

Letter of Instruction and Notes to My Survivors

Name:	
Date:	

LOCATION OF IMPORTANT DOCUMENTS

R – Residence

S – Safe Deposit Box (Bank and Key Location)

O – Office

Documents

Powers of Attorney

Healthcare Directive

Automobile Title

Real Estate titles and deeds

Burial Instructions and Plot

N – Survivor Notebook NA – Does not apply

Adoption papers **Insurance Policies** Birth certificates Automobile Children: Home owner Adoption records Umbrella Birth certificates Medical Guardianship papers Life Citizenship Papers Long Term Care Notes and other Loans Divorce/Separation Driver's License/Passport Rental Property Records **Employment Contracts Stock Option Plans** Estate plan/legal documents Stock Purchase Plans Stored/loaned valuables Special Bequest List Other investment info Marriage Certificate Military Discharge Papers

Financial Records

Employment Benefits

Other Death Benefits

Profit Sharing Plan

Vacation /sick

Pension

Corporate Retirement Plan _____



Financial Records Annuity contracts Bank Statements Brokerage Statements Checkbook Credit cards Income and gift tax returns		Other Safe combination Valuables Password list Other	
Notes: (List in which desk, file, cabinet,	firebox, etc. th	ne documents can be found	1.)



KEY CONTACTS: PROFESSIONALS

Name:	Planner:
Address:	
Phone:	
Web:	
Email:	
Attorney:	
Name:	
Address:	
Phone:	
Web:	
Email:	
Linam	
Tax Prepa	rer:
Name:	
Address:	
Phone:	
Web:	
Email:	
Doctor:	
Name:	
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Phone:	
Web:	
Email:	
Linam	
Employer	
Name:	
Address:	
Phone:	
Web:	
Email:	
Other	
Name:	
Address:	
Phone:	
Web:	
Email:	

A free resource provided by Birchwood Financial Partners | www.birchwoodfp.com



KEY CONTACTS: PERSONAL

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KEY CONTACTS: PERSONAL CONTINUED

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ARRANGEMENTS:

Name:	
Organ Donation: I	want to be an organ donor.
Donation to Medical Science: University of	I want to donate my body to the for medical science.
Cremation: I want Crematory and location:	t to be cremated
Funeral Home to contact:	
Cemetery Arrangements: Name of Cemetery:	
Address:	
Phone:	
Location of Deed:	
Plot in Name of:	
Plot Number:	
Special instructions:	



ARRANGEMENTS: Name: Organ Donation: I want to be an organ donor. want to donate my body to the Donation to Medical Science: I University of for medical science. want to be cremated Cremation: I Crematory and location: Funeral Home to contact: **Cemetery Arrangements:** Name of Cemetery: Address: Phone: Location of Deed: Plot in Name of:

Plot Number:

Special instructions:



NOTES TO LOVED ONES:

To Everyone:	
Spouse:	
Kids:	
Overall Priorities:	
Financial Well Being:	
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Children's Financial Well Being:	
5	
Maintain Family Harmony:	
, ,	
Preserve Estate and Save Taxes:	
Treserve Estate and Save Taxesi	
Trust Provision:	
Trust i Tovision.	
Children's Trust Provisions:	
CHILICITS TRUSC FRONISIONS.	



RELATED TO CHILDREN:

My wish for the children:

This document is provided as a resource and is not a legal document. Please consult an estate lawyer.

Guardians for children:
Primary:
Successor 1:
Successor 2:

We picked these guardians because:

Mentoring Provision for Children:

Education Intentions:

Special Needs: