

## **My Personal Data and Documentation**

### **At a glance guide**

A handy reference questionnaire to keep track of your financial affairs

When planning your financial affairs, it's an excellent idea to have a simple investment overview, updated annually, that documents all your personal and business activity. In the event something should happen to you, it will give your family a clear view of your financial affairs, including information on your living will and organ donation arrangements you may have made.

Once you fill it out, be sure to let your family know where it is kept. Keep it safe... and always make sure it is up to date.

### **My family/named Beneficiaries (in priority order)**

Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

E-mail \_\_\_\_\_

### **My contacts**

Please notify the following people in the event of a serious accident or death

**Executor/Liquidator** \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

**Financial Advisor** \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

**Employer/business partner(s)** \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

---

E-mail \_\_\_\_\_

**Lawyer/Notary** \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

---

E-mail \_\_\_\_\_

Accountant \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

---

E-mail \_\_\_\_\_

**Doctor** \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

---

E-mail \_\_\_\_\_

**Dentist** \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

---

E-mail \_\_\_\_\_

**Bank/credit union** \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

**Stock broker** \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

**Trust officer** \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

**Accountant** \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

**My will(s)**

I have a will  Yes  No

The original is located at \_\_\_\_\_

A copy is located \_\_\_\_\_

The will was dated/last updated \_\_\_\_\_

**Living will**

I have a living will?  Yes  No

My living will is kept at \_\_\_\_\_

**Power of attorney**

I have named a power of attorney      Yes No

Name: \_\_\_\_\_

Arrangements are made through \_\_\_\_\_

\_\_\_\_\_

The original is located \_\_\_\_\_

A copy is located \_\_\_\_\_

**Organ donation**

I want to donate your organs

or body for transplant,

medical research or education              Yes No

(Please note: If yes, be sure to indicate this in your living will, organ donor card and driver’s license)

**Funeral arrangements**

I have made funeral arrangements              Yes No

Funeral home and address \_\_\_\_\_

Telephone \_\_\_\_\_

I have set out instructions for burial/cremation or funeral. Yes No

These instructions are in my will?              Yes No

These instructions are in a letter?              Yes No

They are located \_\_\_\_\_

I own a cemetery plot?                      Yes No

I have provided for its ongoing care?              Yes No

The plot is located \_\_\_\_\_

The deed to it is kept \_\_\_\_\_

My Personal Information

Date of birth \_\_\_\_\_

Place of birth \_\_\_\_\_

Birth certificate is located \_\_\_\_\_

Social insurance/social security number

\_\_\_\_\_

Citizenship papers      Yes No

They are located \_\_\_\_\_

Marriage certificate      Yes No

Located \_\_\_\_\_

Military service Yes No

Discharge papers are located \_\_\_\_\_

Country served \_\_\_\_\_

Veteran's number \_\_\_\_\_

**Previous employers**

Past Employers (from your first employer to the most current listed last)

Employer \_\_\_\_\_

Year \_\_\_\_\_

Address/e-mail \_\_\_\_\_

\_\_\_\_\_

Employer \_\_\_\_\_

Year \_\_\_\_\_

Address/e-mail \_\_\_\_\_

\_\_\_\_\_

Employer \_\_\_\_\_

Year \_\_\_\_\_

Address/e-mail \_\_\_\_\_

\_\_\_\_\_

Employer \_\_\_\_\_

Year \_\_\_\_\_

Address/e-mail \_\_\_\_\_

\_\_\_\_\_

### My Financial Information

#### **Bank accounts**

Be sure to list all your bank accounts, so your executor or family can find the money you have in these accounts.

Bank/credit union \_\_\_\_\_

Branch \_\_\_\_\_

Account # \_\_\_\_\_

Type \_\_\_\_\_

Bank/credit union \_\_\_\_\_

Branch \_\_\_\_\_

Account # \_\_\_\_\_

Type \_\_\_\_\_

Bank/credit union \_\_\_\_\_

Branch \_\_\_\_\_

Account # \_\_\_\_\_

Type \_\_\_\_\_

Bank/credit union \_\_\_\_\_

Branch \_\_\_\_\_

Account # \_\_\_\_\_

Type \_\_\_\_\_

**Financial commitments**

Rent or mortgage payments

Amount \$ \_\_\_\_\_

Due date \_\_\_\_\_

Lender \_\_\_\_\_

Address \_\_\_\_\_

**My Financial Information cont.**

**Outstanding loans**

Amount \$ \_\_\_\_\_

Due date \_\_\_\_\_

Lender \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Amount \$ \_\_\_\_\_

Due date \_\_\_\_\_

Lender \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

**Bills paid through automatic payment plan**

Amount \$ \_\_\_\_\_ Due date \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Amount \$ \_\_\_\_\_ Due date \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Amount \$ \_\_\_\_\_ Due date \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Amount \$ \_\_\_\_\_ Due date \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

**Other financial obligations or commitments**

For \_\_\_\_\_

Located \_\_\_\_\_

For \_\_\_\_\_

Located \_\_\_\_\_

**My Life Insurance Information**

**Policies you own on your life**

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

**Policies you own on others**

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

**Policies others own on your life**

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

**Group or association life insurance**

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

**My Insurance Information**

**Critical illness insurance**

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

**Disability insurance**

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

**Hospital and medical insurance**

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Pension plans \_\_\_\_\_

**Long term care insurance**

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

Company \_\_\_\_\_

Policy number \_\_\_\_\_

Policy is located \_\_\_\_\_

**My Financial & Investment Information**

**I am a member of a registered pension plan**      Yes No

Carrier name and address \_\_\_\_\_

\_\_\_\_\_

Carrier name and address \_\_\_\_\_

\_\_\_\_\_

Information about these plans is located \_\_\_\_\_

**I have a registered retirement savings plan (RRSP)**

Yes No

Carrier name and address \_\_\_\_\_

\_\_\_\_\_

Carrier name and address \_\_\_\_\_

\_\_\_\_\_

Information about these plans is located \_\_\_\_\_

\_\_\_\_\_

I am a member of a deferred profit sharing plan

Yes No

Carrier name and address \_\_\_\_\_

\_\_\_\_\_

Carrier name and address \_\_\_\_\_

\_\_\_\_\_

Information about these plans is located \_\_\_\_\_

\_\_\_\_\_

**Investments**

Segregated funds/mutual funds/RESPs                      Yes No

Fund \_\_\_\_\_

Policy number \_\_\_\_\_

Carrier name and address \_\_\_\_\_

\_\_\_\_\_

I invest regularly using automatic withdrawals?                      Yes No

How often? \_\_\_\_\_

Where is it taken from? \_\_\_\_\_

Do you receive income? Yes No

How often? \_\_\_\_\_

Where is it deposited? \_\_\_\_\_

Information about these investments is located \_\_\_\_\_



Carrier name and address \_\_\_\_\_

\_\_\_\_\_

Do you receive income? Yes No How often? \_\_\_\_\_

Where is it deposited? \_\_\_\_\_

Information about these annuities is located \_\_\_\_\_

\_\_\_\_\_

### **Bonds and government investments**

Do you have any government bonds? Yes No

Type of bond \_\_\_\_\_

Bearer \_\_\_\_\_

Registered in my name Yes No

Co-registered with \_\_\_\_\_

Serial numbers \_\_\_\_\_

\_\_\_\_\_

The bonds are located \_\_\_\_\_

Do you own any stocks or bonds? Yes No

Information about them is located \_\_\_\_\_

\_\_\_\_\_

Did you acquire any of them by gift or inheritance? Yes No

Are any of your securities pledged for loans? Yes No

With whom \_\_\_\_\_

### **My Residence and Real Estate Information**

Type of real estate (e.g. house, condo, etc.)

\_\_\_\_\_

Title is held by You Spouse Joint

Is there a mortgage? Yes No

Mortgage is held by \_\_\_\_\_

Type of real estate (e.g. house, condo, etc.)

\_\_\_\_\_

Title is held by You Spouse Joint

Is there a mortgage? Yes No

Mortgage is held by \_\_\_\_\_

Type of real estate (e.g. house, condo, etc.)

\_\_\_\_\_

Title is held by You Spouse Joint

Is there a mortgage? Yes No

Mortgage is held by \_\_\_\_\_

Where are the following located?

Deeds \_\_\_\_\_

Copy of mortgages \_\_\_\_\_

Property insurance policies \_\_\_\_\_

Land surveys \_\_\_\_\_

Property tax receipts \_\_\_\_\_

Leases \_\_\_\_\_

Building cost figures \_\_\_\_\_

Personal property

List all vehicles you own \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

Vehicle registrations are located \_\_\_\_\_

---

Bill of sale and insurance papers are located \_\_\_\_\_

---

Jewelry, stamp collections, coin collections, etc. are located

---

Are household furnishings insured? Yes No

Bill of sale, an inventory of and insurance policies for

household furnishings are located:

### **My Debtor and Creditor Information**

People who owe you money

Name \_\_\_\_\_

Amount \_\_\_\_\_

Date \_\_\_\_\_

Address/e-mail \_\_\_\_\_

---

Name \_\_\_\_\_

Amount \_\_\_\_\_

Date \_\_\_\_\_

Address/e-mail \_\_\_\_\_

---

People to whom you owe money

(other than previously listed)

Name \_\_\_\_\_

Amount \_\_\_\_\_

Date \_\_\_\_\_

Address/e-mail \_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

Amount \_\_\_\_\_

Date \_\_\_\_\_

Address/e-mail \_\_\_\_\_

\_\_\_\_\_

Loan agreements or promissory notes are located

\_\_\_\_\_

### **My Safety Deposit Box Information**

I have a safe deposit box            Yes No

Location \_\_\_\_\_

Names of others who have access to it \_\_\_\_\_

Location of the keys \_\_\_\_\_

List of contents is kept \_\_\_\_\_

Charitable gifts

For \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

For \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

**Contractual obligations**

For \_\_\_\_\_

Located \_\_\_\_\_

For \_\_\_\_\_

Located \_\_\_\_\_

For \_\_\_\_\_

Located \_\_\_\_\_

For \_\_\_\_\_

Located \_\_\_\_\_

**Trust funds**

Have you created any trusts? Yes No

Purpose \_\_\_\_\_

Trust agreement was drawn up by \_\_\_\_\_

\_\_\_\_\_

Trust papers are located \_\_\_\_\_

**Income tax**

Your tax advisor is \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

Your tax data and supporting data are located \_\_\_\_\_

\_\_\_\_\_

**My Membership Information**

List all memberships in clubs, associations and subscriptions.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

**Notes**

Barry Greenberg provides life insurance advisory services, offering a wide selection of Canada's best insurance programs

to protect you, your employees and your business.

Protect what's most precious

For more information on Barry Greenberg Life Insurance services

visit [www.criticalillnessprotection.ca](http://www.criticalillnessprotection.ca)