My financial life

A preplanner for your family's well-being

It's an uncomfortable topic. None of us wants to think about our own mortality. But it's especially during emotional times that people tend to make financial mistakes—mistakes that can undo years of planning. By taking a little time now to complete this preplanner, you can greatly ease the burden on those you love and help simplify the process of getting your financial house in order. It's your life, your legacy, and your money. Take charge of it.

A NOTE ON PASSWORDS: Security experts typically advise against writing down and storing all your computer, financial account, and social media passwords in a single document like this preplanner. Instead, consider relying on a trusted password manager. For a small annual fee, these applications take the hassle out of managing all your usernames and passwords across multiple sites.

1. Personal information

- a. Full name
- b. Birth date
- c. Social Security number
- d. Birth certificate location
- e. Driver's license number
- f. Medicare number
- g. Passport number & location

	Computer	Unlock code
	Computer	Unlock code
	Phone/Tablet	Unlock code
h	Othor	

- h. Other
- i. Other





2. Key contacts

a. Financial advisor name Address Email	Phone URL
b. Financial advisor name Address Email	Phone URL
c. Financial advisor name Address Email	Phone URL
d. Attorney name Address Email	Phone URL
e. Attorney name Address Email	Phone URL
f. CPA name Address Email	Phone URL
g.Employer name Address Email	Phone URL
h. Primary care physician name Address Email	Phone URL
i. Other medical provider name Address Email	Phone URL

- j. Other
- k. Other
- l. Other

3. Financial account information

If possible, include copies of recent account statements, as these may provide important additional information to assist your beneficiaries.

a. Financial institution	Account number
Financial institution	Account number

4. Other income sources

a. Social Security account number Social Security account number	
b. Military pension service branch Military pension service branch	ID ID
c. Employer pension company name Contact name Email	Employee ID Phone
Employer pension company name Contact name Email	Employee ID Phone

d.Other

e. Other

5. Safe deposit box(es)	
a. Bank	Address
Box #	Key location
Bank	Address
Box #	Key location
6. Home security	
a. Alarm system	Location
	Access code
b. Home safe	Location
	Key location
	Combination
c. Other security considerations	

(e.g., firearms, opioids, poisons)

7. Other valuable assets

a. Homes (include copies of recent mortgage statements and/or property appraisals)

b. Real estate (include location of any other properties, deed and key locations, and alarm codes)

c. Automobiles (include make, model, year, VIN and location)

d. Trust accounts (include name of trust, account number, beneficiary, estimated value, trustee, and location of documents)

7. Other valuable assets (cont'd)

e. Artwork (include description, location, and written appraisal if applicable)

f. Collections (include description, location, and written appraisal if applicable)

g.Other

8. Digital assets

a. Frequent flier pr	ogram name	Account number	
Frequent flier pr	ogram name	Account number	
Frequent flier pr	ogram name	Account number	
Frequent flier pr	ogram name	Account number	
Frequent flier pr	ogram name	Account number	
Frequent flier pr	ogram name	Account number	
b. Credit card poin	ts program	Account number	
Credit card poin	ts program	Account number	
Credit card poin	ts program	Account number	
Credit card poin	ts program	Account number	
c. Hotel reward po	ints program	Account number	
Hotel reward po	ints program	Account number	
Hotel reward po	ints program	Account number	
Hotel reward po	ints program	Account number	
Hotel reward po	ints program	Account number	
d. Social media acc	counts (e.g., Facebook, Twitter, Ir	nstagram)	
Site	User name	Password	

Site	User name	Password
Site	User name	Password

Account number

Account number

Account number

e. TV/Movie/Music streaming services Site Site

Site

8. Digital assets (cont'd)

f. Online shopping accounts (e.g., Amazon, eBay, etc.)			
Site	Account number		
Site	Account number		
Site	Account number		
g.Retail loyalty programs			
Site	Account number		
Site	Account number		
Site	Account number		
h. Other			

i. Other

9. Liabilities (credit cards, loans, home)

unt number
unt number
unt number
unt number
unt number

10. Insurance

a. Health insurance company name		
Address		
Phone		
Primary policy holder	Account/Policy number	
Health insurance company name		
Address		
Phone		
Primary policy holder	Account/Policy number	
b. Homeowners insurance company name		
b. Homeowners insurance company name		
b. Homeowners insurance company name Address		
Address	Account/Policy number	
Address Phone	Account/Policy number	
Address Phone Primary policy holder	Account/Policy number	
Address Phone Primary policy holder Homeowners insurance company name	Account/Policy number	
Address Phone Primary policy holder Homeowners insurance company name Address	Account/Policy number Account/Policy number	

c. Auto insurance company name Address Phone		
Primary policy holder	Account/Policy number	
Auto insurance company name Address Phone		
Primary policy holder	Account/Policy number	
d. Life insurance company name Address Phone Primary policy holder	Account/Policy number	
Life insurance company name Address Phone Primary policy holder	Account/Policy number	
	Account/Policy number	
e. Long-term care insurance company name Address Phone	Account/Policy number	
Long-term care insurance company name Address Phone	Account/Policy number	
f. Disability insurance company name		
Address Phone	Account/Policy number	
Disability insurance company name Address Phone	Account/Policy number	
g. Property/Casualty umbrella company name		
Address Phone	Account/Policy number	
Property/Casualty umbrella company name Address Phone	Account/Policy number	
h. Professional (e.g., malpractice) insurance company name Address		
Phone	Account/Policy number	

i. Other

11. Monthly bills

a. Bill pay service company name (if applicable) Phone		
b. Mortgage lender name		
Account number	Due date	Avg. \$
Mortgage lender name		
Account number	Due date	Avg. \$
c. Car payment name		
Account number	Due date	Avg. \$
Car payment name		
Account number	Due date	Avg. \$
d. Oil/Gas name		
Account number	Due date	Avg. \$
Oil/Gas name		
Account number	Due date	Avg. \$
e. Electric name		
Account number	Due date	Avg. \$
Electric name		
Account number	Due date	Avg. \$
f. Cable/Internet name		
Account number	Due date	Avg. \$
Cable/Internet name		
Account number	Due date	Avg. \$
g. Cell phone name		
Account number	Due date	Avg. \$
Cell phone name		
Account number	Due date	Avg. \$
h. Credit card name		
Account number	Due date	Avg. \$
Credit card name		
Account number	Due date	Avg. \$
Credit card name		
Account number	Due date	Avg. \$

Automatically Drafted charged

11. Monthly bills (cont'd)

Credit card name			Automatically charged	Drafted
Account number	Due date	Avg. \$		
Credit card name				
Account number	Due date	Avg. \$		
Credit card name				
Account number	Due date	Avg.\$		
Credit card name				
Account number	Due date	Avg.\$		
i. Other				
Account number	Due date	Avg.\$		
j. Other				
Account number	Due date	Avg.\$		
k. Other				
Account number	Due date	Avg.\$		
l. Other				
Account number	Due date	Avg.\$		

12. Post-mortem arrangements/instructions

Include copies of any pre-paid funeral/burial arrangements you may have made. Use this preplanner to store any sealed personal letters to loved ones and/or a letter of personal intent outlining values or wisdom you wish to impart, how you would like to be remembered, or wishes.

a. Donation of organs and/or my body (please check one)

I have a formal arrangement with _______ that will permit any of my bodily parts to be donated for science and/or the benefit of another person.

I have not entered into a formal arrangement but desire to donate any part of my body that can be used for science/the benefit of another person/etc.

I do not desire to have my organs/bodily parts donated.

b. Regarding my body (please check one)

I want to be cremated and:

I want my ashes scattered at/over the following location: _____

I want my ashes buried at the following location: ____

I would like for my family to retain my ashes.

I do not wish to be cremated.

I do not care whether or not I am cremated.

12. Post-mortem arrangements/instructions (cont'd)

c. Funeral arrangements (complete all that apply)

- 1. I have already made funeral pre-arrangements with _______(funeral home), and you may contact _______(name) at _______(phone number) to discuss.
- 2. I have not made preburial arrangements, but prefer my family/executor engage______ (funeral home) to handle my funeral proceedings.
- 3. I have a cemetery plot at ______ that I would like to be used for my burial.
- 4. I have made no arrangements and desire for my family to choose how to handle any and all funeral arrangements (Y/N):
- 5. I desire for a memorial service to be held at: ____
- 6. I would prefer to only have a graveside funeral service (in lieu of a memorial service or other funeral service) (Y/N):

d. Additional information

- 1. I have these special requests for any of the services listed in this section:
- 2. Where to send flowers/to whom to make donations:
- 3. Obituary information, including important organizations/people, military and/or career history, etc. (attach additional sheet if desired):

e. Information for a death certificate (complete in full)

1.	My father's name is	He was born on	at
	He passed away onat		
2.	My mother's maiden name is	She was born on	at
	She passed away onat		
3.	My spouse's name is	. He/She was born on	at
	He/She passed away onat	·	

4. I was born on ______at_____.

12. Post-mortem arrangements/instructions (cont'd)

f. Decisions deferred to family (choose one option, if desired)

I desire that ______ make these elections on my behalf. If ______ is not living at the time of my passing, then ______ shall make the final decision.

I desire for my children to make the decision regarding the above matters. If they are unable to come to a unanimous agreement, then a majority vote shall be held.

Personal message to my family and/or friends (attach a separate page if desired)

Initials

13. Important documents

Regardless of the complexity of your assets or your specific wealth-transfer goals, there are several important legal documents you will want to include in this kit to ensure your survivors have easy access to them:

a. Last will and testament – The legal document in which you (the testator) set forth how your probate property should be distributed at death. The will also names an executor/personal representative to settle the estate and appoints a guardian for any minor children.

Document location Date of last update

b. Durable power of attorney – Allows you to appoint someone to serve as an agent to handle your financial affairs in the event you are incapacitated or otherwise unable to perform those duties.

Document location

c. Living will – Sometimes referred to as an advance healthcare directive, this legally binding document clearly articulates your wishes with respect to resuscitation, desired quality of life, and end-of-life treatments—including treatments you do not wish to receive—under certain dire medical conditions.

Document location

Date of last update

Date of last update

d. Healthcare power of attorney – A document in which you designate an agent to make health decisions on your behalf should you be rendered unable to do so yourself. In some states, the healthcare power of attorney is combined with a living will into a single document.

Document location Date of last update

e. Insurance policies – Make sure to include copies of any term and/or permanent life insurance policies, as well as any separate long-term care coverage you might have.

Document location

Date of last update

14. Other documents

In addition to the above, if any of the following are applicable, please enclose copies:

- a. Trusts As well as dictating how your assets should be distributed to your beneficiaries, trusts can help provide for your spouse/partner and children if something happens to you, ensure the care of a loved one with special needs, protect your wealth from creditors/lawsuits/divorce, and provide a charitable legacy.
- **b. Titles/Deeds/Certificates** These will include titles to any properties and vehicles, deeds to land you own, as well as birth and marriage certificates.
- c. Most recent federal and state tax returns If you did not use an accountant to file your most recent tax returns, include copies in this kit.
- d. Marital property agreement If you currently live or have lived in a community property state while married, you should consider establishing a marital property agreement to clarify ownership of property between you and your spouse/ partner during life and at death.

15. Beneficiary designations

Not all property is governed by a will or trust. Some assets (IRAs and life insurance death benefits) are distributed to whoever is the designated beneficiary. So, make sure you carefully review all beneficiary designations to make sure these assets will go to the intended beneficiary.

Along the way

If you have any questions or need assistance in gathering, organizing, or analyzing your financial information, reach out to your Truist advisor. They will be happy to assist you in all aspects of the estate planning process.

You can also visit our Emergency Preparedness page at Truist.com/help-center/emergency-resources for additional insights, advice, and contact information.

Truist.com/wealth

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