Instructions for completing, storing, & sending

ELECTRONIC INSTRUCTIONS

- This is a fillable PDF, which means that you can type directly into the form and choose from designated fields.
- First, download the empty PDF form and save it to your computer before filling it out.
- Fillable PDF forms may be completed and saved using Adobe Acrobat Reader (the latest version is recommended). If you do not have Adobe Acrobat Reader installed on your computer, you may download the latest version free of charge from http://get.adobe.com/reader/otherversions.
- Use Adobe Acrobat Reader to open the empty PDF form that you saved on your own computer or network. Complete the form and save it in a secure location.
- While we do not recommend sharing personal information via email, if you must email this document, please encrypt it to protect your information.
- We strongly recommend saving this document to your Cassaday & Company, Inc. client portal. Your portal provides a secure way to store this and other important documents so they are easily accessible to you and your family. **For troubleshooting assistance, please contact Cassaday's Technology Team at TECH@cassaday.com.**

HARD COPY INSTRUCTIONS

- You may also print the form and complete it by hand.
- Be sure to store this completed document in a safe place, and to inform trusted family members or loved ones of its location.

CASSADAY & COMPANY, INC
Independent Wealth Management
Consolidation • Integration • Simplification

8180 Greensboro Dr., Suite 1180, McLean, VA 22102
Phone (800) 672-2102 or (703) 506-8200 | Fax (703) 506-8208 | www.cassaday.com

Securities offered through **Osaic Wealth**, member FINRA/SIPC.
Investment advisory and insurance services offered through Cassaday & Company, a registered investment advisor not affiliated with **Osaic Wealth**.

Cassaday & Company, Inc.

What My Family Should Know

I. Important Business and Personal Contacts			
Contact	**Name**	**Phone Number**	**Address**
Personal Physician			
Estate Planning Attorney			
Accountant			
Financial Planner			
Insurance Agent			
Additional Contacts	**Name**	**Phone Number**	**Address**

Name: _____ Updated on: _____

If you would like an electronic copy of this document, please email info@cassaday.com.

II. Location of Important Documents

Document	Location
Birth Certificate(s)	
Health Care or Advance Medical Directives	
Will/Power(s) of Attorney	
Trust Agreements	
Last Income Tax Return	
Marriage License	
Social Security Card	
Vehicle Title(s)	
Mortgage and Loan Papers	
Real Estate Deed(s)	
Log-in and Password Information for Online Accounts	
Business Papers (e.g., trademarks, patents)	
Important Keys	
Military/Survivor Benefit (e.g., DD Form 214, VA benefit forms)	
Other	

Name: _____ Updated on: _____

III. Personal Finance Information - Banking Accounts

Bank (Name and Address)	Account Type(s) & Number(s)	Account(s) Title	Contact (if applicable)	Log-in/Password (Optional)
Example: U.S. Bank 1234 Sample St. Town, VA 22102	*Checking - 123456 Savings - 123456*	*John and Jane Smith, JT TEN Jane Smith, TOD*	*Jonathan Doe (703) 123-4567*	

Name: _____ Updated on: _____

IV. Personal Finance Information - Safety Deposit Box

Bank	Safe Deposit Box #	Address of Bank/Branch	Access Granted By: (ex., Key, Password, Name)

V. Personal Finance Information - Investment Accounts

Institution/Advisor	Account Type/Number	Contact Information	Log-in/Password (Optional)
Example: Cassaday & Company, Inc./Stephan Cassaday	*IRA/023456789*	*703-506-8200 steve@cassaday.com*	

Name: _____ Updated on: _____

VI. Pension and Retirement Annuity Information

Payee	Payor/Contact Information	Form of Payment	Amount/As Of	Survivor Benefit? (Y/N) Amount
Example: Steve Smith	*Federal Government/ Department of Defense - H.R. (703) 123-4567*	*Direct Deposit, U.S. Bank Checking*	*$60,000 annual 1/1/2010*	*Yes - $30,000 a year for 10 years*

Name: _____ Updated on: _____

VII. Personal Finance Information - Liabilities

Category and Institution	Account Number	Borrower	Balance/As Of	Contact Information	Log-in/Password (Optional)
Example: Mortgage(s) - U.S. Bank, Credit Card(s), Home Equity Line of Credit, Auto Loans/Lease	*125865*	*John and Mary Smith*	*$100,000/ 12/31/2010*	*www.usabank.com (703) 123-4567*	

Name: _____ Updated on: _____

VIII. Real Estate Information

Property Address/Plat #	Title (Ownership)	Mortgage held by (See Section VII)	Monthly Payments	Balance on Loan
Example: 1234 Greensboro Drive, McLean, VA	*JTWROS*	*U.S. Bank*	*$2,000*	*$100,000*

IX. Automobile Information

Make/Model/Year	V.I.N. or License Plate #/State	Registered To and Status of Ownership	Insurance Provider and Policy Number (See Section XI)
Example: Honda Accord 2008	*VA ABC-123*	*Leased to John Smith*	*Geico Insurance Policy #0020123*

Name: _____ Updated on: _____

X. Insurance

Type of Coverage	Insurance Carrier/ Contact Information	Benefit Amount	Owner/Insured	Beneficiaries
Example: Life, Long-Term Care, Disability, Health, Auto, Property and Casualty	*State Farm Joe Blitz - (703) 123-4567 joe@blitz.com*	*$500,000 Death Benefit*	*John Smith/John Smith*	*Jane Smith*

XI. Other Assets/Collectibles

Type	Location	Insured (Y/N)	If Insured, Location of Policy	Company/Policy #
Example: Stamps, Jewelry, Coins, Art, Planes, Boats, Chinese Ceramics	*Safe Deposit Box, U.S. Bank*	*Yes*	*Lawyer's Office*	*USAA/ #567832951*

Name: _____ Updated on: _____

Final Instructions

(ex. Burial Plot, Headstone, etc.)

Obituary

Name: _____ Updated on: _____

Notes

Name: _____ Updated on: _____

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