



LOCATION # 1:	
LOCATION # 2:	

TYPE OF DOCUMENTS	DOCUMENT	#1	#2
ESTATE PLANNING	Trust Documents		
	Last Will & Testament		
	Estate Planning Letter(s)		
	Power(s) of Attorney		
	Health Care Documents		
	Living Will		
BUSINESS PAPERS	Partnership / LLC Agreements		
	Corporation Papers		
	Employment Agreements		
TAX RECORDS	State and Federal Income Tax Returns		
BANKING RECORDS	Checkbooks		
	Certificates of Deposit		
	Bank Statements and Canceled Checks		
	Credit Card Records		
INVESTMENT RECORDS	Stock and Bond Certificates		
	Brokerage Account Records		
	Annuity Contracts		
TITLE TO PERSONAL PROPERTY	Real Estate Deeds		
	Automobile Title		
	Boat / RV / Trailer Title		
	Other Personal Property		
	Other Personal Property		
PERSONAL PAPERS	Marriage Certificate		
	Birth Certificates		
	Military Records		
	Citizenship Papers		
	Divorce Judgments		
	Other		
	Other		
	Other		

# Key Advisors to Be Contacted

## Accountant

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## Attorney

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## Insurance Agent

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## Bank

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Phone \_\_\_\_\_ Bank \_\_\_\_\_

Address \_\_\_\_\_

## Clergyman/Rabbi

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Phone \_\_\_\_\_ Church/Synagogue \_\_\_\_\_

Address \_\_\_\_\_

## Doctor

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## Employer

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## Financial Advisor

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

# Key Advisors to Be Contacted

## Funeral Director

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## General Insurance Agent

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## Landlord

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## Life Insurance Agent

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## Partner

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## Stockbroker

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Phone \_\_\_\_\_ Firm \_\_\_\_\_

Address \_\_\_\_\_

## Trust Officer

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Phone \_\_\_\_\_ Institution \_\_\_\_\_

Address \_\_\_\_\_

## Relatives and Close Friends to Be Contacted

**Name**

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

Address \_\_\_\_\_

**Name**

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

Address \_\_\_\_\_

**Name**

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

Address \_\_\_\_\_

**Name**

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

Address \_\_\_\_\_

**Name**

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

Address \_\_\_\_\_

**Name**

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

Address \_\_\_\_\_

**Name**

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

Address \_\_\_\_\_

## Life Insurance & Annuity Policies

Policy number and company \_\_\_\_\_

Type\* \_\_\_\_\_ Insured \_\_\_\_\_

Owner \_\_\_\_\_ Date of Purchase \_\_\_\_\_

Primary beneficiary \_\_\_\_\_ Contingent beneficiary \_\_\_\_\_

Who pays premium† \_\_\_\_\_ Cash value \_\_\_\_\_

Amount of loans on policy \_\_\_\_\_ Face amount or death value \_\_\_\_\_

**\*Term, whole life, split dollar, group life, annuity.**

†Husband (H), Wife (W), Corporation (C).

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Policy number and company \_\_\_\_\_

Type\* \_\_\_\_\_ Insured \_\_\_\_\_

Owner \_\_\_\_\_ Date of Purchase \_\_\_\_\_

Primary beneficiary \_\_\_\_\_ Contingent beneficiary \_\_\_\_\_

Who pays premium† \_\_\_\_\_ Cash value \_\_\_\_\_

Amount of loans on policy \_\_\_\_\_ Face amount or death value \_\_\_\_\_

**\*Term, whole life, split dollar, group life, annuity.**

†Husband (H), Wife (W), Corporation (C).

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Policy number and company \_\_\_\_\_

Type\* \_\_\_\_\_ Insured \_\_\_\_\_

Owner \_\_\_\_\_ Date of Purchase \_\_\_\_\_

Primary beneficiary \_\_\_\_\_ Contingent beneficiary \_\_\_\_\_

Who pays premium† \_\_\_\_\_ Cash value \_\_\_\_\_

Amount of loans on policy \_\_\_\_\_ Face amount or death value \_\_\_\_\_

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