AFTER I'M GONE

AN EASY ESTATE WORKBOOK

PUT YOURSELF IN TOUCH WITH THAT "STUFF" YOU KEEP IGNORING . . . WHILE HELPING THOSE YOU LEAVE BEHIND FIGURE IT OUT!!

From "After I'm Gone" by Marilyn M Stratford, © 2004,
Creative Progression, Portland, Oregon, REGISTERED ® 2004
Writers Guild of America, West Reg. No. 1032261,
LIBRARY OF CONGRESS: TXu 1-217-155,
ISBN 0-9764667-0-8.
Adapted with permission.

The need-to-know workbook
for families, heirs, and personal representatives.

Dear Reader,

Dwelling upon our own demise is never appealing, but death is inevitable and there can be a great sense of relief for everyone involved knowing that there is a detailed record of that which needs to be done ... after I'm gone. If my husband should predecease me or visa versa, this information will be invaluable, as it would for our children... or anyone who might serve as a personal representative. I reasoned that if this idea is helpful for my family, then what about others? Hence, this workbook was created.

Assembling the information will be somewhat time consuming... and often frustrating because there may be documents that one cannot locate immediately. Imagine then, the frustration of others who know little about where that document might be and where to even begin searching for it. Documents that are in a safe deposit box should be copied, placed in the book, labeled as a copy, and the original returned to the bank.

Once the book is assembled, there is always the need to keep it updated... because our lives and circumstances can change very quickly. Make sure family members know about this book, where it is kept, and who is to have access to it. It should be stored in a secure place because it will contain some sensitive information. Then when you someday "graduate" from this existence, you will do so knowing that you have provided as much useful information as humanly possible to those left to care for your estate. They will bless you for making the whole process a great deal more trouble-free.

The positive side effect is that this will also put you in better touch with your own affairs and point out areas that really need your attention. Good luck.

Marilyn M Stratford

TABLE OF CONTENTS

GENERAL INSTRUCTIONS
FOR ASSEMBLING WORKBOOK

- Read the entire workbook first.
- Fill in as much information as possible in each category.
- If additional sheets of paper are needed for a specific item, add three-holed punched pages. There is no limit to the number of pages possible with this three-ring binder workbook format.
- Use additional divider pages that have index tabs to meet personal needs not included in this workbook.
- Make a work list of items that need to be obtained.
- Make copies of items that are in safe deposit boxes or other secure places and then return a.s.a.p. ie: wills, trusts, deeds, marriage licenses, birth certificates, titles, etc.
- Purchase vinyl sheet protectors to keep multiple papers secure. Purchase flat vinyl 3 ring pencil holder to hold keys.
- This workbook will contain some very sensitive information and should be kept in a secure, fire-proof place, possibly a safe deposit box or home safe. Another option would be to make a copy of only the workbook pages and store them in the safe or with a trusted person. Keep a separate copy of “distribution of personal goods” at home for changes that might take place and when you update the original, replace the newly revised list in the workbook.
- Update regularly. Mark a calendar ahead of time for a specific date. Remove pages completely and replace with new ones rather than scratch out and overwrite. Be sure to initial and date changes if you do not discard the original entry.
- The final category is for use of your personal representative to make notes of all actions that transpire relative to your estate. A running log of dates, times, contacts, action, etc. needs to be recorded. This information will be extremely valuable in keeping everything managed well. If a personal representative is to be reimbursed for time and expenses, this log will serve that purpose also.
- If necessary, purchase a larger binder to accommodate additional inserts and information.
- Customize the title of book by designing your own. Place it under the plastic cover of the workbook.

ESTATE INFORMATION

My Name is:____

IMMEDIATE CHECKLIST
LIST OF NAMES AND PHONE NUMBERS

- **Physicians** ____

  ____

  ____

  ____

- **Personal representative** ____
- **Funeral home & director** ____
- **Religious leader**____
  (Bishop, priest, pastor, rabbi, etc)
- **Location of burial clothing**____
- **Desires for funeral (see funeral category)**
- **Call family & friends: (next category)**
- **Employer**____
- **Contact bank to confirm names on signature cards for writing necessary checks: (See Financial)**
- **Remove needed items from safe deposit box at bank with location of key, number and authorized persons to do so or location of legal papers**_________

  ____

- **Contact Social Security /Medicare office**_______________________________
- **Call attorney**____
- **Call C.P.A.**____
- **Location of original will and trust papers**______________________________

NAMES, PHONE NUMBERS AND ADDRESSES

CLUBS AND ORGANIZATIONS

(Name, phone number & account/membership number)

FUNERAL PREPARATIONS

Name and phone number of funeral home____________________________________

____

Prepaid funeral documents location____

Location of cemetery plot and deed____

Short life history for obituary: (record on separate pages)

Names of newspapers desired for obituaries__________________________________

Desires for funeral to be conducted:

Officiators____

Speakers____

Music____

Location of service____

Gathering following the service____

Burial site____

Desires for remains____

Suggested charitable organizations____

Veteran or other burial benefits____

ATTORNEY

Name of firm____

Phone number____

Name of personal attorney____

Instructions for procedures to be followed:

ACCOUNTANT

Name of firm____

Phone number____

Name of personal accountant____

Instructions for procedures to be followed:

WILLS & TRUST DOCUMENTS

(Place copies in this book to keep these important documents securely together.)

Location of original will:____

Location of trust documents:____

Living Will, Advance Health Directive or Advance Health Care Directive documents:____

BANKS, SAVINGS & LOAN & CREDIT UNION

Checking and Savings Accounts:

Names, locations and account numbers___________________________________

Names of those on signature cards____

SAFE DEPOSIT BOXES

Bank name and location____

Number of box____

Key location if other than this book_____________________________________

Persons on signature card____

Itemized list of contents:(record on another sheet of paper)

TIP! Keep a copy handy to add or delete items when changes are made. Be sure to amend the original record

MEDICAL INFORMATION

Location of medical records____

Location of Medicare statements____

Procedure to follow for finalizing medical bills

MEDICAL INSURANCE:

Medicare number____

(Calling Social Security office will notify the Medicare office.

Primary or secondary policies:

Names and numbers____

Procedures to follow____

LONG TERM CARE INSURANCE:

Name of company____

Name of agent____

Phone number____

Policy number____

Location of policy____

RETIREMENT ACCOUNTS

Names and numbers of those to be called for each of the following if applicable:

Former employer____

Pensions ____

IRAs____

Keogh Plans____

Profit sharing____

Veteran benefits____

Worker’s compensation____

LOCATION OF THESE DOCUMENTS:

LIFE INSURANCE POLICIES & ANNUITIES

- **Names and numbers of each policy**

- **Names of representatives if available**

- **Instructions for handling these accounts**

(Make copies of these documents and place in vinyl sheet protectors)

INVESTMENTS & BROKER

Name of investment broker:____

Name of firm:____

Address____

Phone number:____

List of investments held by that company

(If addition space is need, record on separate sheet of paper)

List of other investments held privately and where located:

Desires for disbursement of holdings and investments

TAX INFORMATION

Procedure to follow for gathering tax data:

PERSONAL INCOME TAX:

- **Location of information for records and receipts of current year**
- **Location of estimated tax slips and envelopes, dates paid for current year and date next due**____
- **Location of records for previous years**______________________________________

PROPERTY TAX:

- **Names of properties owned and taxed**______________________________________
- **Tax I.D. or account numbers**____
- **Name of country to whom taxes are paid**____________________________________

HOUSE & INSURANCE INFORMATION

Location of primary property____

Location of property deed____

Location of leased/rental property____

Landlords name & phone number____

HOMEOWNERS/RENTERS INSURANCE

- **Name of Insurance Company**____
- **Policy Numbers:**____
- **Agent Name**____

Real estate agent to be used for sale of property:

- **Name & Number**____

Estate Sale Company to be used for liquidation of household items:

- **Name & Number**____

Primary Home Information

- **List of valuable items:**
- **Photos of these items (video or snapshot):**
- **Evaluation of each if known:**
- **Secret hiding places for valuable, money etc. Make <u>SURE</u> that someone knows where these places are located!!**

(written in code ie: "backyard hiding hole", Grandma's sewing box, etc.)

HOUSE MAINTENANCE INFORMATION

NOTIFY THE FOLLOWING: (Note services to keep until the sale of the house)

Gas____

Garbage______________________________________

Water_______________________________________

Electricity____________________________________

Cable TV_____________________________________

Internet______________________________________

Landline phone company____________________________

Cell phone company_______________________________

Newspaper_____________________________________

Post office that delivers mail__________________________

(Note: In order to forward mail to another address, the personal representative must provide proof to the post office with the will or trust document naming representative.)

SERVICES:

Gardener_____________________________________

Sprinkler system________________________________

Swimming pool_________________________________

Spraying service________________________________

Repairmen____________________________________

Other_______________________________________

REAL ESTATE HOLDINGS OTHER THAN PRIMARY RESIDENCE

SECONDARY HOME (S) INFORMATION

- **List of valuable items**____

(Record of separate sheet of paper with evaluations if known)

- **Location of photos of these items (video or snapshot)**_______________________

SECONDARY HOMEOWNERS INSURANCE

- **Name of Insurance Company**______________________________________
- **Policy Number**____
- **Agent Name**____

OTHER HOLDINGS

- **Names of other holdings:**____
- **Locations**____
- **Insurances**____

SPECIAL EXPLANATIONS

OUTSTANDING LOANS TO OTHERS

- **Names and numbers of individuals or businesses:**

- **Names and numbers of financial institutions:**

- **Procedures to retire these obligations:**

NOTES RECEIVABLE

- **Names and numbers of borrowers**

- **Amounts of outstanding loans/notes**

- **Agreements for repayment of these loans**

(Copies of these loans/notes should be included in this section, signed and dated)

DISTRIBUTION OF PERSONAL ITEMS

- **List of all items (jewelry, clothing, heirlooms etc. with name and addresses to whom they are to be given____**

(Record this list on separate sheet of paper)

- **<u>Sign and date this list</u>. If changes are subsequently made on this list....give an explanation beside the item which is <u>dated and initialed</u>....or make a new list!!**
- **Instructions for dispersement of these items**

KEYS

- **Use a three-ring binder zipped pencil pouch**
- **Make copies of all important keys**
- **Label each key and place in the pouch**

VEHICLES

MAKE, VIN NUMBER, LICENSE NUMBER OF ALLVEHICLES:

HISTORY OF EACH VEHICLE:

- **Date of purchase and name of agency:**

- **Location of service records**____

OUTSTANDING LOANS ON EACH VEHICLE

- **Name, phone number and account number of finance company**

LOCATION OF TITLE(S)____

INSURANCE POLICIES:

- **Name of insurance company**____
- **Numbers of policy**____
- **Desires for dispersement of each vehicle:**_____________________________
- **Location of DMV for transferring of title:** _____________________________

(Personal representative must have will or trust documents proving authority to do so)

CREDIT CARD INFORMATION

Photo copies (both sides) of all credit cards:

(Place these photo copies in this section)

LIST OF CARDS AND NUMBERS TO BE CALLED TO CANCEL USE OF CARDS

INTERNET ACCOUNTS

- **List of passwords**

- **Information to close accounts if necessary**

CHILDREN GUARDIANSHIP

- **Names & birth dates of minor children**

- **Names of those given legal guardianship of minor children:**

(Legal papers should be drawn for this guardianship)

- **Location of documents so stating**____

(Copies of these documents may be included in this section)

- **Desires for religious upbringing, education etc. fully detailed in this section**
  (Record these desire on a separate sheet of paper)

- **Provisions for financial support of minor children**

PET GUARDIANSHIP

Name & breed of pet (s)____

- **Location of veterinarian**____
- **Name, location & phone number**____
- **Location of any medical records**____
- **Desires for guardianship of pet (s)**
- **Arrangements for financial support of pet (s)**
- **Disposition of pet upon death of that animal**______________________________

PERSONAL DOCUMENTS

Place copies of these documents in a vinyl sheet protector:

- **Birth certificates**
- **Adoption papers**
- **Baptismal certificates**
- **Church documents**
- **Marriage certificates**
- **Divorce papers**
- **Death certificates**
- **Other**

PERSONAL LETTERS TO SPECIAL INDIVIDUALS

- **Written and sealed in an envelope to be delivered to that individual after your passing by personal representative**

GENEALOGICAL RECORDS

- **Location**____

- **Guardian of these records**____

- **Procedures for sharing of family photographs**

- **Location of personal history**

YOUR PERSONAL TESTIMONY OR PHILOSOPHY OF LIFE

LOG TO BE KEPT BY PERSONAL REPRESENTATIVE: