Date Revised \_\_\_\_\_

Husband's Name			
Vife's Name		SSN	
amily Lawyer: Name		Phone	
inancial Advisor: Name		Phone	
Ooctor: Name	Specialty	Phone	
Doctor: Name	Specialty	Phone	
USEFUL GE-RE	LATED 800 PHONE NUM	BERS	
Pensioners Inquiry Center 1-800-432-34	450 GE Medical In	s. (Prior to 65) 1-	800-552-3232
	GE Medical In: GE/Elfun Medical		-800-848-8406

Туре	Insurance Company Name Beneficiaries	or J	Policy Number Value, Coverage Limits, etc.	Phone Number
				X
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			-	*
	X.			

Date Revised \_\_\_\_\_

NSURANCE	(Cont )
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Туре	Insurance Company Name Beneficiaries	H W	Policy Number Value, Coverage Limits, etc.	Phone Number
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MAJOR ASSETS List Home, Second Home, Cars, Boats, Coin Collection, Art, etc.

Asset And Description	HWJ	Asset Location	Value
			-

INCOME SOURCES List Salary, Pension, Social Security, Annuities, Funds, Trusts, etc.

Description	or J	Monthly Income	Survivor's Income	Phone No.
			-	

Date Revised \_\_\_\_\_

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List checking, savings, money market, safe deposit, etc.

Bank Name	Account No.	Type	HWJ	Phone No.
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		-		

INVESTMENTS List all stocks, bonds, mutual funds, CDs, 401(K), etc.

Description  Account No. Type)	or J	Where Held (Broker / Bank Box)	Phone No. (Servicing Agent)	Value
(No. of Units, Name, Account No., Type)	01 3	(Broker / Balik Box)	(contioning righting	
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Date Revised

# INDIVIDUAL RETIREMENT ACCOUNTS List all CDs, Stocks, Bonds, Funds, etc.

Name & Description	Account No.	HW	Beneficiaries	Value	Phone No.
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		-			
					-
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CREDIT CARDS List all credit cards and bank debit cards

Card Name	Issued By	Name(s) Issued To	Account No.	Phone No.
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Date Revised

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List all home, auto, boat, personal, insurance, etc loans

Loan For	Loan Granted By	Account No.	Phone	Balance
			and the second second	
40		-		

### DOCUMENT LOCATIONS

DOCUMENT/ITEM DESCRIPTION

List storage locations for wills, power of attorney, living wills, health care proxies, deeds, mortgage, tax returns, bank statements, pass books, loan contracts, investment documents, insurance policies, car/boat registration, credit card contracts, safe deposit box key, etc.

LOCATION

DOCUMENT/TEM DESCRIPTION	EGGATION
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# SURVIVORS DATA SHEET Date Revised \_\_\_\_\_

MEMORANDUM		*
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