

The Big Book of Everything



Compiled by Erik A. Dewey

The Big Book of Everything - Information Organizer

Table of contents

Instructions
Personal Info
Emergency Plan
Passwords and Logins
Groups and Organizations
Bank Accounts
Account Numbers
Previous Addresses
Employment History
Life Insurance Policies
Health Insurance Policies
Car Insurance Policies
Homeowner/Renter Insurance
Medical History
Prescription Medication
Extended Family Medical History
Long Term Health Care
Organ and Body Donation
Final Arrangements
Letters to Loved Ones
Estate Plans
Investments
Other Assets
Retirement Plans
Business Interests
Real Estate
Inventory of Valuables
Tax Issues
Safes, Storage Units, PO Boxes, Safety Deposit Boxes
Vehicles
Loan Obligations
Credit Report
Credit Cards
Other Debts
Debts Owed to You

The Big Book of Everything

Welcome and get ready to document your life.

The idea behind this book is to have a single place where you or a loved one can find any piece of information about you. The majority of the information tracked in this book is financial in nature and the ultimate use is for when you pass on. Contained in this book is hopefully everything your loved ones need to know about you during a trying time.

Wills and trusts are very important, and realize this book does not replace them, but what about things that aren't covered by them. What is the password to the deceased's email account? What is the account number and contact information for the cable company? Where is last year's tax return stored? These kinds of questions can be answered by this book.

However, it is not just to be used when dealing with the loss of a loved one. It also contains information that is called upon occasionally but hard to remember. Things like the addresses of all of your residences, the VIN number on your car, the address of that place you worked at one summer.

Now there are a lot of things to fill out here and a lot of information to gather. Don't panic and don't feel overwhelmed. Nobody says you have to get this done in a day, or a week even. Just take your time and fill out the forms as you have time. You should be able to fill out about one form a day and have the entire book finished in a month.

Each year, go through the book and make any changes that you need to. Print off additional sheets if the current ones are full or the changes are that significant. It is important to keep the book as up to date as possible as you never know when you will need some of that information.

Finally, it should be obvious, but make certain others know about this book and where you keep it. Also since it contains a lot of confidential information, be sure to safeguard its location in some manner.

If you come across any problems or think of things that should be included, please let me know and I'll update the file.

Thanks.

Erik A. Dewey
erik@erikdewey.com
www.erikdewey.com

Personal Information (you, spouse, children, parents)				
Name		Current address		
Home phone	Work phone	Cell phone	All email addresses	
Office address			Office contact name and phone	
Birthdate	Birthplace	Anniversary	SSN	DL #
Name		Current address		
Home phone	Work phone	Cell phone	All email addresses	
Office address			Office contact name and phone	
Birthdate	Birthplace	Anniversary	SSN	DL #
Name		Current address		
Home phone	Work phone	Cell phone	All email addresses	
Office address			Office contact name and phone	
Birthdate	Birthplace	Anniversary	SSN	DL #
Notes				

Emergency Plan

Meeting location 1

Meeting location 2

Emergency grab list

Water shutdown location	Gas shutdown location	Fire extinguisher
-------------------------	-----------------------	-------------------

Smoke detectors	Burgular alarm Code	Alarm company contact
-----------------	---------------------	-----------------------

Emergency water location	Emergency food location	Emergency cash location
--------------------------	-------------------------	-------------------------

Emergency contact name	Relationship	Phone number(s)	Address
------------------------	--------------	-----------------	---------

Emergency contact name	Relationship	Phone number(s)	Address
------------------------	--------------	-----------------	---------

Emergency contact name	Relationship	Phone number(s)	Address
------------------------	--------------	-----------------	---------

Other emergency notes

Groups and Organizations (clubs, professional organizations, civic groups, etc.)			
Groups name		Contact name	Contact phone/email
Membership level	Awards received	Member since	Membership number
Groups name		Contact name	Contact phone/email
Membership level	Awards received	Member since	Membership number
Groups name		Contact name	Contact phone/email
Membership level	Awards received	Member since	Membership number
Groups name		Contact name	Contact phone/email
Membership level	Awards received	Member since	Membership number
Groups name		Contact name	Contact phone/email
Membership level	Awards received	Member since	Membership number
Groups name		Contact name	Contact phone/email
Membership level	Awards received	Member since	Membership number
Groups name		Contact name	Contact phone/email
Membership level	Awards received	Member since	Membership number
Groups name		Contact name	Contact phone/email
Membership level	Awards received	Member since	Membership number
Groups name		Contact name	Contact phone/email
Membership level	Awards received	Member since	Membership number
Groups name		Contact name	Contact phone/email
Membership level	Awards received	Member since	Membership number
Notes			

Bank Accounts			
Type	Institution	Account number	
Owners of account		Beneficiaries	
Direct deposits to		Automated payments from	
Location of checks and used checkbooks	ATM and debit cards for account		ATM PIN
Type	Institution	Account number	
Owners of account		Beneficiaries	
Direct deposits to		Automated payments from	
Location of checks and used checkbooks	ATM and debit cards for account		ATM PIN
Type	Institution	Account number	
Owners of account		Beneficiaries	
Direct deposits to		Automated payments from	
Location of checks and used checkbooks	ATM and debit cards for account		ATM PIN
Type	Institution	Account number	
Owners of account		Beneficiaries	
Direct deposits to		Automated payments from	
Location of checks and used checkbooks	ATM and debit cards for account		ATM PIN
Notes			

Previous Addresses			
Street			City
State	Zip	Dates lived there	Notes
Street			City
State	Zip	Dates lived there	Notes
Street			City
State	Zip	Dates lived there	Notes
Street			City
State	Zip	Dates lived there	Notes
Street			City
State	Zip	Dates lived there	Notes
Street			City
State	Zip	Dates lived there	Notes
Street			City
State	Zip	Dates lived there	Notes
Street			City
State	Zip	Dates lived there	Notes
Notes			

Employment (Current and Previous)					
Who employed?	Company name		Street		
City	State	Zip	Phone	Supervisor	
Position held	Dates employed		Starting pay	Ending pay	Reason for leaving
Who employed?	Company name		Street		
City	State	Zip	Phone	Supervisor	
Position held	Dates employed		Starting pay	Ending pay	Reason for leaving
Who employed?	Company name		Street		
City	State	Zip	Phone	Supervisor	
Position held	Dates employed		Starting pay	Ending pay	Reason for leaving
Who employed?	Company name		Street		
City	State	Zip	Phone	Supervisor	
Position held	Dates employed		Starting pay	Ending pay	Reason for leaving
Who employed?	Company name		Street		
City	State	Zip	Phone	Supervisor	
Position held	Dates employed		Starting pay	Ending pay	Reason for leaving
Notes					

Life Insurance Policies (includes AD&D and LTD)			
Who	Policy holder	Policy number	Policy amount
Policy holder contact information		Beneficiaries	
Who	Policy holder	Policy number	Policy amount
Policy holder contact information		Beneficiaries	
Who	Policy holder	Policy number	Policy amount
Policy holder contact information		Beneficiaries	
Who	Policy holder	Policy number	Policy amount
Policy holder contact information		Beneficiaries	
Who	Policy holder	Policy number	Policy amount
Policy holder contact information		Beneficiaries	
Who	Policy holder	Policy number	Policy amount
Policy holder contact information		Beneficiaries	
Who	Policy holder	Policy number	Policy amount
Policy holder contact information		Beneficiaries	
Who	Policy holder	Policy number	Policy amount
Policy holder contact information		Beneficiaries	
Notes			

Health Insurance Policies (includes Dental and Prescription Drugs)			
Who covered	Insurer	Policy number	Policy contact information
Co Pay amount	Website		Cost/month Network
Who covered	Insurer	Policy number	Policy contact information
Co Pay amount	Website		Cost/month Network
Who covered	Insurer	Policy number	Policy contact information
Co Pay amount	Website		Cost/month Network
Who covered	Insurer	Policy number	Policy contact information
Co Pay amount	Website		Cost/month Network
Who covered	Insurer	Policy number	Policy contact information
Co Pay amount	Website		Cost/month Network
Who covered	Insurer	Policy number	Policy contact information
Co Pay amount	Website		Cost/month Network
Who covered	Insurer	Policy number	Policy contact information
Co Pay amount	Website		Cost/month Network
Who covered	Insurer	Policy number	Policy contact information
Co Pay amount	Website		Cost/month Network
Who covered	Insurer	Policy number	Policy contact information
Co Pay amount	Website		Cost/month Network
Notes			

Car Insurance				
Insurer	Drivers covered	Car make/model	Policy number	Contact information
Coverage			Deductibles	\$ deductions
Insurer	Drivers covered	Car make/model	Policy number	Contact information
Coverage			Deductibles	\$ deductions
Insurer	Drivers covered	Car make/model	Policy number	Contact information
Coverage			Deductibles	\$ deductions
Notes				

Homeowner/Renters Insurance

Insurer	Location insured	Policy number
Contact information		Deductible
Items explicitly covered		
Policy notes		

Insurer	Location insured	Policy number
Contact information		Deductible
Items explicitly covered		
Policy notes		

Medical History (Yourself and Immediate Family), Including Allergies			
Who	Approx date	Condition/illness	Notes/results
Who	Approx date	Condition/illness	Notes/results
Who	Approx date	Condition/illness	Notes/results
Who	Approx date	Condition/illness	Notes/results
Who	Approx date	Condition/illness	Notes/results
Who	Approx date	Condition/illness	Notes/results
Who	Approx date	Condition/illness	Notes/results
Who	Approx date	Condition/illness	Notes/results
Who	Approx date	Condition/illness	Notes/results
Notes			

Extended Family Medical History			
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Who	Relationship	Illness/disease	Details
Notes			

Long Term Health Care Directions (Self and Immediate Family)		
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Who	Situation	Care desired
Notes		

Organs, Tissue, and Body Donation (Self and Immediate Family)		
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Who	Body part(s)	Donate/do not donate
Notes		

Final Arrangements					
Who	Date updated	Time on life support?	DNR?	Institution to handle arrangements	
Casket/container type		Open/closed?	Embalmed?	Burial/cremation?	Where interred?
Who performs ceremony?		Pallbearers?			
Grave/Memorial marker details		Ceremony speakers		Special music, notes, food, or drink?	
Where flowers/donations should be sent				Location of will	
Other notes about final arrangements					
Who	Date updated	Time on life support?	DNR?	Institution to handle arrangements	
Casket/container type		Open/closed?	Embalmed?	Burial/cremation?	Where interred?
Who performs ceremony?		Pallbearers?			
Grave/Memorial marker details		Ceremony speakers		Special music, notes, food, or drink?	
Where flowers/donations should be sent				Location of will	
Other notes about final arrangements					
Notes					

Investments (including mutual funds, annuities, and stocks)				
Type	Name		Account number	
Contact info		Location of information		Date
Value				
Type	Name		Account number	
Contact info		Location of information		Date
Value				
Type	Name		Account number	
Contact info		Location of information		Date
Value				
Type	Name		Account number	
Contact info		Location of information		Date
Value				
Type	Name		Account number	
Contact info		Location of information		Date
Value				
Type	Name		Account number	
Contact info		Location of information		Date
Value				
Type	Name		Account number	
Contact info		Location of information		Date
Value				
Type	Name		Account number	
Contact info		Location of information		Date
Value				
Notes				

Other Assets (Savings bonds, stock options, etc.)				
Type	Name	Account number		
Contact info		Location	Value	Date
Type	Name	Account number		
Contact info		Location	Value	Date
Type	Name	Account number		
Contact info		Location	Value	Date
Type	Name	Account number		
Contact info		Location	Value	Date
Type	Name	Account number		
Contact info		Location	Value	Date
Type	Name	Account number		
Contact info		Location	Value	Date
Type	Name	Account number		
Contact info		Location	Value	Date
Type	Name	Account number		
Contact info		Location	Value	Date
Notes				

Retirement Plans (401k, pensions, IRAs, etc.)				
Type	Name		Account number	
Contact info		Location of information	Value	Date
Type	Name		Account number	
Contact info		Location of information	Value	Date
Type	Name		Account number	
Contact info		Location of information	Value	Date
Type	Name		Account number	
Contact info		Location of information	Value	Date
Type	Name		Account number	
Contact info		Location of information	Value	Date
Type	Name		Account number	
Contact info		Location of information	Value	Date
Type	Name		Account number	
Contact info		Location of information	Value	Date
Notes				

Private Business Interests					
Type	Name of company			Position in company	SSN/FEIN
Partner name		Partner contact info			
Partner name		Partner contact info			
Location of business/tax forms			Location of inventory		
Name of bank		Bank account number		Credit card number (s)	
PIN	Bank url		Bank website ID	Bank website password	
Domain name reg	Account ID	Password	Webhost	Account ID	Password
Email url	Email address	PW	Other website	ID	Password
Other website	ID	PW	Other website	ID	Password
Other website	ID	PW	Other website	ID	Password
Notes					

Real Estate				
Location		Type	Date	Est Value
Mortgage holder		Mortgage acct num	Lender contact info	
Property taxes		Location of paperwork		
Notes				
Location		Type	Date	Est Value
Mortgage holder		Mortgage acct num	Lender contact info	
Property taxes		Location of paperwork		
Notes				
Location		Type	Date	Est Value
Mortgage holder		Mortgage acct num	Lender contact info	
Property taxes		Location of paperwork		
Notes				
Notes				

Inventory of Valuables (go room by room and look for things of value)				
Item	Type	Model number	Color	Serial Number
Description		Location	Date	Est Value
Item	Type	Model number	Color	Serial Number
Description		Location	Date	Est Value
Item	Type	Model number	Color	Serial Number
Description		Location	Date	Est Value
Item	Type	Model number	Color	Serial Number
Description		Location	Date	Est Value
Item	Type	Model number	Color	Serial Number
Description		Location	Date	Est Value
Item	Type	Model number	Color	Serial Number
Description		Location	Date	Est Value
Item	Type	Model number	Color	Serial Number
Description		Location	Date	Est Value
Item	Type	Model number	Color	Serial Number
Description		Location	Date	Est Value
Notes				

Tax Issues and Records					
Tax Year	Location of forms		Name of CPA	CPA contact information	
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/ref	City tax paid/ref
Tax Year	Location of forms		Name of CPA	CPA contact information	
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/ref	City tax paid/ref
Tax Year	Location of forms		Name of CPA	CPA contact information	
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/ref	City tax paid/ref
Tax Year	Location of forms		Name of CPA	CPA contact information	
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/ref	City tax paid/ref
Tax Year	Location of forms		Name of CPA	CPA contact information	
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/ref	City tax paid/ref
Tax Year	Location of forms		Name of CPA	CPA contact information	
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/ref	City tax paid/ref
Tax Year	Location of forms		Name of CPA	CPA contact information	
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/ref	City tax paid/ref
Tax Year	Location of forms		Name of CPA	CPA contact information	
Federal tax owed	State tax owed	City tax owed	Federal tax paid/ref	State tax paid/ref	City tax paid/ref
Notes					

Safes, Storage Units, Safety Deposit Boxes, PO Boxes, etc.			
Type	Location	Combination	Key location
What is stored within?			Date Closed
Type	Location	Combination	Key location
What is stored within?			Date Closed
Type	Location	Combination	Key location
What is stored within?			Date Closed
Type	Location	Combination	Key location
What is stored within?			Date Closed
Type	Location	Combination	Key location
What is stored within?			Date Closed
Type	Location	Combination	Key location
What is stored within?			Date Closed
Type	Location	Combination	Key location
What is stored within?			Date Closed
Type	Location	Combination	Key location
What is stored within?			Date Closed
Notes			

Automobiles, Motorcycles, Boats, RVs, and other vehicles					
Type	Year	Make	Model	Color	VIN
License plate #	Location of spare key	Insurer		Policy number	Odometer/hours
Notes					Date
Type	Year	Make	Model	Color	VIN
License plate #	Location of spare key	Insurer		Policy number	Odometer/hours
Notes					Date
Type	Year	Make	Model	Color	VIN
License plate #	Location of spare key	Insurer		Policy number	Odometer/hours
Notes					Date
Type	Year	Make	Model	Color	VIN
License plate #	Location of spare key	Insurer		Policy number	Odometer/hours
Notes					Date
Notes					

Loan Obligations					
Type	Lending institution		Contact info		Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Type	Lending institution		Contact info		Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Type	Lending institution		Contact info		Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Type	Lending institution		Contact info		Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Type	Lending institution		Contact info		Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Type	Lending institution		Contact info		Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Type	Lending institution		Contact info		Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Type	Lending institution		Contact info		Paid off and date?
Account number	Originating date	Final payment date	Loan amount	Loan balance	Date
Notes					

Credit Report

Keep a current copy of your credit report(s) in a pouch or page protector on this page.

Credit Cards					
Type (Visa, MC, etc.)	Brand	Issuing bank	Name on card		
Card number		Exp date	Security code	Cust service phone	
Card website	Website ID	Website password		Outside US customer service phone num	
Interest rate	Balance	Credit limit	Date	Closed?	Date closed
Type (Visa, MC, etc.)	Brand	Issuing bank	Name on card		
Card number		Exp date	Security code	Cust service phone	
Card website	Website ID	Website password		Outside US customer service phone num	
Interest rate	Balance	Credit limit	Date	Closed?	Date closed
Type (Visa, MC, etc.)	Brand	Issuing bank	Name on card		
Card number		Exp date	Security code	Cust service phone	
Card website	Website ID	Website password		Outside US customer service phone num	
Interest rate	Balance	Credit limit	Date	Closed?	Date closed
Type (Visa, MC, etc.)	Brand	Issuing bank	Name on card		
Card number		Exp date	Security code	Cust service phone	
Card website	Website ID	Website password		Outside US customer service phone num	
Interest rate	Balance	Credit limit	Date	Closed?	Date closed
Notes					

Other Debts					
Type	Debt holder		Holder contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Notes					
Type	Debt holder		Holder contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Notes					
Type	Debt holder		Holder contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Notes					
Type	Debt holder		Holder contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Notes					

Debts and Obligations Owed to You					
Type	Debtor		Debtor contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Notes					
Type	Debtor		Debtor contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Notes					
Type	Debtor		Debtor contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Notes					
Type	Debtor		Debtor contact info		
Originating date	Final payment date	Original debt amt	Current balance	Date	Paid off (and date)?
Notes					