**Financial Assets -** Note Confidential Information – Keep in a safe/safety deposit box or with your Financial Advisor

Personal Information Based on *Seven Critical Conversations* *by Stan Craig*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Bank #1 Name | |  | | | | |  | | | | | |  |  | | | |  | |
| ☐ Checking  ☐ Savings | | Account  Number | | | | |  | | | | | Representative Name/Phone | |  | | | |  | |
| Website | |  | | | | | User Name | | | |  | | | Password/  Security Answers | | | | |  |
| Safety Deposit Box # and location of key | | | | | | | |  | | | | | |  | | | |  | |
| Automatic Bill Pay? | | | | ☐ Yes | | | ☐ No | | | | | Total amount/month | | | |  | |  | |
| Bank #2 Name | |  | | | | |  | | | | |  | |  | | | |  | |
| ☐ Checking  ☐ Savings | | Account  Number | | | | |  | | | | | Representative Name/Phone | |  | | | |  | |
| Website | |  | | | | | User Name | | | | |  | | Password and  Security Answers | | | | |  |
| Brokerage Name | | Account # | | | | | Advisor Name | | | | | Advisor Email | | Advisor Phone | | | |  | |
|  | |  | | | | |  | | | | |  | |  | | | |  | |
| Website | |  | | | | | Username | | | | |  | | Password and  Security Answers | | | | |  |
| VISA/AMEX/MC associated with any of these accounts? | | | | | *If yes, photocopy and include with this document* | | | | | | | | | Automatic Pay? | | | | ☐Yes  ☐ No | |
|  | Website | | | | | | Username | | | | | Password | | Security Q/A | | | |  | |
| VISA |  | | | | | |  | | | | |  | |  | | | |  | |
| MC |  | | | | | |  | | | | |  | |  | | | |  | |
| AMEX |  | | | | | |  | | | | |  | |  | | | |  | |
| Other Accounts | |  | | | | | | | | | | | | | | | | | |
| Brokerage Name | | Account # | | | | | Advisor Name | | | Advisor Email | | | | | Advisor Phone | | | | |
|  | |  | | | | |  | | |  | | | | |  | | | | |
| Website |  | | | | | | User Name | | |  | | | | | Password | |  | | |
| Deferred  Compensation | | |  | | | | Owner | | |  | | | | | Institution | |  | | |
| Retirement 401(k) | | |  | | | | Owner | | |  | | | | | Institution | |  | | |
| Retirement 401(k) | | |  | | | | Owner | | |  | | | | | Institution | |  | | |
| Non U.S. Holdings | | |  | | | | Account Name | | |  | | | | | Contact | |  | | |
| Insurance Policies | | Include copy of policies | | | | Value | | | Agent Name/Phone | | | | | Agent  Email Address | | | | Payment schedule | |
| Term | | ☐ | | | |  | | |  | | | | |  | | | |  | |
| Life | | ☐ | | | |  | | |  | | | | |  | | | |  | |
| Disability | | ☐ | | | |  | | |  | | | | |  | | | |  | |
| Annuities | | ☐ | | | |  | | |  | | | | |  | | | |  | |
| Long Term Care | | ☐ | | | |  | | |  | | | | |  | | | |  | |
| Health Insurance | | ☐ | | | |  | | |  | | | | |  | | | |  | |
| Medicare | | ☐ | | | |  | | |  | | | | |  | | | |  | |
| Supplemental Care | | ☐ | | | |  | | |  | | | | |  | | | |  | |
| Home/Contents | | ☐ | | | |  | | |  | | | | |  | | | |  | |
| Auto | | ☐ | | | |  | | |  | | | | |  | | | |  | |
| Buy/Sell Agree. | | ☐ | | | |  | | |  | | | | |  | | | |  | |

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**Personal Property** *Attach copies of appraisals*

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Automobiles  Attach list if necessary | | Year/Model  Location | | Service Contact | | Bill of sale/title | | Insured? | | Value |
| 1. |  | | |  | |  | |  | |  |
| 2. |  | | |  | |  | |  | |  |
| 3. |  | | |  | |  | |  | |  |
| Boats  Attach list if necessary | | Year/Model  Location | | Service Contact | | Bill of sale/title | | Insured? | | Value |
| 1. |  | | |  | |  | |  | |  |
| 2. |  | | |  | |  | |  | |  |
| Airplanes | | Year/Model  Location | | Service Contact | | Bill of sale/title | | Insured? | | Value |
| 1. |  | | |  | |  | |  | |  |
| 2. |  | | |  | |  | |  | |  |
| Art/collectables  Attach list if necessary | | Description | Location | | Insurance | | Appraised Value | | Other | |
| 1. |  | |  | |  | |  | |  | |
| 2. |  | |  | |  | |  | |  | |
| 3. |  | |  | |  | |  | |  | |
| Jewelry  Attach list if necessary | | Description | Location | | Insurance | | Appraised Value | | Other | |
| 1. |  | |  | |  | |  | |  | |
| 2. |  | |  | |  | |  | |  | |
| 3. |  | |  | |  | |  | |  | |
| Antiques/Furniture  Attach list if necessary | | Description | Location | | Insurance | | Appraised Value | | Other | |
| 1. |  | |  | |  | |  | |  | |
| 2. |  | |  | |  | |  | |  | |
| 3. |  | |  | |  | |  | |  | |
| Family Heirlooms Attach list if necessary | | Description | Location | | Insurance | | Appraised Value | | Other | |
| 1. |  | |  | |  | |  | |  | |
| 2. |  | |  | |  | |  | |  | |
| 3. |  | |  | |  | |  | |  | |
| Suites/season tickets/miscel. | | Description | Location | | Insurance | | Appraised Value | | Other | |
| 1. |  | |  | |  | |  | |  | |
| 2. |  | |  | |  | |  | |  | |

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**Real Estate**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | | Address | Rent/Mortgage Payment To: | Deed  Location | Housekeeper/  Maintenance | Phone Number/  Email |
| Primary Residence | |  |  |  |  |  |
| Secondary Residences | | |  |  |  |  |
| 1. |  | |  |  |  |  |
| 2. |  | |  |  |  |  |
| 3. |  | |  |  |  |  |
| Interest/ Time Share | | |  |  |  |  |
| 1. |  | |  |  |  |  |
| 2. |  | |  |  |  |  |
| Undeveloped Ground/Farm land | | |  |  |  |  |
| 1. |  | |  |  |  |  |
| 2. |  | |  |  |  |  |
| Investment Properties-attach list | | |  |  |  |  |
| 1. |  | |  |  |  |  |
| 2. |  | |  |  |  |  |
| 3. |  | |  |  |  |  |
| Commercial property/1031 Exchanges | | |  |  |  |  |
| 1. |  | |  |  |  |  |
| 2. |  | |  |  |  |  |
| 3. |  | |  |  |  |  |

**Location of Important Documents**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Location | Last Updated | Legal Counsel Name | Phone/Email |
| Last Will &Testament |  |  |  |  |
| Trust Documents |  |  |  |  |
| Last 2 years Fed/State Tax Returns |  |  |  |  |
| Power of Attorney |  |  |  |  |
| Birth Certificate |  |  |  |  |
| Passport/SS/Marriage |  |  |  |  |
| Divorce/Prenup Docs |  |  |  |  |
| Military Discharge |  |  |  |  |
| Business Docs |  |  |  |  |
| Computer Passwords |  |  |  |  |
| Funeral Arrangements |  |  |  |  |
| Burial Plot Info |  |  |  |  |
|  |  |  |  |  |

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