

# Organizer of Information, Document Locations, and Funeral Arrangements



## 1.0 General Information

- 1.1 Name \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_
- 1.2 Address \_\_\_\_\_
- 1.3 A resident of Ohio since \_\_\_\_\_ Date/Place of Birth \_\_\_\_\_
- 1.4 Spouse or Next of Kin \_\_\_\_\_  
Address \_\_\_\_\_
- 1.5 If Veteran: Branch \_\_\_\_\_ Serial # \_\_\_\_\_ Years \_\_\_\_\_
- 1.6 Father's Name \_\_\_\_\_
- 1.7 Mother's Maiden Name \_\_\_\_\_
- 1.8 Name of Attorney \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_
- 1.9 Safe deposit box? ( Y / N ) Location \_\_\_\_\_  
Location of key to my safe deposit box \_\_\_\_\_

## 2.0 Legal Documents, Tax Returns, and Records (Info & Document Locations)

- 2.1 Location of my Power of Attorney \_\_\_\_\_  
Name of attorney-in-fact \_\_\_\_\_
- 2.2 Location of my Will/Trust \_\_\_\_\_  
Executor of my Will \_\_\_\_\_ Trustee \_\_\_\_\_
- 2.3 Location of my Living Will and Durable Power of Attorney for Health Care \_\_\_\_\_  
\_\_\_\_\_  
My physician has a copy ( Y / N ) Name: \_\_\_\_\_
- 2.4 Anatomical gift authorization: arrangements made for organ donations? ( Y / N )  
\_\_\_\_\_ within my Living Will \_\_\_\_\_ through the Bureau of Motor Vehicles
- 2.5 Location of tax returns \_\_\_\_\_
- 2.6 Location of Birth Certificate \_\_\_\_\_
- 2.7 Location of Marriage Certificate \_\_\_\_\_
- 2.8 Location of Military/Discharge papers \_\_\_\_\_
- 2.9 Location of Social Security Card and other records \_\_\_\_\_
- 2.10 Other valuable papers and their locations \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2.11 Other information regarding property or estate which may be helpful \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 3.0 Funeral and Burial Arrangements and Preferences

3.1 Check one of the following:

- \_\_\_\_\_ Visitation and burial
- \_\_\_\_\_ Burial only
- \_\_\_\_\_ Visitation and cremation. Desires for remains: \_\_\_\_\_
- \_\_\_\_\_ Cremation only. Desires for remains: \_\_\_\_\_
- \_\_\_\_\_ Gift of body to science. Arranged with: \_\_\_\_\_

3.2 I object to an autopsy ( Y / N )

3.3 Funeral Director \_\_\_\_\_ Address \_\_\_\_\_

3.4 Funeral pre-planned? ( Y / N ) Funeral pre-paid? ( Y / N )

3.5 Location for funeral service \_\_\_\_\_

3.6 Officiant(s) \_\_\_\_\_

3.7 Any special requests for the funeral (e.g., do you want a closed casket?) \_\_\_\_\_

3.8 Suggested pall bearers \_\_\_\_\_

3.9 Clothing I would like put on my body \_\_\_\_\_

3.10 Tangible personal property I would like buried with me \_\_\_\_\_

3.11 Interment location (give details if lot or mausoleum already owned) \_\_\_\_\_

3.12 I would like donations made in lieu of/in addition to flowers ( Y / N )

To what organization(s)? \_\_\_\_\_

### 4.0 Location of Asset Information

*We recommend you list all assets, with their worth, ownership information, and beneficiary and contingent beneficiary information on a separate Schedule of Assets list.*

4.1 Location of IRA, Pension, 401(k), and Annuity documents \_\_\_\_\_

4.2 Location of Checking, Savings, and CD documentation \_\_\_\_\_

4.3 Location of Real Estate documents \_\_\_\_\_

4.4 Location of Stock, Bond, & Mutual Fund documents \_\_\_\_\_

4.5 Location of Automobile titles \_\_\_\_\_

4.6 Location of Life Insurance policies \_\_\_\_\_

4.7 Dispersal of personal effects (rings, etc.) (Use separate sheet if lengthy. NOTE: This is not binding unless mentioned specifically in your Will.)  See attached

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

## 5.0 Location of Liability Information

- 5.1 Location of Mortgage information \_\_\_\_\_
- 5.2 Location of Automobile Loan documents \_\_\_\_\_
- 5.3 Location of Bank Loan information \_\_\_\_\_
- 5.4 Credit card accounts and numbers \_\_\_\_\_
- \_\_\_\_\_
- 5.5 Location of Credit/Contract Loan \_\_\_\_\_
- 5.6 Location of Charge Account Records \_\_\_\_\_
- 5.7 Location of Credit Card Statements for 3 Years \_\_\_\_\_
- 5.8 Location of Debt Contracts, Payment in Full Records \_\_\_\_\_

## 6.0 Insurance Information and Document Locations

- 6.1 Insurance Agents \_\_\_\_\_
- 6.2 Location of Life Insurance Papers \_\_\_\_\_
- 6.3 Location of Home/Property Insurance Papers \_\_\_\_\_
- 6.4 Location of Automobile Insurance Papers \_\_\_\_\_
- 6.5 Location of Liability (Umbrella Policy) Insurance Papers \_\_\_\_\_
- 6.6 Location of Medical Insurance Papers \_\_\_\_\_
- 6.7 Location of Disability Insurance Papers \_\_\_\_\_

## 7.0 Other Information

- 7.1 Other specific wishes are attached (*e.g., about the education of your children, your values, etc.*) ( Y / N )
- 7.2 Location of my computer passwords \_\_\_\_\_
- 7.3 Names, addresses, and phone numbers of persons and organizations to notify at the time of my death, are attached ( Y / N )
- 7.4 Other instructions or comments \_\_\_\_\_
- \_\_\_\_\_

I understand that, in some instances, it may not be possible for my survivors to follow all of my wishes. Because I love them, I hereby sign my name to attest that they should feel absolutely free to make the decisions they feel best at the moment, resting assured that I would support them in those decisions.

Date: \_\_\_\_\_  
\_\_\_\_\_ (Signature)

*Note: this form is not a legal document, so it is not legally binding. You can change it as often as you wish without witnessing or other formalities required for your Will. If you need additional forms, please do not hesitate to call me.*