



With passing comes paperwork.

When the time comes, completing out after-life documents and tasks will be seamless. Use this worksheet to outline key information. Write down your loved one's details or get yourself organized. When you've filled out Solace's Get Organized worksheet, keep it in a secure place where it can be found by loved ones.

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Your Details		
Name	Address	
Date of Birth	City	State
SSN#	ZIP	
Citizenship		
Your Passport		
Number	Issue Date	
Location of Passport	City of Issue	State of Issue
Persons to Notify in an Emergency		
Name	Address	
Relation	City	State
Phone	ZIP	



Persons to Notify in an Emergency Continued Name Address Relation City State Phone ZIP Address Name Relation City State Phone ZIP **Marital Information** Single Married Divorced Separated Domestic Widowed Partnership Married to Date Place of Marriage Location of Marriage Certificate



Mar	Marital Information Continued				
Prev	iously Married to				Date
Term	ninated by				
	Divorce		Annulment		
	Separation		Death		
Loca	tion of Termination P	apers			
Fam	ily Records				
Fath	er's Full Name				Father's Place of Birth
Fath	er's Date of Birth				
Motl	ner's Full Name				Mother's Place of Birth
Motl	her's Date of Birth				
Child	d's Full Name				Child's Address
Child	d's City		Child's State		



Family Records Continued

Child's Full Name		Child's Address
Child's City	Child's State	
Child's Full Name		Child's Address
Child's City	Child's State	
Child's Full Name		Child's Address
Child's City	Child's State	
Grandchild's Name		Grandchild's Name
Grandchild's Name		Grandchild's Name
Grandchild's Name		Grandchild's Name
Other Close Relative		Other Close Relative
Other Close Relative		Other Close Relative



Medical Information			
Physician		Dentist	
Specialist		Specialist	
Other Details			
Military Service Have Served	Have Not Served		
Country Served		Date Served From	Date Served To
Branch		Serial Number	Grade
Service Connected Disabil Have	Do Not Have		
Claim#			
Military Honors or Decora	tions:		
Location of Discharge, Disa	ability or Honors Papers		



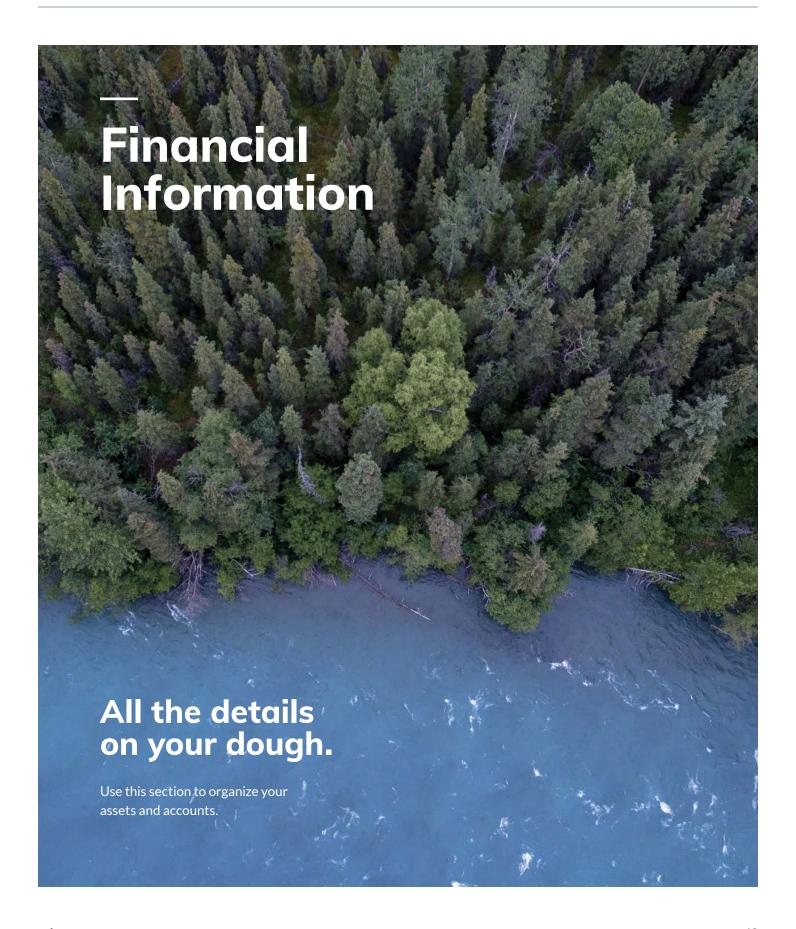
Education	
School Attended	Degrees / Diplomas
Special Honors	Location of Diplomas
School Attended	Degrees / Diplomas
Special Honors	Location of Diplomas
School Attended	Degrees / Diplomas
Special Honors	Location of Diplomas
Religious, Fraternal, Professional Organizations and A	Affiliations
Name of Organization	



Current Personal Employment Business Information Employed by / Title Address Location of Employment Agreement / Proof of Benefits **Professional Advisors** Financial Advisor Email / Phone Executor Email / Phone Trust Officer Email / Phone Email / Phone Attorney Accountant Email / Phone Insurance Agent Email / Phone Power of Attorney Email / Phone



Professional Advisors Continued				
Health Care Power of Attorney	Email / Phone			
Relatives and Friends to Notify				
Name of Friend or Relative	Relationship			
Address 1	Email	Phone		
Address 2				
Name of Friend or Relative	Relationship			
Address 1	Email	Phone		
Address 2				
Name of Friend or Relative	Relationship			
Address 1	Email	Phone		
Address 2				





Benefits in Which I Particip	pate				
Pension / Deferred Compensat	tion Plan	Profit S	Sharing 401(k) Plan	
Stock Options		Other			
Other		Locatio	on of Docume	nts	
Income					
	Stocks / Bonds	Intovost		Trusts	Social Security
Salary		Interest			30clar Security
Mortgages	Annuities	Pension		Other	
Location of Documents					
Accounts Receivable					
I am owed money / other assets					
Yes	No				
Location of Documents					
Liabilities					
I owe money or I am obligated f	financially for the following	g:			
Bank Loans					
Name of Bank		Acco	ount#		
Mortgage					
Name of Bank		Acco	ount#		



Liabilities Continued	
Home Equity Line of Credit	
Name of Bank	Account #
Credit Card	
Type of Card	Issuing Bank
Account#	
Credit Card	
Type of Card	Issuing Bank
Account #	
Credit Card	
Credit Card	
Type of Card	Issuing Bank
Type of Card	ISSUIIR DAIIK
Account #	
Credit Card	
Type of Card	Issuing Bank
A + #	
Account #	



Liabilities Continued			
Other			
Location of Documents			
Record of Personal & Financial Information & Affairs Bank Accounts			
Name of Bank	Type of Account		
Address 1	Account #	Phone	
Address 2			
Name of Bank	Type of Account		
Address 1	Account #	Phone	
Address 2			
Name of Bank	Type of Account		
Address 1	Account #	Phone	
Address 2			



Record of Personal & Finance	cial Information & Affairs Co	ontinued			
Owned Real Estate					
Location of Deeds, Titles, Other	Location of Deeds, Titles, Other Documents				
Securities					
Individual Account		Name of Institution			
Account#	Contact Name		Phone		
Joint Account		Name of Institution			
Account #	Contact Name		Phone		
IRA		Name of Institution			
Account #	Contact Name		Phone		
401K		Name of Institution			
Account #	Contact Name		Phone		



Record of Personal & Financial Information & Affairs Continued

Personal Property	
I have prepared an inventory of my valuable personal property	
Yes No	
Location of Inventory	Location of Lists of Personal Assets and Suggested Distribution, or Attach:
Other Accounts (eg HAS, 529, Alternative Investments)	Other Accounts (eg HAS, 529, Alternative Investments)
Safe Deposit Box	
Name of Bank / Type of Box	Location of Key
In Whose Name	
Personal Safe	
Location	Combination
Contents	Contents
Location of Other Hidden Assets (Cash / Jewelry)	
Location	Contents
Location	Contents

Insurance



Put your policies here.

Use this section to organize your insurance policy information.

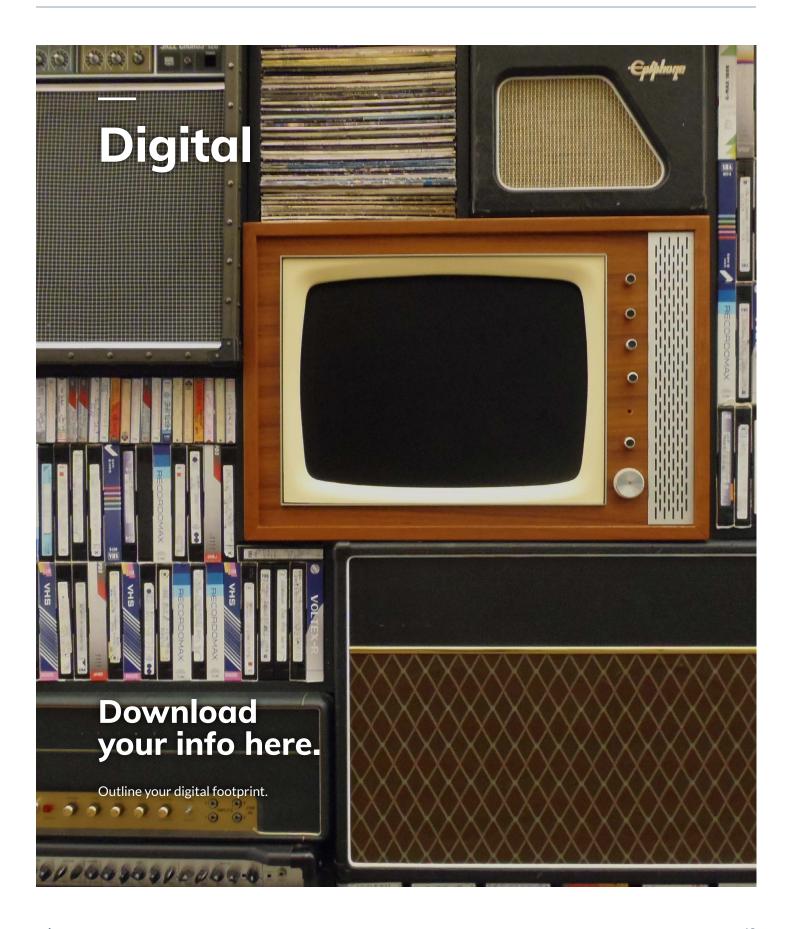


Other Insurance

Insurance Policies I Have the Following Life Insurance Policies:					
Company	Policy # / Amount of Benefit				
Name of Insured	Beneficiary / Contact Info				
Company	Policy # / Amount of Benefit				
Name of Insured	Beneficiary / Contact Info				
Company	Policy # / Amount of Benefit				
Name of Insured	Beneficiary / Contact Info				
I Have the Following Other Types of Policies					
Automobile Insurance	Policy#				
Homeowners Insurance	Policy #				

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Policy#





Computer and Online Login Information

Computer / Location	User ID / Password
Answer to Security Question	
Computer / Location	User ID / Password
Answer to Security Question	
Email Account	User ID / Password
Answer to Security Question	
Email Account	User ID / Password
Answer to Security Question	
Website	User ID / Password
Answer to Security Question	



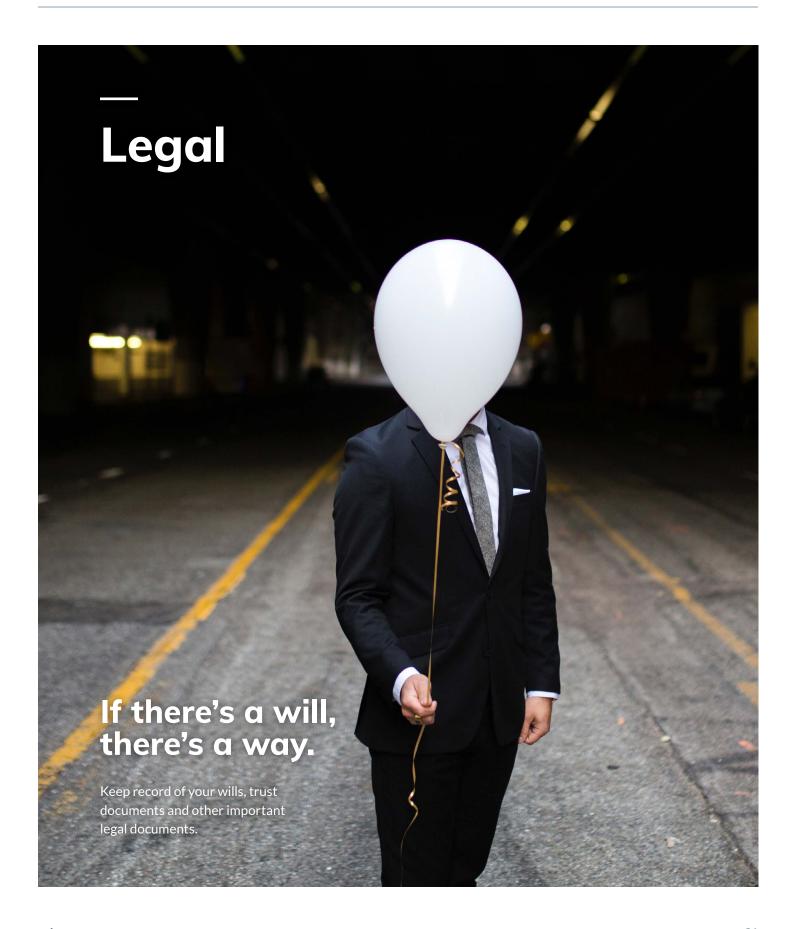
Computer and Online Login Information Continued

Website User ID / Password

Answer to Security Question

Website User ID / Password

Answer to Security Question





Last Will & Testament	
I have/have not made a will.	
Yes, I have No, I have not	
Date of my Last Will and Testament	Executor / Personal Representative(s)
Address	Email
Phone	
Attorney Who Drafted my Will	Address
Email	Phone
Location of my Last Will and Testament	
I have/have not made changes (codicil(s) to my will Yes, I have No, I have not	
Date(s) of Codicil(s)	Location of Codicils(s)
Other Details	



Living Will/Health Care Directiv	'e	
I have/have not made a living will/he	ealth care directive	
Yes, I have No,	I have not	
Date		
Attorney Who Drafted Living Will /	Health Care Directive	Address
Email		Phone
Location of my Living Will / Health C	Care Directive	
I have/have not informed my physic	an that I have a living will/h	ealth care directive
Yes, I have No,	I have not	
Name of Physician Notified		
Other Details		
Trust Documents	lie ii	
I have/have not created trusts in my Yes, I have No.		
Yes, I have No,	I have not	
Details of my Trust A		
Details of my Trust Agreement(s)		



Trust Documents Continued	
Attorney Who Drafted my Trust	Address
Email	Phone
Location of my Trust Agreement(s)	
I have/have not made amendments to my trust(s) Yes, I have No, I have not	
Dates of Amendment(s)	Location of Amendment(s)
Trustee	Successor Trustee
Other Details	
Trust Officer	Phone
Location of other important items	
Automobile Registration / Keys	Other Vehicle Registration / Keys
Other Vehicle Registration / Keys	Other Vehicle Registration / Keys
Income Tax Records / Returns	Other Records / Documents





Need to add anything we didn't cover? There's space for it here.



Other Important Information



Other Important Information



Great job.

You did it - congratulations!
When the time comes, you and your family will be ready. Store this document somewhere safe - either in digital form or printed out - and don't forget to share with your loved ones.

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