# Estate Information Organizer



John Sacke

**BMO Nesbitt Burns** 

## **PERSONAL & CONFIDENTIAL**

Everyone has their own system for filing important documents, financial records, and digital account access information, and can easily obtain this information when needed. However, if someone else were to step into your shoes, would they know where you keep your Will, life insurance policies, the location of your safety deposit box and keys, or details about your digital assets such online accounts, loyalty programs and subscriptions?

The BMO Private Wealth Estate Information Organizer is designed to help your family, executor (referred to as a "liquidator" in Quebec), or Power of Attorney for Property (referred to as a "mandatory" in Quebec) locate all of your important documents and other information needed to administer your estate or act as your Power of Attorney for Property. Using this resource, you can specify where documents or accounts are located, identify appropriate contacts and provide security access details for your online accounts. The Estate Information Organizer can be invaluable in helping to ensure that nothing is overlooked in the administration of your estate.

To make sure the information in the Estate Information Organizer is always current, be sure to review it regularly. It's also a good idea to either make a copy for your executor or, at a minimum, tell your executor where it can be located.

Due to the personal and confidential nature of the information included, we advise you to keep your Estate Information Organizer in a secure, but accessible, location.

Should you require additional space when completing the Estate Information Organizer, please use the 'Notes' section on page 17, or attach copies of the applicable documents.

Name:		
Date of birth:		
S.I.N.:		
Address:		
Phone:		
E-mail:		

# Will Documents and Power of Attorneys

## Will Documents

	Location	Dated (dd/mm/yyyy)
Original Will		
Copy of Will		
Codicil		
Personal effects list		

## Name and Address of Executor

Name	
Address	
City, Province	
Telephone	
Email	

## Power of Attorney for Property

Name of Power of Attorney	
Address	
City, Province	
Telephone	
Email	
Location of Power of Attorney document	

## Power of Attorney for Personal Care

Name of Power of Attorney	
Address	
City, Province	
Telephone	
Email	
Location of Power of Attorney document	

# **Family Information**

Please use the space below to add information about family members (i.e., spouse/common-law partner, siblings, parents, etc.)

	Spouse/Partner	Ex-Spouse/Ex-Partner
Name		
Address	• Same as yourself	
Telephone		
Email		
Date of birth		

	Child / Dependant	Child/Dependant
Name		
Address		
Telephone		
Email		
Date of birth		
Relationship		

	Child / Dependant	Child / Dependant
Name		
Address		
Telephone		
Email		
Date of birth		
Relationship		

	Other	Other
Name		
Address		
Telephone		
Email		
Date of birth		
Relationship		

## **Insurance Policies**

Prompt notification to the applicable insurance companies will help ensure there is cash available for meeting immediate and ongoing expenses. List all policies, Including personal term, universal and whole life policies. Show group plans separately in **Part 5 – Employment Information**. If you have online access to these policies, provide the website, login/username and password.

#### Life Insurance

	Policy 1		Policy 2	
Insurance company name				
Policy number				
Face value of policy				
Location of policy document				
Beneficiary		<ul><li>O First to die</li><li>O Last to die</li></ul>		<ul><li> First to die</li><li> Last to die</li></ul>
Agent's name				
Agent's telephone number				
Agent's email				
Online account access details				

## **Disability Insurance**

Insurance company name	
Policy number	
Location of policy document	
Agent's name	
Agent's telephone number	
Agent's email	
Online account access details	

## **Critical Illness Insurance**

Insurance company name
Face value of policy
Policy number
Location of policy document
Agent's name
Agent's telephone number
Agent's email
Online account access details

#### Long-Term Care Insurance

Insurance company name	
Policy number	
Location of policy document	
Agent's name	
Agent's telephone number	
Agent's email	
Online account access details	

# **Employer Information**

Employer name				
Contact				
Address				
City, Province				
Telephone				
Email				
Participate in the following employer plans	<ul><li>O Registered Pension</li><li>O Group RRSP</li></ul>	<ul><li>O Employee Stock Purchase</li><li>O Employee Stock Option</li></ul>	<ul><li>Group Life Insurance</li><li>Medical/Dental</li></ul>	<ul><li>O Deferred Profit Sharing</li><li>O Other</li></ul>

## **Income Sources**

Income is currently being received from the sources listed below. These individuals or institutions must be advised so they can make the necessary adjustments to the amount of income being paid, or to re-direct payments.

## Alimony/Child Support

	Payor Information
Name	
Address	
City, Province	
Telephone	
Email	

## Retirement Savings Plan (i.e., RRIF)

	Payor Information
Name of financial institution	
Address	
City, Province	
Telephone	
Email	
Online account access details	

## Annuity

	Payor Information
Name of financial institution	
Address	
City, Province	
Telephone	
Email	
Online account access details	

## Registered Pension Plan

	Payor Information
Name of financial institution	
Address	
City, Province	
Telephone	
Email	
Online account access details	

## Rental Income

	Payor Information
Name	
Address	
City, Province	
Telephone	
Email	

## Other (i.e., CPP/QPP, Foreign Pension)

Recipient of Canada Pension Plan Payments	O Yes O No
Recipient of Quebec Pension Plan Payments	O Yes O No
Recipient of Old Age Security	O Yes O No

# **Assets and Liabilities**

#### 1. Assets

Include items such as savings and chequing accounts, investment accounts, RRSPs, TFSAs, RESPs, and any Locked-In accounts. If you have online access to any of the accounts, provide the website, login/username and password.

Account Description	Name and Address (or branch) of Financial Institution	Account Number	Ownership	Online Account Access Details
			<ul><li>Sole ownership</li><li>Joint - Spouse</li><li>Joint - Other</li></ul>	
			<ul><li>O Sole ownership</li><li>O Joint - Spouse</li><li>O Joint - Other</li></ul>	
			<ul><li>O Sole ownership</li><li>O Joint - Spouse</li><li>O Joint - Other</li></ul>	
			<ul><li>O Sole ownership</li><li>O Joint - Spouse</li><li>O Joint - Other</li></ul>	
			<ul><li>O Sole ownership</li><li>O Joint - Spouse</li><li>O Joint - Other</li></ul>	
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			<ul><li>O Sole ownership</li><li>O Joint - Spouse</li><li>O Joint - Other</li></ul>	
			<ul><li>O Sole ownership</li><li>O Joint - Spouse</li><li>O Joint - Other</li></ul>	
			<ul><li>O Sole ownership</li><li>O Joint - Spouse</li><li>O Joint - Other</li></ul>	
			<ul><li>O Sole ownership</li><li>O Joint - Spouse</li><li>O Joint - Other</li></ul>	
			<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>	

## **Real Estate**

Include items such as your residence, cottage, vacation property or rental property.

Description of Property	Address	Location of Property Deed	Ownership	Mortgage Outstanding
			<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>	O Yes O No
			<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>	O Yes O No
			<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>	O Yes O No
			<ul><li>Sole ownership</li><li>Joint - Spouse</li><li>Joint - Other</li></ul>	O Yes O No

### Other Assets

Include jewelry, automobiles, art, loan receivables, business assets (including private company shares) and other valuables.

Description of Asset	<b>Location</b> (Include address where asset is located and any contact person, if applicable)	ownership
		<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>
		<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>
		<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>
		<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>
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		<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>
		<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>

#### 2. Liabilities

Include mortgages, lines of credit and credit cards (even if there is no outstanding balance) and any other loans, including personal guarantees given. If you have online access, provide website, login/username and password.

Description of Liability	Name and Address (or branch) of Financial Institution	Account Number	Ownership	Online Account Access Details
			<ul><li>Sole ownership</li><li>Joint - Spouse</li><li>Joint - Other</li></ul>	
			<ul><li>Sole ownership</li><li>Joint - Spouse</li><li>Joint - Other</li></ul>	
			<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>	
			<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>	
			<ul> <li>Sole ownership</li> <li>Joint - Spouse</li> <li>Joint - Other</li> </ul>	

# **Location of Other Important Documents**

Marriage or co-habitation agreement	
Separation agreement or divorce decree	
Child support agreements	
Business agreements/contracts	
Formal trust documents where you are the beneficiary or trustee	
Property insurance	
Car insurance	
Car ownership	
Driver's licence	
Lease agreements	
Other agreements	
Birth certificate	
Adoption papers	
Passport	

Prior two years income tax returns	
Prior two years income tax returns filed in other countries	
SIN card	
Citizenship card/naturalization certificate	

# Secure Storage

## Safety Deposit Box

Financial institution			
Address			
Box number			
Location of keys			
Person(s) authorized to access safety deposit box			
ownership	O Sole ownership	○ Joint - Spouse	O Joint - Other

## Storage Locker

Storage facility name			
Address			
Locker number			
Location of keys/lock combination			
ownership	O Sole ownership	O Joint - Spouse	O Joint - Other

## On Premise Personal Secured/Fireproof Vault

Address			
Actual location of vault on the premises			
Location of keys/ combination to open vault			
ownership	O Sole ownership	O Joint - Spouse	O Joint - Other

# Memberships, Subscriptions and Loyalty Programs

The following memberships, subscriptions and loyalty programs will need to be cancelled or transferred. Provide online account access details, if applicable.

Professional memberships	
Fitness memberships	
Other memberships	
Retail memberships	
Associations	
Cooperatives	
Charities	
Provincial health program	
Magazine subscriptions	
Newspaper subscriptions	
Loyalty programs	
Other:	

## **Digital Assets**

Include details (website address, login/username and password) for all online accounts not captured in other sections of the Estate Information Organizer that will need to be closed, transferred or cancelled. Include utility accounts managed online (i.e., hydro, water, property taxes), email and social media accounts, cloud and storage services, intellectual property such as domain names and websites, online commerce accounts such as Amazon and eBay and any online payment systems such as PayPal accounts.

You may also want to itemize the location of electronic devices such as computers, smartphones, tablets, e-readers, digital cameras and provide any logins/usernames and passwords needed to access these devices.

Description of Digital Asset	Details

# **Professional Contacts**

## Lawyer/Legal Advisor

Name	
Firm	
Address	
Telephone	
Email	

Or attach business card here

#### Accountant

Or attach business card here

## **Investment Advisor**

Name	
Firm	
Address	
Telephone	
Email	

Or attach business card here

## Financial Planner/Personal Banker

Name	
Firm	
Address	
Telephone	
Email	

Or attach business card here

#### Doctor

Name	
Address	
Telephone	
Email	

Or attach business card here

## Doctor (Specialist)

Name	
Address	
Telephone	
Email	
Specialty	

Or attach business card here

## Dentist

Name	
Address	
Telephone	
Email	
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Or attach business card here

## Spiritual Advisor

Name	
Address	
Telephone	
Email	

Or attach business card here

## Charitable/Philanthropic Contact

Name	
Firm	
Relationship	
Address	
Telephone	
Email	

Or attach business card here

## Other

Name	
Firm	
Relationship	
Address	
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## Other

Name	
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## Other

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## Other

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Relationship	
Address	
Telephone	
Email	

Or attach business card here

# **Notes**

Use this section to provide any further instructions or information not captured elsewhere in this document. For example, indicate if you have a collection of valuables that require an appraisal, or if your collection is on loan to a gallery or museum. Also, provide details of family members/friends (outside your direct circle) who you wish to be notified of your passing, and their contact information.



# Let's Connect

#### John Sacke, сім

Investment Advisor, Portfolio Manager Tel: 416-590-7661 john.sacke@nbpcd.com

John Sacke Wealth Management Team 4881 Yonge Street, 9th floor Toronto, ON M2N 5X3 www.johnsacke.com



John Sacke

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