

# Goodbye, Farewell, So Long: Important Information for My Family Concerning My Dying and Memorial

January 2019



*“Jesus said . . . ‘I am the resurrection and the life.  
Those who believe in me, even though they die, will live,  
and everyone who lives and believes in me will never die.’”  
(John 11:25-26.)*

Claremont United Methodist Church  
211 West Foothill Blvd., Claremont CA 91711  
909-624-9021  
[www.claremontumc.net](http://www.claremontumc.net)



# Claremont United Methodist Church

<http://www.claremontumc.net>

REV. MARK WILEY, SENIOR PASTOR  
REV. MARTHA MORALES, DIR. CHILDREN & CARING MINISTRIES



January 2019

Dear Friends,

Thank you for your willingness to think about the details of your dying. By thinking ahead and by making decisions now, you are providing a gift to those who love you. You will ease their pain and sorrow by giving them the information they need. We are especially delighted because we know from experience how many families struggle with choices after their loved one has died precisely because there was no information available.

We also know that filling out all these forms is both tedious and a little scary. Talking about death, let alone planning for death, is something our society frowns upon and tries to hide. So thanks for being bold.

Just a word about theology. (Hey, we're preachers. Of course, there is going to be theology.) Memorial services and funerals are for the family, not for you. You won't be there!

We believe that we follow Christ's pattern; those who have died in Christ are risen up to new life just as he was risen. But we don't know if that means we actually get to watch our own funeral. This could be creepy. Or it could be a great celebration. Our intuition tells us we might watch the service but with all those we love who are already in Heaven. But we could be wrong. We could be so caught up in the wonder and delights of Heaven that attending our memorial service would seem like seeing a coat we no longer wear.

So the services are for those who miss you terribly and are not yet with you in God's Country. They will want to honor your memory, have time to share their memories, and have a good cry. Filling out this workbook will help them know what you would prefer.

We have also learned that the manner in which a person dies shapes the grieving process. So the things you share here about your services should be seen as guidelines. As you share this book with your family, hopefully you can give them the freedom to handle variations as needed.

If you have questions about services, or about death and dying itself, or about the many ethical choices involved with the dying process, please do not hesitate to contact us.

Mark Wiley, Pastor

Martha Morales, Associate Pastor

## INTRODUCTION

As our pastors acknowledge, it's hard to think about our own death or the death of a loved one. And sometimes it's even harder to talk about it. We hope this workbook will help you think about your last wishes, discuss them with your loved ones, and preserve them in an organized way for the future. The workbook may also help loved ones initiate a conversation about last wishes with their parents or other aging loved ones in their lives.

Keep in mind that this is a process. After you have completed the workbook, you may change your mind about some of the information you have listed. Or you might remember something to add. That's a good thing. You can make changes and have add-ons. But it will take longer than you think to complete this workbook, so *begin now*.

- Be as specific as possible, adding extra pages if necessary.
- When done, put a copy with your important papers in a *safe accessible place*.
- Be sure it's a place you can find.
- Make a copy for your close family members or trusted friend.
- Emphasize they should keep their copy in a *safe place*.
- If your wishes change, note and date on your copy.
- Let loved ones know about any changes you make.
- Review and update the document every three to five years.

We have included space to list information that many people find useful. You can decide what would be helpful to you and your loved ones.

Finally, be sure to consult your attorney or financial planner on any issue requiring their special expertise.

The CUMC Stephen Ministry Team  
January 2019

NOTE: We thank Pasadena First United Methodist Church for sharing their booklet, "My Last Wishes," which provided the framework for this workbook.

# Goodbye, Farewell, So Long . . . .

## CONTENTS

My Personal History	Page 4
My Living Will/Advance Healthcare Directive	Page 9
Considerations Regarding My Physical Body	Page 10
Family and Friends To Notify at My Death	Page 13
Funerals and Memorial Services	Page 15
Memorial Gifts	Page 19
Who to Contact To Wrap Up My Affairs	Page 20
Where to Find Important Documents	Page 29
Inventory of Significant Personal Property	Page 30
Additional Notes and Updates	Page 31

**MY PERSONAL HISTORY**

My Full Name \_\_\_\_\_

Nickname \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_

Marital Status:

Single \_\_\_ Married \_\_\_ Separated \_\_\_ Divorced \_\_\_

Spouse's Full Name \_\_\_\_\_

Nickname \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

If Living, Current Address \_\_\_\_\_

Date of Death \_\_\_\_\_ Place of Burial \_\_\_\_\_

My Father's Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

If Living, Current Address \_\_\_\_\_

Date of Death \_\_\_\_\_ Place of Burial \_\_\_\_\_

My Mother's Maiden Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

If Living, Current Address \_\_\_\_\_

Date of Death \_\_\_\_\_ Place of Burial \_\_\_\_\_

Names of My Children, Their Spouses, and Places of Residence:

---

---

---

---

Names of My Grandchildren:

---

---

---

Names of My Great-Grandchildren:

---

---

---

Other Family Members, Previous Spouses, and/or Closest Friends:

---

---

---

Previous Cities/Places of Residence:

---

---

---

Significant Relationships:

---

---

---

My Most Important Values:

---

---

---

Things I'm Proud Of:

---

---

---

Favorite Places I've Travelled:

---

---

---

Stories That Are Close To My Heart:

---

---

Dates of Military Service: From \_\_\_\_\_ To: \_\_\_\_\_

Branch \_\_\_\_\_ Serial # \_\_\_\_\_

Rank at Discharge \_\_\_\_\_

Special Highlights of Military Service: \_\_\_\_\_

---

---

---

My Occupations (with dates):

---

---

---

---

My Last Employer Was: \_\_\_\_\_

---

Date(s) of Retirement: \_\_\_\_\_

---

---

Schools I Attended (including certificates or degrees):

---

---

---



Other Facts About Me Which I Believe Are Important:

---

---

---

---

---

---

---

---

---

---

**MY LIVING WILL/ADVANCE HEALTHCARE DIRECTIVE**

Cited here are two advance healthcare directive forms (“living wills”) that comply with the California Probate Code. These forms allow you to state your end of life wishes and name someone else to make health care decisions if you are unable to do so. You are also free to use a different form. Estate planning attorneys typically include a version of these forms when they prepare or update wills and trusts. If you use a form other than California’s approved online form, it’s prudent to consult an attorney to make sure your wishes are legally binding.

The Advance Health Care Directive Form is free to complete and print out online at [www.oag.ca.gov](http://www.oag.ca.gov). If signed by two witnesses, this form need not be notarized. The Five Wishes form is available for purchase for \$5.00 at [www.agingwithdignity.org](http://www.agingwithdignity.org). Free copies of Five Wishes are available from our Stephen Ministry team and from the MSAG Clinic for those who live at Mt. San Antonio Gardens.

Copies of these forms have the same effect as the original. You should give them to healthcare providers *and* persons you named to act as your healthcare agent. Hospitals now routinely require very basic advance directives (“DNRs”) when you are admitted for medical care. Thus, it’s important to complete your own advance directive before you actually need it.

I have expressed my preferences in an advance healthcare directive: Yes \_\_\_ No \_\_\_

If yes, where the document can be found \_\_\_\_\_

As stated in that document, my wishes are:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My agent(s) for healthcare decisions is(are):

\_\_\_\_\_  
\_\_\_\_\_

**CONSIDERATIONS REGARDING MY PHYSICAL BODY**

Name of mortuary/funeral society \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Where papers with mortuary information are located

\_\_\_\_\_

Arrangements have \_\_\_ have not \_\_\_ been made.

I have prepaid for the following services with the mortuary: \_\_\_\_\_

\_\_\_\_\_

At the time of my death, I support \_\_\_ do not support \_\_\_ donation of my body for other medical purposes.

*Arrangements for this type of donation must be made with a medical institution before death.*

Name of medical institution: \_\_\_\_\_

Phone \_\_\_\_\_

### CONSIDERATIONS REGARDING MY BURIAL

You now have a myriad of choices concerning where you want to be buried. You can be buried in the earth or at sea, or even launched into space. You can have caskets made of wood or metal or copper. You can have ashes scattered or interred in all shapes of containers. This list is not intended to be exhaustive, but only as a starting point to help you think about options. Here are some basic questions:

My preference is to be buried \_\_\_ cremated \_\_\_

I have no preference regarding cremation or burial \_\_\_

If buried, I prefer a "green burial" \_\_\_ (See [www.greenburialcouncil.org](http://www.greenburialcouncil.org))

If buried, the place where I would like to be buried is:

\_\_\_\_\_

Arrangements have \_\_\_ have not \_\_\_ been made.

Where papers with cemetery information are located \_\_\_\_\_

If cremated, I would like my ashes:

Scattered at: \_\_\_\_\_

Interred at: \_\_\_\_\_

*State law and federal law restrict where ashes may be scattered or buried. See California Cemetery and Funeral Bureau ([www.cfb.ca.gov](http://www.cfb.ca.gov)) or EPA "Burial at Sea" ([www.epa.gov](http://www.epa.gov))*

I would like a casket: \_\_\_ I don't need a casket: \_\_\_

I prefer as casket made of: \_\_\_\_\_

NOTE: In California, embalming is not required before burial or cremation.

My preference is to be embalmed \_\_\_ Not embalmed \_\_\_.

If you die in another state, do you want your body returned to the mortuary listed above? Yes \_\_\_ No \_\_\_

*NOTE: The viewing of a body used to be considered to be a mandatory public event, as was having the casket at the funeral. Today, viewing – either with the casket open or closed – is considered optional. It is not unusual to have a memorial service with neither casket nor ashes present.*

Regarding the viewing of my body, these are my wishes:

Viewing at the mortuary: Yes \_\_\_ No \_\_\_ At the service: Yes \_\_\_ No \_\_\_  
(In general, the UMC does not favor an open casket at the funeral service  
Itself.)

I prefer an open casket: Yes \_\_\_ No \_\_\_

Details of viewing and/or embalming or cremation:

Clothing \_\_\_\_\_

Glasses on \_\_\_ off \_\_\_ Jewelry \_\_\_\_\_

Disposition of ashes:

Placed in an urn \_\_\_ Cremains returned to family \_\_\_

Interred at \_\_\_\_\_

Scattered at sea \_\_\_ Other (be specific) \_\_\_\_\_

If the casket will be at the funeral service, names of suggested  
pall bearers:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Casket to be draped with flowers \_\_\_ American flag \_\_\_ Pall \_\_\_  
(Pall is a symbol of our being clothed in Christ at our baptism and at our  
death. It covers the casket as a sign of equality of all at death.)



---

---

---

---

---

---

---

---

## **Funerals/Memorial Services**

Let's get comfortable. We are going to talk about the details you will need to take care of when a loved one dies. Some of you already have first hand experience with the myriad of details and forms . . . so please bear with us as we try to help those who have no experience.

To be candid, the way a person dies will result in a variety of options and paperwork that is far beyond the scope of this workbook. For example, if a person dies at home out of the blue, call 911. If the loved one is in a health care facility, the management will have their list of protocols and requirements.

Some families don't want services. That's okay. It can be a huge cost savings. But pastors know that your grieving process and moving forward will be aided by having a service.

If you decide to have a service, the timing is usually set by when the family can be present and what's already on the church schedule. (Mortuaries are usually flexible. You are paying them after all.) Calling the pastor before going to the mortuary can be helpful in setting timing.

There are basically two types of services: funerals and memorials. A funeral is a service with the remains of the deceased present in body or cremated form. A memorial service does not include the remains of the deceased and may take place at a time and location apart from when and where the person died. A graveside service is usually short and allows those present to participate in committing the deceased back to the earth. The graveside service may also be separated in time from the funeral or memorial service. For those who choose to not have a funeral or memorial service, but want their body buried, the graveside service may include elements commonly found in a funeral service.

Once you have decided on what kind of service, arrange a meeting with the pastor. He or she can walk you through all the variations and options to plan a service that is meaningful. One thing the pastors will need is a photo of your loved one that can be used on the cover of the bulletin.

The pastors will work with you to make a service personal. At the meeting, they will ask about favorite family stories, favorite music, etc. One suggestion that lately has become extremely popular is to have a show and tell table of things that represent a loved one's life. This might include a display of digital images. The family sets this up for people to view as they arrive.

The costs of having a service at CUMC are typically around \$800. At CUMC, this includes organist, custodian, sound tech, as well as a donation to UMW for a cookie and tea reception.



**MY MEMORIAL/FUNERAL SERVICE**

Newspapers to receive obituaries:

---



---



---

**IMPORTANT NOTE**

*The personal information in the previous sections can be useful to write an obituary. However, AARP cautions ("Death Notice Double-Cross," AARP Bulletin, March 2018) that obituaries "can spoon-feed scammers the precise nuggets (of personal information) they need." Thus, AARP advises that you leave out the decedent's birth date, middle name, home address, birthplace, mother's maiden name, and the names of family survivors in obituaries sent to newspapers and posted on the Internet. Tradition is hard to break, but dangers posed by today's technology may encourage us to find other ways to give notice and memorialize deceased loved ones.*

I request that the following pastor(s) participate in my funeral/memorial service, in addition to my current pastor:

Name \_\_\_\_\_

Contact Information \_\_\_\_\_

Name \_\_\_\_\_

Contact Information \_\_\_\_\_

I have \_\_\_ have not \_\_\_ discussed the service with these persons.

Place where the service is to be held: \_\_\_\_\_

---

Family remembrances to be given by:

---

---

Soloist \_\_\_\_\_ Music for soloist \_\_\_\_\_

---

Congregational hymns/songs:

---

---

Instrumental music: \_\_\_\_\_

Scripture passages: \_\_\_\_\_

---

Special reader: \_\_\_\_\_

Poetry or other literature to be read: \_\_\_\_\_

---

Flowers \_\_\_\_\_

I would like to include the following cultural/family customs \_\_\_\_\_

---

Other wishes regarding the service: \_\_\_\_\_

---

---

**GRAVESIDE SERVICE**

I would like a graveside service: Yes \_\_\_ No \_\_\_

If there will be a graveside service, my preference is that it be:

before \_\_\_ after \_\_\_ the memorial service

Private \_\_\_ Public \_\_\_

If private, names of family and friends to be invited:

---

---

---

I want a pastor to officiate: Yes \_\_\_ No \_\_\_

## MEMORIAL GIFTS

When the church community has been an important part of your life, establishing a lasting memorial is a blessing to both you and the church. Memorial giving honors the loved one, the church, and God. Through memorial giving, you live on in the gifts given in your memory. They also enable the church to complete projects that enhance the church environment and programs. You might consider gifts to the church, community and other organizations important to you. CUMC's Endowment Committee has prepared a brochure with information on memorial gifts.

I ask that memorial gift(s) be given to the following:

CUMC Memorial Fund \_\_\_\_ Specific CUMC fund: \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

**WHO TO CONTACT TO WRAP UP MY AFFAIRS**

**ADVISORS:**

Attorney \_\_\_\_\_

Address/Phone \_\_\_\_\_

Accountant \_\_\_\_\_

Address/Phone \_\_\_\_\_

Executor/Executrix \_\_\_\_\_

Address/Phone \_\_\_\_\_

Financial Planner \_\_\_\_\_

Address/Phone \_\_\_\_\_

Other \_\_\_\_\_

My will is located at \_\_\_\_\_

My trust is located at \_\_\_\_\_

***NOTE: If you do not already have a will, or will and trust, this is the time to prepare one. If you have not reviewed these documents in several years, take time to do so. Failure to have an up-to-date will or will and trust will result in delay and avoidable expense in carrying out your wishes.***

**COMPANIES AND AGENCIES TO NOTIFY:**

***NOTE: Your family will need at least 10 copies of the death certificate to respond to requirements of insurance companies, and state and federal agencies at the time of your death. It's less expensive to obtain copies of the death certificate through the mortuary.***

INSURANCE COMPANIES TO NOTIFY:

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Type of insurance \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Type of insurance \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Type of insurance \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Type of insurance \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Type of insurance \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

OTHER AGENCIES TO NOTIFY

Social Security [information re: death & survivor benefits at [www.ssa.gov](http://www.ssa.gov)]

Social Security # \_\_\_\_\_

Department of Motor Vehicles [instructions at [www.dmv.ca.gov](http://www.dmv.ca.gov)]

Driver's License # \_\_\_\_\_

Post Office: [instructions re: change of address at [www.usps.gov](http://www.usps.gov)]

State of California [information re: state disability at [www.edd.ca.gov](http://www.edd.ca.gov)]

Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PENSIONS:

Company/Agency \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Company/Agency \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Company/Agency \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

*NOTE: In addition to notification of death, these companies and agencies need to be updated on beneficiaries and survivors.*

RETIREMENT ACCOUNTS:

Company \_\_\_\_\_ Phone \_\_\_\_\_

Account # \_\_\_\_\_

Address \_\_\_\_\_

Company \_\_\_\_\_ Phone \_\_\_\_\_

Account # \_\_\_\_\_

Address \_\_\_\_\_

Company \_\_\_\_\_ Phone \_\_\_\_\_

Account # \_\_\_\_\_

Address \_\_\_\_\_

Company \_\_\_\_\_ Phone \_\_\_\_\_

Account # \_\_\_\_\_

Address \_\_\_\_\_

### SOCIAL MEDIA

*NOTE: It's also important to take down social media accounts and not spread news of a loved one's death on the Internet. In addition to the obvious security reasons and danger that someone may exploit the information, such news may cause distress to family and friends who receive it for the first time on social media.*

Facebook \_\_ Login/Password \_\_\_\_\_

Twitter \_\_ Login/Password \_\_\_\_\_

Instagram \_\_ Login/Password \_\_\_\_\_

Other \_\_\_\_\_ Login/Password \_\_\_\_\_

### BANK/CREDIT UNION ACCOUNTS:

*NOTE: There are numerous immediate financial demands at the time of a loved one's death. To avoid delay in obtaining access to the loved one's checking account, it may be prudent to add a family member as a signatory on that account unless your loved one has prepared a durable power of attorney.*

Name \_\_\_\_\_ Acct # \_\_\_\_\_

Type of Acct \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_



Name \_\_\_\_\_ Acct # \_\_\_\_\_

Type of Acct \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Name \_\_\_\_\_ Acct # \_\_\_\_\_

Type of Acct \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Location of Safe Deposit Box \_\_\_\_\_

INVESTMENT ACCOUNTS:

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Type of Acct \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Type of Acct \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Type of Acct \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

REAL ESTATE:

Description or address \_\_\_\_\_

Location of deed \_\_\_\_\_

Mortgage? Yes \_\_\_ No \_\_\_ Loan # \_\_\_\_\_

Lender \_\_\_\_\_ Phone \_\_\_\_\_

Description or address \_\_\_\_\_

Location of deed \_\_\_\_\_

Mortgage? Yes \_\_\_ No \_\_\_ Loan # \_\_\_\_\_

Lender \_\_\_\_\_ Phone \_\_\_\_\_

TIMESHARES

Company \_\_\_\_\_ Membership # \_\_\_\_\_

Name \_\_\_\_\_ City \_\_\_\_\_

Contact Information \_\_\_\_\_

Company \_\_\_\_\_ Membership # \_\_\_\_\_

Name \_\_\_\_\_ City \_\_\_\_\_

Contact Information \_\_\_\_\_

Timeshare Points: Name of Company \_\_\_\_\_

Membership # \_\_\_\_\_

Contact Information \_\_\_\_\_

UTILITIES: [electricity, gas, water, trash cable TV, internet, cell phone, etc.]

*NOTE: Security code may be needed for communication and can be found on page 1 of the bill.*

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Security Code \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Security Code \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Security Code \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Security Code \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Security Code \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Security Code \_\_\_\_\_ Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

CREDIT CARDS:

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Company \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

CAR LOAN(S)

Lender \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

Lender \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_

Address/Web Site \_\_\_\_\_

AIRLINE MILES

Airline \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_ Web Site \_\_\_\_\_

Airline \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_ Web Site \_\_\_\_\_

Airline \_\_\_\_\_ Acct # \_\_\_\_\_

Phone \_\_\_\_\_ Web Site \_\_\_\_\_

HOTEL POINTS:

Hotel \_\_\_\_\_ Acct # \_\_\_\_\_

Phone/Web Site \_\_\_\_\_

Hotel \_\_\_\_\_ Acct # \_\_\_\_\_

Phone/Web Site \_\_\_\_\_

**WHERE TO FIND IMPORTANT DOCUMENTS**

Birth certificate \_\_\_\_\_

Children's birth certificates \_\_\_\_\_

Marriage certificate \_\_\_\_\_

Mortgages & notes \_\_\_\_\_

Deeds for real property \_\_\_\_\_

Deeds for timeshares \_\_\_\_\_

Advance health care directive \_\_\_\_\_

Will \_\_\_\_\_

Living trust \_\_\_\_\_

Durable Power of Attorney \_\_\_\_\_

Deed for cemetery property \_\_\_\_\_

Mortuary insurance documents \_\_\_\_\_

Life insurance policies \_\_\_\_\_

Title/pink slips for vehicles \_\_\_\_\_

Safe deposit box keys \_\_\_\_\_

Other documents \_\_\_\_\_

\_\_\_\_\_

**PASSWORDS:**

Computer login \_\_\_\_\_

Master password for password manager, e.g., Dashlane, Last Pass.

\_\_\_\_\_

Other \_\_\_\_\_







## Claremont United Methodist Church

211 W. Foothill Blvd., Claremont CA 91711  
909-624-9021 FAX 909-624-7308  
[www.claremontumc.net](http://www.claremontumc.net)  
[churchoffice@claremontumc.info](mailto:churchoffice@claremontumc.info)