

# MY LOVE LETTER

*I write this letter now to help you, who I love, at a time when I can't be there to guide you. In an effort to make the next few days / weeks / months easier, I've put together vital information to help you stay organized in dealing with the many details you will need to handle.*

My Full Legal Name: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Location of: (address and contact person included where appropriate)

Safe Deposit Box And Key: \_\_\_\_\_

Insurance Papers: \_\_\_\_\_

Financial Documents: \_\_\_\_\_

Computer Passwords: \_\_\_\_\_

Religious Documents: \_\_\_\_\_

Other Documents (Divorce Decree, Adoption Papers, etc): \_\_\_\_\_

Emergency Cash In House: \_\_\_\_\_

Keys to Safe: \_\_\_\_\_

Check Book and Register: \_\_\_\_\_

Bank Accounts: \_\_\_\_\_

Investment Accounts: \_\_\_\_\_

Credit Card Accounts: \_\_\_\_\_

Mortgage Company: \_\_\_\_\_

Last Will & Testament: \_\_\_\_\_

Burial Plot: \_\_\_\_\_

My Address Book: \_\_\_\_\_

Insurance Policies: (address and agent information included where appropriate)

Term Life: \_\_\_\_\_

Whole Life: \_\_\_\_\_

Accidental Death: \_\_\_\_\_

Long Term Care: \_\_\_\_\_

Critical Illness: \_\_\_\_\_

Final Expense: \_\_\_\_\_

Health: \_\_\_\_\_

Homeowners Insurance: \_\_\_\_\_

Car Insurance: \_\_\_\_\_

Special Assets: (appraisal value and year of appraisal included if appropriate)

Real Estate: \_\_\_\_\_

Jewelry: \_\_\_\_\_

Musical Instruments: \_\_\_\_\_

Silver: \_\_\_\_\_

Art: \_\_\_\_\_

Burial Or Cremation Wishes :

Church: \_\_\_\_\_

Pallbearers: \_\_\_\_\_

Music To Be Played: \_\_\_\_\_

Outfit To Be Worn: \_\_\_\_\_

Stories To Be Told And By Whom: \_\_\_\_\_

Trusted Advisors & Consultants: (contact information included)

Religious: \_\_\_\_\_

Financial: \_\_\_\_\_

Legal: \_\_\_\_\_

Tax: \_\_\_\_\_

Favorite Charities: \_\_\_\_\_

Special Bequeaths:

Item: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

Item: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

Item: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

*This document is intended to give guidance in a time of mourning, it is not intended to replace my will or other planning documents.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_