

What Your Spouse Should Know if *Something* Happens to You

ASSETS Continued

Other Assets

Name of Asset _____

Owner(s) _____

Location _____

Lien Holder or None _____ Account # _____

Phone _____ FAX _____

Amount of Payments _____ Frequency & Form of Payments _____

Location of Deed or Loan Documents _____

Insurance Company _____

Phone _____ FAX _____

Premium Amount _____ Frequency and Form of Payment _____

Value of Asset _____ Date of Last Appraisal _____

If there is a "Transfer on Death" Document on File, Name of Heir(s) _____

Additional Notes _____
