

ADDITIONAL INFORMATION FOR YOUR TRUSTEE OR EXECUTOR

In addition to your trust and will and other formal documents, it can be helpful to your Trustee or Executor if you put in one place other information that they will need to administer your estate. One of the most essential things is to know where to look for the passwords to be able to access your computer, phone, and other devices.

Some of information on the attached pages they will need to know to fill out the death certificate, to know who to contact about your death, and to know what accounts and insurance policies you currently own. You can save them many hours of searching if you give them this information.

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IMPORTANT INFORMATION

PERSONAL DETAILS:

Full Legal Name: _____

Date/Place of Birth: _____

Social Security Number: _____

PASSWORDS: (phone, banking, social media, or where to find passwords)

Site: _____ Password: _____

Site: _____ Password: _____

Site: _____ Password: _____

Site: _____ Password: _____

Site: _____ Password: _____

Site: _____ Password: _____

LIFE INSURANCE/LONG TERM CARE POLICIES:

Company: _____ Policy #: _____

Company: _____ Policy #: _____

FINANCIAL ACCOUNTS: (banks, credit cards, investments)

Institution: _____ Acct #: _____

Institution: _____ Acct #: _____

Institution: _____ Acct #: _____

Institution: _____ Acct #: _____

Institution: _____ Acct #: _____

AUTOMOBILES: (Include copy of title or location of document)

Make/Model: _____ VIN #: _____

Make/Model: _____ VIN #: _____

Make/Model: _____ VIN #: _____

REAL PROPERTY OWNED: (Include copy of Deed or location of document)

Address: _____

Address: _____

Address: _____

SAFE DEPOSIT BOX:

Institution: _____

Location of key: _____

OTHER HELPFUL INFORMATION

PERSONAL CONTACTS TO NOTIFY: (named in your estate planning, spouse, children, parents, siblings, etc.)

Name/Relation: _____	Phone #: _____
Name/Relation: _____	Phone #: _____
Name/Relation: _____	Phone #: _____
Name/Relation: _____	Phone #: _____
Name/Relation: _____	Phone #: _____
Name/Relation: _____	Phone #: _____
Name/Relation: _____	Phone #: _____

LOCATION OF IMPORTANT DOCUMENTATION:

(birth/death certificates; marriage/divorce; citizenship; adoption)

Document(s): _____	Location: _____
Document(s): _____	Location: _____
Document(s): _____	Location: _____
Document(s): _____	Location: _____
Document(s): _____	Location: _____
Document(s): _____	Location: _____
Document(s): _____	Location: _____

MOST RECENT EMPLOYMENT:

EDUCATION/MILITARY RECORDS:

RELIGIOUS CONTACTS:

MEMBERSHIPS IN GROUPS/AWARDS RECEIVED:

IMPORTANT CONTACTS:

Doctor: _____

Phone #: _____

Doctor: _____

Phone #: _____

Doctor: _____

Phone #: _____

Lawyer: _____

Phone #: _____

Financial Advisor: _____

Phone #: _____

Financial Advisor: _____

Phone #: _____

Accountant: _____

Phone #: _____

SOURCES OF INCOME: (IRA, 401(k); pension, social security, etc.)

MORTGAGE(S) & DEBTS: (how are they paid?)

Creditor: _____

Creditor: _____

Creditor: _____

Creditor: _____

Creditor: _____

TAX RETURNS: (include copies and/or location)

Year Filed: _____

Preparer: _____

Year Filed: _____

Preparer: _____

Year Filed: _____

Preparer: _____