

# YOUR PERSONAL RECORDS ORGANIZER



*Your personal records organizer* provided by London Life helps you organize important information about your personal and financial affairs in one handy location. You'll find it easy to update once a year. It will also help your survivors wind up your personal affairs after your death.

Keep this records organizer in a safe place with your other important papers. Let your family know where it's located.

If you include information here about a living will or organ donation, tell your family you've made those arrangements. You'll probably also keep information about this in your purse or wallet.

Please note: In Quebec, executors are known as liquidators. Accordingly, references to "executors" include liquidators in Quebec. Also in Quebec, some estate planning duties may be performed by either lawyers or notaries, with some being more typically performed by notaries.

This organizer is available both as a printed piece and as an electronic Word document. Please let your financial security advisor know which you prefer.

# YOUR PERSONAL RECORDS

## NEXT OF KIN

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

## OTHERS TO NOTIFY IN THE EVENT OF DEATH

### Executor

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

### Financial security advisor

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

### Employer or business partners

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

### Lawyer

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

### Accountant

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

### Doctor

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

### Dentist

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

### Bank or credit union

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

### Stockbroker

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

### Trust officer

Name\_\_\_\_\_

Address\_\_\_\_\_

Telephone\_\_\_\_\_Email\_\_\_\_\_

## YOUR WILL

Do you have a will?    ☐ Yes    ☐ No

The original is located\_\_\_\_\_

A copy is located\_\_\_\_\_

The will was last updated\_\_\_\_\_

## LIVING WILL

Do you have a living will (if allowed in your province)?    ☐ Yes    ☐ No

Living will is kept\_\_\_\_\_

## POWER OF ATTORNEY

Do you have a power of attorney? ☐ Yes ☐ No

Who? \_\_\_\_\_

Arrangements are made through \_\_\_\_\_

The original is located \_\_\_\_\_

A copy is located \_\_\_\_\_

## ORGAN DONATION

Do you want to donate your organs or body for transplant, medical research or education? ☐ Yes ☐ No

If yes, have you explained this in your: ☐ Will ☐ Organ donor card ☐ Driver's license

## FUNERAL ARRANGEMENTS

Have you made funeral arrangements? ☐ Yes ☐ No

Funeral home and address \_\_\_\_\_

Telephone \_\_\_\_\_

Have you set out instructions for burial, cremation or funeral? ☐ Yes ☐ No

Are these instructions in your will? ☐ Yes ☐ No

In a letter? ☐ Yes ☐ No

Instructions are located \_\_\_\_\_

Do you own a cemetery plot? ☐ Yes ☐ No

Have you provided for its ongoing care? ☐ Yes ☐ No

The plot is located \_\_\_\_\_

The deed to it is kept \_\_\_\_\_

## PERSONAL INFORMATION

Date of birth\_\_\_\_\_

Place of birth\_\_\_\_\_

Birth certificate is located\_\_\_\_\_

Social insurance or social security number\_\_\_\_\_

Citizenship papers?     ☐ Yes   ☐ No

They are located\_\_\_\_\_

Marriage certificate?     ☐ Yes   ☐ No

It is located\_\_\_\_\_

Military service?     ☐ Yes   ☐ No

Discharge papers are located\_\_\_\_\_

Country served\_\_\_\_\_

Veteran's number\_\_\_\_\_

## PREVIOUS EMPLOYERS

Put the current or most recent employer first.

Employer\_\_\_\_\_

Years\_\_\_\_\_

Address\_\_\_\_\_

Email\_\_\_\_\_

Employer\_\_\_\_\_

Years\_\_\_\_\_

Address\_\_\_\_\_

Email\_\_\_\_\_

Employer\_\_\_\_\_

Years\_\_\_\_\_

Address\_\_\_\_\_

Email\_\_\_\_\_

## BANK ACCOUNTS

List all your accounts, so your executor or family can find the money in them.

Bank, credit union\_\_\_\_\_

Branch\_\_\_\_\_

Account number\_\_\_\_\_

Type\_\_\_\_\_

Bank, credit union\_\_\_\_\_

Branch\_\_\_\_\_

Account number\_\_\_\_\_

Type\_\_\_\_\_

Bank, credit union\_\_\_\_\_

Branch\_\_\_\_\_

Account number\_\_\_\_\_

Type\_\_\_\_\_

Bank, credit union\_\_\_\_\_

Branch\_\_\_\_\_

Account number\_\_\_\_\_

Type\_\_\_\_\_



## FINANCIAL COMMITMENTS

### Rent or mortgage payments

Amount \$ \_\_\_\_\_

Due date \_\_\_\_\_

Lender \_\_\_\_\_

Address \_\_\_\_\_

### Outstanding loans

Amount \$ \_\_\_\_\_ Due date \_\_\_\_\_

Lender \_\_\_\_\_

Address \_\_\_\_\_

Amount \$ \_\_\_\_\_ Due date \_\_\_\_\_

Lender \_\_\_\_\_

Address \_\_\_\_\_

### Bills paid through automatic payment plans

Amount \$ \_\_\_\_\_

Account number \_\_\_\_\_ Due date \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Amount \$ \_\_\_\_\_

Account number \_\_\_\_\_ Due date \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Amount \$ \_\_\_\_\_

Account number \_\_\_\_\_ Due date \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Amount \$ \_\_\_\_\_

Account number \_\_\_\_\_ Due date \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

#### OTHER FINANCIAL OBLIGATIONS OR COMMITMENTS

For \_\_\_\_\_

Located \_\_\_\_\_

For \_\_\_\_\_

Located \_\_\_\_\_

#### LIFE INSURANCE

##### Policies you own on your own life

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

### Policies you own on others

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_ Name of insured \_\_\_\_\_

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_ Name of insured \_\_\_\_\_

### Policies others own on your life

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

### Group or association life insurance

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

### CRITICAL ILLNESS INSURANCE

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

## DISABILITY INSURANCE

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

## HOSPITAL AND MEDICAL INSURANCE

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_ Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

## INVESTMENTS

### Pension plans, registered plans

Are you a member of a registered pension plan? ☐ Yes ☐ No

Carrier name and address \_\_\_\_\_

Carrier name and address \_\_\_\_\_

Information about these plans is located \_\_\_\_\_

Do you have a registered retirement savings plan (RRSP)? ☐ Yes ☐ No

Carrier name and address \_\_\_\_\_

Carrier name and address \_\_\_\_\_

Information about these plans is located \_\_\_\_\_

Are you a member of a deferred profit-sharing plan? ☐ Yes ☐ No

Carrier name and address\_\_\_\_\_

Carrier name and address\_\_\_\_\_

Information about these plans is located\_\_\_\_\_

### Segregated fund policies, mutual funds, registered education savings plans (RESPs)

Do you have investment funds or RESPs? ☐ Yes ☐ No

#### FUND A

Policy number\_\_\_\_\_

Carrier name and address\_\_\_\_\_

Do you invest regularly using automatic withdrawals? ☐ Yes ☐ No How often?\_\_\_\_\_

Where is it taken from?\_\_\_\_\_

Do you receive income? ☐ Yes ☐ No How often?\_\_\_\_\_

Where is it deposited?\_\_\_\_\_

Information about these investments is located\_\_\_\_\_

#### FUND B

Policy number\_\_\_\_\_

Carrier name and address\_\_\_\_\_

Do you invest regularly using automatic withdrawals? ☐ Yes ☐ No How often?\_\_\_\_\_

Where is it taken from?\_\_\_\_\_

Do you receive income? ☐ Yes ☐ No How often?\_\_\_\_\_

Where is it deposited?\_\_\_\_\_

Information about these investments is located\_\_\_\_\_

## FUND C

Policy number\_\_\_\_\_

Carrier name and address\_\_\_\_\_

Do you invest regularly using automatic withdrawals? ☐ Yes ☐ No How often?\_\_\_\_\_

Where is it taken from?\_\_\_\_\_

Do you receive income? ☐ Yes ☐ No How often?\_\_\_\_\_

Where is it deposited?\_\_\_\_\_

Information about these investments is located\_\_\_\_\_

### Tax-free savings account (TFSA)

Do you have a TFSA? ☐ Yes ☐ No Do you have more than one TFSA? ☐ Yes ☐ No

Where is it deposited / invested?\_\_\_\_\_

Carrier name and address\_\_\_\_\_

Policy/plan number\_\_\_\_\_

Information about these plans is located\_\_\_\_\_

Do you invest regularly? ☐ Yes ☐ No

### Registered retirement income funds (RRIFs), annuity contracts

Do you have any RRIFs or annuities? ☐ Yes ☐ No

## FUND A

Policy number\_\_\_\_\_

Carrier name and address\_\_\_\_\_

Do you receive income? ☐ Yes ☐ No How often?\_\_\_\_\_

Where is it deposited?\_\_\_\_\_

Information about these annuities is located\_\_\_\_\_

## FUND B

Policy number\_\_\_\_\_

Carrier name and address\_\_\_\_\_

Do you receive income? ☐ Yes ☐ No How often?\_\_\_\_\_

Where is it deposited?\_\_\_\_\_

Information about these annuities is located\_\_\_\_\_

### Bonds and government investments

Do you have any government bonds? ☐ Yes ☐ No Registered in your name? ☐ Yes ☐ No

Type of bond\_\_\_\_\_

Bearer\_\_\_\_\_

Co-registered with\_\_\_\_\_

Serial numbers\_\_\_\_\_

The bonds are located\_\_\_\_\_

### Securities

Do you own any stocks or bonds? ☐ Yes ☐ No

Information about them is located\_\_\_\_\_

Did you acquire any of them by gift or inheritance? ☐ Yes ☐ No

Are any of your securities pledged for loans? ☐ Yes ☐ No

Financial institution\_\_\_\_\_

## RESIDENCE AND REAL ESTATE

Type of real estate (house, condo, vacation home, etc.)	Title is held by (select one)	Is there a mortgage?	Mortgage is held by
	<input type="radio"/> You <input type="radio"/> Spouse <input type="radio"/> Joint	<input type="radio"/> Yes <input type="radio"/> No	
	<input type="radio"/> You <input type="radio"/> Spouse <input type="radio"/> Joint	<input type="radio"/> Yes <input type="radio"/> No	
	<input type="radio"/> You <input type="radio"/> Spouse <input type="radio"/> Joint	<input type="radio"/> Yes <input type="radio"/> No	

### Where are the following located?

Deeds\_\_\_\_\_

Copy of mortgages\_\_\_\_\_

Property insurance policies\_\_\_\_\_

Land surveys\_\_\_\_\_

Property tax receipts\_\_\_\_\_

Leases\_\_\_\_\_

Maintenance details\_\_\_\_\_

### Personal property

List all vehicles you own\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Vehicle registrations are located\_\_\_\_\_

Bill of sale and insurance papers are located\_\_\_\_\_

Jewelry, stamp collections, coin collections, etc., are located\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are household furnishings insured? ☐ Yes ☐ No

Bill of sale, inventory, and insurance policies for household furnishings are located\_\_\_\_\_



## DEBTORS, CREDITORS

### People who owe you money

Name\_\_\_\_\_

Address\_\_\_\_\_

Email\_\_\_\_\_

Amount \$ \_\_\_\_\_ Date\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

Email\_\_\_\_\_

Amount \$ \_\_\_\_\_ Date\_\_\_\_\_

### People to whom you owe money, other than previously listed

Name\_\_\_\_\_

Address\_\_\_\_\_

Email\_\_\_\_\_

Amount \$ \_\_\_\_\_ Date\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

Email\_\_\_\_\_

Amount \$ \_\_\_\_\_ Date\_\_\_\_\_

Loan agreements or promissory notes are located\_\_\_\_\_

### Safe deposit box

Do you have a safe deposit box? ☐ Yes ☐ No

Location\_\_\_\_\_

Names of others who have access to it\_\_\_\_\_

Location of the keys\_\_\_\_\_

List of contents is kept\_\_\_\_\_

### Charitable gifts

For\_\_\_\_\_

Address\_\_\_\_\_

For\_\_\_\_\_

Address\_\_\_\_\_

### Contractual obligations

For\_\_\_\_\_

Located\_\_\_\_\_

For\_\_\_\_\_

Located\_\_\_\_\_

For\_\_\_\_\_

Located\_\_\_\_\_

For\_\_\_\_\_

Located\_\_\_\_\_

## Trust funds

Have you created any trusts?      ☐ Yes    ☐ No

Purpose\_\_\_\_\_

Trust agreement was drawn up by\_\_\_\_\_

Trust papers are located\_\_\_\_\_

## Income tax

Tax advisor's name\_\_\_\_\_

Telephone\_\_\_\_\_

Address\_\_\_\_\_

Email\_\_\_\_\_

Your tax and supporting information is located\_\_\_\_\_

## Memberships

List all memberships in clubs and associations and publication subscriptions.

Name\_\_\_\_\_

Address\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

This personal records organizer is provided as a convenience and the accuracy and completeness of information in it is not guaranteed by London Life Insurance Company.

