

## Upon the Event of My Death

This information is provided for my family upon the event of my death. This information will be filed where it can be easily found, and/or with my church, and/or my attorney. For my heirs information, I will notify them that this form has been completed and where it can be found.

Name (print): \_\_\_\_\_ Date Form Completed: \_\_\_\_\_

**Full Name:** \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

**Address:** \_\_\_\_\_

Address: \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**Place of Birth:** \_\_\_\_\_

Place of Birth: \_\_\_\_\_

**Baptism Date:** \_\_\_\_\_

Baptism Date: \_\_\_\_\_

**Occupation:** \_\_\_\_\_

Occupation: \_\_\_\_\_

**SSN:** \_\_\_\_\_

Location of Will: \_\_\_\_\_

Date of Last Will Executed: \_\_\_\_\_

Representative's Name & Address: \_\_\_\_\_

Living Siblings – Name, Address, Phone and/or E-mail:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Persons to Notify Upon My Death – Name, Address, Phone and/or E-mail:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_

Date & Place of Birth: \_\_\_\_\_ Living? Yes  No

Father's Full Name: \_\_\_\_\_

Date & Place of Birth: \_\_\_\_\_ Living? Yes  No

**Bank Accounts / Savings Accounts / Other Income-Producing Accounts**

Name of Institution	Type	Account #
_____	_____	_____
_____	_____	_____

Safe / Safety Deposit Box Number & Location: \_\_\_\_\_

Location of Safe / Safety Deposit Box Key: \_\_\_\_\_

Armed Forces – Date(s) of Service: \_\_\_\_\_ Branch: \_\_\_\_\_

Serial #: \_\_\_\_\_ Discharge Certificate Location: \_\_\_\_\_

Attorney Name & Address: \_\_\_\_\_

Investment Counselor and/or Banker Name & Address: \_\_\_\_\_

Insurance Agent's Name & Address: \_\_\_\_\_

<b>Life Insurance Co.</b>	<b>Amount</b>	<b>Certificate #</b>	<b>Beneficiary</b>
_____	_____	_____	_____
_____	_____	_____	_____

Location of Insurance Policies: \_\_\_\_\_

Credit Card Accounts:

_____	Account # _____
_____	Account # _____
_____	Account # _____

Online Accounts:

User ID _____	Password _____
User ID _____	Password _____
User ID _____	Password _____
User ID _____	Password _____
User ID _____	Password _____

_____ <i>Signature</i>	_____ <i>Witness</i>	_____ <i>Date</i>
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