

## Important Documents

For your peace of mind, family members should know where important documents are housed. Who is authorized (designated personal representative) to speak on behalf of or handle the affairs of your loved one? Do not wait until it is too late to become aware of the following documents.

Documentation for \_\_\_\_\_

Legal	Detail Information
Birth certificate	Name on certificate: _____ Date of Birth: _____ City/State: _____
Cemetery deed	Location of document: _____ Name of Cemetery: _____ Contact Name/number: _____ Location and plot #: _____
Health care power of attorney	Name of personal representative: _____ Location of document: _____
Living will	Location of document: _____
Marriage license	Location of document: _____ Date of Marriage: _____ City/State: _____
Military records	Location of document: _____
Power of attorney	Name of personal representative: _____ Location of document: _____
Social security card	Number: _____ Contact person for information and benefits: _____
Will	Location of document: _____
Other	

Documentation for: \_\_\_\_\_

Financial/Insurance	Detail Information
1. Automobile title  2. Auto Insurance	1a. Location of Title: _____ 1b. VIM #: _____ 1c. Year/Make of Vehicle: _____ 2a. Company name: _____ 2b. Name on Policy: _____ 2c. Policy #: _____
Bank: 1. Checking Acct. 2. Savings Acct. 3. CDs 4. Bank box	Name of Bank: _____ 1. Account #: _____ 2. Account #: _____ 3. Account #: _____ 4. Box #: _____
Credit cards	1. Company: _____ A. Name on Account: _____ B. Account #: _____ C: Telephone #: _____ 2. Company: _____ A. Name on Account: _____ B. Account #: _____ C: Telephone #: _____ 3. Company: _____ A. Name on Account: _____ B. Account #: _____ C: Telephone #: _____
1. House deed/title 2. Insurance	1. Location of document: _____ 2. Company name: _____ A. Name on policy: _____ B. Policy #: _____

Financial/Insurance	Detail Information
Stocks/Bonds	1. Name of Stock/Bond: _____ A. Location: _____ B. Name(s) on document(s): _____ C. Beneficiary: _____ 2. Name of Stock/Bond: _____ A. Location: _____ B. Name(s) on document(s): _____ C. Beneficiary: _____ 3. Name of Stock/Bond: _____ A. Location: _____ B. Name(s) on document(s): _____ C. Beneficiary: _____
Retirement (401k)	1. Location of document: _____ 2. Name of company: _____ 3. Name on document: _____ 4. Account #: _____ 5. Beneficiary: _____
Long-term care	1. Location of document: _____ 2. Name of company: _____ 3. Name on document: _____ 4. Policy #: _____ 5. Policy Amount: _____
Other	