

My Personal Record

This personal record should be completed and filed in some appropriate place where it is readily available.

Name _____ Date _____

PERSONAL PROPERTY

My safety deposit box is located _____

If under joint names with _____

Location of key _____

Key number _____

CERTIFICATES

My birth certificate is located _____

Our marriage certificate is located _____

Social Insurance Number _____ Passport # _____

INCOME TAX RETURN

Location: _____

SECURITIES

1. Type _____

Location _____

Number _____

2. Type _____

Location _____

Number _____

3. Type _____

Location _____

Number _____

4. Type _____

Location _____

Number _____

5. Type _____

Location _____

Number _____

6. Type _____

Location _____

Number _____

BANK ACCOUNTS

1. Bank _____

Account # _____

2. Bank _____

Account # _____

3. Bank _____

Account # _____

4. Bank _____

Account # _____

PROPERTY AND AUTO INSURANCE

Company _____

Type _____ Amount _____

Company _____

Type _____ Amount _____

Company _____

Type _____ Amount _____

WILL

Location _____ Date _____

Lawyer _____

Executors _____

CREDIT CARDS

1. Card _____ Exp. Date _____

2. Card _____ Exp. Date _____

3. Card _____ Exp. Date _____

4. Card _____ Exp. Date _____

HEALTH/LIFE INSURANCE

Company	Policy Number	Insured	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

My agent is _____