



MY F.I.L.E.

(**F**inancial, **I**nsurance & Investments,
Legal Documents, **E**state Management)

Date Recorded: _____

Information & Records For: _____

This records inventory checklist, a.k.a, My F.I.L.E., is designed to help you catalog and gather all of your important financial, legal and estate related information into one central place so that YOU know where everything is and so that YOUR FAMILY and loved ones know where everything is in the event of your death. It is vitally important that you invest the time in completing this checklist so that you and your loved one are best prepared.

Guidelines: You can choose to document important information on paper or other forms of media. If the information is not directly present in this document then be sure to place a “pointer” to where to find it. After completing this document take the time to secure all of this information and tell those closest to you where to find My F.I.L.E.

Let's get started...

Your Information

First Name:	Middle Name:	Last Name:
Social Security Number:	Date of Birth:	Birthplace:
Father's Full Name:	Father's Birthplace:	
Mother's Full Name:	Mother's Birthplace:	

Spouse's Information

First Name:	Middle Name:	Last Name:
Social Security Number:	Date of Birth:	Birthplace:
Father's Full Name:	Father's Birthplace:	
Mother's Full Name:	Mother's Birthplace:	

Marriage and Insurance Information:

Date of Marriage:	Place of Marriage:
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Where is your marriage certificate?

Your Life Insurance Company and Policy Number:

Who is your life insurance agent?

Phone Number:

Your Spouse's Life Insurance Company and Policy Number:

Who is your spouse's life insurance agent?

Phone Number:

What Are Your Assets?

Assets	Description	ID Number	Mortgage(Yes)	Mortgage(No)	Value
Life Insurance					
House #1					
House #2					
IRA					
Retirement Plan					
Auto #1					
Auto #2					
Boat					
Stocks					
Mutual Funds					
Bonds					
CD #1					
CD #2					
Jewelry					
OTHER					

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Information About Your Children

Child 1

First Name:

Middle Name:

Last Name:

Social Security Number:

Date of Birth:

Birthplace:

Male or Female:

Current Address:

Current Phone Number:

Life Insurance Company and Policy Number:

Life Insurance Agent:

Child 2

First Name:

Middle Name:

Last Name:

Social Security Number:

Date of Birth:

Birthplace:

Male or Female:

Current Address:

Current Phone Number:

Life Insurance Company and Policy Number:

Life Insurance Agent:

Child 3

First Name:

Middle Name:

Last Name:

Social Security Number:

Date of Birth:

Birthplace:

Male or Female:

Current Address:

Current Phone Number:

Life Insurance Company and Policy Number:

Life Insurance Agent:

Child 4

First Name:

Middle Name:

Last Name:

Social Security Number:

Date of Birth:

Birthplace:

Male or Female:

Current Address:

Current Phone Number:

Life Insurance Company and Policy Number:

Life Insurance Agent:

Other Things Of Importance

Bank Name(s) and Account Number(s):

Health Insurance Company and Policy/Account Number:

If you have a will (Last Will and Testament), please record the location of it here:

Who is the current executor of your will?

Where are your birth certificates? Please record the location of it/them here:

Have you made any final, funeral arrangements? If so, with which funeral home? (Also record the address and phone number of the funeral home here.)

Are you eligible to receive any military benefits? If so, which branch of the military? (Record any contact person(s) and phone numbers here.)

Do you have a life insurance policy? Record the policy number, insurance agent's name and phone number, and all beneficiaries here.)

Do you have a company retirement plan? If so, what's the company's name, retirement plan account number? Also list all beneficiaries here.

Where is the deed to your house/property?

Where is the title to your automobile/vehicle?

List all emergency contacts here. Full name and best contact phone number:

- Contact 1
- Contact 2
- Contact 3

Are you an organ donor? If yes, where is this documented?

Where are your medical records? With your healthcare organization? At home in a safe place? Both places?

Do you have any trusts? Where were they filed? What kind are they? Who are the trustees?

At the time of this recording, are you expecting to receive an inheritance?

Do you have any credit cards or other accounts that are "P.O.D." - payable on death? If so, which ones? List card company name(s) account numbers and approximate outstanding balances.

Do you have disability insurance? If so, with what company? Record all contact information here.

Do you have a cemetery lot? Is it paid for in full or is there an outstanding balance?

Who Are Your Advisors?

Advisor	Name	Address	Phone Number
Lawyer			
Accountant			
Banker			
Stockbroker			
Financial			
Doctor 1			
Doctor 2			

For My Loved Ones – A Checklist To Help With All That Has To Be Done

First Step – Initial Arrangements And Decisions

- ☐ Was the family member/loved one a member of a church or religious body?
- ☐ Contact clergy, officer or leader of church or religious body
- ☐ Which funeral director?
- ☐ What burial location?
- ☐ Type of home going/funeral or memorial service?
- ☐ Musical arrangements and flowers
- ☐ Date, time and place of final services
- ☐ Burial clothing for the deceased
- ☐ Select pallbearers, if necessary
- ☐ Any special scripture selections?
- ☐ Transportation for the family
- ☐ Submit a newspaper notification
- ☐ If there is a will, review it for special requests
- ☐ Order several copies of the official death certificate
- ☐ Compile a list of people to thank after everything is over
- ☐ Communicate to all friends and relatives
- ☐ Make lodging arrangements for out of town family

Second Step – Notify/Contact These People, Companies and Organizations

- ☐ Family or HMO/PPO Doctor(s)
- ☐ Funeral Director
- ☐ Cemetary
- ☐ Family/Relatives and Friends
- ☐ Employer Of The Deceased
- ☐ Newspaper (Obituary Department)
- ☐ Social/Civic Groups
- ☐ Attorney/Lawyer
- ☐ Accountant
- ☐ Estate Executor
- ☐ Insurance Agent(s)

- ☐ Veterans' Groups/Organizations

Third Step – Gather Vital Statistics Information Of The Deceased

- ☐ Name, Home, Address and Zip
- ☐ Phone Number
- ☐ Occupation & Title
- ☐ State Resident How Long?
- ☐ Social Security Number
- ☐ Date of Birth
- ☐ Place of Birth
- ☐ War Veteran's Serial No.
- ☐ Father's Name
- ☐ Father's Birthplace
- ☐ Mother's Maiden Name
- ☐ Mother's Birthplace

Fourth Step – Gather Important Documents

- ☐ Last Will & Testament (Will)
- ☐ Legal Proof Of Age
- ☐ Social Security Card
- ☐ Marriage License
- ☐ Citizenship Papers
- ☐ Insurance Policies
- ☐ Bank Statements/Books
- ☐ Deeds To Property
- ☐ Vehicle Bill of Sale
- ☐ Income Tax Returns
- ☐ Disability Claims
- ☐ Veteran's Discharge Papers

Fifth Step – Final Things

- ☐ Unfinished Funeral Business
- ☐ Florist And Clergy
- ☐ Hospital And Ambulance
- ☐ Doctors And Nurses
- ☐ Medicines
- ☐ Unresolved Expenses, Bills etc.