

My information

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Filled-in information last revised (put date here)

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GENERAL | [Top](#)

My personal information:

- name
- primary address
- Landline phone (xxx) xxx-xxxx (if you have one)
- Cell phone (xxx) xxx-xxxx
- Birthdate xxxxx in (city, state, country)
- Social security number xxx-xx-xxxx
- Emails: [xxx@xxx.com](#) and [xxxx@xxx.com](#)
- Drivers license or state ID card xxxxxxx in state xxxxxx expires xxxxxxx
- Passport number and country, with expiration date
- Location of my will/trust
- Location of safe deposit box (if any) including box number and key location
- Location of home safe (if any) including combination or key location

My secondary address (if any):

- Address
- Landline phone
- Location of keys
- Caretaker or property management info (if any)
 - Name, address, phone, email, website

Login usernames and passwords (and PIN if used) for your primary computer, smartphone, and/or tablet.

- SmartPhone (if any)
 - Unlock code or pattern
 - PIN (if used)
 - If it's an iPhone, your AppleID and AppleID password
 - If you normally unlock with your fingerprint, make sure you know the unlock code and write it down, for when your fingerprint is no longer available.
- Desktop computer (if any)
 - Login username
 - Password
 - PIN
 - BIOS password, BitLocker key, or hard drive password (if used)

Laptop computer (if any)

Login username

Password

PIN

BIOS password, BitLocker key, or hard drive password (if used)

Tablet (if any)

Unlock code

PIN (if used)

If it's an iPad, your AppleID and AppleID password

If you normally unlock with your fingerprint, make sure you check the unlock code and write it down, for when your fingerprint is no longer available.

Email address(es) and password(s). Make sure to distinguish upper-case from lower-case and distinguish the letter O from zero, and distinguish the letter I from the number 1.

Password manager (if used)

Name of company and their website URL

Login username and password

Security questions and answers

Login information for account/phone to which two-factor authentication is sent

List the location of important documents and papers. Be specific. If in a locked drawer, list where keys are located. If in a safe, provide combination to safe. A sample list appears at the end of this document.

PEOPLE | [Top](#)

Next of kin:

Name

Address

Phone

Email

Executor of will or successor trustee(s) of trust. Provide contact information:

Name

Address

Phone

Email

If you do not have a general Power of Attorney form nominating a conservator should you need one, execute such a form and include it with your important papers.

If you have dependent children or dependent relatives, list them here. For each, provide contact information, dietary restrictions, and important medical and other information. For each, include contact information for doctors, dentists, physical therapists, etc. If your child is young enough to use a security blanket or favorite stuffed animal, or needs a particular bedtime ritual, include that information.

If you have pets, list them here and provide contact information for their veterinarian(s). If your will or trust does not contain this information, state the disposition of your pets when you are no longer able to or willing to care for them. For each pet, provide its name, any dietary restrictions, and other important information.

Accountant: name, address, phone, email

Lawyer: name, address, phone, email

Neighbors or nearby contacts:

Name, address, phone, email

House cleaner or cleaning service: Name, address, phone, email. Website and login info if it is a service

Pool guy: Name, address, phone, email

Handyman: Name, address, phone, email

Computer person: Name, address, phone, email

Gardener: Name, address, phone, email

Auto mechanic: Name, address, phone, email

Counselor or therapist: Name, address, phone, email

Personal trainer: Name, address, phone, email

Other people who the family/heirs might want to contact:

MEDICAL CARE | [Top](#)

Primary care physician

Doctor's name, address, phone, email

Medical record number

Medicare number xxxxxxx

Durable power of attorney for medical care and POLST forms:

Where to find a copy

For your primary decision maker, provide:

Name

Address

Phone

Email

Pharmacy

Name, address, phone number

Medical group name

Website

Online login username and password

List specialists that you see such as:

Oncologist name, phone number

Podiatrist name, phone number
Urology name, phone number
Ophthalmology name, phone number
Neurology name, phone number

Medical alert system (if you have one)

Website, account number, emergency contact, payment info

Healthcare equipment provider (if you have one)

Website, phone, account number, username/password
Payment info

Personal assistant provider (if you have one)

Website, phone, account number, username/password
Payment info

Dentist name and phone

Periodontist name and phone (if you have one)

Eyeglasses prescription and contact info for dispensing optician

INSURANCE | [Top](#)

Homeowners, renters and/or and earthquake insurance

Agent name, phone, address (if you have one)
Company name, policy number(s), contact phone
Company website, login username, login password
Autopay information

Life insurance (if any). For each policy, list:

Agent name, phone, address (if you have one)
Company name, policy number(s), contact phone
Company website, login username, login password
Autopay information

Auto insurance

Agent name, phone, address (if you have one)
Company name, policy number(s), contact phone
Company website, login username, login password
Autopay information
Vehicle make/models, years and license plates. Location of keys

Umbrella insurance (if with separate company)

Agent name, phone, address (if you have one)
Company name, policy number(s), contact phone
Company website, login username, login password

Autopay information

Medical insurance, dental insurance, vision insurance, and all Medicare supplements (list each separately)

- Company name
- Website
- Login userID/password
- Customer service phone number
- Policy number
- Date policy expires
- Autopay and billing information

Long term care insurance

- Company name
- Website
- Login userID/password
- Customer service phone number
- Policy number
- Date policy expires
- Autopay and billing information

Insurance for boat, second home, professional liability, or others not listed above.

FINANCIAL INSTITUTIONS | [Top](#)

Banks, savings and loans, and credit unions (if more than one, list each separately)

- Name of bank
- Account number(s)
- Address
- Phone
- Contact name if you have an assigned banker
- Website
- Login username/password
- List of autopays coming from accounts
- Bank routing number (used to set up autopays)
- Safe deposit box number (if any) and location of key

Brokerage accounts (if more than one, list each separately)

- Name of brokerage
- Account number(s)
- Address
- Phone
- Contact name if you have an assigned banker
- Website
- Login username/password
- List of autopays coming from accounts
- Bank routing number (used to set up autopays)

Safe deposit box number (if any) and location of key

List of stocks and bonds held outside of a brokerage account. If you have paper certificates, list their location and certificate numbers. If you have electronically-held shares, for each company list contact information for the transfer agent.

Pension or company retirement plan

Name of company
Account number(s)
Address
Phone
Contact name if you have an assigned banker
Website
Login username/password
List of autopays coming from this account
Method for getting disbursement

Annuity (if any)

Name of company
Account number(s)
Address
Phone
Contact name if you have an assigned banker
Website
Login username/password
If automatic withdrawal set up, where does it go?

401K, IRA, etc. if held at places not listed above.

Loans or lines of credit if with other than above. For each list:

Name of company
Account number(s)
Address
Phone
Contact name if you have an assigned banker
Website
Login username/password
Autopay information

PayPal, Google Wallet, Apple Pay or other online payment systems

For each, website, username, and password

Keep current list of past IRA withdrawals so people know when the next required disbursement will be needed.

If you have a file of current-year tax documents to help prepare this year's tax return, list the location of this paper file and/or computer files.

CREDIT CARDS and ONLINE SHOPPING | [Top](#)

For each card or online merchant (such as Macys, Amazon, Citibank, etc, list:

- Company name
- Credit card number (if any) with expiration date
- For credit cards, CVC code (or code on front for Amex card)
- Customer service phone number
- Website
- Login username/password
- List of autopays set up on this card

TRANSPORTATION | [Top](#)

Cars, motorcycles and trucks – for each list

- Make/model/year
- License plate

Boats (if any). For each list make/model/year and hull number

Uber, Lyft or other rideshare programs

- For each list website, username, password, autopay information

OnStar, Garmin, or other in-vehicle system (specify which)

- Website
- Username, password
- Autopay information

Clipper card or other mass transit access cards

- Website
- Username, password
- Autopay information

EZPass, FasTrak or other toll tag information

- Company name
- Website
- Account number
- Login username/password
- Autopay info

Frequent flyer accounts. For each provide:

- Company name
- Website
- Account number
- Login username/password
- Autopay info

RESIDENCE AND UTILITIES | [Top](#)

If renting, contact information for landlord

Name
Address
Phone
Email

If sharing the dwelling, contact information for each roommate, co-tenant or co-owner

Name
Address
Phone
Email

Mortgage or reverse mortgage (if more than one, list for each)

Account number
Company who handles it
Account number
Website
Customer service number
Login username and password
Security questions on account
Autopay information

If you have a homeowners' association, provide contact information

Name
Address
Phone
Email
Dues paid until what date?
Autopay for dues, if applicable

Home alarm system (if any)

Location of control panel
Disarm code and instructions
Arming instructions
Company who handles it
Account number
Website
Customer service number
Login username and password
Security questions on account
Autopay information

Phone landline (if you have one)

Phone number
Company who handles it
Account number

Website
Customer service number
Login username and password
Security questions on account
Autopay information

Cell phone

Phone number
Phone unlock code (if smartphone)
Tablet unlock codes (if you have one or more)
Company who handles it
Account number
Website
Customer service number
Login username and password
Security questions on account
Autopay information

Internet provider (if used, and if separate from the above)

Associated phone number
Company who handles it
Account number
Website
Login username/password
Security questions
Autopay information
Modem/gateway/router username and password (if changed from default)
WiFi network name and password (if you changed from default settings)
Modem/router login username/password (if you changed from default settings)

Cable TV provider (if used, and if separate from the above)

Associated phone number
Company who handles it
Account number
Website
Login username/password
Security questions
Autopay information

Trash service (if not handled by landlord or property tax bill)

Company who handles it
Customer service number
Account number
Website
Login username and password
Autopay information

Water service (if not handled by landlord)

Company who handles it
Customer service number
Account number
Website
Login username and password
Autopay information

Gas service (if not handled by landlord)

Company who handles it
Customer service number
Account number
Website
Login username and password
Autopay information

Electricity service (if not handled by landlord)

Company who handles it
Customer service number
Account number
Website
Login username and password
Autopay information

Sewer or septic tank service (if not handled by landlord or property tax bill)

Company who handles it
Customer service number
Account number
Website
Login username and password
Autopay information

House repair service (if you have a provider)

Company who handles it
Customer service number
If you have a monthly or yearly contract, paid until when?
Account number
Website
Login username and password
Autopay information

Property tax collector. (if appropriate)

Assessor's parcel number for house
Customer service number
Website for payment via internet direct to county assessor
Autopay information, if any

P.O. Box (if any)

Address of P.O. Box

Set up online access through <https://poboxes.usps.com/manageAccount.html>
Login username/password
Paid through xxxxx date

Home delivery information for scheduled service such as water, medical supplies, etc.

Home IOT (smart home) system information, such as Nest, Ring, LiftMaster, etc. (if any)
Location of controlling device(s)
Login info for controlling device (username/password)
Website or IP address for controller

Home theater or entertainment system information (if appropriate)
Location of wiring diagram
Contact information for person who handled installation
Please do everyone a favor and label the wires

Anything unusual that someone would need to know to live in, or sell your property, such as the location of underground pipes carrying downspout water run-off, code to side gate, function of mystery switches, where to kick the dishwasher to make it turn on, etc.

MISCELLANEOUS | [Top](#)

Email provider(s)
For each, list provider name, email address, password, security questions, recovery method(s)

Club, gym, museum, and association memberships. For each:
Club/association name
Contact name, address, phone, website
Note which ones are on autopay and provide login information (username, password) for autopays

Newspaper subscriptions. For each one list:
Company
Indicate whether subscription is paper, digital only, or both
Customer service phone number
Account number
Website
Login username and password
Autopay information

Magazine subscription list for purposes of forwarding if you move.

Online subscriptions such as Microsoft 365, LastPass, Adobe Creative Suite, Intuit, etc.
For each provide:
Company name
What you have the subscription for

Website
Login username/password
Autopay method

Other subscriptions such as DoorDash, professional associations, NetFlix, Hulu, Spotify, Pandora, etc. For each provide:

Company name
What you have the subscription for
Customer service phone number
Website
Login username/password
Autopay method

Passwords for encrypted Excel spreadsheets, Quicken files, QuickBooks files, BitLocker hard drives, computer BIOS, and other computer files and computer hardware.

Social Security

Should set up online account at <https://secure.ssa.gov/RIL/SiView.action>
Will need to answer tough security questions or call them on the phone.
Your heirs might be eligible for Social Security survivor's benefits
Get list of Social Security numbers for immediate family members and heirs

Veterans Administration

Your heirs might be eligible for VA survivor's benefits.
If you served in the military, provide location of your service records

Auto Club (AAA) membership

Account number
Paid through date
Autopay information
Website
Website login username and password

Data, system and photo backup storage location (if any)

For online backup account:
Company name (Google Drive, Google Photos, Dropbox, OneDrive, etc.)
Website
Login username and password
For local backup, location of your backup drive and decryption key, if needed

Medical alert device (if any)

Company that handles it
Account number
Customer service number
Autopay information
Website
Website username and password

List of people (and contact info) they contact when it goes off

Storage units (if any)

- Company name
- Address
- Phone
- Unit number(s)
- Combination to lock, or location of key(s)
- Paid through what date
- Autopay information
- Website

Pre-paid cremation or burial plan (veterans may qualify for free burial at a VA cemetery)

- Company
- Customer service phone number
- Account number
- Autopay information (if not fully paid)
- If you own a cemetery plot, provide:
 - Name of cemetery
 - Full address
 - Phone number
 - Account number or plot number
 - Names of people who are authorized to bury someone there
 - Contact information for authorized users of the plot

Memorial service information.

- Clergyperson contact information (if any)
- List of people with contact information that you want notified
- Location of prepared statement, obituary, etc. (if any)
- Location of instructions for memorial service (or include in this document)

Padlock combinations (if needed)

- Bikes, gates, storage units, etc.

Location of jar of keys. Do everyone a favor and label each key.

IMPORTANT DOCUMENTS AND PAPERS | [Top](#)

Here's a list to get you started. This list will not include every document for every person. Make your own list using this as a start. For some documents, a photocopy is sufficient, but you will need originals of some of them.

These documents are stored in the following locations: (list them here) and include any safe combinations, locations of keys, etc. in order to access them.

Originals of:

- Checkbook with at least 20 unused checks
- Passport (if you have one)

Naturalization papers or green card (permanent resident status card)
Immigration documents
Birth certificate
Social Security card
Marriage certificate
Depending on your circumstances, death certificate of spouse, child or other relative
Will or living will
Trust documents
Power of attorney forms
Nomination of conservator form (if not included in power of attorney form)
Voter ID card (if your state requires one)
Stock and bond certificates (consider converting them to electronically-held
Shares, preferably through your brokerage account, or through the company's
transfer agent)
Ownership certificates for cars, also called a "pink slip"
Escrow papers, grant deeds, and other documentation on purchase or sale of home.

Copies are usually sufficient for:

Durable power of attorney for medical care
POLST (medical directive form)
Drivers license or state ID card (some circumstances might require original)
Tax returns
List of usernames and passwords
Divorce papers
Military service records
Adoption papers
Veterans discharge papers and other military service records
Receipts, list or spreadsheet of home improvements to justify increased basis of
house for sale purposes
Business records including business tax returns, insurance, and business licenses
Gun license (if required by state)
Medical insurance ID card(s)
Auto insurance ID card
Documentation of professional certification (CPA, RN, licensed beautician,
professional engineer, etc.)
If you are a recent college graduate, diploma and transcript.

This list was compiled by Sue Kayton, kayton@alum.mit.edu

Please email me with suggestions for how to make this list more complete and easy to use.

For information on how to back up your computer, visit www.suekayton.com/backupbible.htm