

HOSPICE HOME HOSPICE CARE PALLIATIVE CARE GRIEF SUPPORT

Planning for today ... and tomorrow

Your Personal Information Log



Planning for the future

No one ever plans to become sick or disabled. Yet, it's the kind of planning that can make all the difference in an emergency situation. Putting all your important personal information in one place can help first responders, your medical team, and your family members find important information quickly and easily.

What exactly is an "important paper"?

The answer to this question may be different for every family. This is simply a starting place. You may have other information to add (for example, if you have a pet, you'll want to include the name and address of your veterinarian).

Personal Records include:

- Full legal name
- Social Security Number
- Legal residence
- Date and place of birth
- Names and address of spouse and children
- Location of birth and death certificates
- Location of certificates of marriage, divorce, citizenship and adoption(s)
- Employers and dates of employment
- Education and military records
- · Names and phone numbers of religious contacts
- Names and phone numbers of close friends, relatives, doctors, lawyers and financial advisors
- Medications taken regularly (be sure to update these regularly)
- Location of living will and other legal documents

Financial Records include:

- Sources of income and assets (employer, pensions, IRAs, 401(k)s, etc.)
- Social Security and Medicare/Medicaid information
- Insurance information (life, health, long-term care, home, car) with policy numbers and agents' names and phone numbers

Financial Records (cont.)

- Names of your banks and account numbers (checking, savings, credit union)
- Investment income (stocks, bonds, property) and stockbrokers' names and phone numbers
- Copy of most recent income tax return
- Location of your most up-to-date will with an original signature
- Liabilities, including property tax-what is owed to whom and when payments are due
- Mortgages and debts–how and when theγ are paid
- Location of the original deed of trust for your home
- Car title and registration
- Credit and debit card names and numbers
- Location of safety deposit box and key

The following pages will help guide you to getting your important information into one place. You may want to make extra copies of this to give to your next of kin or other close family members. Remember to update the information at least annually to reflect changes in your personal affairs.

For more information about getting your affairs in order:

AARP

1-888-687-2277 (toll-free)

1-877-434-7598 (TTY/toll-free)

1-877-342-2277 (Español/linea gratis)

1-866-238-9488 (TTY/linea gratis)

member@aarp.org

www.aarp.org/health

CaringInfo

National Hospice and Palliative Care Organization 1-800-658-8898 (toll-free)

caringinfo@nhpco.org

www.caringinfo.org

Centers for Medicare & Medicaid Services

1-800-633-4227 (toll-free)

1-877-486-2048 (TTY/toll-free)

www.medicare.gov

Eldercare Locator

1-800-677-1116 (toll-free)

www.eldercare.gov



Personal information



Full name:
Address:
Date of Birth:
Place of Birth:
Names of parents:
Date of marriage:
Location of marriage/divorce certificate:
Social Security/Tax ID Number:
Driver's license state and number:
Passport number:
Next of kin details:
Name:
Address:
Phone number(s)
Occupation:
Work address:
HOLK PHOLIC

Familγ



Relationship	Name	Contact information

Health and Medications: include any ongoing medication

conditions and allergies



Medication	Physician treating
	Medication

Special needs: include any special instructions in the case



of your death

Pet(s) name(s):		
Veterinarian contact information:		
Pets medications and instructions:		

OTHER INSTRUCTIONS:

Location of important documents/items

Birth Certificate	
Marriage certificate	
Social Securitγ card	
Driver's license	
Passport	
Bank book/statements	
Will	
Medicare/Medicaid cards	
Safe (location and combination)	
Valuables e.g.: jewelrγ, guns, antiques	
List:	
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Financial Information



Bank Accounts	Account details	Account numbers	Bank address/
			contact information
			·

Schedule of regular payments: include direct debits/

standing orders from your bank and investment accounts

Details	Amount	Frequency	Bank/account

Credit cards: include Visa, Amex, MasterCard, Discovery and store cards

Card provider	Address and contact number	Card number/expiration date

Utility Companies



	Name of supplier	Account/reference number
Gas		
Electricity		
Water		
Telephone		
Cell phone		
TV/Internet		
Others (newspaper, lawn care, etc.)		
,		

Insurance Companies



Tγpe of insurance	Name of insurance	Account number/	Address and contact
	companγ	reference number	details
Life insurance		•	
House insurance			
Car insurance			
Health/long-term care insurance			
OTHER			
OTHER			

Government: e.g.: benefits such as disability, income support,



Social Security, etc.

Details	Contact information	Account/Reference number

Loans: Mortgages



Mortgage provider: address & contact information	Account number	Repayment	Mortgage amount and term

Further details on Mortgage(s):

Other Loans/Leases: e.g.: cars, student loans, furniture



Name, address & contact number of company	Account/reference number	Details of loan: amount, repayment details

Investments, Stocks and Shares



Details of portfolios	Account/reference number	Address and contact numbers

Pension providers



Name, address & contact	Account/reference number	Other details
number of companγ		

Loyalty cards: store cards, frequent flyers, hotel cards



Card provider	Account/reference number	Address and contact
		information

Last Will and Testament



Is there a Will?	
Where is the Will kept?	
Name, phone number, email and address	
of the person who holds the will, if with an	
attorney, family member or friend	
When was the Will made / last updated?	
Who are the Executors named in the Will?	
Details of 1st Executor:	
Name:	
Address:	
Contact number/Email address:	
Details of 2nd Executor:	
Name:	
Address:	
Contact number/Email address:	
Is there a Guardian appointed for Children in the Will?	
Name and address:	
Contact number/Email address:	

Living Will



	Is there a Living Will?	
	Where is the Living Will kept?	
	Name and address of the person who holds	
	the Living Will, if with a friend or attorneγ	
	Discretionary Will Trus	st
	Is there a Discretionarγ Will Trust?	
	Where is this stored?	
	Name and address of the person who holds	
	the Discretionary Will Trust, if with a friend	
	or attorney	
Enduring or Lasting Power of Attorney		
	Where is the Enduring or Lasting Power of Attorney stored?	
	Name and address of the person who holds	
	the Power of Attorney, if with a friend or	
	attorney	

Organ Donation



I wish to donate mγ organs Y / N	

Funeral planning

Prepaid funeral or funeral plan details:

Name of Provider:		
Address:		
Contact details:		
Reference/Account number:		
If no plan in place:		
Details to consider		
I wish to be buried / cremated		
I wish mγ funeral service to be at:		
Where I would like to be buried / ashes placed		
The music I would like to be included in the service		
Special readings or hymns		
I would like the following persons to conduct the service if possible.		
Other details I would like e.g.: flowers, donations to named charities, people to be informed.		

Informing People: Below is a list of family and friends who



should be informed in the event of my death.

Family / relative/ friend	Name	Contact information

Passwords: Below is a list of passwords to various online accounts.



Account	Web address	Password

Notes



Notes





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The information enclosed in this handout is valuable. Keep it in a secure location that you disclose only to a trusted relative or friend. This is not a legal document. If you have questions about your final wishes, please consult an attorney who specializes in end of life issues.

Visiting Nurse has cared for people with serious illnesses and their families in northeast Indiana since 1888. Our interdisciplinary team of hospice experts ensures that every patient is treated with dignity and respect. Visiting Nurse provides compassionate care to alleviate suffering and ensure quality of life for those affected by serious illness. We care for those who go on living as well. Our grief services are available at no charge for any adult who has experienced the loss of a loved one.

We proudly serve the following Indiana counties: Adams, Allen, DeKalb, Huntington, Noble, Wabash, Wells and Whitley

5910 Homestead Road Fort Waγne, IN 46814 Phone: (260) 435-3222 Toll-free: (800) 288-4111 www.vnfw.org mail@vnfw.org

Nursing and Patient Referral Line:

24 hours a day, 7 days a week

Administrative Office Hours: 8 a.m.-5 p.m. Monday-Friday

We provide compassionate care to all persons, regardless of race, age, creed, sexual orientation or nationality. Translation services available upon request. To make a difference in the lives of Visiting Nurse patients and families, consider making a gift to the Visiting Nurse Foundation. Please visit www.vnfw.org/donate or call (260) 435-3222.