

LETTER OF INSTRUCTION

in the Estate of

Name: \_\_\_\_\_

I. List of Gifts not listed on the will:

ARTICLE	TO WHOM / RELATIONSHIP

II. Credit Cards:

Company	Card No.	Exp. Date

Credit card insurance? \_\_\_\_\_ Amount \_\_\_\_\_  
 Name of insurance company \_\_\_\_\_ Policy # \_\_\_\_\_

III. Bank Accounts and Savings Deposits

Name and Address of Bank Type Account Account Number  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Bonds are located at \_\_\_\_\_

IV. U.S. Bonds

Denomination Number In Name Of  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Bonds are located at \_\_\_\_\_

V. Stocks, Mutual Funds, and Other Securities

Company Date Purchased Purchase Price Certificate # \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Carried in account number \_\_\_\_\_ maintained with \_\_\_\_\_

Name and address of broker: \_\_\_\_\_  
\_\_\_\_\_

VI. Insurance

1. I (do) (do not) have government life insurance.

This insurance is (U.S. government life insurance)  
(National Service life insurance)  
(Servicemen's group life insurance)

The policy number is \_\_\_\_\_

Type of insurance \_\_\_\_\_

Amount of government insurance \_\_\_\_\_

The policy is located at \_\_\_\_\_

2. I have in effect the following commercial life insurance:

Company	Address	Policy Number	Amount
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

These policies are located at \_\_\_\_\_

The following loans are outstanding against these policies: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Primary beneficiary \_\_\_\_\_

Contingent beneficiaries \_\_\_\_\_

4. Life insurance in effect upon the lives of my wife and children:

Name and relationship	Company	Policy #	Amt	Premium	Due
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_____	_____	_____	_____	_____	_____
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5. The property and casualty insurance policies presently in effect are:

Company	City, State	Policy #	Amount
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_____	_____	_____	_____
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Personal liability \_\_\_\_\_  
\_\_\_\_\_

Hospitalization and health \_\_\_\_\_  
\_\_\_\_\_

VII. Moneys Owed to Me

Amount Debtor's Name and Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VIII. Liabilities (Loans, notes not previously listed)

Amount Lender's name and address Date Made Date Due

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IX. Safe Deposit Box

Location of box \_\_\_\_\_

Safe deposit box key located at \_\_\_\_\_

X. Valuables not listed above:

Item	Location
_____	_____
_____	_____
_____	_____

XI. Other Pertinent Information and Instructions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

XII. This record was last checked on: \_\_\_\_\_