

## Your Valuable Records



*A form to help you keep track of all of your family's valuable records.*

Your family is a small business unit, and it deserves to be operated just as efficiently as any other business. You have many papers necessary for managing your personal and business affairs. Some are more important than others, but all need to be accessible when needed, and stored in a safe place.

Receipts, documentation, proofs of ownership, and pieces of identification may be needed to collect insurance, pension, or retirement benefits; to receive military compensation; and to solve tax or inheritance problems. Do you know where all your records are located? Would someone else know in the case of your injury or death?

You may wish to keep two copies of this listing of valuable records—one in a safe deposit box or fireproof and burglarproof home safe, and another in a convenient location at home. Because of the nature of the information, even the copy kept at home should be stored in as safe a location as possible.

|                                       |                             |
|---------------------------------------|-----------------------------|
| <b>NAME:</b>                          | <b>DATE:</b>                |
|                                       |                             |
| <b>Copy 1 Stored Where:</b>           | <b>Copy 2 Stored Where:</b> |
|                                       |                             |
| <b>Safe Deposit Box No./Location:</b> | <b>Key:</b>                 |
|                                       |                             |

### Personal Information

| Family Member Name | Date of Birth | Where Birth Certificate Kept | Social Security Number | Where Social Security Card Kept |
|--------------------|---------------|------------------------------|------------------------|---------------------------------|
|                    |               |                              |                        |                                 |
|                    |               |                              |                        |                                 |
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**Important Advisers**

| <b>Type</b>              | <b>Name</b> | <b>Address</b> | <b>Telephone</b> |
|--------------------------|-------------|----------------|------------------|
| Attorney:                |             |                |                  |
| Exectuor: Husband's Will |             |                |                  |
| Executor: Wife's Will    |             |                |                  |
| Religious Adviser:       |             |                |                  |
| Doctor(s):               |             |                |                  |
|                          |             |                |                  |
|                          |             |                |                  |
| Accountant/Tax Adviser:  |             |                |                  |

|                         |  |  |  |
|-------------------------|--|--|--|
| Bank or Trust Officer:  |  |  |  |
| Business Manager:       |  |  |  |
| Health Insurance Agent: |  |  |  |
| Auto Insurance Agent:   |  |  |  |
|                         |  |  |  |
| Home Insurance Agent:   |  |  |  |
|                         |  |  |  |
| Other:                  |  |  |  |
|                         |  |  |  |
|                         |  |  |  |
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**Property**

| Type               | Owner | Type of Ownership | Date Acquired | Location/ Description | Where title is kept | Additional Information |
|--------------------|-------|-------------------|---------------|-----------------------|---------------------|------------------------|
| <b>Real Estate</b> |       |                   |               |                       |                     |                        |
| Residences         |       |                   |               |                       |                     |                        |

|                       |  |  |  |  |  |  |
|-----------------------|--|--|--|--|--|--|
|                       |  |  |  |  |  |  |
| <b>Business</b>       |  |  |  |  |  |  |
|                       |  |  |  |  |  |  |
|                       |  |  |  |  |  |  |
| <b>Vacation</b>       |  |  |  |  |  |  |
|                       |  |  |  |  |  |  |
| <b>Motor Vehicles</b> |  |  |  |  |  |  |
|                       |  |  |  |  |  |  |
|                       |  |  |  |  |  |  |
|                       |  |  |  |  |  |  |
| <b>Other</b>          |  |  |  |  |  |  |
|                       |  |  |  |  |  |  |
|                       |  |  |  |  |  |  |

**Banking, Savings, and Investments**

For additional tools for caregiving or aging, visit [www.CaregiversLibrary.org](http://www.CaregiversLibrary.org)

| Type | Institution | Owner | Where records kept | ID# | Beneficiary | Value |
|------|-------------|-------|--------------------|-----|-------------|-------|
|      |             |       |                    |     |             |       |
|      |             |       |                    |     |             |       |
|      |             |       |                    |     |             |       |
|      |             |       |                    |     |             |       |
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|      |             |       |                    |     |             |       |
|      |             |       |                    |     |             |       |

**Banking, Savings, and Investments (cont'd.)**

| Type                        | Institution | Owner | Where records kept | ID# | Beneficiary | Value |
|-----------------------------|-------------|-------|--------------------|-----|-------------|-------|
| Stocks,<br>Mutual<br>Funds, |             |       |                    |     |             |       |

|   |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| Investment<br>Trusts, etc.                |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| IRAs,<br>KEOGH<br>Accts.,<br>SEPs         |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| Retirement<br>Plans,<br>Pensions,<br>etc. |  |  |  |  |  |  |
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|   |  |  |  |  |  |  |
| Other                                     |  |  |  |  |  |  |

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**Insurance (Life, Health, Homeowner's/Renter's, Auto, etc.)**

| Type | Company | Policy No. | Where Kept | Beneficiary Info. |            | Policy Owner | Person/Property Insured | Value |
|------|---------|------------|------------|-------------------|------------|--------------|-------------------------|-------|
|      |         |            |            | Primary           | Contingent |              |                         |       |
|      |         |            |            |                   |            |              |                         |       |
|      |         |            |            |                   |            |              |                         |       |
|      |         |            |            |                   |            |              |                         |       |
|      |         |            |            |                   |            |              |                         |       |
|      |         |            |            |                   |            |              |                         |       |
|      |         |            |            |                   |            |              |                         |       |
|      |         |            |            |                   |            |              |                         |       |
|      |         |            |            |                   |            |              |                         |       |

**Credit Cards**

| Type of Card | In Name of: | Acct. Number | <i>in lost or stolen, notify:</i> |         |           |
|--------------|-------------|--------------|-----------------------------------|---------|-----------|
|              |             |              | Company                           | Address | Telephone |
|              |             |              |                                   |         |           |

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**Debt Information**

| Type | Company/Person and Address | Amount | Payment Plan | Where records kept |
|------|----------------------------|--------|--------------|--------------------|
|      |                            |        |              |                    |
|      |                            |        |              |                    |
|      |                            |        |              |                    |
|      |                            |        |              |                    |
|      |                            |        |              |                    |
|      |                            |        |              |                    |
|      |                            |        |              |                    |



### Membership in Organizations/Clubs

| Organization | Address | Telephone | Membership Information |        |
|--------------|---------|-----------|------------------------|--------|
|              |         |           | In whose name          | Number |
|              |         |           |                        |        |
|              |         |           |                        |        |
|              |         |           |                        |        |
|              |         |           |                        |        |
|              |         |           |                        |        |

### Other Important Records

| Group   | Record Type                                    | Where Kept? | Additional Information |
|---------|--|-------------|------------------------|
| A       | Adoption Papers                                |             |                        |
|         | Baptismal Records                              |             |                        |
|         | Bill(s) of Sale                                |             |                        |
|         | Citizenship Papers                             |             |                        |
|         | Diplomas                                       |             |                        |
|         | Divorce Papers                                 |             |                        |
|         | Easements/Rights-of-way                        |             |                        |
|         | Household Inventory                            |             |                        |
|         | Irreplacable Receipts/Proofs of Tax Deductions |             |                        |
|         | Marriage Certificate                           |             |                        |
|         | Military Records                               |             |                        |
|         | Passport Papers                                |             |                        |
|         | Power of Attorney                              |             |                        |
| Will(s) |  |             |                        |
| B       | Education Records                              |             |                        |
|         | Employment Records                             |             |                        |
|         | Family History                                 |             |                        |
|         | Funeral/Burial Records                         |             |                        |
|         | Household Inventory(copy)                      |             |                        |

|       |   |  |  |
|-------|---|--|--|
|       | Income/Expense Records                            |  |  |
|       | Income Tax Returns/Replacable Proofs of Deduction |  |  |
|       | Medical Records                                   |  |  |
|       | Net Worth Statements                              |  |  |
|       | Safe Deposit Box Inventory                        |  |  |
|       | Appliance Manuals/Warranties                      |  |  |
|       | Will(s) (copy)                                    |  |  |
| C     | Employee ID Card(s)                               |  |  |
|       | ID Card/Whom to notify in emergency               |  |  |
|       | Insurance/Medical Cards                           |  |  |
| Other |   |  |  |
|       |   |  |  |
|       |   |  |  |
|       |   |  |  |

\* **Guideline:** The more important the record, and the more expensive and difficult it is to replace, the safer the storage location should be. For some records (will, family history, tax returns, household inventory) you may wish to keep copies in more than one location. **Group A** items should be kept in a safe deposit box or fireproof and burglarproof home safe. **Group B** items can generally be stored in a home business center, file cabinet, desk, etc. **Group C** items should be carried in your purse or pocket.

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Reprinted from “Managing Time, Work & Family,” by Emily Mark and Katey Walker, Kansas State University.



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