

Preparedness

e-binder

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Preparedness
e-binder

Instructions

01 Read the information below.

02 Print all documents or fill them using a PDF writer software

03 Gather other items on document checklist if need it.

04 Fill out all the forms. The most information you provide will be better.

05 Encrypt always your files and send a separate email with password

Thank you for trusting

Read this first

Concerns about Security

Having all this information in one place may create risk. But with the proper security in place, your e-binder will be safe. If you don't have your e-binder at all, there are risks, specially knowing that we don't know when will be called to the afterlife. You must weight which risk is less scary to you.

Having MyLegacy on your side, be certain that your emails are well secured and will be delivery on time. Consider MyLegacy as your life insurance for communications.

Keep your Data Safe

MyLegacy provides control and increased privacy. All data is stored and backed up in highly secure data centers.

Suggestions

Protect your preparedness e-binder by implementing some encryption on it. Did you know that files can be protected with password. If you print your e-binder, disguise your e-binder as a "children's artwork" binder. I've provided an "artwork" cover for your printout; then, put all your documents between two pieces of children's art.

(2) Create a "code" system for your financial information. One idea is to use a 10 letter phrase such as "LIGHT BREAD"

for number L=0, I=1, G=2, H=3 etc) You can find other "code" ideas online.

MyLegacy
Delivered when it matters most

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Document Check List

Gather these documents and add them along with your Preparedness e-binder. Put personal documents in a safe place where your family member can find them. Then use MyLegacy to let them know where to find the documents. Also you can attach password protected documents through MyLegacy if you wish!

Personal Documents

- ☐ Birth Certificates
- ☐ Driver's License
- ☐ Military records
- ☐ Social Security Cards
- ☐ Passports
- ☐ Immunization Records
- ☐ Religious Certificates / Blessings
- ☐ Diplomas

Tax & Investment Documents

- ☐ 3 Years Income tax returns
- ☐ Property Tax Statements
- ☐ Investment plan summaries
- ☐ Stock Certificates
- ☐ Bonds
- ☐ Certificates of Deposit

Testamentary Documents

- ☐ Will
- ☐ Trust and amendments
- ☐ Contact info for everyone
- ☐ Name in will / trust
- ☐ Living Will
- ☐ Power of Attorney

Legal Documents

- ☐ Marriage certificates
- ☐ Divorce records
- ☐ Prenuptial / postnuptial
- ☐ Other contracts
- ☐ Child custody agreements
- ☐ Utility bill as proof or residency
- ☐ Adoption Papers

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Document Check List

Other

- [ ] Recent and old family photos
- [ ] Cash
- [ ] Maps of area

Property

- [ ] Deeds
- [ ] Titles
- [ ] Appraisals
- [ ] Home inventory list / Picture CD

Insurance

- [ ] Policy summary pages
- [ ] ID Cards
- [ ] Vehicle registration cards

Tax & Investment Documents

- [ ] Marriage certificates
- [ ] Divorce records
- [ ] Prenuptial / postnuptial
- [ ] Other contracts
- [ ] Child custody agreements
- [ ] Utility bill as proof or residency
- [ ] Adoption Papers

Misc

- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]

Add your own

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Essential Family Info

Home Address: _____Phone 1:_____ Phone 2:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Name: _____ DOB: _____Allergies:_____

Pets Info

Name: _____ DOB: _____Type: _____

Name: _____ DOB: _____ Type: _____

Name: _____ DOB: _____ Type: _____

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Family & Friends Info

Extended family numbers

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

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Name: _____ Number: _____

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nu

Family & Friends Info

Local Friends Numbers

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Long Distance Friends Numbers

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

Name: _____ Number: _____

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Financial Numbers

Checking Account Provider: _____

Account #: _____ Phone Number:_____

Savings Account Provider: _____

Account #: _____ Phone Number:_____

401K Provider: _____

Account #: _____ Phone Number:_____

IRA Provider: _____

Account #: _____ Phone Number:_____

Permanent Life Insurance: _____

Account #: _____ Phone Number:_____

Other Investments: _____

Account #: _____ Phone Number:_____

Other Investments: _____

Account #: _____ Phone Number:_____

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Insurance Providers

Health Insurance: _____ Policy # :_____

Address: _____

Phone Number:_____ Agent: _____

Dental Insurance: _____ Policy # :_____

Address: _____

Phone Number:_____ Agent: _____

Auto Insurance: _____ Policy # :_____

Address: _____

Phone Number:_____ Agent: _____

Car1 Vin#: _____ Car2 Vin#: _____

Car3 Vin#: _____ Car4 Vin#: _____

Life Insurance: _____ Phone No:_____

Policy 1# :_____ Policy 2#: _____

Policy 3# :_____ Policy 4#: _____

Life Insurance: _____ Phone No:_____

Policy 1# :_____ Policy 2#: _____

Home owner Insurance: _____ Phone No:_____

Address: _____

Policy 1# :_____ Policy 2#: _____

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Utility Provider Numbers

Electricity: _____ Phone Number :_____

Account #: _____

Gas: _____ Phone Number :_____

Account #: _____

Internet: _____ Phone Number :_____

Account #: _____

Phone: _____ Phone Number :_____

Account #: _____

Trash: _____ Phone Number :_____

Account #: _____

Water: _____ Phone Number :_____

Account #: _____

Other: _____ Phone Number :_____

Account #: _____

Other: _____ Phone Number :_____

Account #: _____

Other: _____ Phone Number :_____

Account #: _____

Other: _____ Phone Number :_____

Account #: _____

Other: _____ Phone Number :_____

Account #: _____

Other: _____ Phone Number :_____

Account #: _____

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Password Tracker

Website: _____
Username: _____
Password: _____
Email attached: _____
Other: _____

Website: _____
Username: _____
Password: _____
Email attached: _____
Other: _____

Website: _____
Username: _____
Password: _____
Email attached:_____
Other: _____

Website: _____
Username: _____
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Website: _____
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Password: _____
Email attached:_____
Other: _____

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