
Document Locator

NAME _____ DATE _____

Please indicate the location of the following items:

PERSONAL

Original Will (self) _____

Original Will (spouse) _____

Special Estate Instructions—Written _____

Special Estate Instructions—Video _____

Combination to Personal Safe _____

All Passwords _____

Bank Safe Deposit Box _____

Trust Documents _____

Power of Attorney _____

Health Care Power of Attorney _____

Living Will _____

Birth Certificate _____

Military Records _____

Marriage Certificate _____

Divorce Papers _____

BUSINESS PROFESSIONAL

Partnership/LLC Documents _____

Corporate Documents _____

Inventory of Business Assets _____

Buy-Sell Documents _____

Pension Plans _____

Other Employee Retirement Benefits _____

(e.g., Nonqualified Deferred Compensation)

TAX RETURNS & RECORDS

Income Tax Returns _____

Records for Tax Bases of Property _____

Gift Tax Returns _____

INSURANCE POLICIES

Life Insurance—Group _____

Life Insurance—Individual(s) _____

Property/Casualty _____

Umbrella Liability _____

Disability _____

Income Annuities _____

FINANCIAL ASSETS

Checking Accounts _____

Money Market Accounts _____

Savings Account _____

Certificates of Deposit _____

Credit Union Accounts _____

Securities Accounts _____

Mutual Fund Accounts _____

OTHER INSTRUMENTS/PAPER

Original Deeds to Real Property _____

Mortgages or Leases _____

Affidavits Re: Domicile _____

Affidavits Re: Community Property _____

Affidavits Re: Separate Property _____