

ANNEX C IN CASE OF EMERGENCY
The Master Document and Personal Information Registry Template
of

Revised _____ (Pencil Entry)

In the event of my death or incapacitation, the following information may help manage my personal affairs and the notification of my relatives.

1. Personal Information:

Full Name: _____ Social Security Number: ____ - ____ - _____

Date of Birth _____ Location: _____

In the event of an emergency, contact:

Name _____ Relationship _____ Telephone (____) _____

Name _____ (Alt) Relationship _____ Telephone (____) _____

Instructions for my obituary and funeral. (Provide detailed instructions on the reverse side of this sheet)

Family Member	Location	Telephone Number

Important Documents

Document	Location
Birth Certificate	
Insurance Policies	
Passport	
Military Discharge Papers	
Vaccination Records	
Marriage License or Divorce Decree	
Power of Attorney	
Household Inventory (video/flash drive)	
External Drives, Flash Drives, Tax Records	
Other	

The Master Document and Personal Information Registry Template
(Cont.)

2. Safe Deposit Boxes or Security Containers

Depository Address	Owner	Person with Power of Attorney	Contents
Box #1			
Box #2			

3. Bank Accounts

Bank Name/Address	Type of Account	Account #	Branch

4. Investments

Type (Stocks, Bonds, CDs Mutual Funds, etc.)	Broker or location of Certificates	Location of Account Statements

For all investments, indicate if IRA or other tax-favored savings. Note the maturation date of CDs or Bonds. Update the list at least annually.

5. Employee Savings, Retirement, or Stock Plans

Employer	Type of Plan	Value	Beneficiary

6. Real Estate Holdings

Property Address and Description	Location of Deed	Name/Address of Mortgage Lender

If the mortgage is paid in full, show the date and location of pertinent documents

The Master Document and Personal Information Registry Template
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7. Children's Accounts and Trusts

Child's Name	Type of Account Or Trust	Where Funds are invested	Custodian's Name/Address

8. Life Insurance

Insurance Company	Policy #	Type of Coverage	Location of Policy

9. Health Insurance

Insurance Company	Policy #	Type of Coverage	Agent's Name and Phone Number

10. Casualty Insurance (*Homeowner's or Renter's, Auto, etc.*)

Insurance Company	Policy #	Type	Policy Limit	Agent's Name and Phone #

11. Income Tax Records

Return and Documents	Location
<i>Current Year</i>	
<i>Last Year</i>	
<i>Prior Years</i>	

12. Credit Cards or Loans

Type of Card or Loan	Issuer or Lender	Account #	Location of Statement

Indicate money borrowed from friends or relatives. Show telephone number to call if a credit card is lost or stolen.

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(Cont.)

13. Last Will and Testament or Living Trust *(Pencil Entry)*

Location of Original Document	Personal Representative	Address/Phone #

14. Pre-arranged Funeral and Burial Plot (if Applicable)

Location of Deed and Burial Instructions

Cemetery

Mortuary

15. Advisors *(Pencil Entries)*

	Name	Address	Telephone #
Bishop			
Lawyer			
Stockbroker			
Life Insurance Agent			
Health Insurance Agent			
Tax Accountant			
Closest Friend			
Minister/Pastor			
Other			

16. Organizing your Records. If you must evacuate your home quickly, you may not have time to gather important documents or priceless family photographs. As you prepare this Master Document and Personal Information Registry, consider placing all your important documents in one location and easily transported. While your possessions can be replaced, documenting your loss will be more difficult if you haven't prepared an inventory worksheet or taken photographs of your belongings. Keeping good records and organizing them is an essential method in being prepared for emergencies or in the unfortunate event of your death or incapacitation.

When completed, this document contains very sensitive information. Consider copying all essential documents on an encrypted flash drive, including The Master Document, Personal Information Registry, and household inventory and video.

17. Special Instructions or Explanatory Remarks. *(Attach an additional page outlining the information that might be helpful to someone managing your affairs temporarily or upon your death. For example, you might want to explain certain benefits (Veteran, Social Security, Union, etc.) available to your survivors. Attach a copy of your Affidavit that clearly outlines your desire to donate usable organs, your preference for extraordinary life support measures, or the disposition of personal items not shown in your Last Will and Testament. Discuss the contents of this document with your family, Personal Representative, or Trustee). Seek Legal counsel for complicated estates.*

Revised: June 29, 2022 @ 1600T