Personal Emergency & Estate Summary Template

Last Reviewed: February 2026

This template is intended as an organizational tool only. It does not replace a will, trust, or other estate planning documents.

Personal Information

Full Name: ______________________________________

Date of Birth: ___________________________________

Primary Phone: ___________________________________

Primary Email: ___________________________________

1. Key Contacts

Executor / Personal Representative: _________________________

Phone: _________________ Email: _______________________

Attorney: ____

Phone: _________________

Financial Advisor: _________________________________

Phone: _________________

Insurance Agent: __________________________________

Phone: _________________

2. Location of Important Documents

Will located at: ___________________________________

Trust located at: __________________________________

Power of Attorney located at: ___________________________

Insurance policies located at: ___________________________

Safe or safe deposit box location: ________________________

Who has access: ____________________________________

3. Financial Overview (Providers Only)

Primary Bank(s): ______________________________

Retirement Plan Provider(s): ______________________

Life Insurance Carrier(s): ________________________

Disability Insurance Carrier: ______________________

Mortgage Servicer: _____________________________

4. Digital Asset Overview (Do Not List Passwords)

Email Provider: ________________________________

Cloud Storage Provider: __________________________

Cell Phone Carrier: ______________________________

Investment Portal(s): ____________________________

Utility Provider Logins: __________________________

Password manager used (if any): ____________________

Location of master access instructions (if applicable): ______

5. Beneficiary Review Checklist

Date last reviewed: ___________________

☐ 401(k)

☐ IRA

☐ Life Insurance

☐ HSA

☐ Bank accounts with TOD designation

☐ Brokerage accounts

6. Emergency & Personal Wishes (Optional)

Funeral preferences: ________________________________

Burial or cremation preference: _________________________

Charitable requests: _________________________________

Other notes for family:

____

____

____

____

____

____

____

____

____

____

____

____

____

____

____

____

____

____

Signature (optional): ________________________________

Date: ______________________