

# MY WISHES RECORD KEEPER



## To My Family

My goal is to make it easy as possible for you at what is probably a difficult time. I know you have many decisions to make on my behalf and I hope this information will help.

Thank you.

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Signature

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Date

## About Me

This is information about me that will help you in locating records and in writing an obituary.

### **Full Name**

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Country of citizenship: \_\_\_\_\_

### **Address**

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP: \_\_\_\_\_ At this address since (date): \_\_\_\_\_

### **Birth**

City: \_\_\_\_\_ State: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Country: \_\_\_\_\_

### **Work**

Occupation: \_\_\_\_\_

Date retired: \_\_\_\_\_ Employer(s): \_\_\_\_\_

Retirement benefits from previous employer?: \_\_\_\_\_

Previous Employer: \_\_\_\_\_

### **Marital Status**

\_\_\_\_ Married \_\_\_\_ Single \_\_\_\_ Divorced \_\_\_\_ Widowed

Birth name (if different): \_\_\_\_\_

Spouse's name: \_\_\_\_\_

Date and place of marriage: \_\_\_\_\_

### **Parents**

Father's name: \_\_\_\_\_

Birthplace: \_\_\_\_\_

Mother's birth name: \_\_\_\_\_

Birthplace: \_\_\_\_\_

### **Military Record:**

Branch of Service: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Rank: \_\_\_\_\_

Date and place of induction: \_\_\_\_\_

Date and place of discharge: \_\_\_\_\_

### ***Education***

<i>Insitution(s)</i>	<i>Year(s)</i>	<i>Degrees Earned</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

***Clubs and Organizations:*** \_\_\_\_\_

\_\_\_\_\_

### ***Social Media***

<i>Social Media Platform</i>	<i>Login</i>	<i>Password</i>
_____	_____	_____
_____	_____	_____

### ***Digital Assets***

*Hardware:* \_\_\_\_\_

*Online Accounts:* \_\_\_\_\_

*Information or Data (photos, music, etc.):* \_\_\_\_\_

\_\_\_\_\_

*Domain Names:* \_\_\_\_\_

### ***People to Contact***

*Name:* \_\_\_\_\_ *Phone number:* \_\_\_\_\_

*Address:* \_\_\_\_\_ *Relationship:* \_\_\_\_\_

*Name:* \_\_\_\_\_ *Phone number:* \_\_\_\_\_

*Address:* \_\_\_\_\_ *Relationship:* \_\_\_\_\_

*Name:* \_\_\_\_\_ *Phone number:* \_\_\_\_\_

*Address:* \_\_\_\_\_ *Relationship:* \_\_\_\_\_

*Name:* \_\_\_\_\_ *Phone number:* \_\_\_\_\_

*Address:* \_\_\_\_\_ *Relationship:* \_\_\_\_\_



# My Advisors

The people I sought for advice on important matters and their contact information.

	<i>Name</i>	<i>Phone</i>
<i>Attorney:</i>	_____	_____
<i>Accountant:</i>	_____	_____
<i>Financial Advisor:</i>	_____	_____
<i>Insurance Agent:</i>	_____	_____
<i>Physician:</i>	_____	_____
<i>Employer Benefits:</i>	_____	_____
<i>Other:</i>	_____	_____



# My Finances

Information about some of my financial dealings.

## Banking

*Checking Account(s):*\_\_\_\_\_

*Institution(s):*\_\_\_\_\_

*Savings Account(s):* \_\_\_\_\_

*Institution(s):*\_\_\_\_\_

## Investments

*Investment Type:*\_\_\_\_\_

*Account or Certificate Number:*\_\_\_\_\_

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*Account or Certificate Number:*\_\_\_\_\_

### ***Credit Cards***

*Institution:* \_\_\_\_\_

*Account Number:* \_\_\_\_\_

*Institution:* \_\_\_\_\_

*Account Number:* \_\_\_\_\_

*Institution:* \_\_\_\_\_

*Account Number:* \_\_\_\_\_

### ***Loan***

*Institution:* \_\_\_\_\_

*Account Number:* \_\_\_\_\_

*Institution:* \_\_\_\_\_

*Account Number:* \_\_\_\_\_

### ***Real Estate***

*Owners:* \_\_\_\_\_

*Title Held as:* \_\_\_\_\_

*Purchase Price and Date:* \_\_\_\_\_

### ***Other Assets***

*Description:* \_\_\_\_\_

*Purchase Price and Date:* \_\_\_\_\_

*Location of Asset:* \_\_\_\_\_

### ***Insurance Coverages***

*Health:* \_\_\_\_\_

*Life:* \_\_\_\_\_

*Disability:* \_\_\_\_\_

*Critical Illness:* \_\_\_\_\_

*Property and Casualty:* \_\_\_\_\_

*Long-term Care:* \_\_\_\_\_



## My Important Documents

Location of the documents you may need to settle my affairs.

*Safety Deposit Box Location:* \_\_\_\_\_

*Box Number* \_\_\_\_\_ *Location of Keys:* \_\_\_\_\_

*Will:* \_\_\_\_\_

*Living Will:* \_\_\_\_\_

*Medical Power of Attorney:* \_\_\_\_\_

*Financial Power of Attorney:* \_\_\_\_\_

*Trusts:* \_\_\_\_\_

*Social Security Card:* \_\_\_\_\_

*Military Records:* \_\_\_\_\_

*Insurance Cards:* \_\_\_\_\_

*Insurance Policies:* \_\_\_\_\_

*Pensions & Retirement Plans:* \_\_\_\_\_

*Income Tax Documents:* \_\_\_\_\_

*Stocks and Bonds:* \_\_\_\_\_

*Property Deeds or Mortgages:* \_\_\_\_\_

*Bank Records:* \_\_\_\_\_

*Automobile Titles:* \_\_\_\_\_

*Birth Certificate:* \_\_\_\_\_

*Marriage License:* \_\_\_\_\_

*Other:* \_\_\_\_\_



## My Memorial Service

Here are my wishes for my memorial service and final resting place.

*Funeral Home:* \_\_\_\_\_

*Pre-arrangements::* \_\_\_\_YES \_\_\_\_NO

*Type of Service:* \_\_\_\_\_

*Desired Location:* \_\_\_\_\_

*Religious Affiliation:* \_\_\_\_\_

*Clergyman or Officiant:* \_\_\_\_\_

*Phone Number:* \_\_\_\_\_

*Pallbearers:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### ***Speacial Requests***

*Clothing:* \_\_\_\_\_

\_\_\_\_\_

*Viewing:* \_\_\_\_\_

*Eulogy:* \_\_\_\_\_

\_\_\_\_\_

*Music:* \_\_\_\_\_

\_\_\_\_\_

*Prayers or Readings:* \_\_\_\_\_

\_\_\_\_\_

*Flowers:* \_\_\_\_\_

*Donations:* \_\_\_\_\_

*Preferred Cemetery or Mausoleum:* \_\_\_\_\_

*Plot Purchased:* \_\_\_\_YES \_\_\_\_NO

*Location:* \_\_\_\_\_

*Headstone or Monument:* \_\_\_\_\_

*Inscription:* \_\_\_\_\_

\_\_\_\_\_

*Special Request Instructions:* \_\_\_\_\_

\_\_\_\_\_



# One Last Wish

This is what I would like my family and friends to remember about me.

*My Early Life:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*My Hopes and Dreams:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*My Career:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*My Hobbies and Interests:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*My Travels:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*My Favorite Places:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*My Greatest Accomplishments:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*My Fondest Memories:* \_\_\_\_\_

\_\_\_\_\_

*My Family History:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Final Thoughts and Instructions

Here are a few more things I'd like for you to know.

[illegible]



Courtesy of  
**MUTUAL OF OMAHA INSURANCE COMPANY**

[Agent/Marketer Name]  
[Agent/Marketer Phone Number]  
[Agent/Marketer Email Address]