



Life Planning Guide

MRMS

Insurance

Vital Information

Full Name_____

Address_____

City_____ State_____ County_____

Date of birth_____ Place of birth_____

Social security number_____

Occupation (or retired from)_____

Employer _____ Supervisor_____

Employer address/phone_____

Education (schools & degrees) _____

If a Veteran, complete this section.

Serial number _____ Name of War_____

Date and place of induction_____

Date and place of discharge _____

Branch of service _____ Rank_____

Personal Information

Name of spouse _____

Date of marriage _____ Location of ceremony _____

How We Met _____

Names of children _____

Names of grandchildren _____

Names of brothers/sisters _____

Special friends _____

Career highlights _____

Hobbies _____

Organizations _____

Special achievements or awards _____

Family Notification

Father's name _____

Fathers address _____ Phone _____

Mother's name _____

Mother's address _____ Phone _____

Please notify the following family members or friends immediately.

Name _____ relationship _____

Address/Phone _____

Name _____ relationship _____

Address/Phone _____

Name _____ relationship _____

Address/Phone _____

Name _____ relationship _____

Address/Phone _____

Funeral Instructions

Name of mortuary _____

Address _____

Location of service: Church Funeral Home Private Home

Address _____

Church Denomination _____

I prefer: Earth Burial Cremation Mausoleum

Name/Location of Cemetery _____

Person in charge of final arrangements _____

Relationship _____ Phone _____

Requested Pallbearers:

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Important Documents

List below the location of important legal papers.

Last Will and Testament _____

Birth Certificate _____

Marriage Certificate _____

Bank Account Books _____

I have bank deposits in the following banks _____

Stock/Bond Certificates _____

Mortgage Papers _____

Location of safety Deposit Box _____

Retirement Plan Benefits Available From _____

Attorney's Name _____ Phone _____

Address _____

Executory of my Estate _____ Relationship _____

Address/Phone _____

Personal Mementos

- ▶ List any special notes to your family or how you want them to remember you.

Thank you