

My Final Wishes

Basic Information

Legal Name: _____

Maiden Name: _____

Phone Number: _____

Date of Birth: _____

Place of Birth: _____

Home Address: _____

Social Security Number: _____

Parent(s) or Guardian(s) Legal Name(s): _____

Occupation: _____

Name of Beneficiary: _____

Name of Attorney: _____

Location of Documents

My will or trust is located: _____

My keys are located: _____

My life insurance paperwork is located: _____

Any other keys and/or safe combinations: _____

My bank statements are located: _____

The deed to my home is located: _____

Checking and savings account bank(s): _____

Other important documents (birth, marriage, divorce, military, and tax forms) are located: _____

Computer and phone passwords: _____

Auto insurance and car information: _____

End of Life Plans

I would like to have a: Funeral Memorial Celebration of Life Other

I would like to be: Buried Cremated

I have selected my urn or casket: Yes _____ No

I have pre-purchased a burial plot: Yes _____ No

Burial Location: _____

Where I'd like my service held: _____

Name of requested officiator: _____

Specific ceremony requests: No service Open casket

Closed casket Wake Graveside ceremony No preference

Favorite Songs: _____

Favorite Flowers: _____

Request for specific readings, prayers, or poems: _____

Military honors: Yes No

Military rank: _____

I request to be buried with: _____

Names of requested pallbearers: _____

I've attached to this document notes to my loved ones: Yes No

Obituary Information

Level of education: _____

Awards or honors: _____

Career titles: _____

Hobbies: _____

Anything I would like to have mentioned: _____

Important Contacts

Who should be contacted if I pass away? _____

My pets should be cared for by (add names and contact information): _____
