



Estate planning

# Personal records organizer



Organize important information about your personal and financial affairs in one handy location

Name \_\_\_\_\_

Date \_\_\_\_\_

# How to use this organizer

Use this organizer as a handy master index of your personal and financial records.

- In each section, fill in names, addresses and other key details. Include more information, or less, based on what's important to you. Then write down the location of the documents that contain additional details.
- Keep this organizer in a secure place with your other important papers. Let your family know where it is.
- Give your estate plan a yearly checkup with your advisor. (You can use our checkup form 17-8148). If you find anything's changed, update it in this organizer.

Organizing your information is an important step in your estate plan.

You can be confident your family and your executor will be able to find the information necessary to manage your affairs.

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# Basic personal information

## Your full legal name

Date and place of birth

Birth certificate is located

Social insurance number and location of card  
(also, if applicable, U.S. social security number)

Countries of which you are a citizen

Citizenship papers, if applicable, are located

Passport(s) are located

Driver's licence is located

Marriage certificate, if applicable, is located

Divorce papers, if applicable, are located

# Key contacts

## Immediate family

<b>Name</b>	Relationship
Address	Phone
	Email

<b>Name</b>	Relationship
Address	Phone
	Email

<b>Name</b>	Relationship
Address	Phone
	Email

<b>Name</b>	Relationship
Address	Phone
	Email

<b>Name</b>	Relationship
Address	Phone
	Email



## Other key contacts

You can include additional contacts at the end of this section.

### Executor

Your executor is the person you name to manage your estate after you die. In Quebec, executors are called liquidators.

Name	Address
Phone, email	

### Advisor

Name	Address
Phone, email	

### Employer or business partner

Name	Address
Phone, email	

### Lawyer

Name	Address
Phone, email	

### Notary

In Quebec, some estate-related tasks are typically performed by notaries, instead of lawyers.

Name	Address
Phone, email	

### Accountant

Name	Address
Phone, email	

### Doctor

Name	Address
Phone, email	

### Dentist

Name	Address
Phone, email	

### Bank or credit union

Name	Address
Phone, email	

### Stockbroker

Name	Address
Phone, email	



### Trust officer

Name \_\_\_\_\_ Address \_\_\_\_\_  
Phone, email \_\_\_\_\_

### Other contacts 1

Relationship \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_  
Phone, email \_\_\_\_\_

### Other contacts 2

Relationship \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_  
Phone, email \_\_\_\_\_

### Other contacts 3

Relationship \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_  
Phone, email \_\_\_\_\_

## Your will and powers of attorney

Do you have a will?  Yes  No

Date of will (when last updated) \_\_\_\_\_  
Original document is located \_\_\_\_\_  
A copy is located \_\_\_\_\_  
Type of will:  notarized  witnessed  handwritten (also called “holograph”) \_\_\_\_\_

Do you have a living will or power of attorney for personal care?  Yes  No

Your legal representative for personal care \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Original document is located \_\_\_\_\_  
A copy is located \_\_\_\_\_

Do you have a power of attorney for property?  Yes  No

Your legal representative for property \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Law firm \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_  
Original document is located \_\_\_\_\_  
A copy is located \_\_\_\_\_

If in Quebec, do you have a protection mandate in case of mental incapacity?  Yes  No

Your legal representative \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Law firm \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_



# Funeral arrangements and organ donation

Have you made funeral arrangements?  Yes  No

Funeral home

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Address

Phone

Email

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

Where are these instructions written?  Your will  A letter

---

Document is located

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Do you own a cemetery plot?  Yes  No

Plot is located

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Have you provided for its ongoing care?  Yes  No

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Deed to the plot is located

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

Where have you explained this?

Will  Organ donor card  Driver's licence  Your province's online donor registry

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## Taxes

Do you file your taxes yourself?  Yes  No

Tax advisor

---

Address

Phone

Email

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Tax information and supporting data are located

---



# Employers, volunteer work, military service

## Most recent employer

Address	Starting year – ending year
	Phone
	Email

## Employer 2

Address	Starting year – ending year
	Phone
	Email

## Employer 3

Address	Starting year – ending year
	Phone
	Email

## Employer 4

Address	Starting year – ending year
	Phone
	Email

Have you done volunteer work?  Yes  No

## Organization 1

Address	Starting year – ending year
	Phone
	Email

## Organization 2

Address	Starting year – ending year
	Phone
	Email

## Organization 3

Address	Starting year – ending year
	Phone
	Email

## Organization 4

Address	Starting year – ending year
	Phone
	Email

Have you performed military service?  Yes  No

Country served	Veteran's #
Discharge papers are located	



# Bank, credit union accounts

## Account 1

Bank, credit union	Branch
Type of account <sup>1</sup>	Account #
Address	Phone
	Email

## Account 2

Bank, credit union	Branch
Type of account <sup>1</sup>	Account #
Address	Phone
	Email

## Account 3

Bank, credit union	Branch
Type of account <sup>1</sup>	Account #
Address	Phone
	Email

## Account 4

Bank, credit union	Branch
Type of account <sup>1</sup>	Account #
Address	Phone
	Email

## Account 5

Bank, credit union	Branch
Type of account <sup>1</sup>	Account #
Address	Phone
	Email

## Account 6

Bank, credit union	Branch
Type of account <sup>1</sup>	Account #
Address	Phone
	Email

<sup>1</sup> For example, chequing, savings.



# Scheduled payments

## Payment 1

Type of payment <sup>2</sup>	Paid to
Address	Phone
	Email
Account #	Amount \$
Due date	Automatic payment plan? <input type="checkbox"/> Yes <input type="checkbox"/> No

## Payment 2

Type of payment <sup>2</sup>	Paid to
Address	Phone
	Email
Account #	Amount \$
Due date	Automatic payment plan? <input type="checkbox"/> Yes <input type="checkbox"/> No

## Payment 3

Type of payment <sup>2</sup>	Paid to
Address	Phone
	Email
Account #	Amount \$
Due date	Automatic payment plan? <input type="checkbox"/> Yes <input type="checkbox"/> No

## Payment 4

Type of payment <sup>2</sup>	Paid to
Address	Phone
	Email
Account #	Amount \$
Due date	Automatic payment plan? <input type="checkbox"/> Yes <input type="checkbox"/> No

## Payment 5

Type of payment <sup>2</sup>	Paid to
Address	Phone
	Email
Account #	Amount \$
Due date	Automatic payment plan? <input type="checkbox"/> Yes <input type="checkbox"/> No

<sup>2</sup> For example, mortgage, rent, loan, bill.



## Scheduled payments, continued

### Payment 6

Type of payment <sup>2</sup>	Paid to
Address	Phone
	Email
Account #	Amount \$
Due date	Automatic payment plan? <input type="checkbox"/> Yes <input type="checkbox"/> No

### Payment 7

Type of payment <sup>2</sup>	Paid to
Address	Phone
	Email
Account #	Amount \$
Due date	Automatic payment plan? <input type="checkbox"/> Yes <input type="checkbox"/> No

### Payment 8

Type of payment <sup>2</sup>	Paid to
Address	Phone
	Email
Account #	Amount \$
Due date	Automatic payment plan? <input type="checkbox"/> Yes <input type="checkbox"/> No

### Payment 9

Type of payment <sup>2</sup>	Paid to
Address	Phone
	Email
Account #	Amount \$
Due date	Automatic payment plan? <input type="checkbox"/> Yes <input type="checkbox"/> No

### Payment 10

Type of payment <sup>2</sup>	Paid to
Address	Phone
	Email
Account #	Amount \$
Due date	Automatic payment plan? <input type="checkbox"/> Yes <input type="checkbox"/> No

<sup>2</sup> For example, mortgage, rent, loan, bill.



# Debtors and creditors

## People who owe you money

<b>Debtor 1</b>	Amount \$
Address	Date of loan
	Phone, email

<b>Debtor 2</b>	Amount \$
Address	Date of loan
	Phone, email

<b>Debtor 3</b>	Amount \$
Address	Date of loan
	Phone, email

## People you owe money to

<b>Creditor 1</b>	Amount \$
Address	Date of loan
	Phone, email

<b>Creditor 2</b>	Amount \$
Address	Date of loan
	Phone, email

<b>Creditor 3</b>	Amount \$
Address	Date of loan
	Phone, email

## Loan agreements and promissory notes are located

## Other financial commitments and contractual obligations

<b>Description of commitment or obligation 1</b>
Information is located

<b>Description of commitment or obligation 2</b>
Information is located

<b>Description of commitment or obligation 3</b>
Information is located



# Insurance: Life insurance

## Policies you own on your own life

### Policy 1

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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### Policy 2

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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<hr/>	

### Policy 3

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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<hr/>	

### Policy 4

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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## Policies you own on the lives of others

### Policy 1

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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### Policy 2

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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### Policy 3

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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### Policy 4

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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## Policies that others own on your life

### Policy 1

Policyowner	Phone or email
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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### Policy 2

Policyowner	Phone or email
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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### Policy 3

Policyowner	Phone or email
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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<hr/>	

### Policy 4

Policyowner	Phone or email
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) and their phone or email	
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## Group or association life insurance

### Policy 1

Company or association	Policy #
Address	Phone or email
	Policy is located
Beneficiary(ies) and their phone or email	

### Policy 2

Company or association	Policy #
Address	Phone or email
	Policy is located
Beneficiary(ies) and their phone or email	

### Policy 3

Company or association	Policy #
Address	Phone or email
	Policy is located
Beneficiary(ies) and their phone or email	

### Policy 4

Company or association	Policy #
Address	Phone or email
	Policy is located
Beneficiary(ies) and their phone or email	



# Critical illness insurance

## Policies you own on yourself

### Policy 1

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 2

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 3

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 4

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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## Policies you own on the health of others

### Policy 1

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 2

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 3

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 4

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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# Disability insurance

## Policies you own on yourself

### Policy 1

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 2

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 3

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 4

Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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## Policies you own on the health of others

### Policy 1

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 2

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 3

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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### Policy 4

Insured person(s)	Phone or email
Will someone else become the policyowner after you die? <input type="checkbox"/> Yes <input type="checkbox"/> No Who?	
Insurance company	Policy #
Address	Phone or email
	Policy is located
Advisor who services policy	Phone or email
Beneficiary(ies) other than yourself, and their phone or email	
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# Hospital, medical, travel and other insurance

## Policy 1

Type of insurance <sup>3</sup>	Policy #
Insurance company	Phone
Address	Email
	Policy is located

## Policy 2

Type of insurance <sup>3</sup>	Policy #
Insurance company	Phone
Address	Email
	Policy is located

## Policy 3

Type of insurance <sup>3</sup>	Policy #
Insurance company	Phone
Address	Email
	Policy is located

## Policy 4

Type of insurance <sup>3</sup>	Policy #
Insurance company	Phone
Address	Email
	Policy is located



<sup>3</sup> For example, hospital, medical, travel.



# Investments: Tax-free savings accounts (TFSA's)

## TFSA 1

Financial company	Account #
Address	Phone or email
	Information is located
Individual TFSA or group TFSA? <input type="checkbox"/> Individual <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Beneficiary(ies) and their phone or email	
<hr/>	
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## TFSA 2

Financial company	Account #
Address	Phone or email
	Information is located
Individual TFSA or group TFSA? <input type="checkbox"/> Individual <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Beneficiary(ies) and their phone or email	
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## TFSA 3

Financial company	Account #
Address	Phone or email
	Information is located
Individual TFSA or group TFSA? <input type="checkbox"/> Individual <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Beneficiary(ies) and their phone or email	
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## TFSA 4

Financial company	Account #
Address	Phone or email
	Information is located
Individual TFSA or group TFSA? <input type="checkbox"/> Individual <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Beneficiary(ies) and their phone or email	
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# Registered retirement savings plans (RRSPs)

## RRSP 1

Financial company	Account #
Address	Phone or email
Information is located	
Individual RRSP or group RRSP? <input type="checkbox"/> Individual <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Beneficiary(ies) and their phone or email	

## RRSP 2

Financial company	Account #
Address	Phone or email
Information is located	
Individual RRSP or group RRSP? <input type="checkbox"/> Individual <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Beneficiary(ies) and their phone or email	

## RRSP 3

Financial company	Account #
Address	Phone or email
Information is located	
Individual RRSP or group RRSP? <input type="checkbox"/> Individual <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Beneficiary(ies) and their phone or email	

## RRSP 4

Financial company	Account #
Address	Phone or email
Information is located	
Individual RRSP or group RRSP? <input type="checkbox"/> Individual <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Beneficiary(ies) and their phone or email	



# Deferred profit-sharing plans

## Plan 1

Company with plan	Account #
Address	Phone or email
	Information is located
Financial company	
Address	Phone or email
Beneficiary(ies) and their phone or email	

## Plan 2

Company with plan	Account #
Address	Phone or email
	Information is located
Financial company	
Address	Phone or email
Beneficiary(ies) and their phone or email	

## Plan 3

Company with plan	Account #
Address	Phone or email
	Information is located
Financial company	
Address	Phone or email
Beneficiary(ies) and their phone or email	

## Plan 4

Company with plan	Account #
Address	Phone or email
	Information is located
Financial company	
Address	Phone or email
Beneficiary(ies) and their phone or email	



# Registered education savings plans (RESPs)

## RESP 1

Financial company	Account #
Address	Phone or email
	Information is located
Advisor who services account	Phone or email
Type of RESP? <input type="checkbox"/> Individual <input type="checkbox"/> Family <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Student beneficiary(ies) and their phone or email	
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## RESP 2

Financial company	Account #
Address	Phone or email
	Information is located
Advisor who services account	Phone or email
Type of RESP? <input type="checkbox"/> Individual <input type="checkbox"/> Family <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Student beneficiary(ies) and their phone or email	
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<hr/>	

## RESP 3

Financial company	Account #
Address	Phone or email
	Information is located
Advisor who services account	Phone or email
Type of RESP? <input type="checkbox"/> Individual <input type="checkbox"/> Family <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Student beneficiary(ies) and their phone or email	
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<hr/>	

## RESP 4

Financial company	Account #
Address	Phone or email
	Information is located
Advisor who services account	Phone or email
Type of RESP? <input type="checkbox"/> Individual <input type="checkbox"/> Family <input type="checkbox"/> Group	Company or group name?
Do you invest regularly using automatic payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	What account is payment made from?
Student beneficiary(ies) and their phone or email	
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# Registered retirement income funds (RRIFs) and annuities

## RIFF or annuity 1

Financial company	Policy or account #
Address	Phone or email
	Information is located
Advisor who services account	Phone or email
Do you receive income?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	Where is it deposited?
Beneficiary(ies) and their phone or email	
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## RIFF or annuity 2

Financial company	Policy or account #
Address	Phone or email
	Information is located
Advisor who services account	Phone or email
Do you receive income?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	Where is it deposited?
Beneficiary(ies) and their phone or email	
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## RIFF or annuity 3

Financial company	Policy or account #
Address	Phone or email
	Information is located
Advisor who services account	Phone or email
Do you receive income?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	Where is it deposited?
Beneficiary(ies) and their phone or email	
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## RIFF or annuity 4

Financial company	Policy or account #
Address	Phone or email
	Information is located
Advisor who services account	Phone or email
Do you receive income?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often?	Where is it deposited?
Beneficiary(ies) and their phone or email	
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# Pension plans

## Pension plan 1

Plan or policy #	Information is located
Company with plan	Phone or email
Address	
Financial company	Phone or email
Address	
Type of plan: <input type="checkbox"/> Defined benefit <input type="checkbox"/> Defined contribution <input type="checkbox"/> Hybrid or other	
Name of spouse when pension began, if applicable	Phone or email
Beneficiary(ies) and their phone or email	
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## Pension plan 2

Plan or policy #	Information is located
Company with plan	Phone or email
Address	
Financial company	Phone or email
Address	
Type of plan: <input type="checkbox"/> Defined benefit <input type="checkbox"/> Defined contribution <input type="checkbox"/> Hybrid or other	
Name of spouse when pension began, if applicable	Phone or email
Beneficiary(ies) and their phone or email	
<hr/>	
<hr/>	

## Pension plan 3

Plan or policy #	Information is located
Company with plan	Phone or email
Address	
Financial company	Phone or email
Address	
Type of plan: <input type="checkbox"/> Defined benefit <input type="checkbox"/> Defined contribution <input type="checkbox"/> Hybrid or other	
Name of spouse when pension began, if applicable	Phone or email
Beneficiary(ies) and their phone or email	
<hr/>	
<hr/>	



# Government bonds

## Government bonds 1

Type of bond<sup>4</sup>:

Payable to bearer?  Yes  No Who has the bond?

Registered in your name?  Yes  No Co-registered with

Serial #s

Bonds are located

## Government bonds 2

Type of bond<sup>4</sup>:

Payable to bearer?  Yes  No Who has the bond?

Registered in your name?  Yes  No Co-registered with

Serial #s

Bonds are located

## Government bonds 3

Type of bond<sup>4</sup>:

Payable to bearer?  Yes  No Who has the bond?

Registered in your name?  Yes  No Co-registered with

Serial #s

Bonds are located

## Government bonds 4

Type of bond<sup>4</sup>:

Payable to bearer?  Yes  No Who has the bond?

Registered in your name?  Yes  No Co-registered with

Serial #s

Bonds are located

<sup>4</sup> For example, federal, provincial, municipal, Canada savings bond, treasury bill.



# Securities: Stocks and non-government bonds

## Securities 1

Description	Information is located
A gift or from inheritance? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Collateral for a loan? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Lender	
Address	Phone
	Email

## Securities 2

Description	Information is located
A gift or from inheritance? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Collateral for a loan? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Lender	
Address	Phone
	Email

## Securities 3

Description	Information is located
A gift or from inheritance? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Collateral for a loan? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Lender	
Address	Phone
	Email

## Securities 4

Description	Information is located
A gift or from inheritance? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Collateral for a loan? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Lender	
Address	Phone
	Email



# Non-registered accounts

## Non-registered account 1

Type of investment <sup>5</sup>	Account #
Financial company	Phone or email
Address	Information is located
Advisor who services account	Phone or email
Beneficiary(ies), if any, and their phone or email	
<hr/>	
<hr/>	

## Non-registered account 2

Type of investment <sup>5</sup>	Account #
Financial company	Phone or email
Address	Information is located
Advisor who services account	Phone or email
Beneficiary(ies), if any, and their phone or email	
<hr/>	
<hr/>	

## Non-registered account 3

Type of investment <sup>5</sup>	Account #
Financial company	Phone or email
Address	Information is located
Advisor who services account	Phone or email
Beneficiary(ies), if any, and their phone or email	
<hr/>	
<hr/>	

## Non-registered account 4

Type of investment <sup>5</sup>	Account #
Financial company	Phone or email
Address	Information is located
Advisor who services account	Phone or email
Beneficiary(ies), if any, and their phone or email	
<hr/>	
<hr/>	

<sup>5</sup> For example, segregated funds, mutual funds, government bonds, securities.



# Home and real estate

## Property 1

Address	Type of real estate <sup>6</sup>
Title is held by <input type="checkbox"/> You <input type="checkbox"/> Spouse <input type="checkbox"/> Joint	
Is there a mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mortgage held by	Phone or email
Address	

## Property 2

Address	Type of real estate <sup>6</sup>
Title is held by <input type="checkbox"/> You <input type="checkbox"/> Spouse <input type="checkbox"/> Joint	
Is there a mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mortgage held by	Phone or email
Address	

## Property 3

Address	Type of real estate <sup>6</sup>
Title is held by <input type="checkbox"/> You <input type="checkbox"/> Spouse <input type="checkbox"/> Joint	
Is there a mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mortgage held by	Phone or email
Address	

## Property 4

Address	Type of real estate <sup>6</sup>
Title is held by <input type="checkbox"/> You <input type="checkbox"/> Spouse <input type="checkbox"/> Joint	
Is there a mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mortgage held by	Phone or email
Address	

## Property 5

Address	Type of real estate <sup>6</sup>
Title is held by <input type="checkbox"/> You <input type="checkbox"/> Spouse <input type="checkbox"/> Joint	
Is there a mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mortgage held by	Phone or email
Address	

Deeds are located

Copies of mortgages are located

Property insurance policies are located

Land surveys are located

Property tax receipts are located

Leases are located

Information on building costs is located

<sup>6</sup> For example, house, condo, vacation home.

## Personal property

List of vehicles you own or lease

---

Vehicle registrations are located

---

Vehicles' bills of sale or lease and insurance policies are located

---

Jewelry, stamp collections, coin collections and other valuables are located

---

Are household furnishings insured?  Yes  No

---

Furnishings' bills of sale and insurance policies, and list of items in your home, are located

---

---

## Safe deposit box

Do you have a safe deposit box?  Yes  No

Box is located

---

Names of others who have access to it

---

Keys are located

---

List of contents is located

---





# Email, social media, digital assets

Your digital assets include online accounts, electronic files and data.

If information on these assets is available somewhere else, please note the location below.

Do you have an online password manager for your digital assets?  Yes  No

Company	Account # or user ID	Password
---------	----------------------	----------

Is information on your digital assets available somewhere else?  Yes  No

Information is located

## Email accounts

Email address	Password
Email address	Password
Email address	Password
Email address	Password

## Social media accounts

Company	User ID	Password
Company	User ID	Password
Company	User ID	Password
Company	User ID	Password
Company	User ID	Password
Company	User ID	Password
Company	User ID	Password

## Other online accounts

For example, CRA, PayPal, Bitcoin, data storage, photos.

Company	Type of account	Account #
User ID	Password	
Company	Type of account	Account #
User ID	Password	
Company	Type of account	Account #
User ID	Password	
Company	Type of account	Account #
User ID	Password	
Company	Type of account	Account #
User ID	Password	
Company	Type of account	Account #
User ID	Password	



## Charitable gifts

<b>Charity 1</b>	Information is located
Address	Phone or email
<b>Charity 2</b>	Information is located
Address	Phone or email
<b>Charity 3</b>	Information is located
Address	Phone or email
<b>Charity 4</b>	Information is located
Address	Phone or email

## Trust funds

<b>Purpose of trust 1</b>	
Agreement was drawn up by	
Trust papers are located	Phone or email
<b>Purpose of trust 2</b>	
Agreement was drawn up by	
Trust papers are located	Phone or email
<b>Purpose of trust 3</b>	
Agreement was drawn up by	
Trust papers are located	Phone or email
<b>Purpose of trust 4</b>	
Agreement was drawn up by	
Trust papers are located	Phone or email



# Memberships

## Club or association 1

Address	Phone
	Email

## Club or association 2

Address	Phone
	Email

## Club or association 3

Address	Phone
	Email

## Club or association 4

Address	Phone
	Email

# Subscriptions

## Publication 1

Address	Phone
	Email

## Publication 2

Address	Phone
	Email

## Publication 3

Address	Phone
	Email

## Publication 4

Address	Phone
	Email



# Notes



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