

*savvy snowbirds*  
FUNERAL & ESTATE PLANNER





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# organ donor information

Organ and tissue donation is definitely something you want to give thought to. If you decide you want to move forward with this decision you need to register your consent to ensure that the information is recorded with the Ontario government. If you live outside of Ontario, you can easily use Google to find out how to register in your province or state.

Registering as a donor is the only guaranteed way to make your decision known. Please let your family know this is your wish.

## HOW TO REGISTER:

[Register, check or update your consent online](#)

You can also register:

- in person at any [Service Ontario centre](#)
- by completing a [Gift of Life consent form](#) and sending it to:  
ServiceOntario  
Organ Donor Consent  
PO Box 48  
Kingston ON, K7L 5J3

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# personal information

FULL NAME	
DATE OF BIRTH	
CITY AND STATE OF BIRTH	
DRIVER'S LICENSE NUMBER	
SOCIAL INSURANCE NUMBER	
HEALTH CARD NUMBER	
ADDRESS PO BOX PHONE NUMBER	
EMAIL ADDRESS	

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# next of kin & dependants

## NEXT OF KIN

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

## DEPENDANT

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

## DEPENDANT

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

## DEPENDANT

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

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# next of kin & dependants

## DEPENDANT

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

## DEPENDANT

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

## DEPENDANT

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

## DEPENDANT

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

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# attorney information

ATTORNEY'S NAME	
LAW FIRM NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	
POWER OF ATTORNEY	
NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

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# insurance provider

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	



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# beneficiary information

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

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# where is it?

## PHYSICAL LOCATION

DIVER'S LISENCE	
HEALTH CARD	
SOCIAL INSURANCE CARD	
PASSPORT	
NEXUS	
BIRTH CERTIFICATE	
MARRIAGE CERTIFICATE	
LIFE INSURANCE POLICY	
WILL & TESTAMENT	
SAFE	

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# important contacts

NAME		ADDRESS	
PHONE NUMBER		EMAIL ADDRESS	

NAME		ADDRESS	
PHONE NUMBER		EMAIL ADDRESS	

NAME		ADDRESS	
PHONE NUMBER		EMAIL ADDRESS	

NAME		ADDRESS	
PHONE NUMBER		EMAIL ADDRESS	

NAME		ADDRESS	
PHONE NUMBER		EMAIL ADDRESS	

NAME		ADDRESS	
PHONE NUMBER		EMAIL ADDRESS	

NAME		ADDRESS	
PHONE NUMBER		EMAIL ADDRESS	

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# login/access information

ACCOUNT NAME	
WEBSITE	
ACCOUNT NUMBER	
USERNAME	
PASSWORD/PIN	

ACCOUNT NAME	
WEBSITE	
ACCOUNT NUMBER	
USERNAME	
PASSWORD/PIN	

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# medical information

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

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# medical information

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	

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# corner

NAME	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	
CONTACT PERSON	
NOTES	

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# funeral home

NAME	
CONTACT PERSON	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	
HOURS OF OPERATION	
NOTES	



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# visitation/viewing

OPEN/CLOSED CASKET	
PHOTOGRAPH	
CHARITY DONATION	
DATES	
TIMES	

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# visitation/viewing

SPEAKERS



PRAYERS/READINGS



MUSIC

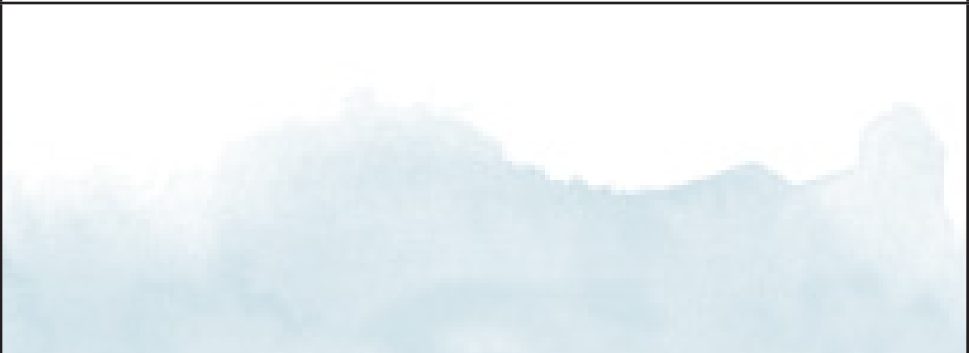




SPECIAL MEMORIES





# service

OPEN/CLOSED CASKET	
PHOTO	
DATE	
TIME	
SPEAKERS	
PRAYERS/READINGS	



# service

MUSIC	
EULOGY	
PALL BEARERS	
PUBLIC/ FAMILY ONLY	
PRAYERS/READINGS	
NOTES	

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# burial

ADDRESS	
DATE	
TIME	
HEADSTONE PURCHASED	
SPEAKER	
PRAYERS/READINGS	
MUSIC	
PLOT PURCHASED	
CASKET PURCHASED	
PUBLIC/ FAMILY ONLY	
NOTES	

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# cremation

COLUMBARIUM	
ADDRESS	
DATE	
TIME	
SPEAKER	
PRAYER/READINGS	
MUSIC	
URN PURCHASED	
COLUMBARIUM PURCHASED	
PUBLIC/FAMILY ONLY	
NOTES	

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# *celebration of life*

NAME	
ADDRESS	
PHONE NUMBER	
NOTES	

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# funeral expenses

PAY TO	DOLLAR AMOUNT	DATE	OWE	INVOICE NUMBER



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# life insurance

POLICY HOLDER	
CONTACT	
POLICY NUMBER	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	
VALUE OF POLICY	
BENEFICIARY	
NOTES	

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# employer

ADDRESS	
MAIN PHONE NUMBER	
EMAIL ADDRESS	
CONTACT PERSON	
PHONE NUMBER	
COMPANY	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	
CONTACT PERSON	
PHONE NUMBER	

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# mortgage information

NAME(S) OF MORTGAGE HOLDER	
MORTGAGE COMPANY	
ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	
CONTACT PERSON	
PHONE NUMBER	
LOGIN INFORMATION	
USERNAME	
PASSWORD	
AMOUNT OWING	
ACCOUNT TYPE	
NOTES	

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# household contacts

NAME:

ACCOUNT NUMER	
CONTACT NUMBER	
USERNAME	
PASSWORD	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

NAME:

ACCOUNT NUMER	
CONTACT NUMBER	
USERNAME	
PASSWORD	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

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# household contacts

NAME:

ACCOUNT NUMBER	
CONTACT NUMBER	
USERNAME	
PASSWORD	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

NAME:

ACCOUNT NUMBER	
CONTACT NUMBER	
USERNAME	
PASSWORD	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

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# household contacts

NAME:

ACCOUNT NUMBER	
CONTACT NUMBER	
USERNAME	
PASSWORD	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

NAME:

ACCOUNT NUMBER	
CONTACT NUMBER	
USERNAME	
PASSWORD	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

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# household contacts

NAME:

ACCOUNT NUMBER	
CONTACT NUMBER	
USERNAME	
PASSWORD	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

NAME:

ACCOUNT NUMBER	
CONTACT NUMBER	
USERNAME	
PASSWORD	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

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# vehicle information

VEHICLE OWNER	
YEAR/MAKE/MODEL	
LISENCE PLATE NUMBER	
LEASE, LOAN, OWN	
LENDERS NAME	
CONTACT NUMBER	
ADDRESS	
EMAIL ADDRESS	
AMOUNT OWING	
MONTHLY PAYMENT	
AUTO WITHDRAWL/ PAY ONLINE/ PAY CHQ	



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# loans & debts

ACCOUNT TYPE	
ACCOUNT NUMBER	
USERNAME	
PASSWORD	
AMOUNT OWING	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

ACCOUNT TYPE	
ACCOUNT NUMBER	
USERNAME	
PASSWORD	
AMOUNT OWING	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

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# loans & debts

ACCOUNT TYPE	
ACCOUNT NUMBER	
USERNAME	
PASSWORD	
AMOUNT OWING	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

ACCOUNT TYPE	
ACCOUNT NUMBER	
USERNAME	
PASSWORD	
AMOUNT OWING	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

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# loans & debts

ACCOUNT TYPE	
ACCOUNT NUMBER	
USERNAME	
PASSWORD	
AMOUNT OWING	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	

ACCOUNT TYPE	
ACCOUNT NUMBER	
USERNAME	
PASSWORD	
AMOUNT OWING	
AUTO WITHDRAWL/PAY ONLINE/PAY CHQ	



# personal items

ITEM	
LOCATION	
BENEFICIARY	

ITEM	
LOCATION	
BENEFICIARY	

ITEM	
LOCATION	
BENEFICIARY	

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# personal items

ITEM	
LOCATION	
BENEFICIARY	

ITEM	
LOCATION	
BENEFICIARY	

ITEM	
LOCATION	
BENEFICIARY	



# personal items

ITEM	
LOCATION	
BENEFICIARY	

ITEM	
LOCATION	
BENEFICIARY	

ITEM	
LOCATION	
BENEFICIARY	

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# personal items

ITEM	
LOCATION	
BENEFICIARY	

ITEM	
LOCATION	
BENEFICIARY	

ITEM	
LOCATION	
BENEFICIARY	

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# obituary





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# *enlogys*



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# final words

A series of horizontal lines for writing, set against a background of soft, light blue clouds. The lines are evenly spaced and extend across the width of the page.