



Personal Planning Organizer

Personal History

Important Documents

*Bank Accounts,
Investments & Insurance*

*Veterans & Social
Security Benefits*

*Funeral & Cemetery
Arrangements*

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to our loved ones





nobody likes to **think**
about death, let alone
their own.

but **planning** for it
now is one of the most
caring things you can do
for your loved ones.

where to **begin**

This Personal Planning Organizer provides one central place for you to write down the location of important documents, such as your will and living will, life insurance policies, investments and bank accounts, as well as veteran's and social security benefits.

When a death occurs, most people don't know what to do or who to turn to. For those left behind, planning final arrangements and locating documents at the time of loss is extremely difficult. When you organize your important papers in advance, as well as plan your funeral and cemetery services, your family will be spared difficult decisions during an already stressful and emotional time.

Be sure to make a note of your wishes for your funeral and cemetery service as well, so your loved ones aren't left guessing what you would have wanted, and then wondering if they made the right decision.

start the **conversation**

Use your Personal Planning Organizer to start a conversation with your loved ones. That way they'll know what you've already taken care of and where to find all of the necessary information. Be sure to store your Personal Planning Organizer in a safe and protected location.

It's a good idea to make a copy of the information you've recorded here and give it to a trusted relative or close friend who lives outside your home.

personal history

husband

Full Name _____
First Middle Last

Suffix (Jr., Sr.) _____ Sex (M/F) _____ Citizenship (Country) _____

Date of Birth _____ Place of Birth _____

Residence _____
Address

City _____ County _____ State _____ Zip _____ () _____
Home Phone Cell Phone

Email Address _____ Password _____

Facebook Profile Name _____ Password _____

Instagram Profile Name _____ Password _____

Twitter Profile Name _____ Password _____

Other Social Media Profile _____ Password _____

Resided in County since: _____ Marriage Date/Place _____

Name of Father _____ Birthplace of Father _____

Maiden Name of Mother _____ Birthplace of Mother _____

Occupation _____ Employer _____

If Veteran, Branch of Service _____ Location of Discharge _____

DD-214 (Discharge Papers) or Serial Number _____

Name of Spouse/Partner _____

Children's Names _____

Sibling(s) Name(s) _____

Grade School _____

Middle School _____

High School _____

College(s) _____

Degree(s) _____

Profession _____

Military Service & Citations _____

Lodges, Clubs, Associations _____

Personal Accomplishments _____

spirituality

Faith/Denomination _____

Place of Worship _____

Place of Worship Address _____

Pastor, Priest, Spiritual Leader Name _____

Phone Number _____

Favorite Scripture _____

Favorite Hymn(s) or Song(s) _____

personal notes *(what you might not have known about me)*

My Pet(s): _____
Name(s)/Type (Dog, Cat, Horse, etc.)

My Favorite Color _____ My Favorite Food _____

My Favorite Song _____ My Favorite Hobby _____

My Favorite Vacation _____

My Favorite Book _____ My Favorite Movie _____

My Favorite TV Show _____ My Favorite Childhood Moment _____

My Proudest Moment _____

My Fondest Memory of Us _____

I want the inscription on my monument, memorial, or mausoleum to read _____

personal history

wife

Full Name _____
First Middle Last

Suffix (Jr., Sr.) _____ Sex (M/F) _____ Citizenship (Country) _____

Date of Birth _____ Place of Birth _____

Residence _____
Address

City _____ County _____ State _____ Zip _____ () _____ () _____
Home Phone Cell Phone

Email Address _____ Password _____

Facebook Profile Name _____ Password _____

Instagram Profile Name _____ Password _____

Twitter Profile Name _____ Password _____

Other Social Media Profile _____ Password _____

Resided in County since: _____ Marriage Date/Place _____

Name of Father _____ Birthplace of Father _____

Maiden Name of Mother _____ Birthplace of Mother _____

Occupation _____ Employer _____

If Veteran, Branch of Service _____ Location of Discharge _____

DD-214 (Discharge Papers) or Serial Number _____

Name of Spouse/Partner _____

Children's Names _____

Sibling(s) Name(s) _____

Grade School _____

Middle School _____

High School _____

College(s) _____

Degree(s) _____

Profession _____

Military Service & Citations _____

Lodges, Clubs, Associations _____

Personal Accomplishments _____

spirituality

Faith/Denomination _____

Place of Worship _____

Place of Worship Address _____

Pastor, Priest, Spiritual Leader Name _____

Phone Number _____

Favorite Scripture _____

Favorite Hymn(s) or Song(s) _____

personal notes *(what you might not have known about me)*

My Pet(s): _____
Name(s)/Type (Dog, Cat, Horse, etc.)

My Favorite Color _____ My Favorite Food _____

My Favorite Song _____ My Favorite Hobby _____

My Favorite Vacation _____

My Favorite Book _____ My Favorite Movie _____

My Favorite TV Show _____ My Favorite Childhood Moment _____

My Proudest Moment _____

My Fondest Memory of Us _____

I want the inscription on my monument, memorial, or mausoleum to read _____

important documents

Organizing your personal documents and making them accessible is an important step in estate planning. In case of a sudden death, it is essential that family members know the location of your will, bank accounts, living will and other important documents.



You Can Find My:

Here (please mark appropriate boxes):

Last Will & Testament	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Birth Certificate	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Marriage Certificate	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Social Security Card	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Citizenship Papers	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Insurance Policies	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Military Discharge Papers	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Income Tax Records	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Living Will	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Power of Attorney	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Trust Documents	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Safety Deposit Box Keys	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Automobile Title	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Checkbook	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Deeds to Real Estate	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Cemetery Deed	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
Funeral Arrangement Plans	Husband	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>
	Wife	Home <input type="checkbox"/>	Office <input type="checkbox"/>	Safe Deposit <input type="checkbox"/>	Attorney <input type="checkbox"/>

your will

No matter how large or small your assets, it is essential that you prepare a will and revise it regularly. Your will is the least expensive way to protect your family's assets.

If you die without a will, state law and a probate judge will determine who will administer your estate, who will receive your assets, and who will be the guardian of your minor children. With a will,

you are the one who makes these decisions and not a probate judge, who will be completely unaware of your wishes.

The small legal fee for drafting a will is one of the best investments you can ever make, considering how much is at stake—the well-being of your entire family and the protection of your property.

Husband

My Will Is Located With:

Name _____
Address _____
City _____ State _____ Zip _____
Phone () _____ Mobile () _____
Email _____

My Executor is:

Name _____
Address _____
City _____ State _____ Zip _____
Phone () _____ Mobile () _____
Email _____

My Attorney is:

Name _____
Address _____
City _____ State _____ Zip _____
Phone () _____ Mobile () _____
Email _____

I am the beneficiary of a will or trust: ☐ Yes ☐ No

If yes, from _____
Contact _____
Phone () _____ Mobile () _____
Email _____

I am the executor for someone else.

If yes, for _____
Contact _____
Phone () _____ Mobile () _____
Email _____

Wife

My Will Is Located With:

Name _____
Address _____
City _____ State _____ Zip _____
Phone () _____ Mobile () _____
Email _____

My Executor is:

Name _____
Address _____
City _____ State _____ Zip _____
Phone () _____ Mobile () _____
Email _____

My Attorney is:

Name _____
Address _____
City _____ State _____ Zip _____
Phone () _____ Mobile () _____
Email _____

I am the beneficiary of a will or trust: ☐ Yes ☐ No

If yes, from _____
Contact _____
Phone () _____ Mobile () _____
Email _____

I am the executor for someone else.

If yes, for _____
Contact _____
Phone () _____ Mobile () _____
Email _____

living will

A Living Will and a “will” are not the same. A will, or last will and testament, is a legal document that gives you the opportunity to make decisions on how your money and property will be managed and distributed after your death. It also allows you to choose who serves as guardian to your minor children, and who administers your estate.

A Living Will is an “advance directive,” a tool for you to communicate to medical staff and family your choice of whether to continue, withhold, or withdraw life-sustaining procedures, such as a feeding tube for hydration and nutrition, in the event you become incapacitated and are unable to speak on your own behalf. If you do not leave any instructions, no one will know what you would have wanted.

It is called an “advance” directive because you make the decision while you are healthy and competent on whether or not you would like to remain on life support. A Living Will only becomes active in the event you should become incapacitated and are unable to communicate your wishes to a health care provider.

durable power of attorney

Another type of advance directive is a Durable Power of Attorney. While a Living Will is a written statement of your wishes regarding only life sustaining procedures in the event you should become incapacitated, a Durable Power of Attorney (or Health Care Proxy) is a written document in which you appoint someone (your agent) to make health care decisions beyond those covered by your Living Will.

For instance, you may be in a persistent vegetative state or in a coma, but are not terminally ill; in accordance with the instructions you give in your Durable Power of Attorney, your agent can be authorized to make all or some health care decisions regarding your care, including choosing your doctor and treatment plan.

Deciding who will act on your behalf when you are not able to is important, since this person will be making difficult and emotional decisions regarding your care.

It is recommended you have both a Living Will and a Durable Power of Attorney.

My Living Will and/or Durable Power of Attorney are located here:

Husband

Name of the person* who has my documents
(list address, phone and email below):

or Location of my documents (i.e., desk drawer, file cabinet, etc.)

Address (where documents are located):

City _____ State _____ Zip _____

*Phone () _____ *Mobile () _____

*Email _____

Wife

Name of the person* who has my documents
(list address, phone and email below):

or Location of my documents (i.e., desk drawer, file cabinet, etc.)

Address (where documents are located):

City _____ State _____ Zip _____

*Phone () _____ *Mobile () _____

*Email _____

organ donation

Organ donation takes healthy organs and tissues from one person and transplants them into another. Every 16 minutes, a new name is added to the national organ transplant waiting list, which is filled with more than 100,000 people.

The organs from just one donor can save or help as many as 50 people. If you would like to be an organ donor, make sure your wishes are known

by registering with your state's donor registry, signing a donor card, or checking the box on the back of your driver's license.

To find your state's donor registry, go to www.organdonor.gov.

Fill out your organ donation wishes in the form below, so that all of your wishes are included in your Personal Planning Organizer.

I hereby make an anatomical gift to be effective upon my death.

☐ Any needed organs and tissues

☐ The following organs and tissues only _____

Name _____

Age _____ Blood Type _____ Date _____

Donor's Signature _____

Witness Signature _____

Witness Signature _____

I hereby make an anatomical gift to be effective upon my death.

☐ Any needed organs and tissues

☐ The following organs and tissues only _____

Name _____

Age _____ Blood Type _____ Date _____

Donor's Signature _____

Witness Signature _____

Witness Signature _____

financial information

People often have bank accounts, IRA's, stocks, bonds, and other investments, and neglect to tell family members about them. Every year, banks publish lists of accounts that people have forgotten. For your own security, we don't recommend that you write your passwords to your accounts in this book. However, make sure you give them to someone you trust.

In many states, if the money is not claimed within seven years, it will go to the government. Record all of your accounts here, so your investments are protected.

banking

Husband

Bank Name _____

Address _____

City _____ State _____ ZIP _____

Phone (____) _____

Web Address _____

Account No. _____

☐ Checking ☐ Savings ☐ Money Market
☐ CD ☐ Other: _____

Account No. _____

☐ Checking ☐ Savings ☐ Money Market
☐ CD ☐ Other: _____

Account No. _____

☐ Checking ☐ Savings ☐ Money Market
☐ CD ☐ Other: _____

safety deposit box

Husband

Bank Name _____

Address _____

City _____ State _____ ZIP _____

Phone (____) _____

Web Address _____

Box Number: _____

Keys Located Here: _____

Wife

Bank Name _____

Address _____

City _____ State _____ ZIP _____

Phone (____) _____

Web Address _____

Account No. _____

☐ Checking ☐ Savings ☐ Money Market
☐ CD ☐ Other: _____

Account No. _____

☐ Checking ☐ Savings ☐ Money Market
☐ CD ☐ Other: _____

Account No. _____

☐ Checking ☐ Savings ☐ Money Market
☐ CD ☐ Other: _____

Wife

Bank Name _____

Address _____

City _____ State _____ ZIP _____

Phone (____) _____

Web Address _____

Box Number: _____

Keys Located Here: _____



insurance

Husband

Life Insurance Co. _____

Web Address _____

Phone (____) _____ Policy No. _____

Policy Owner _____

Name of Insured _____

Beneficiary _____

Medical Insurance Co. _____

Web Address _____

Phone (____) _____ ID No. _____

Group No. _____

Home Owners _____

Web Address _____

Phone (____) _____ Policy No. _____

Property (ies) _____

Wife

Life Insurance Co. _____

Web Address _____

Phone (____) _____ Policy No. _____

Policy Owner _____

Name of Insured _____

Beneficiary _____

Medical Insurance Co. _____

Web Address _____

Phone (____) _____ ID No. _____

Group No. _____

Home Owners _____

Web Address _____

Phone (____) _____ Policy No. _____

Property (ies) _____

investments

» mutual funds

Husband

Fund Name _____

Account No. _____

Address _____

Phone (____) _____

Fund Name _____

Account No. _____

Address _____

Phone (____) _____

» stocks

Husband

Brokerage _____

Broker _____

Account No. _____

Web Address _____

Phone (____) _____ Email _____

Location of Certificates: _____

Wife

Fund Name _____

Account No. _____

Address _____

Phone (____) _____

Fund Name _____

Account No. _____

Address _____

Phone (____) _____

Wife

Brokerage _____

Broker _____

Account No. _____

Web Address _____

Phone (____) _____ Email _____

Location of Certificates: _____

» **401(k)**

Husband

Company _____

Account No. _____

Web Address _____

Phone (____) _____

Beneficiary (ies) _____

Wife

Company _____

Account No. _____

Web Address _____

Phone (____) _____

Beneficiary (ies) _____

» **ira/keogh**

Husband

Company _____

Account No. _____

Web Address _____

Phone (____) _____

Beneficiary (ies) _____

Wife

Company _____

Account No. _____

Web Address _____

Phone (____) _____

Beneficiary (ies) _____

» **trusts**

Husband

Fund Name _____

Account No. _____

Web Address _____

Phone (____) _____

Beneficiary (ies) _____

Wife

Fund Name _____

Account No. _____

Web Address _____

Phone (____) _____

Beneficiary (ies) _____

» **annuities**

Husband

Fund Name _____

Account No. _____

Web Address _____

Phone (____) _____

Beneficiary (ies) _____

Wife

Fund Name _____

Account No. _____

Web Address _____

Phone (____) _____

Beneficiary (ies) _____

» **real estate**

Husband

Primary Residence

Address _____

Lender _____

Email _____

Phone (____) _____ Loan #: _____

Wife

Primary Residence

Address _____

Lender _____

Email _____

Phone (____) _____ Loan #: _____

Secondary Residence, if any.

Address _____

Lender _____

Email _____

Phone (____) _____ Loan #: _____

Secondary Residence, if any.

Address _____

Lender _____

Email _____

Phone (____) _____ Loan #: _____

Investment Property, if any.

Address _____

Lender _____

Email _____

Phone (____) _____ Loan #: _____

Investment Property, if any.

Address _____

Lender _____

Email _____

Phone (____) _____ Loan #: _____



veterans & social security benefits

Knowing what government benefits you are entitled to and knowing how to collect them are important in estate planning.

Be aware that you must apply for these benefits and that you need to do so within the specified time period or you risk losing them.

veterans **benefits**

To facilitate receiving veterans benefits for which you may be eligible, you will need the following when you contact the Veterans Administration Office:

- Discharge Papers
- Service Serial Number
- Marriage License
- Children's Birth Certificates
- Death Certificate

More information can be found at the Department of Veterans Affairs web site:
www.vba.va.gov.

Record your service serial number(s) below.

Husband's Service Serial Number _____

Wife's Service Serial Number _____

Nearest Veterans Administration Office _____
Address

City State ZIP Phone

social security **benefits**

To be sure your Social Security payroll deductions have been properly credited to your account, review the annual statements you receive from the Social Security Administration. If you have not been receiving annual statements, request a complete statement of your social security earnings from the SSA.

You can either fill out and submit the proper form online at the SSA's web site, www.ssa.gov, or download Form SSA-7004 from the same web site if you prefer to mail it. Once you complete the form, send to:

*Social Security Administration
Wilkes-Barre
P.O. Box 7004
Wilkes-Barre, PA 18767-7004
Data Operations Center*

At the time of death, most people are eligible to receive a lump sum

cash benefit from the SSA, but you must apply for it within two years from the second anniversary of the insured person's death.

To apply for any Social Security benefits to which you may be entitled, you may be asked to supply a birth certificate, naturalization papers, U.S. military discharge paper(s), W-2 forms(s), and/or self-employment tax returns for the prior year(s).

Call the SSA at **1-800-772-1213** to schedule an appointment with your local office, and ask what documents you should bring with you. If you have trouble locating required documents, the SSA may be able to help you locate them.

More information can be found at the Social Security Administration's web site, **www.ssa.gov**.

Husband's Name _____

Social Security Number _____

Wife's Name _____

Social Security Number _____



funeral & cemetery arrangements

By planning your funeral and cemetery arrangements in advance, you can help your loved ones with the process and give them precious peace of mind, as well as help eliminate emotional overspending.

When you record your wishes on the following pages, your loved ones will know exactly what you want, rather than having to guess what you might have wanted.

67 things

When there is a death, the family almost always experiences shock, grief, and a sudden change in their lives.

The staggering number of complicated arrangements for a funeral and burial make it worse. And very few people are aware of the high cost and complexity of last minute arrangements.

On the next page is a list of 67 things survivors must face when there is a death in the family. With the help of this guide and your funeral home and cemetery counselors or advisors, many of these last-minute needs can be arranged in advance. You can then be assured that your family will be spared much of the expense and burden.

peace of mind

Consider going one step beyond recording your wishes to actually making pre-arrangements with the funeral home and cemetery of your choice.

When you do this, you'll lock in rates at today's prices and pay for what you want in advance, such as the casket, the vault, the burial space and the memorial. You'll give your loved ones priceless peace of mind.

67 things that must be done

notify immediately

1. The doctor or doctors
2. The funeral director
3. The cemetery
4. Relatives
5. Friends
6. Deceased's employer
7. Employers of relatives missing work
8. Insurance agents (life, health, etc.)
9. Attorney & accountant
10. Clergy and house of worship

decide & arrange immediately

11. Select funeral director*
12. Select cemetery*
13. Purchase burial property*
14. Select the casket*
15. Select the vault*
16. Select the memorial*
17. Decide location of service
18. Select clergy or person you want to officiate
19. Provide information for eulogy
20. Select flowers
21. Arrange for music & visitation
22. Arrange type of service (military, etc.)
23. Provide obituary to

newspaper

24. Answer calls, messages, & letters
25. Get addresses for thank you cards
26. Meet with funeral director
27. Check and sign burial permit
28. Arrange for special memorial services
29. Check the will for special wishes
30. Order death certificate
31. Look after house, children and pets.

secure vital statistics

All of this information is required for the Death Certificate issued by the Board of Health.

32. Name, home address & telephone
33. How long in state
34. Business name, address, phone
35. Occupation and title
36. Social Security Number
37. Veteran's Serial Number
38. Date of birth
39. Place of birth
40. U.S. citizenship
41. Father's name
42. Father's birthplace
43. Mother's maiden name
44. Mother's birthplace
45. Religious name (if any)

collect documents

All of this information is required to establish rights for insurance, pension, Social Security, etc.).

46. Funeral certificate
47. Deed to burial property
48. Will
49. Legal proof of age or Birth Certificate
50. Social Security card or number
51. Marriage license
52. Citizenship papers
53. Insurance policies
54. Bank books
55. Deeds to property
56. Bill of sale of car
57. Tax returns, receipts, checks
58. Veteran's discharge certificate
59. Disability & pension claims

pay the following

60. Funeral home services*
61. Burial plot, mausoleum or niche*
62. Vault*
63. Casket*
64. Interment Charge (opening and closing of burial space)*
65. Clergy
66. House of worship
67. Transportation

*These items can all be taken care of in advance of need.

funeral preferences

husband

Funeral Establishment _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Web Address _____

Type of Casket _____

Place of Memorial Service _____

Clergy/Person to Officiate _____

Clothing _____

Favorite Flower _____

Psalm or other Passage _____

Embalming: ☐ Yes ☐ No - Viewing: ☐ Yes ☐ No - Eulogy: ☐ Yes ☐ No - Glasses On: ☐ Yes ☐ No

Memorial Service: ☐ Yes ☐ No - Wedding Ring Returned After the Service: ☐ Yes ☐ No

wife

Funeral Establishment _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Web Address _____

Type of Casket _____

Place of Memorial Service _____

Clergy/Person to Officiate _____

Clothing _____

Favorite Flower _____

Psalm or other Passage _____

Embalming: ☐ Yes ☐ No - Viewing: ☐ Yes ☐ No - Eulogy: ☐ Yes ☐ No - Glasses On: ☐ Yes ☐ No

Memorial Service: ☐ Yes ☐ No - Wedding Ring Returned After the Service: ☐ Yes ☐ No

relatives or friends who can assist the family

Name _____ **Relationship** _____

(____) _____ (____) _____ (____) _____
Home Phone Office Phone Cell Phone Email Address

Name _____ **Relationship** _____

(____) _____ (____) _____ (____) _____
Home Phone Office Phone Cell Phone Email Address

Name _____ **Relationship** _____

(____) _____ (____) _____ (____) _____
Home Phone Office Phone Cell Phone Email Address

Personal History

Important Documents

Bank Accounts,
Investments & Insurance

Veterans & Social
Security Benefits

Funeral & Cemetery
Arrangements

cemetery preferences

Costs will increase as the years go by. Making arrangements now will freeze costs and stop inflation. If this section is left blank, the burden of making last minute cemetery arrangements will fall on those you least want to hurt. To relieve your

family from this unnecessary stress and expense at one of the most difficult times in their lives, the following burial arrangements should be made in advance and recorded here.

Burial Property Location (Husband)

Name of Cemetery/Mausoleum _____
Address _____
City _____ State _____ Zip _____
Phone (____) _____ Web Address _____

Burial Property Location (Wife)

Name of Cemetery/Mausoleum _____
Address _____
City _____ State _____ Zip _____
Phone (____) _____ Web Address _____

Cemetery Options (Husband)

Property Selection _____
Mausoleum _____
Private Estate _____
Burial Space _____
Lawn Crypt _____
Other _____

Cemetery Options (Wife)

Property Selection _____
Mausoleum _____
Private Estate _____
Burial Space _____
Lawn Crypt _____
Other _____

Cemetery Merchandise Selection (Husband)

Memorial _____
Monument _____
Outer Burial Container _____
Other _____

Cemetery Merchandise Selection (Wife)

Memorial _____
Monument _____
Outer Burial Container _____
Other _____

Cremation Selection (Husband)

Property Section _____
Columbarium Niches _____
Urn _____
Other _____

Cremation Selection (Wife)

Property Section _____
Columbarium Niches _____
Urn _____
Other _____

people to contact

List all of the people you want notified of your funeral arrangements at the time of your death. (Examples include family, friends, neighbors, co-workers, employers, and the like.)

husband

Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email

wife

Name	Relationship	Phone ()	Email
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Name	Relationship	Phone ()	Email
Name	Relationship	Phone ()	Email

a letter to
our loved ones

To Our Loved Ones,

Because of our love for you and for each other, we have completed this Personal Planning Organizer.

Our sincere desire is to relieve you from anxiety, expense, and inconvenience at the time of our death. We have made our cemetery and funeral arrangements in advance so that you would not be forced to make these sudden and costly decisions on a day already filled with sorrow.

It is especially important that we let you know how gratified we feel that we have been able to make these decisions. We know you are now protected against loss of insurance, government benefits, and personal possessions that we want you to have.

Our estate now being in order gives us peace of mind. With these arrangements completed, we know they will help keep alive the warm and tender memories of the time we have had together.

With Our Warmest Thoughts & Love,

Signature

Signature

Date

Date

Personal Planning Organizer

5 Easy Sections

Make Sure Those You Care About the Most Know:

1. Your wishes and preferences.
2. The location of your important documents.
3. Where to find your retirement accounts and investments.
4. The location of your insurance policies.
5. How to claim Veterans and Social Security benefits.

Complete Yours Today!

