



ANCHOR POINT
BENEFIT GROUP

Local Medicare guidance • Fresno & Central Valley

PERSONAL & CONFIDENTIAL

My Important Information

A record for the people I love — everything they'll need to know, all in one place, if something happens to me.

THIS ORGANIZER BELONGS TO

Margaret "Peggy" Ann Sample

DATE COMPLETED

March 14, 2026

Contains account numbers and passwords. Keep it locked in a safe place.



Read This First

When someone passes away, their family often spends months hunting for accounts, policies, and passwords. This workbook puts it all in one place. You don't have to finish it in one sitting — fill in a section at a time. Skip anything that doesn't apply to you.

How to use it

- 1. Write in pen for things that don't change, and pencil for things that do (passwords, balances).
- 2. Gather your statements, policies, and cards before you start — it goes faster.
- 3. Look at the filled-in *sample* copy if you're not sure what to write.
- 4. Tell one or two trusted people that this organizer exists and where it is kept.
- 5. Review it once a year (your birthday is an easy reminder) and log it on the last page.

Keep it safe: This book holds account numbers and passwords. Store it in a locked, fireproof safe or locked drawer at home. Never email, text, or photograph the pages. When you update a page, shred the old one. Don't keep the only copy in a bank safe deposit box — your family may not be able to open it quickly.

What's inside

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THIS ORGANIZER IS KEPT AT
Fire safe, bedroom closet

KEY OR COMBINATION IS WITH
Bob and Linda

This workbook is for personal record-keeping only. It is not a will, trust, or legal document and does not replace one. Anchor Point Benefit Group does not provide legal, tax, or investment advice — please talk with an attorney or tax professional about your estate. Anchor Point Benefit Group is not connected with or endorsed by the U.S. government or the federal Medicare program.

1 About Me

The basic facts your family will need for the death certificate, Social Security, and every account they have to close. Most people don't realize the death certificate asks for your parents' names and birthplaces — write them down now.

FULL LEGAL NAME

Margaret Ann Sample

NAME I GO BY

Peggy

OTHER NAMES USED (MAIDEN, PRIOR MARRIED)

Margaret Ann Carter (maiden)

DATE OF BIRTH

03 / 14 / 1951

PLACE OF BIRTH (CITY, STATE, COUNTRY)

Visalia, California, USA

SOCIAL SECURITY NUMBER

000-12-3456

MEDICARE NUMBER (ON RED-WHITE-BLUE CARD)

1EX4-AM5-PL00

DRIVER'S LICENSE / STATE ID # & STATE

CA D0000000

PASSPORT # & EXPIRATION

000000000 exp 06/2029

HOME ADDRESS

1234 Example Ave, Fresno, CA 93700

HOME PHONE

559-555-0101

CELL PHONE

559-555-0102

EMAIL

peggy@example.com

MARITAL STATUS

☒ Married ☐ Widowed ☐ Divorced ☐ Single ☐ Domestic partner

CITIZENSHIP

U.S. citizen

FAITH / CHURCH / PLACE OF WORSHIP

Example Community Church

USUAL OCCUPATION (FOR DEATH CERTIFICATE)

Elementary school teacher

INDUSTRY / EMPLOYER I RETIRED FROM

Example Unified School District

HIGHEST EDUCATION

Bachelor's degree

FATHER'S FULL NAME & BIRTHPLACE

Thomas Carter - Tulare, CA

MOTHER'S FULL MAIDEN NAME & BIRTHPLACE

Ruth Ellen Moore - Oklahoma

Military service (if any)

DID YOU SERVE?	BRANCH	RANK AT DISCHARGE
☐ Yes ☒ No		
SERVICE NUMBER	DATES OF SERVICE	TYPE OF DISCHARGE
WHERE MY DD-214 (DISCHARGE PAPERS) IS KEPT		
n/a — Bob's DD-214 is in the fire safe (he served Army 1969-71)		
VA CLAIM / FILE NUMBER	VA BENEFITS I RECEIVE	

Good to know: Veterans and their spouses may qualify for burial in a national cemetery, a free headstone or marker, a burial flag, and military funeral honors. Your family will need the DD-214 to request them — keep it with this organizer.

2 My Family

Who your family is and how to reach them. Include former spouses — Social Security and pension survivor benefits can depend on past marriages.

Spouse or partner

FULL LEGAL NAME

Robert James Sample

DATE OF BIRTH

08 / 02 / 1949

DATE & PLACE OF MARRIAGE

June 12, 1976 - Fresno, CA

CELL PHONE

559-555-0103

Children (including step-children and adopted)

NAME	RELATIONSHIP	PHONE	CITY / EMAIL
<i>Linda Sample-Garcia</i>	<i>Daughter</i>	<i>559-555-0104</i>	<i>Clovis linda@example.com</i>
<i>Michael Sample</i>	<i>Son</i>	<i>916-555-0105</i>	<i>Sacramento mike@example.com</i>

Grandchildren, siblings, and others close to me

NAME	RELATIONSHIP	PHONE	CITY / EMAIL
<i>Emma Garcia</i>	<i>Granddaughter</i>	<i>559-555-0106</i>	<i>Clovis</i>
<i>Daniel Carter</i>	<i>Brother</i>	<i>559-555-0107</i>	<i>Visalia</i>

Former spouses (if any)

NAME	MARRIED (DATE)	ENDED (DATE & HOW)	NOTES

3 My Trusted People

The people who will handle things. Your executor (or successor trustee) is the person who settles your estate — tell them this organizer exists and where it's kept.

ROLE	NAME	PHONE	EMAIL / ADDRESS / NOTES
Executor (named in my will)	Linda Sample-Garcia	559-555-0104	daughter; has house key
Back-up executor	Michael Sample	916-555-0105	son
Successor trustee (if I have a trust)	Linda, then Michael		same as executor
Power of attorney for finances	Robert Sample	559-555-0103	then Linda
Health care agent	Robert Sample	559-555-0103	then Linda
Attorney	Jane Doe, Esq.	559-555-0130	Example Law Office, Fresno
CPA / tax preparer	Sam Example, EA	559-555-0131	does our taxes every March
Financial advisor	Chris Sample	559-555-0132	Example Investments
Insurance agent	Frank Fluharty	559-862-5615	Medicare + life insurance
Banker			
Primary doctor	Dr. A. Example	559-555-0133	
Specialist			
Pharmacy	Example Drug #12	559-555-0134	Cedar & Shaw
Pastor / clergy	Pastor John Example	559-555-0135	Example Community Church
Funeral home	Sample Funeral Home	559-555-0136	prepaid - see Section 15
Employer HR / union (if working)			

4

Legal Papers & Where They Are

Your family can't use a will they can't find. For each paper, check if you have it and write exactly where the ORIGINAL is kept.

DOCUMENT	HAVE IT?	DATE SIGNED	WHERE THE ORIGINAL IS KEPT
Will	Yes	2019	Fire safe, bedroom closet
Living trust	Yes	2019	Fire safe + attorney copy
Trust amendments			
Power of attorney (finances)	Yes	2019	Fire safe
Advance health care directive	Yes	2021	Fire safe + copy at doctor
POLST (doctor's orders)	No		
HIPAA release			
Birth certificate	Yes		Fire safe
Marriage certificate(s)	Yes	1976	Fire safe
Divorce papers			
Social Security card			
Military discharge (DD-214)			
Citizenship / naturalization			
House deed(s)	Yes		Safe deposit box
Vehicle titles (pink slips)	Yes		Fire safe
Tax returns (last 3-7 years)	Yes		Hall closet, gray file box
Prepaid funeral contract	Yes	2022	Fire safe
Cemetery deed / plot papers			
Life insurance policies	Yes		Fire safe (red folder)
Other:			

Safe deposit box

BANK & BRANCH	BOX NUMBER	WHERE THE KEY IS
Example Savings Bank - Shaw Ave	0000	Kitchen drawer, left
OTHERS ALLOWED TO OPEN IT		
Robert Sample, Linda Sample-Garcia		

Home safe & storage

HOME SAFE LOCATION	COMBINATION / CODE
Bedroom closet floor	00-00-00 (sample)
STORAGE UNIT (COMPANY, UNIT #, GATE CODE, KEY LOCATION)	
none	

Important: Tip: don't keep the ONLY copy of your will or this organizer in a safe deposit box. After a death, the bank may not let family open the box quickly.

SAMPLE

5 Bank Accounts

Checking, savings, and money market accounts. A “payable-on-death” (POD) beneficiary lets the money go straight to that person without probate — ask your bank if you're not sure whether you have one.

Bank account 1

BANK OR CREDIT UNION

Example Savings Bank

BRANCH ADDRESS & PHONE

Shaw Ave branch 559-555-0110

ACCOUNT TYPE

☒ Checking ☐ Savings ☐ Money market ☐ Other

FULL ACCOUNT NUMBER

0000 4455 6677

ROUTING NUMBER

000000000

OWNERSHIP

☐ Just me ☒ Joint ☐ In my trust ☐ Business

JOINT OWNER'S NAME

Robert Sample

PAYABLE-ON-DEATH (POD) BENEFICIARY

none - joint w/ Bob

DEBIT CARD PIN

0000 (sample)

ONLINE USERNAME

peggy sample51

ONLINE PASSWORD

SAMPLE-Blue\$ky24

MONEY DEPOSITED HERE AUTOMATICALLY (SOCIAL SECURITY, PENSION...)

Both of our Social Security checks + my teacher pension

BILLS PAID AUTOMATICALLY FROM HERE

Electric, gas, water, phone, car insurance, church giving

Bank account 2

BANK OR CREDIT UNION

Sample Federal Credit Union

BRANCH ADDRESS & PHONE

Blackstone branch 559-555-0120

ACCOUNT TYPE

☐ Checking ☒ Savings ☐ Money market ☐ Other

FULL ACCOUNT NUMBER

0000 9988 11

ROUTING NUMBER

000000001

OWNERSHIP

☒ Just me ☐ Joint ☐ In my trust ☐ Business

JOINT OWNER'S NAME

PAYABLE-ON-DEATH (POD) BENEFICIARY

Linda & Michael, 50/50

DEBIT CARD PIN

ONLINE USERNAME

msample

ONLINE PASSWORD

SAMPLE-Rose#1951

MONEY DEPOSITED HERE AUTOMATICALLY (SOCIAL SECURITY, PENSION...)

none

BILLS PAID AUTOMATICALLY FROM HERE

none - emergency savings

Bank account 3

BANK OR CREDIT UNION

BRANCH ADDRESS & PHONE

ACCOUNT TYPE

☐ Checking ☐ Savings ☐ Money market ☐ Other

FULL ACCOUNT NUMBER

ROUTING NUMBER

OWNERSHIP

JOINT OWNER'S NAME

☐ Just me ☐ Joint ☐ In my trust ☐ Business

PAYABLE-ON-DEATH (POD) BENEFICIARY

DEBIT CARD PIN

ONLINE USERNAME

ONLINE PASSWORD

MONEY DEPOSITED HERE AUTOMATICALLY (SOCIAL SECURITY, PENSION...)

BILLS PAID AUTOMATICALLY FROM HERE

Bank account 4

BANK OR CREDIT UNION

BRANCH ADDRESS & PHONE

ACCOUNT TYPE

☐ Checking ☐ Savings ☐ Money market ☐ Other

FULL ACCOUNT NUMBER

ROUTING NUMBER

OWNERSHIP

JOINT OWNER'S NAME

☐ Just me ☐ Joint ☐ In my trust ☐ Business

PAYABLE-ON-DEATH (POD) BENEFICIARY

DEBIT CARD PIN

ONLINE USERNAME

ONLINE PASSWORD

MONEY DEPOSITED HERE AUTOMATICALLY (SOCIAL SECURITY, PENSION...)

BILLS PAID AUTOMATICALLY FROM HERE

6 CDs & Savings Bonds

CDs and bonds are easy to forget — especially old paper savings bonds tucked away years ago. List every one.

Certificate of deposit (CD) 1

BANK / CREDIT UNION

Sample Federal Credit Union

CD NUMBER

CD-000123

AMOUNT

\$20,000

INTEREST RATE

4.10%

MATURITY DATE

11/2027

OWNER(S)

Margaret Sample

POD BENEFICIARY

Linda & Michael 50/50

WHERE THE PAPERWORK IS

Fire safe (green folder)

Certificate of deposit (CD) 2

BANK / CREDIT UNION

CD NUMBER

AMOUNT

INTEREST RATE

MATURITY DATE

OWNER(S)

POD BENEFICIARY

WHERE THE PAPERWORK IS

Certificate of deposit (CD) 3

BANK / CREDIT UNION

CD NUMBER

AMOUNT

INTEREST RATE

MATURITY DATE

OWNER(S)

POD BENEFICIARY

WHERE THE PAPERWORK IS

U.S. savings bonds — electronic (TreasuryDirect)

TREASURYDIRECT ACCOUNT NUMBER	USERNAME	PASSWORD
A-000-000-000	psample51	SAMPLE-Bond\$2020

U.S. savings bonds — paper

SERIES (EE, I, ETC.)	SERIAL NUMBER	FACE VALUE	ISSUE DATE	OWNER / CO-OWNER / BENEFICIARY	WHERE KEPT
EE	L000000000EE	\$100	05/1990	Margaret, POD Linda	Fire safe
EE	L000000001EE	\$100	05/1990	Margaret, POD Michael	Fire safe

Helpful: Lost track of old savings bonds? The U.S. Treasury has a free search tool at treasurydirect.gov (“Treasury Hunt”). Never pay someone to find them for you.

7 Investments & Other Assets

Brokerage accounts, stocks, crypto, business interests, and money others owe you. Crypto warning: without the wallet recovery phrase, cryptocurrency is lost forever.

Brokerage / investment account 1

COMPANY

Example Investments

ACCOUNT NUMBER

0000-1111

ACCOUNT TYPE

☐ Individual
 ☐ Joint
 ☒ Trust
 ☐ Transfer-on-death (TOD)

TOD BENEFICIARY

n/a - in trust

ADVISOR & PHONE

Chris Sample 559-555-0132

ONLINE USERNAME

psample

ONLINE PASSWORD

SAMPLE-Invest!9

Brokerage / investment account 2

COMPANY

ACCOUNT NUMBER

ACCOUNT TYPE

☐ Individual
 ☐ Joint
 ☐ Trust
 ☐ Transfer-on-death (TOD)

TOD BENEFICIARY

ADVISOR & PHONE

ONLINE USERNAME

ONLINE PASSWORD

Other assets

STOCK CERTIFICATES (COMPANY, # OF SHARES, WHERE KEPT)

30 shares Example Power Co. - fire safe

CRYPTOCURRENCY (EXCHANGE / WALLET, AND WHERE THE RECOVERY PHRASE IS KEPT)

none

BUSINESS I OWN (NAME, % OWNED, PARTNERS)

none

MONEY OWED TO ME (WHO, HOW MUCH, WHERE THE NOTE IS)

Michael owes \$3,000 - forgive at my death (in my will)

8 Retirement Accounts, Pensions & Annuities

401(k)s, IRAs, rollover IRAs, pensions, and annuities. Beneficiary forms on these accounts OVERRIDE your will — so make sure they say what you want.

Retirement account 1

TYPE

☐ 401(k) ☐ 403(b) ☐ 457 ☐ IRA ☐ Roth IRA ☒ Rollover IRA ☐ TSP ☐ Other

COMPANY HOLDING IT

Example Investments

ACCOUNT NUMBER

0000-2222

PRIMARY BENEFICIARY(IES) & %

Robert Sample 100%

BACK-UP (CONTINGENT) BENEFICIARY

Linda & Michael 50/50

PHONE

559-555-0132

ONLINE USERNAME

psample

ONLINE PASSWORD

SAMPLE-Invest!9

TAKING REQUIRED WITHDRAWALS (RMDS)?

☒ Yes ☐ No

Retirement account 2

TYPE

☐ 401(k) ☒ 403(b) ☐ 457 ☐ IRA ☐ Roth IRA ☐ Rollover IRA ☐ TSP ☐ Other

COMPANY HOLDING IT

Example Retirement Co. (old school job)

ACCOUNT NUMBER

000-333

PRIMARY BENEFICIARY(IES) & %

Robert Sample 100%

BACK-UP (CONTINGENT) BENEFICIARY

Linda & Michael 50/50

PHONE

800-555-0140

ONLINE USERNAME

msample403

ONLINE PASSWORD

SAMPLE-Apple#7

TAKING REQUIRED WITHDRAWALS (RMDS)?

☒ Yes ☐ No

Retirement account 3

TYPE

☐ 401(k) ☐ 403(b) ☐ 457 ☐ IRA ☐ Roth IRA ☐ Rollover IRA ☐ TSP ☐ Other

COMPANY HOLDING IT

ACCOUNT NUMBER

PRIMARY BENEFICIARY(IES) & %

BACK-UP (CONTINGENT) BENEFICIARY

PHONE

ONLINE USERNAME

ONLINE PASSWORD

TAKING REQUIRED WITHDRAWALS (RMDs)?

☐ Yes ☐ No

Good to know: A “rollover IRA” holds money moved from an old job’s retirement plan. List every past employer — families often miss old 401(k)s that were never rolled over.

Pensions

Pension 1

PENSION PLAN / FORMER EMPLOYER

State teachers' pension (example)

MEMBER OR ID NUMBER

0000000

MONTHLY AMOUNT

\$2,450

PAYOUT I CHOSE

☐ Single life ☒ Joint & survivor ☐ Don't know

SURVIVOR GETS (% OR \$) & WHO

50% to Robert

PENSION PHONE

800-555-0141

Pension 2

PENSION PLAN / FORMER EMPLOYER

MEMBER OR ID NUMBER

MONTHLY AMOUNT

PAYOUT I CHOSE

☐ Single life ☐ Joint & survivor ☐ Don't know

SURVIVOR GETS (% OR \$) & WHO

PENSION PHONE

Annuities

Annuity 1

INSURANCE COMPANY

Example Life Insurance Co.

CONTRACT NUMBER

AN-000456

TYPE

☒ Fixed
 ☐ Indexed
 ☐ Variable
 ☐ Income / immediate
 ☐ Don't know

OWNER

Margaret

ANNUITANT

Margaret

BENEFICIARY

Robert

AGENT & PHONE

(bank rep) 559-555-0142

WHERE THE CONTRACT IS

Fire safe (red folder)

Annuity 2

INSURANCE COMPANY

CONTRACT NUMBER

TYPE

☐ Fixed
 ☐ Indexed
 ☐ Variable
 ☐ Income / immediate
 ☐ Don't know

OWNER

ANNUITANT

BENEFICIARY

AGENT & PHONE

WHERE THE CONTRACT IS

9 Social Security & Government Benefits

Social Security must be told when someone passes. A surviving spouse may be able to switch to a higher survivor benefit — it is NOT automatic in every case.

I RECEIVE SOCIAL SECURITY BASED ON

☒ My own work ☐ My spouse's work ☐ Survivor benefit ☐ Not yet

MONTHLY AMOUNT

\$1,890

DEPOSITED TO (BANK & LAST 4)

Example Savings - 6677

MY SOCIAL SECURITY (SSA.GOV) USERNAME

psample.ssa

PASSWORD

SAMPLE-Soc\$ec51

Other government benefits

BENEFIT	ID / CLAIM NUMBER	AMOUNT	PHONE / NOTES
VA benefits			
Medi-Cal	none		
SSI			
Railroad retirement			
IHSS / in-home care			
CalFresh			
Other:			

Helpful: Social Security: 1-800-772-1213 (TTY 1-800-325-0778). Funeral homes usually report the death, but your family should confirm. The payment for the month of death usually has to be returned — don't spend it until Social Security says so. A surviving spouse or child may also qualify for a one-time death payment.

10 Life Insurance

Families miss life insurance all the time. List every policy — including group coverage through a job, union, or retirement, and small accidental-death policies from banks or credit cards.

Life insurance policy 1

INSURANCE COMPANY

Example Life Insurance Co.

POLICY NUMBER

WL-0001234

TYPE

☐ Term
 ☒ Whole life
 ☐ Universal
 ☐ Group (job/union)
 ☐ Final expense / burial
☐ Accidental death

PERSON INSURED

Margaret

POLICY OWNER

Margaret

DEATH BENEFIT AMOUNT

\$25,000

PRIMARY BENEFICIARY(IES) & %

Robert Sample 100%

BACK-UP BENEFICIARY

Linda & Michael 50/50

PREMIUM & HOW PAID

\$62/mo autopay

AGENT & PHONE

Frank F. 559-862-5615

WHERE THE POLICY IS

Fire safe (red folder)

Life insurance policy 2

INSURANCE COMPANY

Sample Mutual (retiree group)

POLICY NUMBER

GRP-778

TYPE

☐ Term
 ☐ Whole life
 ☐ Universal
 ☒ Group (job/union)
 ☐ Final expense / burial
☐ Accidental death

PERSON INSURED

Margaret

POLICY OWNER

School district

DEATH BENEFIT AMOUNT

\$10,000

PRIMARY BENEFICIARY(IES) & %

Robert Sample 100%

BACK-UP BENEFICIARY

Linda

PREMIUM & HOW PAID

paid by district

AGENT & PHONE

HR 559-555-0143

WHERE THE POLICY IS

Hall closet, gray box

Life insurance policy 3

INSURANCE COMPANY

POLICY NUMBER

TYPE

☐ Term ☐ Whole life ☐ Universal ☐ Group (job/union) ☐ Final expense / burial
☐ Accidental death

PERSON INSURED

POLICY OWNER

DEATH BENEFIT AMOUNT

PRIMARY BENEFICIARY(IES) & %

BACK-UP BENEFICIARY

PREMIUM & HOW PAID

AGENT & PHONE

WHERE THE POLICY IS

Life insurance policy 4

INSURANCE COMPANY

POLICY NUMBER

TYPE

☐ Term ☐ Whole life ☐ Universal ☐ Group (job/union) ☐ Final expense / burial
☐ Accidental death

PERSON INSURED

POLICY OWNER

DEATH BENEFIT AMOUNT

PRIMARY BENEFICIARY(IES) & %

BACK-UP BENEFICIARY

PREMIUM & HOW PAID

AGENT & PHONE

WHERE THE POLICY IS

Helpful: Can't find a policy? The National Association of Insurance Commissioners (NAIC) offers a free Life Insurance Policy Locator. Also check old bank statements for premium payments.

11 Health & Other Insurance

Your family will need to notify your health plans and keep your home and car insurance active until those are settled or sold.

Medicare & health coverage

MEDICARE NUMBER

1EX4-AM5-PL00

PART A & PART B START DATES

03/2016

MY COVERAGE (CHECK ALL)

- ☐ Original Medicare
 ☐ Medicare Supplement (Medigap)
 ☒ Medicare Advantage
- ☐ Part D drug plan
 ☐ PACE
 ☐ Medi-Cal
 ☐ Retiree / employer plan

COVERAGE	COMPANY	MEMBER / POLICY #	PHONE / AGENT
Medical plan	Example Health Plan	000111222	Frank F. 559-862-5615
Drug plan (Part D)	included in medical plan		
Dental	Example Dental	D-555	800-555-0144
Vision			
Hearing			
Long-term care insurance			
Other:			

Property & other insurance

COVERAGE	COMPANY	POLICY #	AGENT / PHONE
Homeowners / renters	Example Home Insurance	H-000789	559-555-0145
Auto	Example Auto Insurance	A-000321	559-555-0145
Umbrella			
Earthquake / flood			
Pet			
Medical alert / ambulance membership			
Other:			

Health details for my family

WHERE MY MEDICATION LIST IS

Taped inside kitchen cabinet by fridge

ALLERGIES

Penicillin

IMPLANTED DEVICES (PACEMAKER, ETC.)

none

SAMPLE

12 My Home & Real Estate

Property you own, how it's titled, and the everyday things someone would need to know to look after your home.

Property 1

ADDRESS

1234 Example Ave, Fresno, CA 93700

TYPE

☒ My home ☐ Rental ☐ Land ☐ Mobile home ☐ Timeshare ☐ Other

HOW IT'S TITLED

☐ In my name ☐ Joint ☒ In my trust ☐ Don't know

WHERE THE DEED IS

Safe deposit box

PROPERTY TAX APN # & HOW PAID

000-000-00 paid in 2 installments

MORTGAGE LENDER & LOAN

Paid off 2015

MONTHLY PAYMENT

none

REVERSE MORTGAGE?

☐ Yes ☒ No

HOME EQUITY LINE (HELOC)?

☐ Yes ☒ No

HOA NAME & PHONE

none

TENANTS / PROPERTY MANAGER

n/a

Property 2**ADDRESS****TYPE**
☐ My home ☐ Rental ☐ Land ☐ Mobile home ☐ Timeshare ☐ Other
HOW IT'S TITLED
☐ In my name ☐ Joint ☐ In my trust ☐ Don't know
WHERE THE DEED IS**PROPERTY TAX APN # & HOW PAID****MORTGAGE LENDER & LOAN #****MONTHLY PAYMENT****REVERSE MORTGAGE?****HOME EQUITY LINE (HELOC)?**
☐ Yes ☐ No

☐ Yes ☐ No
HOA NAME & PHONE**TENANTS / PROPERTY MANAGER**

Important: If there is a reverse mortgage, your family must contact the lender soon after the death — there are deadlines for repaying or selling.

Looking after my home**SPARE KEYS ARE WITH**
Linda; also hidden key - ask Linda
ALARM COMPANY & CODE
Example Alarm code 0000 (sample)
WATER SHUT-OFF LOCATION
Front yard, by sidewalk
ELECTRICAL PANEL LOCATION
Garage, left wall
GARDENER / POOL / HOUSEKEEPER (NAME & PHONE)
Luis (gardener) 559-555-0146 - Fridays
TRASH DAY / OTHER NOTES
Tuesday. Sprinkler timer is in the garage.

13 Vehicles & Valuables

Cars, RVs, and the things that matter — to your wallet or to your heart.

YEAR / MAKE / MODEL	LICENSE PLATE	VIN	WHERE TITLE IS	LOAN / LENDER
2018 Example Sedan	0ABC000	000000000000000000	Fire safe	Paid off

Valuables & keepsakes

ITEM	WHERE IT IS	WHO SHOULD GET IT	APPRAISED?
Mom's wedding ring	Jewelry box, top drawer	Linda	No
Grandfather's pocket watch	Fire safe	Michael	No
Quilt collection	Hall closet	Emma	No

Good to know: This list shows your wishes but may not be legally binding by itself. Ask your attorney whether it should be referenced in your will. Firearms must be transferred following California law — ask an attorney or a licensed dealer.

14 Debts, Bills & Online Accounts

What you owe, what gets paid every month, and your digital life. Your family will need to stop automatic payments and close or memorialize accounts.

Debts

TYPE	LENDER	ACCOUNT #	ABOUT HOW MUCH OWED	CO-SIGNER?
Mortgage				
Car loan				
Credit card	<i>Example Bank Visa</i>	<i>0000 0000 0000 1111</i>	<i>paid in full month</i>	<i>No</i>
Credit card				
Credit card				
Personal loan				
Medical bills				
Loan I co-signed				
Other:				

Helpful: Family members usually are NOT personally responsible for your debts unless they co-signed or shared the account. Debts are generally paid from the estate. California is a community property state, so a spouse's situation can differ — ask an attorney.

Monthly bills & subscriptions

BILL	COMPANY	ACCOUNT #	AMOUNT	HOW PAID
Electric	<i>Example Power Co.</i>	<i>0000-11</i>	<i>~\$180</i>	<i>Autopay (chk)</i>
Gas				
Water / sewer / trash				
Cell phone	<i>Example Wireless</i>	<i>0000-22</i>	<i>\$85</i>	<i>Autopay (card)</i>
Home phone / internet				
TV / streaming	<i>Example Stream</i>	<i>peggy@example.com</i>	<i>\$15</i>	<i>Credit card</i>
Newspaper / magazines				
Charity / church giving				
Memberships / clubs				
Other:				

Phone, computer & online accounts

CELL PHONE PASSCODE

000000 (sample)

COMPUTER / TABLET PASSWORD

*SAMPLE-Tablet1*PASSWORD MANAGER & MASTER
PASSWORD*none*

APPLE ID OR GOOGLE ACCOUNT (EMAIL & PASSWORD)

peggy@example.com / SAMPLE-Apple#7

ACCOUNT / WEBSITE	USERNAME OR EMAIL	PASSWORD	CLOSE, KEEP, OR MEMORIALIZE?
Email	<i>peggy@example.com</i>	<i>SAMPLE-Mail#51</i>	<i>Keep 1 yr, then close</i>
Facebook	<i>peggy@example.com</i>	<i>SAMPLE-Face#51</i>	<i>Memorialize</i>
Online shopping			
Photos / cloud storage	<i>peggy@example.com</i>	<i>same as Apple ID</i>	<i>Save photos, then close</i>
Other:			
Other:			
Other:			

Good to know: Apple, Google, and Facebook each let you name a “legacy contact” ahead of time so a loved one can access photos or memorialize your account. Ask a family member to help you set it up.

15 Funeral & Final Wishes

The kindest gift you can give your family is not making them guess. If you have a prepaid plan, write down every detail — families sometimes pay twice because nobody knew a plan existed.

Funeral arrangements

HAVE ARRANGEMENTS BEEN MADE?

☒ Prepaid - paid in full ☐ Prepaid - still paying ☐ Planned, not paid ☐ Nothing arranged

FUNERAL HOME NAME

Sample Family Funeral Home

PHONE

559-555-0136

ADDRESS

100 Example Blvd, Fresno, CA

CONTRACT NUMBER

PN-2022-0000

DATE PURCHASED

04/2022

AMOUNT PAID / BALANCE

\$9,800 / \$0

PAID THROUGH (FUNERAL TRUST OR INSURANCE COMPANY & POLICY #)

Funeral trust - Example Trust Co. #FT-0001

WHERE THE CONTRACT IS

Fire safe

What my prepaid plan INCLUDES (check all):

☒ Funeral home services

☒ Transportation / hearse

☒ Embalming

☒ Viewing / visitation

☒ Casket

☐ Urn

☐ Cremation

☐ Cemetery plot

☒ Opening & closing of grave

☒ Burial vault / liner

☐ Headstone / marker

☒ Death certificates

☐ Obituary

☐ Flowers

Burial or cremation**I WANT**

☒ Burial ☐ Cremation ☐ Entombment / mausoleum ☐ Green burial ☐ Body donation to science

CEMETERY NAME & CITY

Example Memorial Park, Fresno

PLOT: SECTION / ROW / SPACE

Garden of Peace, Row 4, Space 2

PLOT ALREADY OWNED?

☒ Yes ☐ No

WHERE PLOT DEED IS

Fire safe

HEADSTONE / MARKER WISHES & INSCRIPTION

Flat bronze, shared with Bob. "Beloved teacher, wife & mother"

IF CREMATED — ASHES SHOULD BE**REGISTERED ORGAN / TISSUE DONOR?**

☒ Yes ☐ No

BODY DONATION PROGRAM (IF ANY)

none

Important: Have a pacemaker or other implanted device? It must be removed before cremation. Tell your family and funeral home.

15 Funeral & Final Wishes (continued)

Your service, your way. Fill in only what matters to you.

TYPE OF SERVICE

- ☒ Funeral with viewing
 ☐ Memorial service
 ☒ Graveside only
 ☐ Celebration of life
☐ Private / family only
 ☐ No service

WHERE (CHURCH, FUNERAL HOME, OTHER)

Example Community Church

WHO SHOULD LEAD IT

Pastor John Example

CASKET AT VIEWING

- ☒ Open
 ☐ Closed
 ☐ No preference

CLOTHING / JEWELRY TO WEAR

Navy blue dress; keep wedding ring on

RELIGIOUS TRADITIONS OR RITES

Prayer at graveside

MUSIC / SONGS

"Amazing Grace" and "How Great Thou Art"

READINGS, SCRIPTURE, OR POEMS

Psalm 23

PEOPLE I'D LIKE TO SPEAK

Linda, and my friend Carol

PALLBEARERS

Michael, Daniel, Emma's husband, Tom, Ray, Luis

IN PLACE OF FLOWERS, DONATIONS TO

Example Children's Library Fund

RECEPTION / GATHERING (PLACE & FOOD)

Church hall - potluck is fine!

PHOTOS FOR THE SERVICE & OBITUARY (WHERE)

Blue photo album, living room shelf

MILITARY HONORS?

- ☐ Yes
 ☐ No
 ☒ Not a veteran

Anything else about my service

Keep it simple. I want people to laugh and eat. Please sing loud.

15 Obituary & Who to Call

Information for your obituary, and people to notify.

For my obituary

NAME AS IT SHOULD APPEAR

Margaret "Peggy" Ann Sample

PARENTS' NAMES

Thomas and Ruth Carter

SIBLINGS

Daniel Carter (brother)

SPOUSE, CHILDREN, GRANDCHILDREN

Husband Bob of 50 years; children Linda and Michael; granddaughter Emma

FAMILY MEMBERS WHO PASSED BEFORE ME

Parents; sister Joan

SCHOOLS, CAREER, MILITARY

Fresno State; taught 2nd grade for 34 years

CHURCH, CLUBS, HOBBIES, VOLUNTEER WORK

Church choir, quilting guild, library volunteer

WHAT I'D LIKE PEOPLE TO REMEMBER ABOUT ME

That I loved my kids — all 1,000 of them

NEWSPAPERS / WEBSITES TO PUBLISH IN

Local paper + funeral home website

Important: Scam warning: criminals read obituaries. Leave out the full birth date and home address, and have someone stay at the house during the funeral.

People and groups to notify

NAME / GROUP	RELATIONSHIP	PHONE	EMAIL / NOTES
Carol Example	Best friend	559-555-0147	will call church friends
Quilting guild	Club	559-555-0148	ask for Mary
Retired teachers group	Club		newsletter@example.com

16 Pets & Personal Messages

Who will care for your pets, and anything you want to say to the people you love.

Pet 1

NAME & TYPE	AGE	VET & PHONE
Biscuit - beagle	9	Example Vet 559-555-014
FOOD / MEDICINES / SPECIAL NEEDS		
1 cup dry food 2x/day; allergy pill in the morning		
WHO WILL TAKE CARE OF THEM	MONEY SET ASIDE FOR THEIR CARE	
Linda & Emma	\$1,000 in my will	

Pet 2

NAME & TYPE	AGE	VET & PHONE
FOOD / MEDICINES / SPECIAL NEEDS		
WHO WILL TAKE CARE OF THEM	MONEY SET ASIDE FOR THEIR CARE	

LETTERS I'VE WRITTEN TO LOVED ONES ARE KEPT AT
Fire safe, white envelope marked "Family"

A message for my family

Don't argue over the stuff. Take care of your dad. Call your brother. I'm proud of every one of you. Thank you for a wonderful life. - Mom

17 For My Family: What To Do After I Pass

A step-by-step checklist. Take it one step at a time — most of this does not have to happen in the first week. Your executor and attorney will guide the legal steps.

First 1-2 days

- ☐ If death happens at home and hospice is NOT involved, call 911. If on hospice, call the hospice nurse.
- ☐ Call the funeral home (see Section 15 — check whether it is prepaid).
- ☐ Tell close family and the executor.
- ☐ Lock up the home, car, and valuables. Take care of pets.
- ☐ Find this organizer and the will (see Section 4).

First 2 weeks

- ☐ Order certified death certificates — the funeral home can help. Many families need 10 or more.
- ☐ Confirm Social Security was notified (1-800-772-1213). Don't spend the payment for the month of death until Social Security says to.
- ☐ Notify pensions, the VA, and Medicare / health plans.
- ☐ Call each life insurance company to start a claim (see Section 10).
- ☐ Notify banks. Don't close joint accounts that pay bills yet.
- ☐ Meet with the attorney about the will, trust, and probate.
- ☐ Keep all funeral receipts.

First 1-3 months

- ☐ Contact Equifax, Experian, and TransUnion to flag the credit file “deceased” — this helps stop identity theft.
- ☐ Cancel driver's license / ID with the DMV.
- ☐ Forward mail with the Post Office.
- ☐ Stop automatic payments; cancel cards, subscriptions, and phone (see Section 14).
- ☐ Close or memorialize email and social media.
- ☐ Keep home and car insurance active until the property is transferred or sold.
- ☐ Transfer vehicle titles and utilities.

Within the first year

- ☐ File the final income tax return (usually due the next April). A CPA can help.
- ☐ Distribute assets as the will or trust directs.
- ☐ Surviving spouse: review your own Social Security, Medicare coverage, beneficiaries, and life insurance.

Important: Be careful: scammers target grieving families. Be suspicious of calls or letters about “unpaid debts” or “policies” you’ve never heard of. Verify by calling the company at a number you look up yourself.

SAMPLE

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Review Log

Review this organizer once a year — your birthday is an easy reminder — and any time something big changes: a move, a new account, a marriage, a death in the family.

DATE REVIEWED	WHAT I CHANGED	INITIALS
03/14/2025	Added CD at credit union; new phone passcode	MS
03/14/2026	Updated pet info; no other changes	MS

THIS ORGANIZER IS KEPT AT

Fire safe, bedroom closet

PEOPLE WHO KNOW WHERE IT IS

Bob, Linda

MY SIGNATURE

Margaret A. Sample

DATE

03/14/2026



The Anchor Point Promise

“We educate before we recommend. We explain before we enroll. We stay with you after the paperwork is finished. If we can help you, we will. If someone else is better equipped to help, we will point you in the right direction.”

Part of being prepared is knowing what coverage you have today. If you'd like help understanding your Medicare or life insurance — so your family knows too — give us a call. There's never any pressure.

Frank Fluharty

Licensed Insurance Agent · Anchor Point Benefit Group

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A Scope of Appointment form is completed before any Medicare appointment. CA License #4410164 · NPN 21350555. This workbook is for personal record-keeping only. It is not a will, trust, or legal document and does not replace one. Anchor Point Benefit Group does not provide legal, tax, or investment advice — please talk with an attorney or tax professional about your estate. Anchor Point Benefit Group is not connected with or endorsed by the U.S. government or the federal Medicare program.