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## **Document Locator**

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Name:	Date:	. ,	
Personal Documents (Indica	ate Location, if None or I	Not Applic	able, so state.)
Original Will:			i. Ú
Spouse's Will:		4)	
Special Estate Instructio	ns:		
Funeral Instructions:			
Cemetery Plot Papers: _		·····	,
Bank Safe Deposit Box:			
Trust Documents:		<del></del> -	
Power of Attorney:		<del></del>	
Health Care Power of Att	orney:		
Living Will:			. 4
Birth Certificate:			
Marriage Certificate:		,	
Divorce Papers:			
	Military, Naturalization, et		

## Business & Professional (Location, if None or Not Applicable so state) Partnership/LLC Documents: Corporate Documents: Buy/Sell Agreements: Pension Plans: Other Employee Benefits: Other: Tax Returns and Records (Location, if None or Not Applicable so state) Income Tax Returns: Gift Tax Returns: Tax Basis for Property: (Real Estate, Stocks, Bonds, etc) Insurance Policies (Location, Contact Info, if None so state) Life Insurance: Homeowners: Umbrella Liability: Disability/Business Overhead: Income Annuities: Long-Term Care: \_\_\_\_\_ Medical:

Other (Accident, Disease, Boat, etc):	
Financial Assets (Location, Account Numbers, if None so s	tate)
Checking Accounts:	ţ
Savings Accounts:	
Money Market Accounts:	_
Certificates of Deposit:	
Securities Accounts:	
Mutual Fund Accounts:	
Retirement Accounts:	
Other:	
Miscellaneous Instruments:	٠
Original Deeds to Real Property:	
Mortgages, Loans, Leases:	<del></del>
Personal Loans:	4
Auto Loans:	
Titles (Car, Boats):	
Others (Affidavits, Agreements):	<del></del>
Names and Telephone Numbers of Personal and Professional	Advisors
Attorney:	
Accountant:	
Insurance Agent:	

investment Advisor:	 
Clergy:	
Physician:	
Executor of Estate:	
Next of Kin (and addresses):	
	**************************************
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Other:	 -