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

## **ASSETS Continued**

## **Vehicles - Camper/RV**

Year Make and Model		
Name on Title		
Lien Holder or None		
Phone	FAX	
Amount of Payments Frequence	cy & Form of Payments	
Title Location		
If there is a "Transfer on Death" Documer	nt on File, Name of Heir(s)	
Insurance Company		
Phone	FAX	
Premium Amount	Frequency	
Approved Drivers		
Maintenance & Repair Shop	Phone	
Location of Maintenance & Repair Record	ds	
Additional Notes		