



# *Final Wishes*

# *Planning Guide*

*For:* \_\_\_\_\_



## **Compliments of:**

Agent Name  
Broker / Field Underwriter  
agentemail@gmail.com  
(615) 999-9999  
Lic. #099009

# Final Expense & Burial Expense Plan

Policy # \_\_\_\_\_ Company \_\_\_\_\_

Face Amount \$ \_\_\_\_\_ Monthly Premium \$ \_\_\_\_\_ Payment date \_\_\_\_\_

Agent \_\_\_\_\_ Phone \_\_\_\_\_

Policy details \_\_\_\_\_

I expect expenses for a casket and Mortuary Service to total approximately \$ \_\_\_\_\_  
and to consist of a:

**I would prefer:**  Earth Burial  Cremation/Inurnment

Mausoleum/Entombment  Plot already purchased at: \_\_\_\_\_

Other: \_\_\_\_\_

## Type of casket:

Cloth Covered Casket (moderate cost)

Metal Casket (average selection)

Metal Sealer Casket (finest protection)

## Mortuary Service usually includes:

- Charges of first call at hospital or home
- Preservation and preparation
- Use of funeral coach/director
- Automobile for family and pallbearers
- Use of mortuary chapel for service and music

## Cemetery

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

**Flag:**  Folded  Draped  No flag

Presented To \_\_\_\_\_



# To My Family and Friends

Dear \_\_\_\_\_

My final wish is that upon my passing that you be spared from the expenses and anxiety of planning my funeral. My hope is that you will celebrate my life and the wonderful memories we shared. Know that I'll miss you as much as you miss me.

Within these final wishes plan, I have outlined my funeral arrangements and gathered information to make it easier and less burdensome for you during this time.

I have specified the arrangements that should be made and provided a list of those who should be informed of my passing.

I have also provided a detailed list of all insurance, legal, and financial information that will be needed when settling my estate.

Thank you for caring for my final wishes and I sincerely hope you will find these arrangements helpful and that they will help you retain a warm memory of the wonderful years we have shared together.

With love,

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Signature



# Personal Information

## Name

First \_\_\_\_\_

Middle \_\_\_\_\_

Last \_\_\_\_\_

Social Security Number \_\_\_\_\_

## Address

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

County \_\_\_\_\_ Phone \_\_\_\_\_

**Social Media:** Facebook account \_\_\_\_\_ Password \_\_\_\_\_

## Birthplace

Country \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Date of Birth \_\_\_\_\_ Hospital \_\_\_\_\_

## Occupation

Employer \_\_\_\_\_ Date Retired \_\_\_\_\_

## Marital Status

Country \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Date of Birth \_\_\_\_\_ Hospital \_\_\_\_\_

**Father's Name** \_\_\_\_\_

Birthplace \_\_\_\_\_

**Mother's Name** \_\_\_\_\_

Birthplace \_\_\_\_\_

## If you are a Veteran, please complete this information:

Service Number \_\_\_\_\_ Name of War \_\_\_\_\_

Branch \_\_\_\_\_ Rank \_\_\_\_\_

Date Enlisted \_\_\_\_\_ Date Discharged \_\_\_\_\_

Location of original discharge papers \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# Funeral Requests

## Funeral Director

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

I want my funeral to be:  Public  Private

## Funeral Home

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## Church

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## Clergyman

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## Participating Organizations (i.e. military, association, club)

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_



# Funeral Requests continued

## Pallbearers

#1 Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

#2 Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

#3 Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

#4 Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

#5 Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

#6 Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## Special Service Requests

Favorite Hymns/Songs \_\_\_\_\_

\_\_\_\_\_

Clothing to be worn \_\_\_\_\_

Flowers or Arrangements \_\_\_\_\_

Donations can be made to the following organizations \_\_\_\_\_

\_\_\_\_\_

## Other important notes

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_



# Announcements

The following publications / newspapers should be notified

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## Information to be contained in the Public Announcement

Spouse's / Significant Other's Name \_\_\_\_\_

If deceased, place and date of death \_\_\_\_\_

## Family to be listed (brothers, sisters, children, etc.)

Family Member Names (Include Spouses)

Relationship

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Education Highlights \_\_\_\_\_

Date of Marriage \_\_\_\_\_

Special Achievement \_\_\_\_\_

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Religious, charitable, social, fraternal, or lodge affiliations you wish to mention

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# Family Information

**Father**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Mother**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Father-In-Law**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Mother-In-Law**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Other** \_\_\_\_\_ (step father/mother)

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Other** \_\_\_\_\_ (step father/mother)

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_





# Family Information

List children's name (if married, list spouse's name and grandchildren's names)

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Grandchildren \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Grandchildren \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Grandchildren \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Grandchildren \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Grandchildren \_\_\_\_\_



# Notification

The following people below are significant in my life, I would like to ensure that these people will be notified of my death.

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_



# Legal Documents

Location of papers and documents

Name of Estate Executor \_\_\_\_\_

Last Will and Testament \_\_\_\_\_

Birth Certificate \_\_\_\_\_

Marriage Certificate \_\_\_\_\_

Stock Certificate \_\_\_\_\_

Bond Certificate \_\_\_\_\_

Military Records \_\_\_\_\_

Passport \_\_\_\_\_

Trust Fund Information \_\_\_\_\_

Insurance Documents \_\_\_\_\_

Automobile Insurance \_\_\_\_\_

Mortgage Documents \_\_\_\_\_

Deed to House \_\_\_\_\_

Car Title or Loans \_\_\_\_\_

Citizenship documents \_\_\_\_\_

Income Tax Information \_\_\_\_\_

Passwords/PIN Numbers \_\_\_\_\_

Safe Deposit Box Location and persons with authorized access \_\_\_\_\_

\_\_\_\_\_

## Other important notes

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# Legal Documents

Life & Health Insurance Policies

**Institution** \_\_\_\_\_ Phone \_\_\_\_\_

Policy Number \_\_\_\_\_ Benefit Amount \_\_\_\_\_

Agent \_\_\_\_\_ Phone \_\_\_\_\_

**Institution** \_\_\_\_\_ Phone \_\_\_\_\_

Policy Number \_\_\_\_\_ Benefit Amount \_\_\_\_\_

Agent \_\_\_\_\_ Phone \_\_\_\_\_

**Institution** \_\_\_\_\_ Phone \_\_\_\_\_

Policy Number \_\_\_\_\_ Benefit Amount \_\_\_\_\_

Agent \_\_\_\_\_ Phone \_\_\_\_\_

**Institution** \_\_\_\_\_ Phone \_\_\_\_\_

Policy Number \_\_\_\_\_ Benefit Amount \_\_\_\_\_

Agent \_\_\_\_\_ Phone \_\_\_\_\_

**Institution** \_\_\_\_\_ Phone \_\_\_\_\_

Policy Number \_\_\_\_\_ Benefit Amount \_\_\_\_\_

Agent \_\_\_\_\_ Phone \_\_\_\_\_

## Record of other important documents

Document \_\_\_\_\_ Purpose \_\_\_\_\_

Location \_\_\_\_\_ Contact \_\_\_\_\_

Document \_\_\_\_\_ Purpose \_\_\_\_\_

Location \_\_\_\_\_ Contact \_\_\_\_\_

## Other important document notes

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# Financial Information

Checking, Savings, & Financial Accounts

## Checking & Savings Accounts

**Institution** \_\_\_\_\_

Account Number \_\_\_\_\_ Type \_\_\_\_\_

Branch Location \_\_\_\_\_ Phone \_\_\_\_\_

**Institution** \_\_\_\_\_

Account Number \_\_\_\_\_ Type \_\_\_\_\_

Branch Location \_\_\_\_\_ Phone \_\_\_\_\_

## IRA's, CD's, 401k,

**Institution** \_\_\_\_\_

Account Number \_\_\_\_\_ Type \_\_\_\_\_

Branch Location \_\_\_\_\_ Phone \_\_\_\_\_

**Institution** \_\_\_\_\_

Account Number \_\_\_\_\_ Type \_\_\_\_\_

Branch Location \_\_\_\_\_ Phone \_\_\_\_\_

## Credit Card Accounts

**Institution** \_\_\_\_\_

Account Number \_\_\_\_\_ Type \_\_\_\_\_

Phone \_\_\_\_\_

**Institution** \_\_\_\_\_

Account Number \_\_\_\_\_ Type \_\_\_\_\_

Phone \_\_\_\_\_

**Institution** \_\_\_\_\_

Account Number \_\_\_\_\_ Type \_\_\_\_\_

Phone \_\_\_\_\_

**Institution** \_\_\_\_\_

Account Number \_\_\_\_\_ Type \_\_\_\_\_

Phone \_\_\_\_\_





