairs	
Living Will	
Long Term Care Insurance	
Medical Insurance Policy	
Property Insurance Policy	
Auto Insurance Policy	

Other personal documents

Document	Location
Birth Certificate	
Citizenship Papers	
Military Papers	
Marriage Certificate	
Divorce Papers	

Financial Records
Checking/Savings/Credit Union/CD Accounts

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Financial Institution Name & Address	Contact Name	Phone	Account Number	Location

# Notes/ Loans

Financial Institution Name & Address	Contact Name	Phone	Account Number	Location

401(k)/Other Pension Accounts

Financial Institution Name & Address	Contact Name	Phone	Account Number	Location

Stock/Bond/Mutual Fund/Brokerage Accounts

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Financial Institution Name & Address	Contact Name	Phone	Account Number	Location

Other Financial Records
Personal Creditors or Debtors, if any.

Creditor/Debtor Name	Nature of Debt	Location

#### **Tax Records**

Document	Location
Location of Personal Income Tax Returns	
Location of Tax Return Support Info	

# **Credit Cards/Revolving Accounts/Store Accounts**

Name of Credit Card/other Account	Account Number	Customer Service Ph #	Location

# SAFE DEPOSIT BOX KEY

Financial Institution Name & Address	Safe Deposit Box Number	Key Location

# **Advisors Attorney:** Name Address Phone Physician: Address Phone Name **Accountant:** Name Address **Insurance Agents:** Name Address Phone Banker: Name Address Phone Stock Broker: Address Phone Name **Executor of Estate:** Address Phone Name Clergy: Name Address Phone **Dentist:** Name Address

**Other Important Contacts:** 

other important contacte.				
Name	Address	Phone		
Name	Address	Phone		
Name	Address	Phone		
Name	Address	Phone		
Name	Address	Phone		