

Financial and estate planning record keeper





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Financial and estate planning record keeper Keeping up-to-date records of your personal and financial documents is extremely important for a number of reasons:

- It keeps all the information you need for future reference in one handy place.
- It provides your executor or Power of Attorney all the details necessary to deal with your assets on your behalf.
- It can form the basis for both your estate plan and your financial plan if you haven't developed either as yet.

This Record Keeper is one of the most important documents you have and will save your heirs and executor a great deal of time and trouble. It's worth the effort!

The Record Keeper is also available as an online document so you can complete, save and easily update the Record Keeper on your computer. Whether you choose to use the printed version or the electronic version, be sure to send a copy to your executor or Power of Attorney or let them know where you have stored it so it can be easily accessed.

IF YOU CHOOSE TO PREPARE THIS DOCUMENT ONLINE

There are a number of issues with accessing your documents on your computer. We recommend that you copy the Record Keeper on a portable device such as a memory stick and either give it to your Executor or let them know where it is located. Don't forget to provide the newest updates when you revise it.

UPDATE EVERY YEAR

Your Record Keeper is only as valuable as the accuracy of the information it contains. Be sure to update it annually to ensure all the information is correct. It is helpful to time this with another annual event such as completing your taxes.

NEED HELP?

If you have any questions, don't hesitate to contact your financial advisor at BlueShore Financial as well as your other key professional advisors.

Date Prepared	Date	Prep	ared
---------------	------	------	------

Date of Last Update

PERSONAL INFORMATION							
Your First Name	Middle Name		Surname	5			
Date of Birth	Place of Birth						
Current Address	1	City	Provinc	e	Postal Code		
Social Insurance Number		Driver's License Number		BC Personal He	alth Number		

Spouse

opouse				
Spouse's First Name	Middle Name		Surname	2
Date of Birth	Place of Birth			
Social Insurance Number	I	Driver's License Number		BC Personal Health Number

Children

Child's First Name	Middle Name S		Surname		
Date of Birth	Place of Birth				
Current Address (if different from above)		City	Province	Postal Code	
Social Insurance Number (for minor children) BC Personal Health Num		BC Personal Health Numb	nber		
Child's First Name	Middle Name		Surname		
Date of Birth	Place of Birth				
Current Address (if different from above)		City	Province	Postal Code	
Social Insurance Number (for minor children)		BC Personal Health Numb	ber		
Child's First Name	Middle Name		Surname		
Date of Birth	Place of Birth				
Current Address (if different from above)		City	Province	Postal Code	
Social Insurance Number (for minor children) BC Personal Health		BC Personal Health Numb	er	1	

YOUR ADVISORS

Financial Planner

Name	Firm/Financial Institution		
Address	City	Province	Postal Code
Phone Number	Email		1

Investment Advisors

Name	Firm/Financial Institution			
Address	City	Province	Postal Code	
Phone Number	Email			
Name	Firm/Financial Institution			
i von ne				
Address	City	Province	Postal Code	
Phone Number	Email		·	

Banking Contacts

Name	Financial Institut	Financial Institution				
Address	City	Province	Postal Code			
Phone Number	Email					
Name	Financial Institut	ion				
Address	City	Province	Postal Code			
Phone Number	Email					

Lawyers

Name	Firm			
Address		City	Province	Postal Code
Phone Number	Email		Type of Service	
Name	Firm			
Indifie				
Address		City	Province	Postal Code
Phone Number	Email		Type of Service	

Accountants

Name	Firm			
INditic				
Address		City	Province	Postal Code
	1			
Phone Number	Email		Type of Service	
Name	Firm			
Address		City	Province	Postal Code
Phone Number	Email		Type of Service	

Physicians and other Health Professionals

Name		Nature of Care	
Address	City	Province	Postal Code
Phone Number	Email	1	
Name		Nature of Care	
Address	City	Province	Postal Code
Phone Number	Email		
Name		Nature of Care	
Address	City	Province	Postal Code
Phone Number	Email		
Name		Nature of Care	
Address	City	Province	Postal Code

Other

Name		Type of Service	
Address	City	Province	Postal Code
Phone Number	Email	1	1
Additional Notes	·		

WILLS, POWERS OF ATTORNEY AND FINAL ARRANGEMENTS

Wills and Powers of Attorney

Date of your last Will	Date of your spouse's last will	
Executor/Trustee	Phone Number	Email
Executor/Trustee (Co)	Phone Number	Email
Executor/Trustee for your spouse if different than above	Phone Number	Email
Date of your last Power of Attorney (POA)	Date of your spouse's last Power of	f Attorney
Designated Power of Attorney	Phone Number	Email
Desigated POA for your spouse if different then above	Phone Number	Email

Funeral Arrangements

Name of Funeral Home/Crematorium				
Address	City	Provinc	e	Postal Code
Contact Name	Phone Number		Email	
Notes				

Cemetery Plot

Cemetery Name	Plot Number		Phone	
Address	City	Provinc	e	Postal Code
Notes				

DOCUMENT AND ITEM LOCATIONS

Your Birth Certificate	Spouse's Birth Certificate		Children's Birth Certificates
Marriage Certificate	Separation / Divorce Papers		Custody / Adoption Papers
Citizenship Papers		Passports	· · · · · · · · · · · · · · · · · · ·
Medical Records		Income Tax Retu	irns
Banking Records		Investment State	ements
Stock Certificates	Bonds		Share Certificates
Insurance Documents	1	Vehicle Ownersł	nip Papers
Loans / Mortgage Papers		Real Estate Deed	ds and other Documents

Shareholder / Partnership Agreements			
Power of Attorney Papers	Wills		Cemetery Plot Deed
Safety Deposit Box		Safety Deposit B	ox Key
Other		Other	
Other		Other	

ACCOUNTS

Financial Accounts

Name of Financial Institution			
Branch	Contact		Phone Number
Account Type	Account Number	Individual	Joint
Account Type	Account Number	Individual	Joint
Account Type	Account Number	Individual	Joint
Account Type	Account Number	Individual	Joint
Name of Financial Institution			
Branch	Contact		Phone Number
Account Type	Account Number	Individual	Joint
Account Type	Account Number	Individual	Joint
Account Type	Account Number	Individual	Joint
Account Type	Account Number	Individual	Joint
Name of Financial Institution			
Branch	Contact		Phone Number
Account Type	Account Number	Individual	Joint
Account Type	Account Number	Individual	Joint
Account Type	Account Number	Individual	Joint
Account Type	Account Number	Individual	Joint

Other Accounts

Hydro	Account Number
Oil / Gas	Account Number
Home Telephone	Account Number
Internet Service	Account Number
Cellular Phone	Account Number
Cable / Satellite	Account Number
Home Security	Phone Number
Lawn & Garden Care	Phone Number
House Cleaning	Phone Number
Newspaper	Account Number
Newspaper	Account Number
Magazine	Account Number
Club Membership	Account Number
Club Membership	Account Number
Loyalty Program Membership	Account / Phone Number
Loyalty Program Membership	Account / Phone Number
Other	Account / Phone Number

ASSETS

Investment Accounts (Includes term deposits or GICs, RRSPs, RRIFs, RESPs)

Financial Institution / Firm				
Branch	Contact			Phone Number
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Financial Institution or Firm				
Branch	Contact			Phone Number
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Financial Institution or Firm				
Branch	Contact			Phone Number
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value
Account Type	Account Number	Individual	Joint	Value

Other Investments (e.g., stocks, bonds, mutual funds, share certificates)

Contact	Phone Number	Value
Contact	Phone Number	Value
	Contact Contact Contact Contact Contact Contact	Contact Phone Number Contact Phone Number

Pension Plans

Company Name	Phone Number	Plan Number	Value
Company Name	Phone Number	Plan Number	Value
Company Name	Phone Number	Plan Number	Value
Company Name	Phone Number	Plan Number	Value

Annuities

Issuing Company	Phone Number	Policy Number	Value
Issuing Company	Phone Number	Policy Number	Value
Issuing Company	Phone Number	Policy Number	Value
Issuing Company	Phone Number	Policy Number	Value

Valuables (includes art, jewelry, coin/stamp collections, cars, antiques, season's tickets, etc)

Description	Location	Value
Description	Location	Value
Description	Location	Value
Description	Location	Value
Description	Location	Value
Description	Location	Value

Real Estate

Principal Residence Address		Purchase Date	Purchase Price
Owners	Mortgage Institution		Reference Number
Property Tax Reference Number	Municipality		
Notes			
Other Property Address		Purchase Date	Purchase Price
Owners	Mortgage Institution		Reference Number
Property Tax Reference Number	Municipality		
Notes			
Other Property Address		Purchase Date	Purchase Price
Owners	Mortgage Institution		Reference Number
Property Tax Reference Number	Municipality		
Notes	1		
Other Property Address		Purchase Date	Purchase Price
Owners	Mortgage Institution		Reference Number
Property Tax Reference Number	Municipality		
Notes			
Business Interests			
mpany Name		Your Role	
Location of Key Documents			
Notes			
Company Name		Your Role	
Location of Key Documents			
Notes			

INSURANCE

Life (term, whole, universal)

Туре	Insurer	Insured
Face Value	Policy Number	Policy Location
Contact Name		Phone Number
Туре	Insurer	Insured
Face Value	Policy Number	Policy Location
Contact Name		Phone Number
Туре	Insurer	Insured
Туре		lindieu
Face Value	Policy Number	Policy Location
Contact Name	1	Phone Number

Health (disability, critical illness, long-term care)

Туре	Insurer	Insured
Face Value	Policy Number	Policy Location
Contact Name		Phone Number
Туре	Insurer	Insured
Face Value	Policy Number	Policy Location
Contact Name		Phone Number
Туре	Insurer	Insured
Face Value	Policy Number	Policy Location
Contact Name		Phone Number
Туре	Insurer	Insured
Face Value	Policy Number	Policy Location
Contact Name		Phone Number

Property and Casualty (house, auto, travel, mortgage)

Туре	Insurer	Insured
Coverage Amount	Policy Number	Policy Location
Contact Name		Phone Number
Туре	Insurer	Insured
Coverage Amount	Policy Number	Policy Location
Contact Name		Phone Number
Туре	Insurer	Insured
Coverage Amount	Policy Number	Policy Location
Contact Name		Phone Number
Туре	Insurer	Insured
Coverage Amount	Policy Number	Policy Location
Contact Name		Phone Number
Туре	Insurer	Insured
Type Coverage Amount	Policy Number	Policy Location
Coverage Amount		Policy Location
Coverage Amount Contact Name	Policy Number	Policy Location Phone Number
Coverage Amount Contact Name Type	Policy Number	Policy Location Phone Number Insured
Coverage Amount Contact Name Type Coverage Amount	Policy Number	Policy Location Phone Number Insured Policy Location Policy Location
Coverage Amount Contact Name Type Coverage Amount Contact Name	Policy Number Insurer Policy Number	Policy Location Phone Number Insured Policy Location Policy Location Phone Number Phone Number
Coverage Amount Contact Name Type Coverage Amount Contact Name Type	Policy Number Insurer Policy Number Insurer Insurer Insurer	Policy Location Phone Number Insured Policy Location Policy Location Phone Number Insured Insured Insured Insured
Coverage Amount Contact Name Type Coverage Amount Contact Name Type Coverage Amount Contact Name	Policy Number Insurer Policy Number Insurer Insurer Insurer	Policy Location Phone Number Insured Policy Location Policy Location Phone Number Insured Policy Location Phone Number Policy Location Policy Location Policy Location
Coverage Amount Contact Name Type Coverage Amount Contact Name Type Coverage Amount Contact Name Coverage Amount Contact Name	Policy Number Insurer Policy Number Insurer Policy Number Policy Number	Policy Location Phone Number Insured Policy Location Phone Number Insured Insured Phone Number Insured Phone Number Phone Number Phone Number Phone Number Phone Number Phone Number Phone Number

LIABILITIES

Loans and Lines of Credit

Purpose	Borrower	Original Amount	
Name of Institution	Address or Branch		
Notes			
Purpose	Borrower	Original Amount	
Name of Institution	Address or Branch		
Notes			
Purpose	Borrower	Original Amount	
Name of Institution	Address or Branch		
Notes			
Purpose	Borrower	Original Amount	
Name of Institution	Address or Branch		
Notes			
Purpose	Borrower	Original Amount	
Name of Institution	Address or Branch		
Notes			
Purpose	Borrower	Original Amount	
Name of Institution	Address or Branch	1	
Notes	1		

Credit Cards

Issuer	Name on Card	Card Number
Issuer	Name on Card	Card Number
Issuer	Name on Card	Card Number
Issuer	Name on Card	Card Number
lssuer	Name on Card	Card Number
Issuer	Name on Card	Card Number

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