



WEALTH ADVISORY SERVICES

MY FINANCIAL STORY AND ESTATE ORGANIZER

Writing your financial story and organizing your estate is a difficult task. Not only is the process time consuming — you are also accepting your mortality.

Yet organizing and detailing your estate will significantly reduce the time required to administer your estate. It will also lessen the stress and anxiety on your family and/or executors at a time when they are often emotionally ill-equipped to make financial and legal decisions. Preparing this document is essentially a selfless act of love.

Please keep your loved ones in mind while completing this organizer. It will make completing this document more meaningful.

Once completed, this document should be stored in a secure location, such as a safety deposit box.

You should ensure your executor is aware of the location of this document.

This organizer is a fluid document and should be updated for any significant life changes, and reviewed regularly to ensure it is up to date.

Included are the following:

- ▶ Family Information
- ▶ Important Documents
- ▶ Financial Information
- ▶ Insurance Information
- ▶ Employment Information
- ▶ Income Details
- ▶ Real Estate
- ▶ Financial Advisors
- ▶ Executors
- ▶ Digital Information
- ▶ Funeral Arrangements
- ▶ Other Information or Instructions

Family information

MY INFORMATION	
Full name	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	
Date of Birth	
SIN #	
Health Card #	
Driver's Licence #	
Passport #	
Birthplace / Citizenship	
Maiden Name (if APL)	
MY SPOUSE	
Full Name	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	
Date of Birth	
SIN #	
Health Card #	
Driver's Licence #	
Passport #	
Birthplace / Citizenship	
Maiden Name (if APL)	
MY PARENTS - FATHER	
Full Name	
Date of Birth	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	
MY PARENTS - MOTHER	
Full Name	
Date of Birth	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	

Family information (continued)

MY SIBLINGS	
Full Name	
Date of Birth	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	
Spouse's Name (if APL)	
MY SIBLINGS	
Full Name	
Date of Birth	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	
Spouse's Name (if APL)	
MY SIBLINGS	
Full Name	
Date of Birth	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	
Spouse's Name (if APL)	
MY CHILDREN	
Full Name	
Date of Birth	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	
Spouse's Name (if APL)	
MY CHILDREN	
Full Name	
Date of Birth	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	
Spouse's Name (if APL)	

Family information

MY CHILDREN	
Full Name	
Date of Birth	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	
Spouse's Name (if APL)	

MY CHILDREN	
Full Name	
Date of Birth	
Home Address	
City / Province / PC	
Home # / Cell #	
Email	
Spouse's Name (if APL)	

OTHER CONTACTS	
Full Name	
Relationship	
Home # / Cell #	
Email	

OTHER CONTACTS	
Full Name	
Relationship	
Home # / Cell #	
Email	

NOTES	

Important documents

MY WILL	
Prepared by	
Address	
City / Province / PC	
Telephone #	
Email	
Date of Last Primary Will	
Date of Last Secondary Will	
Location of Document	
PERSONAL POSSESSIONS NOT LISTED IN YOUR WILL - <i>Note: All items should be listed in your will</i>	
List Recipient and Item	
POWER OF ATTORNEY - MEDICAL	
Prepared by	
Address	
City / Province / PC	
Telephone #	
Email	
Location of Document	
POWER OF ATTORNEY - PROPERTY	
Prepared by	
Address	
City / Province / PC	
Telephone #	
Email	
Location of Document	
LOCATION OF DOCUMENTS	
Tax Returns	
Note - if you made an election for capital property in 1994, that election is required	
Birth Certificate	
Marriage Certificate	
Divorce Agreement	
Custody/Adoption Records	
Passport	

Financial information: Assets

SAFETY DEPOSIT BOX	
Institution	
Address	
City / Province / PC	
Telephone #	
Location of Key	
CONTENTS	
BANK ACCOUNTS	
Institution	
Address	
City / Province / PC	
Telephone #	
Account # and Type	
BANK ACCOUNTS	
Institution	
Address	
City / Province / PC	
Telephone #	
Account # and Type	
BANK ACCOUNTS	
Institution	
Address	
City / Province / PC	
Telephone #	
Account # and Type	
BANK ACCOUNTS	
Institution	
Address	
City / Province / PC	
Telephone #	
Account # and Type	
BANK ACCOUNTS	
Institution	
Address	
City / Province / PC	
Telephone #	
Account # and Type	

Financial information: Assets (continued)

PENSION INFORMATION	
Payor	
Contact	
Telephone #	
Beneficiary	
Location	
Health Benefits	
PENSION INFORMATION	
Payor	
Contact	
Telephone #	
Beneficiary	
Location	
Health Benefits	
INVESTMENTS	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Account # and Type	
Beneficiary	
INVESTMENTS	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Account # and Type	
Beneficiary	
INVESTMENTS	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Account # and Type	
Beneficiary	

Financial information: Assets (continued)

INVESTMENTS	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Account # and Type	
Beneficiary	

INVESTMENTS	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Account # and Type	
Beneficiary	

INVESTMENTS	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Account # and Type	
Beneficiary	

INVESTMENTS	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Account # and Type	
Beneficiary	

NOTES	

Financial information: Liabilities

CREDIT CARDS	
Institution	
Telephone #	
Name on Card	
Card #	
Expiry Date	
Card Security Code	
CREDIT CARDS	
Institution	
Telephone #	
Name on Card	
Card #	
Expiry Date	
Card Security Code	
CREDIT CARDS	
Institution	
Telephone #	
Name on Card	
Card #	
Expiry Date	
Card Security Code	
CREDIT CARDS	
Institution	
Telephone #	
Name on Card	
Card #	
Expiry Date	
Card Security Code	
CREDIT CARDS	
Institution	
Telephone #	
Name on Card	
Card #	
Expiry Date	
Card Security Code	
LINE OF CREDIT	
Institution	
Telephone #	
Account #	
Approximate Amount	

Financial information: Liabilities (continued)

LINE OF CREDIT	
Institution	
Telephone #	
Account #	
Approximate Amount	
LINE OF CREDIT	
Institution	
Telephone #	
Account #	
Approximate Amount	
PERSONAL / PRIVATE LOANS	
Type of Loan	
Amount of Loan	
Lendor	
Telephone #	
Email	
PERSONAL / PRIVATE LOANS	
Type of Loan	
Amount of Loan	
Lendor	
Telephone #	
Email	
NOTES	

Insurance information

POLICY INFORMATION	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Type of Insurance	
Amount of Insurance	
Policy #	
Beneficiary	
POLICY INFORMATION	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Type of Insurance	
Amount of Insurance	
Policy #	
Beneficiary	
POLICY INFORMATION	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Type of Insurance	
Amount of Insurance	
Policy #	
Beneficiary	
POLICY INFORMATION	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Type of Insurance	
Amount of Insurance	
Policy #	
Beneficiary	

Insurance information (continued)

POLICY INFORMATION	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Type of Insurance	
Amount of Insurance	
Policy #	
Beneficiary	

POLICY INFORMATION	
Institution	
Address	
City / Province / PC	
Contact	
Telephone #	
Type of Insurance	
Amount of Insurance	
Policy #	
Beneficiary	

NOTES	

Employment information

EMPLOYER	
Company Name	
Address	
City / Province / PC	
Telephone #	

EMPLOYER - SPOUSE	
Company Name	
Address	
City / Province / PC	
Telephone #	

EMPLOYER PLANS	
Registered Pension	
Group Life Insurance	
Employee Stock Purchase	
Employee Stock Option	
Deferred Profit Sharing	
Other	

NOTES	

Income details

ALIMONY / CHILD SUPPORT	
Full Name	
Address	
City / Province / PC	
Telephone #	
ANNUITY	
Company Name	
Address	
City / Province / PC	
Telephone #	
REGISTERED PENSION PLAN	
Company Name	
Address	
City / Province / PC	
Telephone #	
RENTAL INCOME	
Full Name	
Address	
City / Province / PC	
Telephone #	
RENTAL INCOME	
Full Name	
Address	
City / Province / PC	
Telephone #	
OTHER (e.g. Foreign Pension)	
Company Name	
Address	
City / Province / PC	
Telephone #	
OTHER	
CPP / QPP Payments	
OAS Payments	
NOTES	

Real estate

PRINCIPAL RESIDENCE	
Owner(s)	
Address	
City / Province / PC	
Location of Deed	
MORTGAGE INFORMATION	
Account Holder(s)	
Account #	
Institution	
Address	
City / Province / PC	
Telephone #	
PROPERTY TAX	
Property #	
Municipality	
Telephone #	
SECONDARY RESIDENCE	
Owner(s)	
Address	
City / Province / PC	
Purpose (i.e vacation, rental)	
MORTGAGE INFORMATION	
Account Holder(s)	
Account #	
Institution	
Address	
City / Province / PC	
Telephone #	
PROPERTY TAX	
Property #	
Municipality	
Telephone #	
NOTES	

Financial advisors

INVESTMENT AND / OR FINANCIAL PLANNER	
Full Name	
Company Name	
Address	
City / Province / PC	
Telephone #	
Email	
INVESTMENT AND / OR FINANCIAL PLANNER	
Full Name	
Company Name	
Address	
City / Province / PC	
Telephone #	
Email	
LAWYER	
Full Name	
Company Name	
Address	
City / Province / PC	
Telephone #	
Email	
ACCOUNTANT	
Full Name	
Company Name	
Address	
City / Province / PC	
Telephone #	
Email	
LIFE INSURANCE AGENT	
Full Name	
Company Name	
Address	
City / Province / PC	
Telephone #	
Email	
BANKER	
Full Name	
Company Name	
Address	
City / Province / PC	
Telephone #	
Email	

Executors

EXECUTOR	
Full Name	
Relationship	
Address	
City / Province / PC	
Home # / Cell #	
Email	

EXECUTOR	
Full Name	
Relationship	
Address	
City / Province / PC	
Home # / Cell #	
Email	

EXECUTOR	
Full Name	
Relationship	
Address	
City / Province / PC	
Home # / Cell #	
Email	

NOTES	

Digital information

COMPUTER	
Login Information	
Password	
INTERNET	
Login Information	
Password	
FACEBOOK	
Login Information	
Password	
LINKEDIN	
Login Information	
Password	
TWITTER	
Login Information	
Password	
BANK ACCOUNTS	
Login Information	
Password	
BANK ACCOUNTS	
Login Information	
Password	
INVESTMENT ACCOUNTS	
Login Information	
Password	
INVESTMENT ACCOUNTS	
Login Information	
Password	
OTHER	
Login Information	
Password	
Login Information	
Password	
Login Information	
Password	
Login Information	
Password	
NOTES	

Funeral arrangements

FUNERAL	
Funeral Home Name	
Address	
City / Province / PC	
Funeral Home Contact	
Telephone #	
Email	
Cremation or Burial	
Organ Donor Form Location	
Other Burial Instructions	
PEOPLE TO NOTIFY	
Full Name	
Relationship	
Home # / Cell #	
Email	
PEOPLE TO NOTIFY	
Full Name	
Relationship	
Home # / Cell #	
Email	
PEOPLE TO NOTIFY	
Full Name	
Relationship	
Home # / Cell #	
Email	
PREPAID ARRANGEMENTS	
Company Name	
Address	
City / Province / PC	
Contact	
Telephone #	
NOTES	

Other information or instructions

NOTES