



# OLD NORTH STATE TRUST, LLC

*A memo of information for my family and friends:*

*[www.oldnorthstatetrust.com](http://www.oldnorthstatetrust.com)*

To: \_\_\_\_\_

From: \_\_\_\_\_

Date: \_\_\_\_\_

## CONTENTS

<b>My Will</b>	<b>2</b>
<b>My Heirs</b>	<b>2</b>
<b>My Trusts</b>	<b>2</b>
<b>Banking</b>	<b>3</b>
<b>Investments</b>	<b>3</b>
<b>Documents</b>	<b>4</b>
<b>Your Income</b>	<b>5</b>
<b>My Military History</b>	<b>7</b>
<b>Other Real Estate We Own</b>	<b>8</b>
<b>My Business Interests</b>	<b>8</b>
<b>Funeral Instructions</b>	<b>9</b>
<b>Insurance</b>	<b>10</b>
<b>List of Insurance Policies On My Life</b>	<b>11</b>
<b>My Employment Record</b>	<b>12</b>
<b>My Debts</b>	<b>12</b>
<b>List of Passwords</b>	<b>13</b>
<b>Preferred Providers</b>	<b>13</b>
<b>Other Instructions</b>	<b>14</b>

**MY WILL**

My will is located \_\_\_\_\_. The personal representative [executor (trix)] who is designated to carry out the provisions of my will is \_\_\_\_\_. If he/she declines or cannot serve, the alternate representative is \_\_\_\_\_. My attorney is \_\_\_\_\_ and should be consulted to assist you in settling any legal matters. In the event estate accounting is required, I suggest my accountant \_\_\_\_\_ be contacted. Two other people (financial advisors) I recommend to assist you with financial matters are \_\_\_\_\_ and \_\_\_\_\_.

The main provisions of the will are: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MY HEIRS**

Name	Age	Relationship	Amount of Bequest (% of Estate)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**MY TRUSTS**

Here are brief descriptions of my trusts:

- 1. This trust is  in my will  a separate instrument.

Trustee: \_\_\_\_\_

Assets in the trust: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(See Trust agreement for details.)

**BANKING**

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

My account number(s): \_\_\_\_\_

Dependents Name & Account Number: \_\_\_\_\_

Location of checkbooks and statements:

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

Information pertaining to my savings account(s):

1. Account number: \_\_\_\_\_

Name of Institution: \_\_\_\_\_

2. Account number: \_\_\_\_\_

Name of Institution: \_\_\_\_\_

3. Account number: \_\_\_\_\_

Name of Institution: \_\_\_\_\_

Passbooks are located: \_\_\_\_\_

Special instructions relating to these accounts in the event of my death: \_\_\_\_\_

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

**INVESTMENTS**

My stockbroker, \_\_\_\_\_, with \_\_\_\_\_ Company

(address: \_\_\_\_\_),

has given me a complete list of our stocks and bonds as of \_\_\_\_\_

\_\_\_\_\_, which is attached. This list and values often change.

Notify the broker of my death so the records can be changed.

Title to the stocks and bonds is as follows: \_\_\_\_\_

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

The actual certificates are located \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**DOCUMENTS**

The deed to the home is located \_\_\_\_\_  
And is registered in the following name(s): \_\_\_\_\_  
\_\_\_\_\_.

I estimate the value is approximately \$\_\_\_\_\_.  
The mortgage balance is \$\_\_\_\_\_ as of  
\_\_\_\_\_.

The files which pertain to the home such as cost of purchase,  
improvements, original closing, etc., are marked \_\_\_\_\_  
\_\_\_\_\_ and located \_\_\_\_\_.

I made an inventory of our household furnishings and their  
approximate values. That inventory is located \_\_\_\_\_  
\_\_\_\_\_.

The attached photocopy shows the contents of my wallet. You will  
want to notify the credit card companies if the cards have  
been lost. Just a reminder about safe deposit box(es):

- 1. No. \_\_\_\_\_ Location \_\_\_\_\_
- 2. No. \_\_\_\_\_ Location \_\_\_\_\_

The key(s) is/are kept \_\_\_\_\_.  
Contents:

- 1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Important documents and their locations are as follows:  
Automobile titles/registrations \_\_\_\_\_

Birth Certificate/ Adoption Records \_\_\_\_\_

Income tax records \_\_\_\_\_

Keys \_\_\_\_\_

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

Naturalization/ Citizenship papers \_\_\_\_\_

Patents & Copyrights \_\_\_\_\_

Title Insurance \_\_\_\_\_

Death Certificate for spouses/relatives \_\_\_\_\_

Veterans' Administration information \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Social Security Card \_\_\_\_\_

Person(s) with Keys to my house \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## YOUR INCOME

Here is the summary of the income you will have. These figures will of course need to be updated as income and expenses change.

<b>Monthly Income</b>	<b>Amount</b>
Retirement income	\$ _____
Investment income	\$ _____
Your salary	\$ _____
Other income	\$ _____
Social Security payments	\$ _____
<b>Total Income.....</b>	<b>\$ _____</b>

<b>Monthly Expenses</b>	
Mortgage or rental (insurance & taxes, too)	\$ _____
Utilities	\$ _____

Household/Yard/Furnishings	\$ _____
Auto expenses	
(including insurance, repair, license	\$ _____
Clothing & personal care	\$ _____
Education	\$ _____
Charitable contributions	\$ _____
Gifts and allowances	\$ _____
Medical & Dental	\$ _____
Vacation & recreation	\$ _____
Life Insurance	\$ _____
Other _____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**Total Income.....** \$ \_\_\_\_\_

1. You will begin receiving retirement benefits \_\_\_\_\_  
 \_\_\_\_\_.

If you have questions, contact \_\_\_\_\_.

2. To receive Social Security benefits, you will need contact the S.S. office to make an appointment.

S.S. Office Number \_\_\_\_\_

Take care of this promptly because if you delay you may miss some benefits. Take with you:

- a. My Social Security card
- b. Death certificate
- c. Birth certificate for each of the children under 18 or those attending college under 22
- d. Marriage certificate
- e. Your birth certificate

3. You  are  are not eligible for veterans' benefits. To receive these benefits, do the following:

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



From \_\_\_\_\_ to \_\_\_\_\_

Rank \_\_\_\_\_

I do  I do not have a service-connected disability.

Location of special papers:

Document	Location
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**OTHER REAL ESTATE WE OWN**

Nature of Title

(Joint Ownership, Tenants-in-common)	Mortgage Balance	Date of Purchase	Cost	Approximate Value
_____	\$ _____	__-__-____	\$ _____	\$ _____
_____	\$ _____	__-__-____	\$ _____	\$ _____
_____	\$ _____	__-__-____	\$ _____	\$ _____
_____	\$ _____	__-__-____	\$ _____	\$ _____
_____	\$ _____	__-__-____	\$ _____	\$ _____
_____	\$ _____	__-__-____	\$ _____	\$ _____

The file where more information is kept about this property is located

\_\_\_\_\_.

**MY BUSINESS INTERESTS**

Business information: Proprietorship, Partnership, Corporation

Description	Source of Ownership
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

The following persons can help you with the business matters:

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

Phone: \_\_\_\_\_

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

Phone: \_\_\_\_\_

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

Phone: \_\_\_\_\_

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

Phone: \_\_\_\_\_

### **FUNERAL INSTRUCTIONS**

Funeral Home \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

1. I direct that my body be used for medical purposes as follows:

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

2. I request postmortem examination be made if desirable.

3. I direct cremation of remains.

No ashes to remain

Disposition of ashes as follows:

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

4. I request burial in the following manner: \_\_\_\_\_

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

Place of burial: \_\_\_\_\_

Address \_\_\_\_\_

5. I wish memorial service with no casket present.

6. I desire a funeral with remains present:

Closed Casket  Open Casket

(Special information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_)

7. Service:

Location \_\_\_\_\_

Officiator \_\_\_\_\_

Music \_\_\_\_\_

Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. I request that memorial gifts be given to the following:

Charitable institution(s):

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_

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

## INSURANCE

On page 11 is a list of my life insurance policies. You will want to receive the proceeds as soon as possible.

Call my agent \_\_\_\_\_ with \_\_\_\_\_

\_\_\_\_\_ at( ) \_\_\_\_\_  
to help you or have your financial advisor or attorney help you. You may  
write the companies directly, enclosing a copy of the death certificate.

The homeowner's policy is with \_\_\_\_\_.

The policy (# \_\_\_\_\_) is located \_\_\_\_\_  
\_\_\_\_\_.

The automobile insurance is with \_\_\_\_\_.

The policy (# \_\_\_\_\_) is located \_\_\_\_\_  
\_\_\_\_\_.

My medical insurance is with \_\_\_\_\_.

The policy (# \_\_\_\_\_) is located \_\_\_\_\_  
\_\_\_\_\_.

### **LIST OF INSURANCE POLICIES ON MY LIFE**

1. Company \_\_\_\_\_

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

Face Amount \$ \_\_\_\_\_

Loan Balance \$ \_\_\_\_\_

Net Amount Due You \$ \_\_\_\_\_

2. Company \_\_\_\_\_

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

Face Amount \$ \_\_\_\_\_

Loan Balance \$ \_\_\_\_\_

Net Amount Due You \$ \_\_\_\_\_

3. Company \_\_\_\_\_

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

Face Amount \$ \_\_\_\_\_

Loan Balance \$ \_\_\_\_\_

Net Amount Due You \$ \_\_\_\_\_

4. Company \_\_\_\_\_

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

Face Amount \$ \_\_\_\_\_

Loan Balance \$ \_\_\_\_\_

Net Amount Due You \$ \_\_\_\_\_

5. Company \_\_\_\_\_

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

Face Amount \$ \_\_\_\_\_

Loan Balance \$ \_\_\_\_\_  
 Net Amount Due You \$ \_\_\_\_\_

**MY EMPLOYMENT RECORD**

Dates (From-to)	Name of Employer	Approximate Annual Income
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

**DEBTS OWED ME**

Description	Terms	Present Balance	Location of Documents
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

**DEBTS I OWE**

Description	Terms	Present Balance	Location of Documents
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

Other Information \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



