



# Looking ahead.

A resource and planning guide  
for beneficiaries.



GROUP BENEFIT  
SOLUTIONS

## Information that can help you

The death of a loved one can be traumatic. In the midst of your grieving, you're expected to handle countless practical matters for which you may not be prepared. This booklet is designed to provide information that can help you cope with the numerous legal and financial responsibilities involved in settling an estate. We can also recommend resources to help you with this process.

Whether you are the beneficiary of a deceased spouse, close relative or friend, this booklet can help you:

- Research and apply for necessary records of the deceased;
- Discover the various possible sources of income benefits; and
- Make plans for your financial future.

We hope the enclosed information is helpful during this difficult time. If you need help, please call us, toll free, at **(800) 570-3778**.

*This booklet contains general information which may vary by state and may change after publication. You should consult your personal advisor for complete information.*

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**When a loved one dies, you may need many different people to help you with your emotional and practical needs. This process will not be an easy one, but we hope the following contact sheets will help you organize the different people with whom you will need to communicate.**

# **1. Rallying your resources**

## **Personal support contact list.**

Think of the various people who can help you. Don't be afraid to tell friends and family members how they can help. Often they're not sure what to do, and are looking to you for cues.

Family and friends

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Clergy or spiritual advisor

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Hospital and doctors

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Therapist of grief counselor

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Social and family services

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Community center

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Salvation Army and relief organizations

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Crisis intervention

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Support groups (often offered by hospitals, hospices, places of worship, funeral homes, senior centers, or mental health centers)

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## Business advisor contact list.

A list of contacts to help with business and financial issues will also help you. Make sure you choose your advisors wisely if you haven't already established relationships with professionals you trust. Don't let anyone pressure you into making decisions you do not understand or that make you feel uncomfortable.

Attorney

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American Bar Association

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Legal Aid Society

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Financial services investment broker

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Bank or trust officer

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Accountant or tax advisor

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Insurance agents

Life

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Property

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Health

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Deceased's employer

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Funeral director

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## **2. Setting priorities**

Although you may not feel up to addressing the many decisions you must make in the aftermath of a funeral, many of these matters are time-sensitive and important to your future well-being. Take things one step at a time. If you need to, enlist the help of a friend, lawyer or trusted advisor.

### **Hospitalization/major medical insurance.**

One of your most immediate concerns should be deciding what to do about converting any private hospitalization/major medical insurance the deceased may have provided for you. Not attending to the vital matter could result in catastrophic cash expenses for you.

Most employer-sponsored hospitalization/major medical plans remain valid for a certain period after a participant's death. Surviving dependents may often continue coverage at full rates for up to 36 months. There may also be lifetime survivor benefits. Find out what the deceased's plan offers and determine whether it would be more cost-efficient to continue this coverage or to purchase an individual policy for yourself. In either case, you must make a decision to ensure that you are adequately covered for the future. The deceased may also have had other supplemental insurance (such as a hospital indemnity plan) or specialized disease coverage (such as cancer insurance).

### **Covering expenses and settling the estate.**

Next on the list is making sure you have access to financial assets to pay important household bills and expenses. This involves investigating all benefit sources, settling claims and probating the estate. Do not panic if you find that financial assets are frozen. If you are a joint owner of an account, you should be able to withdraw funds to meet daily expenses until the estate is settled. If you are not, your legal advisors will help you determine how best to meet expenses.

### 3. Taking care of business

#### Household management.

It is important to keep up with household expenses, especially if the deceased was the primary bill-payer in your family. Make sure you pay all utilities and household services, and keep registrations and inspections up to date, especially for cars and other vehicles.

Inquire with banks and other lenders to determine if any mortgages, loans or credit card purchases were insured against death of the borrower. If a debt is not covered, lenders may consider reducing the size of your monthly payments and extending the payment period. Make sure you tell them if any payments will be late, and why. The only way they can help you is if they are informed.

#### Business ownership.

If you owned a family business with your spouse, you will probably need to get professional advice about owner succession, probate, taxes and other relevant matters.

#### Household management checklist and contact list.

Emergency phone number \_\_\_\_\_

Telephone \_\_\_\_\_

Electric \_\_\_\_\_

Gas \_\_\_\_\_

Property insurance company/agent \_\_\_\_\_

Homeowners insurance company/agent \_\_\_\_\_

Automobile insurance company/agent \_\_\_\_\_

Maintenance/services \_\_\_\_\_

Automobile titles and registration \_\_\_\_\_

Other property registrations \_\_\_\_\_

Other services \_\_\_\_\_

Credit cards \_\_\_\_\_

Other loans \_\_\_\_\_

## 4. Gathering documents

To claim some benefits, you may be asked for proof of your relationship to the deceased and eligibility. You will need copies of birth certificates of all family members claiming benefits, your marriage certificate and typically at least ten certified copies of the death certificate. You can get most copies from the funeral director or county health department.

Sorting through the deceased's personal effects may be difficult, but avoiding this could prevent you from getting additional benefits. You should gather all pertinent documents and organize them so that they are easily accessible to you. Clearly label folders for documents such as insurance, deeds, taxes, bills, bank accounts, securities, etc. To help you with this task, we have included the following document checklist.

### Important document checklist.

Death certificate (at least 10 copies) \_\_\_\_\_

Wills \_\_\_\_\_

Trust agreements \_\_\_\_\_

Birth certificates \_\_\_\_\_

Adoption papers \_\_\_\_\_

Marriage certificate(s) \_\_\_\_\_

Divorce records \_\_\_\_\_

Insurance policies \_\_\_\_\_

Social Security numbers \_\_\_\_\_

Military service records \_\_\_\_\_

VA claim number \_\_\_\_\_

W-2 forms and other earnings records \_\_\_\_\_

Tax returns (for prior year) \_\_\_\_\_

Safety deposit box \_\_\_\_\_

Keys/contents \_\_\_\_\_

Bank books \_\_\_\_\_

Security certificates \_\_\_\_\_

Stocks, mutual funds, bonds \_\_\_\_\_

Business agreements or contracts \_\_\_\_\_

Real estate deeds \_\_\_\_\_

Car registration \_\_\_\_\_

Notes payable/receivable \_\_\_\_\_

Other \_\_\_\_\_



## 5. Probating the estate

**Probating** a deceased person's estate is the legal transfer of the deceased's property and assets to the heirs. Each state has its own laws governing this process. The transfer is cleared by the state **probate** courts, sometimes referred to as the **surrogate** court. It is vital to start this procedure as soon as possible, because the process can take several months – even several years, in some cases – to complete. Your attorney or the court clerk can advise you whether probate is necessary based on the kinds of assets involved and their value.

### How to start.

If a will exists, you can start the probate procedure by filing it with the probate court. The court will then officially appoint the **executor** named in the will—usually the spouse, a family member, friend, attorney or bank trust department. If there is not a will, a deceased person is considered **intestate**, and the court will appoint an **administrator** to function as **executor**.

### The executor's duties.

If you are the executor, it is your duty to inventory the deceased's total assets, collect debts, pay bills, manage and distribute property, and submit a final accounting to the court. The court also needs the birth certificates, names and addresses of any children, and copies of marriage certificate(s).

### Frozen assets.

Bank accounts and other assets may be frozen, safe deposit boxes sealed and other steps taken to protect the interests of heirs and to preserve assets subject to taxes. If you are a joint owner or signer of an account, you should be able to withdraw funds to meet daily expenses until the estate is settled.

### Assets not subject to probate.

The probate clerk can inform you which assets should and should not be included in probate. Laws differ by state. Many states exclude:

- Joint property passing directly to a widow or widower, such as a jointly owned home or bank account;
- U.S. savings bonds;
- Assets in certain types of trusts; and
- Life insurance proceeds payable to a named beneficiary.

## Probate fees.

Probate court fees are based on the amount of an estate in the deceased person's name alone and the amount that was owned with others, such as survivorship property. These fees are strictly regulated by law.

## Proceeding without a will.

If the deceased has not left a will, the laws of descent, or ***intestate succession***, in each state determine the division of an estate. These laws generally provide for the surviving widow or widower and children to receive shares. For example, a widow with one child might receive one-half of the estate. If there is more than one child, the widow may receive one-third and the children may equally share two-thirds.

## Estate taxes.

Each state charges estate taxes according to its own statutes. You can contact your State Tax Department for details. Summaries of state inheritance taxes can also be found in many publications, such as almanacs and online. Search for "taxation," "estate tax," or "state inheritance tax."

Since estate tax regulations can be complicated and are frequently revised, you should ask a tax expert, such as a tax attorney or a certified public accountant, any questions you may have.

## Legal assistance.

Professional legal assistance is usually advisable when settling an estate, unless the estate is small and uncomplicated. There can be many fees to pay and forms to fill out. Some states actually require you to hire a legal representative.

If you do not have a family attorney, you might ask the local bar association or your bank's trust officer to recommend someone with expertise in probate and estate law. Attorneys may charge hourly, flat or percentage fees. To help you make a wise choice, try to speak with at least three attorneys, and find out how they charge. In certain situations, help may be available from legal aid societies.

# 6. Investigating benefit sources and making claims

It is up to you to investigate all benefits that may be available to you. Each organization will have to be notified and queried by mail or by phone. We have provided several model letters at the end of this booklet to help you.

Remember that if the deceased worked for different employers throughout his or her career, he or she may have accrued benefits owed to you. Pension rights are often guaranteed after a specified period of employment. In addition, many social and service organizations, unions and professional and business associations have group life insurance plans for members that provide benefits for surviving spouses. Some even arrange for an organization member to visit the family and offer assistance.

## Benefits checklist/contact list.

Deceased's employer \_\_\_\_\_

Retirement or annuity income \_\_\_\_\_

Unpaid wages \_\_\_\_\_

Group life insurance \_\_\_\_\_

Disability benefits \_\_\_\_\_

Workers' compensation \_\_\_\_\_

Credit union funds/life insurance \_\_\_\_\_

Social Security Administration \_\_\_\_\_

Spouse/dependents' benefits \_\_\_\_\_

Lump-sum death benefit \_\_\_\_\_

Medicare \_\_\_\_\_

Supplemental Security Income (SSI) \_\_\_\_\_

Life insurance \_\_\_\_\_

Income tax benefits \_\_\_\_\_

Veterans Administration \_\_\_\_\_

Death benefit \_\_\_\_\_

Pension payment \_\_\_\_\_

Educational assistance \_\_\_\_\_

Civil service retirement system \_\_\_\_\_

Survivor's annuity \_\_\_\_\_

Lump-sum payment \_\_\_\_\_

Railroad retirement board \_\_\_\_\_

Union membership \_\_\_\_\_

Professional affiliations \_\_\_\_\_

Fraternal organizations \_\_\_\_\_

Social services \_\_\_\_\_

Medicaid \_\_\_\_\_

AFDC – Aid to Families with Dependent Children \_\_\_\_\_

Salvation Army \_\_\_\_\_

American Red Cross \_\_\_\_\_

Other sources of support \_\_\_\_\_

### **Life or accidental death insurance.**

If the deceased owned a personal individual life or accidental death insurance policy, you can start the claims process by:

- Calling the local office of the insurance company;
- Contacting the agent who sold the policy; or
- Writing to the insurer whose name and address is on the policy.

We have included a model letter in our Model Letter Appendix.

If you are named as the beneficiary in the policy, you will need to complete a claim statement and provide the insurer with a certified copy of the death certificate and the policy number. The insurance company may also request additional information about the cause of death, attending physicians' statements, a birth certificate and other life insurance policies. The insurer must file information on taxable payments with the federal government, so the company will also need **your** age, address and Social Security number.

### **Payment plans and settlement options.**

Insurance companies typically pay the proceeds of a claim in either a lump-sum draft or in the form of an interest-bearing checking account. The checking account approach has become popular because it quickly ensures the money is earning an attractive rate of interest, while giving beneficiaries time to think about how to best allocate their money for the long term.

Your insurance proceeds can support your future plans in many ways. Many beneficiaries use insurance proceeds to provide for their children's education, maintain their standard of living and/or return to school themselves.

Once you have determined your long-range needs, you may choose your methods of payment, (as long as the policy owner did not specify a payment

method in advance). You should know that you generally do **not** have to accept a lump-sum payment from your insurance company. There are longer-term alternatives to the life insurance payment you have received, called “settlement options.” Settlement options are based on the deceased’s life insurance policy. You should learn about all the options your company offers before making a final decision.

### The most common settlement options are:

- Payment of interest only, with the principal left with the insurance company until a beneficiary wishes to withdraw all or part of the principal amount, or selects an installment option.
- Payment of equal installments until the proceeds are depleted.
- Payment of periodic income for a specified number of years.
- Payment of an income for life, with the size of the payments depending on the age and sex of the beneficiary and the amount of the policy.

### Workers’ compensation.

If the deceased died as a result of a work-related accident or illness, you may be eligible for benefits under the Workers’ Compensation program administered by each state. Benefits paid to survivors and children are generally based on a percentage of the worker’s wage.

Employers usually file reports with information about survivor benefits for you. You can also contact the state labor department or compensation commission for information and help in filing a claim.

### Social Security Administration.

The Social Security program is not exclusively for those over age 65. Benefits are provided to widows, widowers, children and other surviving family members under age 65.

When a person of employable age dies, the funeral director usually sends a death notice to the Social Security Administration. ***This does not constitute*** a claim, however. You should apply for benefits as soon as possible. You can call Social Security’s toll-free number, **(800) 772-1213**, 7:00 a.m. – 7:00 p.m., EST Monday – Friday. Or you may place your claim by mail; a model letter is provided in our Model Letter Appendix.

It can take two to three months after you complete the paperwork before you receive your first check payment. Back payments are limited to a one-year period.

**Required documents for Social Security** – The Social Security office will need:

- The deceased's Social Security number and W-2 forms for the previous year.
- A certified copy of the death certificate, birth and marriage certificates.

If some of the documents are missing, do not delay filing. Turn in the documents you do have and ask for help in securing alternate documents to support your claim.

**Lump-sum death benefit** – The Social Security Administration awards a one-time death benefit of \$255, if the deceased was a worker covered by Social Security. The benefit is given to either a spouse or a child eligible to receive monthly payments.

**Earnings restrictions** – Anyone who receives Social Security payments under age 70 is restricted as to how much they can earn in wages and salary per year before benefit payments will be reduced. Income from other sources such as dividends, interest, and rents does not affect benefit payments.

You can obtain details on these restrictions from your local Social Security office.

## **Income tax benefits.**

Federal income tax regulations have special provisions for widows and widowers. A widowed person may file a joint return in the year of a spouse's death rather than filing as a single person, a category that carries a higher tax rate. A widowed person with at least one dependent child may continue to do this for two years. At the end of two years, the widowed parent with a dependent child may use the rates for heads of household.

## **Veterans' benefits.**

If the deceased is a veteran, you may be eligible for veteran benefits. Benefits are available to a veteran's spouse and children and depend on the financial resources of the family and/or whether the veteran:

- Died from causes connected with military service;
- Served in war or peacetime; and/or
- Had an honorable discharge.

To learn more about your eligibility, call or visit your local Veterans Administration (VA) office, veterans' organization or the American Red Cross.

**Required documents** – The VA will need:

- A veteran's claim file number ("C" number) or a copy of their discharge papers;
- A military service number or branch of service and the dates served; and
- A death certificate and/or marriage certificate(s).

Birth certificates for children may also be requested.

**Government (GI) life insurance** – If your spouse was covered by GI life insurance, you should write to one of the two VA centers that handle life insurance claims. One center covers the eastern U.S., the other covers western U.S. These addresses are provided in the letter in the Model Letter Appendix.

**Funeral and burial benefits** – Burial expense payments may be available to families of veterans who served in wartime, and to certain peacetime veterans disabled at the time of death. All veterans are entitled to a burial flag and a government grave marker. Wartime veterans are eligible for burial in any national cemetery. Check with the VA on dates of eligibility.

**Pensions** – If a veteran's death is connected with military service, a widow or widower and some unmarried children may be eligible for monthly payments from the VA. Monthly payments depend on a veteran's rank and length of service.

Under certain financial circumstances, spouses and children of veterans who did not die in connection with military service may be eligible for pension payments. The amount is linked to annual income and can be frequently adjusted by the VA. For current information call your local VA organization. A letter is included in the Model Letter Appendix to help you apply for Veterans' pension benefits.

**Educational benefits** – Spouses of veterans whose deaths or permanent disabilities occurred through military service can apply for educational benefits for themselves and their children. The VA also offers educational counseling. The VA has several student payment programs and makes provisions for cooperative work/study programs. Payments can cover up to 45 months of schooling.

**Government (GI) home loans** – A widowed spouse who has not remarried may apply for GI home loans. The deceased spouse must have:

- Died after at least 90 days of active service;
- Died of service related disabilities; or
- Be considered a Prisoner of War or Missing in Action.

**Aid and assistance** – Spouses of deceased veterans may also be eligible for “aid and assistance” benefits if they are nursing home patients, or if they are blind, disabled or require the regular aid of another person in their homes.

### **Civil service benefits.**

The survivor of a deceased spouse who worked for the U.S. Government and was receiving a retirement annuity may be eligible for a survivor’s annuity. Survivors are eligible only if the annuity recipient had opted to pay for a survivor’s benefit annuity. If this is the case, the surviving spouse is eligible to receive 50% of the full annuity amount (not reduced by 10%).

A special supplementary annuity may also be payable if the surviving spouse is under age 60 and will not be eligible for Social Security survivor benefits until age 60.

### **Railroad Retirement Board.**

The survivor of a deceased spouse who worked for at least 10 years for the nation’s railroad system may be eligible for survivors benefits. Call the Federal Information Center at **(800) 688-9889** to find out more details.

## **7. Assessing your financial situation**

The loss of a loved one often calls for some adjustment in financial matters. For some it may be minor; for others it can cause a major disruption in their standard of living.

Your first step will be to determine how much money is coming in and how much is going out for everyday expenses. After probate is complete, it is important to become familiar with all of your assets and make sure they are clearly organized. This will help you figure out what funds are available for emergencies or expenses like a child’s education.

Your attorney can advise you on what cash and other assets are likely to be received from the estate even before probate is complete. Federal agencies such as Social Security and the VA can estimate the amount of the monthly benefit payments you will receive, even before they are issued.

If you can meet current expenses (see section #3 on Household Management



in this booklet), you should begin a regular savings program. If you can't meet expenses, try to figure out what expenses can be cut or consider sharing expenses with a friend. If you aren't working, but are able to, check with a state-operated employment office that doesn't charge fees. Consider getting employment counseling and information on job opportunities or retraining programs.

### **Financial planning and investing.**

It is important to make sure that your financial assets are working as hard as they can for you. Take care when you make your investment decisions. Make sure you deal with reputable, well-established firms or individual advisors. Never invest in something you don't understand. It is often wise to make sure your assets are invested in diverse areas, so that you don't get stuck with "all of your eggs in one basket." Make sure you evaluate the risk of any investment, versus its potential return to you. Never make a risky investment you can't afford to lose.

If investing and financial management are not your strong points, seek out professional advice. Your life insurance representative or attorney may be able to help or refer you to someone who can. Many insurance companies also have financial planning services and offer various forms of annuities. A bank trust department may offer money management services and brokerage firms can give advice on investing in securities, such as stocks and bonds. You may even wish to hire a money manager affiliated with a brokerage firm or an investment consulting firm to develop an overall investment plan.

### **Financial obligations and assets worksheet.**

Outgoing expenses \_\_\_\_\_

Rent \_\_\_\_\_

Mortgage(s) \_\_\_\_\_

Credit cards \_\_\_\_\_

Other loans \_\_\_\_\_

Utilities, services and other monthly bills \_\_\_\_\_

Daily expenses \_\_\_\_\_

Assets and incoming funds \_\_\_\_\_

Salary \_\_\_\_\_

Property \_\_\_\_\_

Rents \_\_\_\_\_

Securities, stocks and bonds \_\_\_\_\_

Annuities \_\_\_\_\_

Investment accounts \_\_\_\_\_

Checking \_\_\_\_\_

Savings \_\_\_\_\_

Mutual funds \_\_\_\_\_

Retirement (IRA, Keogh, 401[k]) \_\_\_\_\_

## **8. Estate planning**

Having experienced the loss of a loved one, you probably understand now, more than ever, the importance of planning your estate. This is especially important now if you are the sole head of the household and have dependent children.

If you do not have a will, make sure to see an attorney and create one, so your property will pass on to those you wish to have it. In addition, don't forget to update wills and records as your family grows or details change.

Consider a life insurance program if you want to financially protect minor children or others dependent on you. You may also wish to consider signing a living will, if you feel strongly about exceptional life-sustaining medical procedures. This way your relatives and friends will know how you would choose to be treated during a medical crisis.

If you can afford it, you might wish to consider making tax-free gifts to those you love during your lifetime. They can enjoy the resources now and you will know that less will be lost to the government. An attorney, the IRS or some insurance representatives can advise you on this.

Inform family members or a trusted friend where you keep important papers filed. You may even wish to provide them with a document checklist, similar to the one in section #4 of this booklet, with locations noted on it.

Knowing you have organized your records for your loved ones can help bring you peace of mind.

## Model letter appendix.

### Social Security

#### Social Security Administration

Address

(Call **(800) 772-1213** to get the address of your local Social Security office.)

City/State/Zip

To whom it may concern:

My **(relationship)**, **(full name and Social Security number)**, passed away on **(month, day, year)**. I would like to schedule a date to meet with a Social Security representative at your earliest convenience to review my family's Social Security benefits.

I have gathered all necessary copies of our Social Security numbers, the death certificate, our marriage certificate, our birth certificates and those of our dependent children, and evidence showing my **(relationship)**'s recent paid income. If you need any other information or documents, please let me know when you set the date for our appointment.

I can be reached at **(telephone number)** during daytime hours. Your prompt attention to this matter will be appreciated.

Sincerely,

**(Signature)**

**(Name)**

**(Your Address)**

**(City/State/Zip)**

## Veterans' pension benefits.

### Department of Veterans Affairs

Address

(Call **(800) 698-2411** to get the address of your local Veterans' Affairs office.)

City/State/Zip

To whom it may concern:

My **(relationship)**, **(full name and Social Security number)**, passed away on **(month, day, year)**. [He/she] was employed by **(branch of service)**, service number **(service number)**, from **(start date)** to **(ending date)**. I would now like to apply for the Veterans' Pension Benefits due to me [and my children].

Please send me all necessary forms and instructions.

I can be reached at **(telephone number)** during daytime hours, if you need any additional information. Your prompt attention to this matter will be appreciated.

Sincerely,

**(Signature)**

**(Name)**

**(Your Address)**

**(City/State/Zip)**

## Government life insurance.

### Department of Veterans Affairs

Regional Office and Insurance Center

P.O. Box 8079

Philadelphia, PA 19101

To whom it may concern:

My **(relationship)**, **(full name and Social Security number)**, passed away on (month, day, year). [He/she] was employed by **(branch of service)**, service number **(service number)**, from **(start date)** to **(ending date)** and was insured under policy no. \_\_\_\_\_. I would now like to apply for the life insurance benefits entitled to me [and my children]. Please forward all necessary forms and instructions to me.

I can be reached at **(telephone number)** during daytime hours, if we need to discuss this matter. Your prompt attention will be appreciated.

Sincerely,

**(Signature)**

**(Name)**

**(Your Address)**

**(City/State/Zip)**

## Commercial life or accidental death insurance.

### (Other than New York Life Group Benefit Solutions)

Insurance Company

Address

City/State/Zip

To whom it may concern:

I would like to apply for the life insurance benefits entitled to me as beneficiary, due to the death of my **(relationship)**, **(full name and Social Security number)**, who passed away on **(month, day, year)**. [He/she] was insured under policy no. \_\_\_\_\_. Please send me all necessary forms and instructions.

I can be reached at **(telephone number)** during daytime hours, if you need to reach me. Your prompt attention to this matter will be appreciated.

Sincerely,

**(Signature)**

**(Name)**

**(Your Address)**

**(City/State/Zip)**

Note: Investigate all insurance policies for which you find a record. Even if a policy looks old or expired, there may still be benefits due to you.

## Employer.

### Personnel Officer

Company Name

Address

City/State/Zip

To whom it may concern:

As you may already be aware, my **(relationship)**, **(full name and Social Security number)**, passed away on **(month, day, year)**. I understand that [he/she] may have been covered by a life insurance plan through your organization. Please send me all necessary forms and instructions. Let me know what documents and information you will need from me as beneficiary.

I can be reached at **(telephone number)** during daytime hours, if you need to reach me. Your prompt attention will be appreciated.

Sincerely,

**(Signature)**

**(Name)**

**(Your Address)**

**(City/State/Zip)**

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# Personal Information Organizer

Your source to record all personal information in one convenient place.



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**HELPFUL HINT:** *While this document seems long, few people will need to complete every field on every page. You may also be able to attach documents, or indicate where information is located, to save time in completing all fields.*

*Once completed, keep in a secure location and make sure your estate executor or other responsible party knows this document exists.*

# Personal/Family Information

NAME		
ADDRESS		
CITY	STATE	ZIP CODE
DATE OF BIRTH (use MM/DD/YY format)	SOCIAL SECURITY NUMBER	THIS DOCUMENT WAS LAST UPDATED ON

## Family

### Spouse/Partner

NAME (including maiden name)	
DATE OF BIRTH (use MM/DD/YY format)	SOCIAL SECURITY NUMBER

### First Child

NAME		
ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER	DATE OF BIRTH (use MM/DD/YY format)	SOCIAL SECURITY NUMBER

### Second Child

NAME		
ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER	DATE OF BIRTH (use MM/DD/YY format)	SOCIAL SECURITY NUMBER

### Other Dependent - Relationship:

NAME		
ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER	DATE OF BIRTH (use MM/DD/YY format)	SOCIAL SECURITY NUMBER

# Important Contacts

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## Attorney Information

NAME

---

ADDRESS

---

CITY

STATE

ZIP CODE

PHONE NUMBER

---

## Landlord Information

NAME

---

ADDRESS

---

CITY

STATE

ZIP CODE

PHONE NUMBER

---

## Financial Planner Information

NAME

---

ADDRESS

---

CITY

STATE

ZIP CODE

PHONE NUMBER

---

## Accountant Information

NAME

---

ADDRESS

---

CITY

STATE

ZIP CODE

PHONE NUMBER

---

## Tax Preparer

NAME

---

ADDRESS

---

CITY

STATE

ZIP CODE

PHONE NUMBER

---

# Important Contacts, cont'd.

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## Primary Care Physician Information

NAME

---

ADDRESS

---

CITY

STATE

ZIP CODE

PHONE NUMBER

---

## Specialist Physician Information - Specialty:

NAME

---

ADDRESS

---

CITY

STATE

ZIP CODE

PHONE NUMBER

---

## Specialist Physician Information - Specialty:

NAME

---

ADDRESS

---

CITY

STATE

ZIP CODE

PHONE NUMBER

---

## Other Contact:

NAME

---

ADDRESS

---

CITY

STATE

ZIP CODE

PHONE NUMBER

---

## Other Contact:

NAME

---

ADDRESS

---

CITY

STATE

ZIP CODE

PHONE NUMBER

---

# Important Document Directory

FAMILY DOCUMENTS	LOCATION
Social Security Card	
Driver's License Number	
Birth Certificate	
Passport/Visa	
Marriage Certificate	
Pre-Nuptial Agreement	
Divorce Decree	
Adoption Document(s)	
Military Discharge/Military ID	
Green Card/Naturalization Papers	

FINANCIAL DOCUMENTS	LOCATION
Deeds/Titles to Property	
Life Insurance Document(s)	
Auto Insurance Document(s)	
Home Insurance Document(s)	
Health Insurance Document(s)	
Loan Document	
Retirement Benefit Statement(s)	
Investments and Savings Document(s)	
State & Federal Income Tax Returns	
Employer/Union Benefits Information	

ESTATE PLANNING	LOCATION
Will	
Living Will	
Power of Attorney	
HIPAA Document(s)	
Trust Name Change	
Letter of Instruction	

OTHER DOCUMENTS	LOCATION

# Financial Information

## Safety Deposit Box

LOCATION OF SAFETY DEPOSIT BOX KEYS

SAFETY DEPOSIT BOX NUMBER

NAME OF INSTITUTION

ADDRESS

PHONE

## Savings Account

ACCOUNT NUMBER

ACCOUNT HOLDER

BANK NAME/LOCATION

WEBSITE/PASSWORDS

BANK PHONE

LOCATION OF STATEMENTS

## Savings Account (additonal)

ACCOUNT NUMBER

ACCOUNT HOLDER

BANK NAME/LOCATION

WEBSITE/PASSWORDS

BANK PHONE

LOCATION OF STATEMENTS

## Checking Account

ACCOUNT NUMBER

ACCOUNT HOLDER

BANK NAME/LOCATION

WEBSITE/PASSWORDS

BANK PHONE

LOCATION OF STATEMENTS

## Checking Account (additional)

ACCOUNT NUMBER

ACCOUNT HOLDER

BANK NAME/LOCATION

WEBSITE/PASSWORDS

BANK PHONE

LOCATION OF STATEMENTS

## Checking Account (additional)

ACCOUNT NUMBER

ACCOUNT HOLDER

BANK NAME/LOCATION

WEBSITE/PASSWORDS

BANK PHONE

LOCATION OF STATEMENTS

# Financial Information, cont'd.

## Social Security Account Information

ACCOUNT NUMBER	ACCOUNT HOLDER
BANK NAME/LOCATION	WEBSITE/PASSWORDS
BANK PHONE	LOCATION OF STATEMENTS

## Loan Information

LENDER	DEBTOR
ACCOUNT NUMBER/WEBSITE/PASSWORDS	DATE OF LOAN (use MM/DD/YY format) DUE DATE
AMOUNT OF LOAN	<input type="checkbox"/> MONTHLY PAYMENT OF <input type="checkbox"/> QUARTERLY PAYMENT OF. INTEREST RATE
LOCATION OF STATEMENTS	COLLATERAL

## Loan Information (additional)

LENDER	DEBTOR
ACCOUNT NUMBER/WEBSITE/PASSWORDS	DATE OF LOAN (use MM/DD/YY format) DUE DATE
AMOUNT OF LOAN	<input type="checkbox"/> MONTHLY PAYMENT OF <input type="checkbox"/> QUARTERLY PAYMENT OF. INTEREST RATE
LOCATION OF STATEMENTS	COLLATERAL

## Real Estate Information

LOCATION OF PROPERTY DOCUMENTS	TYPE OF PROPERTY
PROPERTY OWNER	PROPERTY VALUE
LEGAL DESCRIPTION	
PROPERTY ADDRESS	
MORTGAGE OWNER	PHONE
MORTGAGE OWNER ADDRESS	

## Retirement Fund

LOCATION OF STATEMENTS/WEBSITE/PASSWORDS			
ACCOUNT NUMBER	ACCOUNT OWNER	VALUE	AS OF

## Investment Account

LOCATION OF STATEMENTS/WEBSITE/PASSWORDS			
ACCOUNT NUMBER	ACCOUNT OWNER	VALUE	AS OF



# Financial Information, cont'd.

## Investment Account

LOCATION OF STATEMENTS/WEBSITE/PASSWORDS

ACCOUNT NUMBER	ACCOUNT OWNER	VALUE

## Bond Information

LOCATION OF DOCUMENTS

BOND OWNER			BOND TYPE
PURCHASE DATE (use MM/DD/YY format)	MATURITY DATE (use MM/DD/YY format)	BOND VALUE	FACE VALUE

## Bond Information (additional)

LOCATION OF DOCUMENTS

BOND OWNER			BOND TYPE
PURCHASE DATE (use MM/DD/YY format)	MATURITY DATE (use MM/DD/YY format)	BOND VALUE	FACE VALUE

## Stock Information

LOCATION OF STATEMENTS/WEBSITE/PASSWORDS

STOCK OWNER				STOCK PRICE
STOCK NAME				
NUMBER OF SHARES	PURCHASE DATE (use MM/DD/YY format)	PURCHASE PRICE	CURRENT PRICE	VALUE

## Stock Information (additional)

LOCATION OF STATEMENTS/WEBSITE/PASSWORDS

STOCK OWNER				STOCK PRICE
STOCK NAME				
NUMBER OF SHARES	PURCHASE DATE (use MM/DD/YY format)	PURCHASE PRICE	CURRENT PRICE	VALUE

# Insurance

## Auto Insurance Policy

LOCATION OF DOCUMENTS

INSURANCE COMPANY		AGENT'S NAME	
AGENT'S PHONE NUMBER	POLICY NUMBER		DATE ISSUED (use MM/DD/YY format)
ANNUAL PREMIUM	DEDUCTIBLES		VEHICLES INSURED

## Auto Insurance Policy (additional)

LOCATION OF DOCUMENTS

INSURANCE COMPANY		AGENT'S NAME	
AGENT'S PHONE NUMBER	POLICY NUMBER		DATE ISSUED (use MM/DD/YY format)
ANNUAL PREMIUM	DEDUCTIBLES		VEHICLES INSURED

## Homeowner's Insurance Policy

LOCATION OF DOCUMENTS

COMPANY	
POLICY NUMBER	DATE ISSUED (use MM/DD/YY format)

## Life Insurance Policy

LOCATION OF DOCUMENTS

COMPANY		
POLICY NUMBER	DATE ISSUED (use MM/DD/YY format)	ANNUAL PREMIUM
POLICY OWNER	INSURED	
PRIMARY BENEFICIARY	CONTINGENT BENEFICIARY	
DEATH BENEFIT	CASH SURRENDER VALUE	TYPE

## Life Insurance Policy

LOCATION OF DOCUMENTS

COMPANY		
POLICY NUMBER	DATE ISSUED (use MM/DD/YY format)	ANNUAL PREMIUM
POLICY OWNER	INSURED	
PRIMARY BENEFICIARY	CONTINGENT BENEFICIARY	
DEATH BENEFIT	CASH SURRENDER VALUE	TYPE

# Insurance, cont'd.

## Final Needs Insurance

LOCATION OF DOCUMENTS

COMPANY

POLICY NUMBER		DATE ISSUED (use MM/DD/YY format)	ANNUAL PREMIUM
POLICY OWNER		INSURED	
DEATH BENEFIT	CASH SURRENDER VALUE	TYPE	

## Long-Term Care Insurance

LOCATION OF DOCUMENTS

COMPANY

POLICY NUMBER		DATE ISSUED (use MM/DD/YY format)	ANNUAL PREMIUM
POLICY OWNER		INSURED	
DEATH BENEFIT	CASH SURRENDER VALUE	TYPE	

## Disability Insurance

LOCATION OF DOCUMENTS

COMPANY

POLICY NUMBER		DATE ISSUED (use MM/DD/YY format)	ANNUAL PREMIUM
POLICY OWNER		INSURED	
DEATH BENEFIT	CASH SURRENDER VALUE	TYPE	

## Legal Services Provider

LEGAL SERVICES PROVIDER	COMPANY PHONE
COMPANY WEBSITE	MEMBER ID
ATTORNEY NAME	ATTORNEY'S PHONE

## Power of Attorney Information

LOCATION OF DOCUMENTS

AGENT	PHONE
AGENT	PHONE

## Living Trust Information

LOCATION OF DOCUMENTS

AGENT	PHONE
AGENT	PHONE

## Guardianship/Conervatorship Information

LOCATION OF DOCUMENTS

GUARDIAN/CONSERVATOR	PHONE	
ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER		
GUARDIAN/CONSERVATOR (additional)	PHONE	
ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER		

## Living Will Information

LOCATION OF STATEMENTS

--

Will Information

LOCATION OF DOCUMENTS

EXECUTOR		PHONE
CO-EXECUTOR		PHONE
LOCATION		
BENEFICIARY NAME		
ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER		

BENEFICIARY NAME (additional)		
ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER		

BENEFICIARY NAME (additional)		
ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER		

Executor Information

NAME		
ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER		

# Supplemental Information

## Divorce Information

FORMER SPOUSE'S NAME (including maiden name)

ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

DATE OF BIRTH (use MM/DD/YY format)

SOCIAL SECURITY NUMBER

### DIVORCE DOCUMENTS

☐ DECREE LOCATION

☐ OTHER LOCATION

☐ OTHER LOCATION

☐ OTHER LOCATION

DIVORCE ATTORNEY'S NAME

ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

## Military

BRANCH

RANK

SERVICE NUMBER

DATES OF SERVICE

DATE OF DISCHARGE/LOCATION OF DOCUMENTS

## Social Media

☐ FACEBOOK

USERNAME

PASSWORD

☐ TWITTER

USERNAME

PASSWORD

☐ LINKEDIN

USERNAME

PASSWORD

☐ GOOGLE+

USERNAME

PASSWORD

☐ OTHER:

USERNAME

PASSWORD

☐ OTHER:

USERNAME

PASSWORD

# Supplemental Information, cont'd.

## Employment

PRESENT EMPLOYER

DATES OF EMPLOYMENT

ADDRESS

CITY STATE ZIP CODE PHONE NUMBER

DIRECT SUPERVISOR CONTACT PHONE NUMBER

HR CONTACT PHONE NUMBER

## EMPLOYMENT BENEFITS

☐ MEDICAL LOCATION/POLICY OR ACCOUNT NUMBER

☐ LIFE LOCATION/POLICY OR ACCOUNT NUMBER

☐ 401K LOCATION/POLICY OR ACCOUNT NUMBER

☐ STOCK LOCATION/POLICY OR ACCOUNT NUMBER

☐ PENSION LOCATION/POLICY OR ACCOUNT NUMBER

☐ PROFIT SHARING LOCATION/POLICY OR ACCOUNT NUMBER

☐ DENTAL LOCATION/POLICY OR ACCOUNT NUMBER

☐ VISION LOCATION/POLICY OR ACCOUNT NUMBER

☐ LEGAL LOCATION/POLICY OR ACCOUNT NUMBER

☐ OTHER LOCATION/POLICY OR ACCOUNT NUMBER

## Assets

AUTOMOBILE MAKE MODEL YEAR

TITLE LOCATION

LOAN LOCATION

AUTOMOBILE (additional) MAKE MODEL YEAR

TITLE LOCATION

LOAN LOCATION

# Supplemental Information, cont'd.

## ASSETS (additional)

<input type="checkbox"/> BOAT	LOAN/TITLE/LOCATION
<input type="checkbox"/> RV	LOAN/TITLE/LOCATION
<input type="checkbox"/> TRAILER	LOAN/TITLE/LOCATION
<input type="checkbox"/> OTHER	LOAN/TITLE/LOCATION
<input type="checkbox"/> OTHER	LOAN/TITLE/LOCATION
<input type="checkbox"/> OTHER	LOAN/TITLE/LOCATION

## Business

TYPE OF BUSINESS	TYPE OF OWNERSHIP	AMOUNT OF OWNERSHIP	ESTIMATED VALUE
BUSINESS CONTACT 1		PHONE NUMBER	
BUSINESS CONTACT 2		PHONE NUMBER	

## Additional Business Documents

DOCUMENT NAME	LOCATION
DOCUMENT NAME	LOCATION
DOCUMENT NAME	LOCATION
DOCUMENT NAME	LOCATION
DOCUMENT NAME	LOCATION
DOCUMENT NAME	LOCATION



# Pre-Planning of Funeral and Burial Arrangements

## Funeral and Burial Arrangements

CEMETARY/COLUMBARIUM/NICHE NAME

LOT NUMBER

ADDRESS

CITY STATE ZIP CODE PHONE NUMBER

FUNERAL HOME NAME

FUNERAL DIRECTOR NAME

ADDRESS

CITY STATE ZIP CODE PHONE NUMBER

CHURCH/SYNAGOGUE/OTHER NAME

CONTACT

ADDRESS

CITY STATE ZIP CODE PHONE NUMBER

### IMPORTANT DOCUMENTS

<input type="checkbox"/> ORGAN DONOR RECORDS	LOCATION
<input type="checkbox"/> INSTRUCTIONS FOR BURIAL, CREMATION, ETC	LOCATION
<input type="checkbox"/> SPECIAL WISHES FOR CEREMONY	LOCATION
<input type="checkbox"/> PREPAID FUNERAL POLICY	LOCATION

### PERSONAL FRIENDS TO CONTACT (OR ATTACH LIST)

NAME

ADDRESS

CITY STATE ZIP CODE

PHONE NUMBER

NAME

ADDRESS

CITY STATE ZIP CODE

PHONE NUMBER

# Pre-Planning of Funeral and Burial Arrangements, cont'd.

## OBITUARY INFORMATION

## HOBBIES AND/OR PERSONAL INTERESTS

## CLUBS, ORGANIZATIONS, CHURCH AFFILIATION AND ACTIVITIES

## MILITARY SERVICE

## AWARDS AND ACHIEVEMENTS

## OTHER INFORMATION

SURVIVOR NAME 1	RELATIONSHIP	CITY	STATE
SURVIVOR NAME 2	RELATIONSHIP	CITY	STATE
SURVIVOR NAME 3	RELATIONSHIP	CITY	STATE
SURVIVOR NAME 4	RELATIONSHIP	CITY	STATE
PRE-DECEASED 1	RELATIONSHIP	YEAR OF DEATH	
PRE-DECEASED 2	RELATIONSHIP	YEAR OF DEATH	
PRE-DECEASED 3	RELATIONSHIP	YEAR OF DEATH	

## WHO CAN MEMORIAL DONATIONS BE MADE TO

NAME	
ADDRESS	PHONE NUMBER
NAME	
ADDRESS	PHONE NUMBER

## FUNERAL CEREMONY

HOUSE OF WORSHIP	ADDRESS
NAME OF CLERGYMAN	PHONE NUMBER

## PREFERRED FUNERAL CEREMONY (select all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> HELD AT FUNERAL HOME        | <input type="checkbox"/> VIEWING ONLY AT FUNERAL HOME PRIOR TO CEREMONY |
| <input type="checkbox"/> HELD AT CHURCH (specify)    | <input type="checkbox"/> FAMILY AND FRIENDS ONLY                        |
| <input type="checkbox"/> GRAVESIDE CEREMONY ONLY     | <input type="checkbox"/> IMMEDIATE FAMILY ONLY                          |
| <input type="checkbox"/> GRAVESIDE CEREMONY ONLY AT: | <input type="checkbox"/> NO VIEWING/NO OPEN CASKET                      |
| <input type="checkbox"/> OPEN CASKET                 |   |

## PERSONAL EFFECTS THAT SHOULD STAY WITH THE REMAINS AFTER THE MEMORIAL SERVICE (select all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> EYEGLASSES             | <input type="checkbox"/> OTHER (please specify) _____   |
| <input type="checkbox"/> WATCH                  | <input type="checkbox"/> NONE   |
| <input type="checkbox"/> RINGS/JEWELRY          | <input type="checkbox"/> NO PERSONAL EFFECTS ARE TO BE WITH THE REMAINS DURING THE MEMORIAL SERVICE |
| <input type="checkbox"/> SMART PHONE/CELL PHONE |   |

# Pre-Planning of Funeral and Burial Arrangements, cont'd.

## VETERANS FUNERAL ARRANGEMENTS

☐ DRAPED FLAG

☐ FOLDED FLAG

☐ FLAG PRESENTED TO: \_\_\_\_\_

## TYPE OF EULOGY

☐ RELIGIOUS SERVICE ONLY

☐ RELIGIOUS SERVICE AND EULOGY

☐ EULOGY ONLY

☐ NONE

NAME OF INDIVIDUAL TO PROVIDE EULOGY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

RELIGIOUS PASSAGES (to be read at service) \_\_\_\_\_

## FLORAL PREFERENCES

☐ FLORAL TYPE: \_\_\_\_\_

☐ FLORAL COLOR: \_\_\_\_\_

☐ NO FLORAL

## MUSIC SELECTION

☐ ORGANIST

☐ SOLOIST

☐ OTHER MUSIC SELECTION: \_\_\_\_\_

☐ NONE

## CLOTHING PREFERENCE

☐ EXISTING CLOTHING

☐ NEW CLOTHING

☐ DESCRIPTION OF CLOTHING (type and color): \_\_\_\_\_

☐ NONE

## PREFERENCE FOR DISPOSAL OF THE REMAINS

☐ BURIAL

☐ CREMATION

☐ MAUSOLEUM INTERMENT

☐ OTHER (please explain): \_\_\_\_\_

☐ OTHER INSTRUCTIONS (e.g. dispersal of cremains): \_\_\_\_\_

## TYPE OF CASKET

☐ HARDWOOD (type): \_\_\_\_\_

☐ METAL (type): \_\_\_\_\_

☐ CREMATION COFFIN

☐ OTHER (please explain): \_\_\_\_\_

☐ NOT APPLICABLE

## CASKET SPECIFICS

☐ MANUFACTURER \_\_\_\_\_

☐ MODEL: \_\_\_\_\_

☐ OTHER INFORMATION (please specify): \_\_\_\_\_

☐ NOT APPLICABLE

## CASKET PRESENTATION DURING CEREMONY

☐ OPEN (if possible)

☐ CLOSED

☐ NOT APPLICABLE

## TYPE OF HEADSTONE

☐ STONE

☐ FLAT MARKER

☐ UPRIGHT

☐ HEADSTONE SAYING: \_\_\_\_\_

☐ HEADSTONE PHRASE: \_\_\_\_\_

## POST-MEMORIAL GATHERING DESIRED

☐ QUIET GATHERING AT FAMILY MEMBER'S HOUSE

☐ LIFE CELEBRATION EVENT: \_\_\_\_\_

☐ OTHER (please specify): \_\_\_\_\_

☐ NONE

.....  
**PROTECT YOUR IDENTITY** - Keep this document in a secure location and only allow access to necessary parties.  
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