

Snapshots™



SNAPSHOTS ORGANIZER

Name	
Date	

All About Me and My Family

Family Information

Keeping Things Going

Household Accounts

What I Own

Savings and Investments

Annuities

Real Estate

Real Stuff

What I'm Getting from

My Company

Pension Plans

Deferred Profit Sharing Plans

Group RRSP

What I Owe

Loans and/or Lines of Credit

Credit Cards

My Insurance

Life

Health

Other

My Banking

Banking Information

My Advisors

Powers of Attorney

Doctors

Professional Advisors

My Business

Company Name

Proprietor

Partners

Banking Information

Landlord Information

Documents

My Important Documents

Will

Funeral Arrangements

Safety Deposit Box

Other Important Documents

Other Important Information

Let your loved ones, including your executor or executrix, know where you will store this document.

ALL ABOUT ME AND MY FAMILY

Your information			
Name (Legal)			
Address			
Phone		Fax	
Email			
Cell			
Date of birth		Place of birth	
S.I.N.		Health card number	
Driver's licence number			
Spouse/Partner			
Name (Legal)			
Address			
Phone		Fax	
Email			
Cell			
Date of birth		Place of birth	
S.I.N.		Health card number	
Driver's licence number			
Children			
Name (Legal)		Name (Legal)	
Address		Address	
Date of birth		Date of birth	
Place of birth		Place of birth	
S.I.N.		S.I.N.	
Health card number		Health card number	
Name (Legal)		Name (Legal)	
Address		Address	
Date of birth		Date of birth	
Place of birth		Place of birth	
S.I.N.		S.I.N.	
Health card number		Health card number	
Grandchildren			
Name		Name	
Parents/Parents-in-law		Parents/Parents-in-law	
Address		Address	
Phone		Phone	
Name		Name	
Parents/Parents-in-law		Parents/Parents-in-law	
Address		Address	
Phone		Phone	

KEEPING THINGS GOING

Electricity/Hydro provider	
Account number	
Phone	
Cable/Satellite provider	
Account number	
Phone	
Oil/Gas company	
Account number	
Phone	
Phone and/or long distance provider	
Account number	
Phone	
Internet provider	
Account number	
Phone	
Security/Alarm provider	
Account number	
Phone	
Cell phone provider	
Account number	
Phone	
Newspaper/Magazine	
Account number	
Phone	
Home maintenance provider	
Account number	
Phone	
Club membership	
Account number	
Phone	
Other	
Account number	
Phone	

WHAT I OWN

Savings and investments	
Company	
Account type	
Account number	
Individual or joint	
Company	
Account type	
Account number	
Individual or joint	
Company	
Account type	
Account number	
Individual or joint	
Company	
Account type	
Account number	
Individual or joint	
Company	
Account type	
Account number	
Individual or joint	
Other investments (bonds, certificates, shares, etc)	
Item	Item
Location	Location
Item	Item
Location	Location
Item	Item
Location	Location
Annuities	
Issuing company	
Phone number	
Policy	
Location	

Real estate			
RESIDENCE (PRINCIPAL)			
Address			
Purchase date		Purchase price	
Owner			
Deed location			
MORTGAGE			
Company			
Phone			
Mortgage/Plan number			
Document location			
PROPERTY TAX			
Property number			
Municipality			
Phone			
OTHER PROPERTY			
Address			
Purchase date		Purchase price	
Owner			
Deed location			
MORTGAGE			
Company			
Phone			
Mortgage/Plan number			
Document location			
PROPERTY TAX			
Property number			
Municipality			
Phone			

Real stuff (car, art, equipment, jewellery, collectibles, etc.)			
Item		Item	
Location		Location	
Insured		Insured	
Item		Item	
Location		Location	
Insured		Insured	
Item		Item	
Location		Location	
Insured		Insured	
Item		Item	
Location		Location	
Insured		Insured	
Item		Item	
Location		Location	
Insured		Insured	

WHAT I'M GETTING FROM MY COMPANY

Pension plans (defined benefit, defined contribution, DPSP, Group RRSP)	
Company name	
Phone number	
Plan number	
Plan type	
Beneficiary	
Company name	
Phone number	
Plan number	
Plan type	
Beneficiary	
Company name	
Phone number	
Plan number	
Plan type	
Beneficiary	
Company name	
Phone number	
Plan number	
Plan type	
Beneficiary	

WHAT I OWE

Loan and/or line of credit	
Company	
Address	
Contact	
Phone	
Information/Details	
Loan and/or line of credit	
Company	
Address	
Contact	
Phone	
Information/Details	
Credit card	
Company	
Name on card	
Card number	
P.I.N.	
Credit card	
Company	
Name on card	
Card number	
P.I.N.	
Credit card	
Company	
Name on card	
Card number	
P.I.N.	
Credit card	
Company	
Name on card	
Card number	
P.I.N.	

MY INSURANCE

Life insurance (term, whole, universal)			
Company			
Type		Value	
Policy number		Beneficiary	
Agent name			
Phone		Document location	
Life insurance (term, whole, universal)			
Company			
Type		Value	
Policy number		Beneficiary	
Agent name			
Phone		Document location	
Life insurance (term, whole, universal)			
Company			
Type		Value	
Policy number		Beneficiary	
Agent name			
Phone		Document location	
Health insurance (disability, critical illness, long-term care)			
Company			
Type		Value	
Policy number			
Agent name			
Phone		Document location	
Health insurance (disability, critical illness, long-term care)			
Company			
Type		Value	
Policy number			
Agent name			
Phone		Document location	
Health insurance (disability, critical illness, long-term care)			
Company			
Type		Value	
Policy number			
Agent name			
Phone		Document location	

MY INSURANCE

Other insurance (home, auto, travel, mortgage, etc.)			
Company			
Type		Value	
Policy number			
Agent name			
Phone		Document location	
Other insurance (home, auto, travel, mortgage, etc.)			
Company			
Type		Value	
Policy number			
Agent name			
Phone		Document location	
Other insurance (home, auto, travel, mortgage, etc.)			
Company			
Type		Value	
Policy number			
Agent name			
Phone		Document location	
Other insurance (home, auto, travel, mortgage, etc.)			
Company			
Type		Value	
Policy number			
Agent name			
Phone		Document location	
Other insurance (home, auto, travel, mortgage, etc.)			
Company			
Type		Value	
Policy number			
Agent name			
Phone		Document location	

MY BANKING

Name of bank			
Address			
Contact			

Phone			
Type		Type	
Account number		Account number	
Individual or joint		Individual or joint	
Type		Type	
Account number		Account number	
Individual or joint		Individual or joint	
Name of bank			
Address			
Contact			
Phone			
Type		Type	
Account number		Account number	
Individual or joint		Individual or joint	
Type		Type	
Account number		Account number	
Individual or joint		Individual or joint	
Name of bank			
Address			
Contact			
Phone			
Type		Type	
Account number		Account number	
Individual or joint		Individual or joint	
Type		Type	
Account number		Account number	
Individual or joint		Individual or joint	

MY ADVISORS

Powers of attorney			
Location		Location	
Attorney		Attorney	
Address		Address	
Phone		Phone	
Comments		Comments	
Spouse/Partner powers of attorney			
Location		Location	
Attorney		Attorney	
Address		Address	
Phone		Phone	
Comments		Comments	
Doctor(s)			
Name		Name	

Firm		Firm	
Address		Address	
Phone		Phone	
Email		Email	
Comments		Comments	

Lawyer(s)

Name		Name	
Firm		Firm	
Address		Address	
Phone		Phone	
Email		Email	
Comments		Comments	

Accountant(s)

Name		Name	
Firm		Firm	
Address		Address	
Phone		Phone	
Email		Email	
Comments		Comments	

Financial advisor(s)

Name		Name	
Firm		Firm	
Address		Address	
Phone		Phone	
Email		Email	
Comments		Comments	

MY ADVISORS

Personal banker(s)

Name		Name	
Firm		Firm	
Address		Address	
Phone		Phone	
Email		Email	
Comments		Comments	

Veterinarian(s)

Name		Name	
Firm		Firm	
Address		Address	
Phone		Phone	
Email		Email	
Comments		Comments	

MY BUSINESS

Company name			
Proprietor (sole, partnership, corporation)			
Document location			
Company name			
Proprietor (sole, partnership, corporation)			
Document location			
My partner(s)' name(s)			
Address			
Phone		Fax	
E-mail			
My banking information			
Bank			
Address			
Contact			
Phone		Fax	
Landlord information/Lease agreements			
Name			
Address			
Contact			
Phone		Fax	
Statements/Location			
Financial statements			
Lease agreements			
Incorporation documents			
Tax returns			
Pension details			
Insurance agreements			
Stock options			
Outstanding contracts			
Other			

MY IMPORTANT DOCUMENTS

Will	
Date of last Will	
Will location	
Executor/Executrix/Trustee	
Address	
Phone number	

Spouse/Partner Will	
Date of last Will	
Will location	
Executor/Executrix/ Trustee	
Address	
Phone number	
Funeral arrangements	
Funeral home	
Contact name	
Phone number	
Other specific details	
Plot number and location	
Plot deed	
Contact name	
Phone number	
Safety deposit box	
Box 1 location	
Box number	
Key location	
Box 2 location	
Box number	
Key location	
Passport Information:	
Passport No.	
Type	
Issuing country	
Surname	
Given names	
Nationality	
Date of birth	
Sex	
Place of birth	
Date of issue	
Date of expiry	
Spouse Passport Information:	
Passport No.	
Type	
Issuing country	
Surname	
Given names	

Nationality	
Date of birth	
Sex	
Place of birth	
Date of issue	
Date of expiry	

MY IMPORTANT DOCUMENTS

Other important documents location	
Birth certificate	
Spouse/Partner birth certificate	
Children(s') birth certificate	
Marriage certificate	
Citizenship	
Passport(s)	
Medical records	
Income tax returns	
Banking records	
Investment records	
Loans	
Mortgages	
Vehicle ownership(s)	
Separation/Divorce papers	
Custody/Adoption records	
Other	
Other important information	
Home alarm code	
Computer code	
Telephone banking code	
Garage door code	
Business alarm code	
Business key location	
Cottage alarm code	
Cottage key location	
Key/Code to safe location	
Other	

