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INTRODUCTION

As Benjamin Franklin said, there is nothing certain in this world except death and taxes. And no one wants to talk about either one. Sure, we all know that no one lives forever, but chances are, we're not going to die today, or even tomorrow, so why bother dwelling on something so depressing? Why not live in the moment?

Of course, we all intend to keep our affairs organized and up-to-date, but so often life gets in the way. We are busy with work, family, sports, friends, house renovations, and holidays. Certainly, there is great wisdom in stopping to smell the roses, but perhaps we're also delaying, denying and avoiding the task of putting our lives in order. Maybe this attitude explains why only about 2% of the population makes advance funeral arrangements, or why families are thrown into confusion and chaos if a parent, spouse, partner or friend suddenly ends up in hospital.

Exit: The Life and Death Planner is a practical, easy-to use guide designed to help you organize your important personal information and documents in preparation for life's major changes such as: illness, injury, divorce, a change of residence or death.

This book is not just for the elderly or infirm. We all know of friends or family members who have been involved in a serious accident, gone through the upheaval of a divorce, faced a medical emergency, or have been diagnosed with a terminal illness. These events make us reflect on our own messy lives. Suddenly, we wonder: what would happen if I were hit by a bus tomorrow? Would my family know where my will is? Would they be able to access the files on my computer? Would they know where I keep my safety deposit box?

Imagine these three scenarios:

You are 63-years-old, and you have a stroke. Your spouse, parents and children, who are shocked and upset, want to help you. They know you pay your bills online, but they don't know the password to your computer. Who should they get in touch with at your office? How do they unlock your iPhone to access your contacts and online calendar? What is the code on your house alarm? What medications are you on? You would like to give them this information, but, for the moment, you can't – because you cannot speak or move.

Your marriage breaks up. Your lawyer needs information about your financial situation, your household expenses, pensions, insurance, stocks, education funds, etc. You know you have these documents somewhere, but you're not sure where your spouse kept them, and you're an emotional wreck. You feel helpless and defeated.

"Live as if you were to die tomorrow."

Mahatma Gandhi

You die in a car accident. Your distraught family, wishing to honour your memory, pays \$25,000 for a casket, burial and service (yes, funerals can be expensive). They struggle through your messy files. Your will is outdated with “notes to self” to leave money to the grandchildren and charities – but to which charities, and how much? Arguments erupt between siblings. No one knows where your safety deposit box is located. Finally, someone finds a scrap of paper, in your scrawled handwriting, stating that you’d like to be cremated, no service, and you’d like to have your ashes scattered at Lighthouse Park. But it’s too late for that; no one knew. Everyone feels awful.

Scenarios like these are not uncommon, but the process does not have to be this painful and confusing. You can choose to put your house in order now, while you’re in good health and of clear mind. You can organize your documents, make a will, and express your wishes about who gets the diamond ring and who gets the silverware. You can plan your funeral, make a CD about your family history, or select a favourite picture for your obituary.

When you have completed the forms in this book, *Exit: The Life and Death Planner* will become a key resource, whether you’re moving across town or facing a medical emergency. If you have young children, special wishes, or complex affairs, you need to tackle the issues in the planner now. By referring to the planner, in the event of a debilitating illness or death, your family will know how to pay your household bills, where your important documents are located, and what your end-of-life wishes are. Do it for your family, so that they have the crucial information they need in a time of crisis. There is no better gift you can give your loved ones.

***"Being the richest man in the cemetery
doesn't matter to me ... Going to bed at
night saying we've done something
wonderful ... that's what matters to me."***

Steve Jobs

HOW TO USE THIS PLANNER

If you're reading this page with the intention of getting started now, good for you. Here are some suggestions about how to tackle the job.

Each chapter includes an overview as well as checklists and forms. Some sections, such as "Personal Information and Contacts," will be fairly easy to complete, while others, such as "Planning Your Funeral," require research and reflection. We suggest that you complete the planner in stages. Start with the "Emergency Call to Action," and then proceed with the rest. If you run out of space while recording your information, use the "Notes" section at the back of the planner.

Remember to seek advice from your financial advisor and lawyer when you complete your financial and legal chapters. Set up appointments. Make sure your documents are up-to-date and that you are aware of the medical, legal and financial regulations pertaining to the province or state where you live.

You may want to enlist the help of your spouse, partner, children or a friend while working on your planner, but don't be surprised if they balk at conversations about illness or death. Our youth-obsessed culture does an excellent job of evading these uncomfortable subjects, and you might have to persist in your attempts to have "the talk" with your family. Keep things practical and focused. Let them know that organizing your affairs now will save everyone a lot of emotional stress and confusion later on. You might even share a few laughs along the way.

If you are printing a hard copy of your planner, you could purchase plastic sheets for the placement of contracts, photos, business cards and relevant documents. Keep original documents in a safe place and insert only photocopies into the planner. If you're storing the planner as a computer file, you could keep a copy on a specially designated USB stick or other storage device. Make sure someone knows where you keep it.

Remember to update your information whenever there are significant changes in your life such as: marriage, separation, divorce, birth of children or grandchildren, death of a spouse or partner, or a change of residence. These life changes can have legal and financial repercussions, so make a note in your calendar to review your information annually. If you are storing a downloadable version of this planner on your computer, updating will be easy. Remember to make a backup copy of the file and delete old versions. If you are working on a hard copy, initial and date all changes and shred old versions.

Please note: **This planner does not presume to give medical, legal or financial advice.** We will not instruct you on how to make a will, or counsel you on how to deal with grief, illness and death. We don't explore options for home care or hospices. There are excellent books and services offering help and advice in these areas.

Please check our website www.theexitplanner.com. Look for our blog as well as updated information, news, resources and events. Join our website Forum and tell us your stories, share information, and ask questions of your fellow browsers. We welcome your tips, warnings and suggestions concerning any topic in the planner. Tell us about seminars on retirement planning, helpful books and sites, unusual memorial services, online casket companies, challenges and successes.

But first, you have work to do. Don't be an ostrich. Pick up the pen or click the mouse and begin. You'll be glad you did.

"If my doctor told me I had only six minutes to live, I wouldn't brood. I'd type a little faster."

Isaac Asimov

MEDICAL RECORDS

This chapter is dedicated to the compilation of your current medical records and information. Please consult your doctor to make sure the information listed here is accurate and up-to-date.

When planning for your end-of-life medical care, you will also need to determine what your wishes are should you become terminally ill or seriously injured. Refer to the Advance Health Care Directive chapter of this planner for information and forms relating to: organ donation, Do Not Resuscitate (DNR) or No-CPR orders, living wills, and medical powers of attorney or legally binding advance directives.

Date completed: _____

First name	Middle name	Last name	Health card #	
Street	City	Province/ State	Postal code/Zip code	
Phone number		Cell number		
Social insurance no. (Canada)		Social security no. (USA)		
Date of birth	<input type="checkbox"/> Male <input type="checkbox"/> Female	Height	Weight	
Hair Color	Eye Color	Blood type	Dentures <input type="checkbox"/> upper <input type="checkbox"/> lower	
Organ donor <input type="checkbox"/> Yes <input type="checkbox"/> No				
Leaving body to a medical research centre <input type="checkbox"/> Yes <input type="checkbox"/> No				
(See Organ Donation and Body Bequeathal section for complete details)				
Language(s) spoken:				
Hearing difficulties	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____		
Speaking difficulties	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____		
Vision difficulties	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____		
Pacemaker	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____		
Medical insurance company: _____				
Phone no.: _____ ID no.: _____ Policy no.: _____				
Extended medical insurance company: _____				
Phone no.: _____ ID no.: _____ Policy no.: _____				

Prescription medications:

Dosage: _____

Frequency: _____

Prescription medications: _____

Dosage: _____

Frequency: _____

Prescription medications: _____

Dosage: _____

Frequency: _____

Prescription medications: _____

Dosage: _____

Frequency: _____

Prescription medications: _____

Dosage: _____

Frequency: _____

Prescription medications: _____

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Frequency: _____

Prescription medications: _____

Dosage: _____

Frequency: _____

Prescription medications: _____

Dosage: _____

Frequency: _____

Prescription medications: _____

Dosage: _____

Frequency: _____

Prescription medications: _____

Dosage: _____

Frequency: _____

FINANCIAL PROFILE

This chapter will give you the opportunity to review and list your financial information including: bank accounts, investments, mortgages, debts, loans, insurance policies, benefits, pensions, assets, and business contacts. We will also discuss several key issues such as joint tenancy and power of attorney so that you can make proactive choices about who will manage your financial affairs in case of illness or mental incapacity. **We suggest that you consult your financial and legal advisors for expert help and advice.**

If you have security or privacy concerns about recording certain financial information, you can leave those sections blank and include them on the Security Information sheet. Make sure your family and executor can access this information in case of a medical emergency or death.

Remember to include foreign accounts, property and assets, and to consider the financial, legal and taxation implications of foreign ownership.

Accountant: _____

Institution: _____

Address: _____

City: _____ Province/State: _____ Postal/Zip code: _____

Phone: _____ Cell: _____

Email: _____

Notes: _____

Financial advisor: _____

Institution: _____

Address: _____

City: _____ Province/State: _____ Postal/Zip code: _____

Phone: _____ Cell: _____

Email: _____

Notes: _____

Executor: _____

Address: _____

City: _____ Province/State: _____ Postal/Zip code: _____

Phone: _____ Cell: _____

Email: _____

Co-executor: _____

Address: _____

City: _____ Province/State: _____ Postal/Zip code: _____

Phone: _____ Cell: _____

Email: _____

Tax returns

Location of old and last year's tax returns: _____

Location of tax file for current year's receipts and information: _____

Safety deposit box

Bank: _____

Address: _____

City: _____ Province/State: _____ Postal/Zip code: _____

Phone: _____

Co-signer: _____

Address: _____

City: _____ Province/State: _____ Postal/Zip code: _____

Phone: _____ Cell: _____

Email: _____

Location of safety deposit keys: _____

House safe

Location of safe: _____

Combination of safe: _____

Location of keys for safe: _____

FUNERAL ARRANGEMENTS

Name of church, synagogue, mosque, temple or other place of worship: _____

Religious/spiritual leader contact: _____

Address: _____

City: _____ Province/State: _____ Postal/Zip code: _____

Phone: _____ Email: _____

I am a member of a memorial society: Yes No

If yes, name of society: _____

Website: _____ Phone: _____

Membership no.: _____

I have made funeral arrangements: Yes No

If yes, name of funeral home/service provider: _____

Address: _____

City: _____ Province/State: _____ Postal/Zip code: _____

Phone: _____ Cell: _____

Certificate no.: _____

I have pre-paid for a:

Plot

Niche

Crypt

I have pre-paid for the following funeral services or package. (This could include casket, transportation, reception, etc).

I would like a viewing or visitation: Yes No Whatever my loved one(s) choose

If yes, open casket: Yes No Whatever my loved one(s) choose

I would prefer to have the following style of casket: _____

I would prefer to be buried in the following clothing:

I would prefer to be buried wearing the following jewellery:

Song, hymn or music requests and details:

Poetry selections:

Readings requested:

I would like my eulogy read by:

Farewell memories or reflections could be given by:

I would like the following people as my pallbearers:

Flower preferences at service:

Memorial table: Please include some of the following items on my memorial table (i.e. specific picture of yourself, favorite items, candle, items that are part of your life):

Pictures:

The picture I would prefer to have used at my funeral service is located: _____

The video I would prefer to have used at my funeral service is located: _____

A selection of pictures for the program for my service are located: _____

I would like a reception in my honour: Yes No

If yes, I would prefer the following location and arrangements if possible: _____
