#### Vital Document Check List

Emergency information Summary Financial

Emergency contact information Banking information Family advisor Safety deposit box

Map of area Investments

Stocks & bonds

Identification Items Credit card list/extra cards

Household members information Tax information

Social security card

Passport/visa Legal

Marriage certificate Will & trust
Birth certificate Legal contacts

Wallet information Car title

Driver's license copy, etc Real estate deeds

Heath power of attorney

Insurance Funeral information

Homeowners/renters

Auto (license, make, model, year) Household

Medical Utility accounts

Dental Memberships

Vision Computer passwords
Life Household inventory

Disability Item list and photo c.d.

Umbrella Extra auto and house keys

Computer back-up c.d.'s

Medical Cash in small denominations

Medication records Extra bank checks

Immunization records

Eyeglass prescriptions Family

Medical records Genealogy

Wallet medical form Religious records

Keep this notebook in a waterproof container Keep this record as safe as you would your wallet

# er items checklist Bin

1 binder

1 pack 8 tab dividers

sheet protectors (no kids=20)

1 cd holder sheet

half sheet pocket protectors 2

3 business card holders

1 photo holder sheet

1 sheet labels

1 packet of papers

#### emergency contact information

# emergency number: 911 STAY CALM. DESCRIBE THE EMERGENCY. DON'T HANG UP THE PHONE

this phone number is: this address is: directions to this address:	
emergency contact numbers	family emergency plan
police department:	we will meet here:
fire department:	
ambulance:	
poison control center:	
family physician:	our emergency contact is:
dad's work number:	
dad's cell number:	phone:
mom's work number:	address:
mom's cell number:	
neighbor's name:	first aid kit is located:
neighbor's phone:	
neighbor's name:	emergency kits are stored:
neighbor's phone:	
neighbor's name:	plan for pets:
neighbor's phone:	
end/relative's name:	other notes:
friend/relative's phone:	

# family advisors

accountant	attorney
name:	name:
address:	address:
phone:	phone:
fax:	fax:
email:	email:
account number:	account number:
employer	financial planner
name:	name:
address:	address:
phone:	phone:
fax:	fax:
email:	email:
account number:	account number:
life, health, disability insurance	home & auto insurance
name:	name:
address:	address:
phone:	phone:
fax:	fax:
email:	email:
account number:	account number:

tamily advisors

mortgage holder	pension benefits
name:	name:
address:	address:
phone:	phone:
fax:	fax:
email:	email:
account number:	account number:
stockbroker	
name:	name:
address:	address:
phone:	phone:
fax:	fax:
email:	email:
account number:	account number:
name:	name:
address:	address:
phone:	phone:
fax:	fax:
email:	email:
o. na	) Cirian.

household members information social security card original passport/visa marriage certificate birth certificate

copies of what is in my wallet driver's license copy credit cards (front & back) insurance cards etc.

## household members

name:	name:
date of birth:	date of birth:
ssn:	ssn:
drivers license:	drivers license:
passport number:	passport number:
allergies:	allergies:
medication:	medication:
name:	name:
date of birth:	date of birth:
ssn:	SSn:
drivers license:	drivers license:
passport number:	passport number:
allergies:	allergies:
medication:	medication:
name:	name:
date of birth:	date of birth:
ssn:	ssn:
drivers license:	drivers license:
passport number:	passport number:
allergies:	allergies:

# insurance contacts & policies

home auto life disability medical

insurance summary

medical		/	dental	
company:			company:	
agent:			agent:	
phone:	fax:		phone:	fax:
website:	3. MAN, 40.		website:	
email:			email:	
policy number	er:		policy number:	
coverage:			coverage:	
vision			life	
company:			company:	
agent:			agent:	
phone:	fax:		phone:	fax:
website:			website:	
email:			email:	
policy number	er:		policy number:	
coverage:			coverage:	
life		/	disability	
company:			company:	
agent:	- 101		agent:	
phone:	fax:		phone:	fax:
website:			website:	
email:			email:	
policy number	er:		policy number:	
coverage:			coverage:	
I .		1 1		

# insurance summary

homeowners/rental	auto
company:	company:
agent:	agent:
phone: fax:	phone: fax:
website:	website:
email:	email:
policy number:	policy number:
coverage:	coverage:
flood	umbrella
company:	company:
agent:	agent:
phone: fax:	phone: fax:
website:	website:
email:	email:
policy number:	policy number:
coverage:	coverage:
company:	company:
agent:	agent:
phone: fax:	phone: fax:
website:	website:
email:	email:
policy number:	policy number:
coverage:	coverage:

# auto informatior

	/
make:	make:
model:	model:
year:	year:
license plate:	license plate:
dealer service number:	dealer service number:
vin:	vin:
	MAXIS III
other:	other:
other:	other:
other:	other:
make:	make:
make: model:	make: model:
make: model: year:	make: model: year:
make: model: year: license plate:	make: model: year: license plate:

#### medical record

medication list
eyeglass prescriptions
immunizations
medical records
wallet medical forms

#### financial

banking information safety deposit box stocks & bonds investments credit card list extra credit cards tax information

## banking institutions

checking	savings
company:	company:
contact person:	contact person:
phone: fax:	phone: fax:
website or address:	website or address:
email:	email:
account number:	account number:
24 hour contact number:	24 hour contact number:
safe deposit	investment
company:	company:
contact person:	contact person:
phone: fax:	phone: fax:
website or address:	website or address:
email:	email:
account number:	account number:
24 hour contact number:	24 hour contact number:
investment	investment
company:	company:
contact person:	contact person:
phone: fax:	phone: fax:
website or address:	website or address:
email:	email:
account number:	account number:
24 hour contact number:	24 hour contact number:

CALL TO THE RESIDENCE OF THE PARTY OF THE PA	• •		
crad	11	00	rd
cred	11	Ca	IU.

company:	company:
account #:	account #:
expires: cid #:	expires: cid #:
24 hour contact #:	24 hour contact #:
website:	website:
passwords:	passwords:
credit limit:	credit limit:

company:
account #:
expires: cid #:
24 hour contact #:
website:
passwords:
credit limit:

account #:		
expires:	cid #:	N. ( )
24 hour conta	act #:	
website:		
passwords:		
credit limit:		115.00

	<b>\</b>	
company:		
account #:		
expires:	cid #:	90'
24 hour conta	act #:	
website:		
passwords:		
credit limit:		<del></del>

will & trust
legal contracts
car title
real estate deeds
health power of attorney
funeral information

#### household

utility accounts
memberships
computer passwords
household inventory
item list and photo c.d.
extra auto and house keys
computer back-up c.d.'s
cash in small denominations
extra blank checks

utility accounts

electric	/water/sewer/trash
name:	name:
address:	address:
phone:	phone:
fax:	fax:
email:	email:
account number:	account number:
gas	phone
name:	name:
address:	address:
phone:	phone:
fax:	fax:
email:	email:
account number:	account number:
mobile phone	landscape
name:	name:
address:	address:
phone:	phone:
fax:	fax:
email:	email:
account number:	account number:

computer passwords

		<del></del>		padoviolus
company/site	user name	password	security?	security answer
<u> </u>				

#### Bathroom

Bumoom			
Article	Replacement Cost		
Floor Covering	3		
Chests			
Towels			
Mirrors			
Scales			
Mats	7-40		
Electric Razor			
Electric Toothbrush			
Medicine/Supplies			
Vanity			
Curtains			
Fixtures			
Tables			
Hamper			
Hair Dryer			
Curling Iron			
Electric Rollers			
Total	8		

#### China & Crystal Glassware

China Pattern—Name	8
No. of Pieces	
Crystal Pattern—Name	
No. of Pieces	
Total	8

#### Silver

Silver Pattern—Name	8
No. of Settings	
Total	8

#### Clothing

	Men's	Boy's	Women's	Girl's
Article	RC	RC	RC	RC
Suits	8	8	8	3
Sport Coats	-			T
Top Coats	1			T
Raincoats			1	
Furs				
Jackets				T
Boots	1			1
Shoes/Slippers				
Sweaters		Ī		
Shirts				
Blouses				1
Shorts				†
Pants	1			1
Dresses				†
Formal Wear				
Skirts				
Socks			1	1
Lingerie/Hosiery				<b>—</b>
Underwear/Sleepwear				
Ties	1		1	
Hats/Gloves		1	1	1
Handbags			1	<del>†</del>
Briefcases			1	
		1		-
				<del> </del>
-			1	<b></b>
***	1			
			1	
		1		-
		1	1	
		-		
				1
	1	1	1	1
	1	+	1	
37//	+	1	1	<b>-</b>
Company Company of the Company of th	-	+		<del> </del>
	-		1	+
	-	-	+	-
-	-	-	1	-
Totals	8	8	0	8
IUIdia	19	19	\$	19

RC = Replacement Cost

#### Bedrooms

	#1	#2	#3	#4
Article	RC	RC	RC	RC .
Floor Covering	8	8	\$	3
Beds/Crib				
Mattresses & Springs				
Pillows & Covers			1	
Sheets				
Comforters/Quilts				
Blankets				
Bedspreads				
Chairs				
Lounge				
Tables				
Dressers				
Chests				
Bureaus				
Toilet Sets				
Cosmetics				
Lamps/Floor, Table				
Mirrors	-	1		
Desk & Contents		1		
Pictures				
Curtains & Blinds				
Draperies				10.550 560
Fixtures				
Clocks				
Radio				
TV				
VCR/Compact Disc				
Vaporizer		1		
Humidifier				
Nursery Monitor				
Figurines				
			1	
			1	
		1		<del></del>
	<del></del>			
Totals	8	8	8	8

#### RC = Replacement Cost

#### Kitchen

Article	Replacement Cost
Tables	\$
Chairs & Stools	
Utensils	
Cabinets	
Pots & Pans	
Stove	
Refrigerator	
Freezer	
Mixer	
Toaster	
Dishwashe <b>r</b>	
Storage Containers	
Food	
Clocks	
Radio/TV	
Curtains/Blinds	
Fixtures	
Canisters	
Microwave Oven .	
Microwave Stand	
Food Processor	
T. 1.1	
Total	8

#### Linen Closets

Table Linens/Napkins	\$
Sheets/Pillowcases	
Blankets	
Towels	200
Iron	
Ironing Board	
Heating Pad	
Scale	
Bedspreads	
Total	8

#### Household Inventory

Whether you're still unpacking boxes from your recent move or whether your boxes of memorabilia have been stashed away for years, the contents in your home are valuable. Your house or apartment would not be a home without your belongings

Trying to appraise your belongings would be a difficult task without an organized format to follow. This brochure enables you to record an accurate assessment of your belongings. Should a loss occur, your completed inventory will help you to readily identify the extent of the loss.

The ERIE recognizes how important your personal belongings are to you. And it is important to us to provide you with the service you deserve. Therefore, we have designed this home inventory form.

The following instructions will aid you in completing this form.

- Simply enter the RC (Replacement Cost—current cost to replace the article) of each item, then total each room.
- · Estimate any items necessary.
- Enter each room total on page 2. Then add the entire column to determine the value of your contents.
- Enter your present Personal Property insurance limit and compare this amount to your total contents value.

#### ... IMPORTANT:

If the amount of insurance protection on your contents is lower than the value shown, contact your ERIE Agent so your policy can be properly adjusted.

#### Miscellaneous

Article	Replacement Cost
Air Conditioner	S
Fans	13 (17)
Sewing Machine	
Sun Lamps	
Vacuum Cleaner	
Hand-held Vacuum	
Typewriter	
Card Table/Chairs	
TV Trays	
Picnic Table & Benches	-
Patio Furniture	
Home Computer/Printer	
Answering Machine	
File Cabinet	
	1
<del></del>	
***	
	7380 3
	-
	7
	****
	<del> </del>
Tarat	10
Total	8

Living	Family	Dining	Rec
Room	Room	Room	Room

	.100111	Hoom	1100111	HOUIN
Article	RC	RC	RC	RC
Carpets, Rugs, Pads	\$	\$	8	8
Tables				
Chairs				
Couch/Sofa Bed				
Love Seat				
Desk & Contents				
Chests				
Lamps/Table, Floor				
VCR/Compact Disc			1	
Piano & Music		T		
Record Player				
Records/Tapes		1		
Entertainment Center				
Radio				
TV	30110			
Fireplace Fixtures				
Clocks				1
Pictures				
Mirrors				
Curtains & Blinds				
Draperies				
Fixtures				
Tapestries				
Paintings				
Vases/Figurines				
Bookcases/Books	1	1		1
Plants	1	1	1	
Pillows		1	1	1
China Cabinet				W-35-5
Buffet			1	-
Serving Tables		1		
Candle Sticks	1			1
Pool Table	-	1	1	1
Card Table/Chairs	_		1	
Picture Frames		<del> </del>	1	<del> </del>
Electrical Equipment		1	<b>†</b>	
Ceiling Fan	+		-	+
	-	<del> </del>	-	-
			-	
Totals	3	8	8	8
IUMIS	10	J	0	0

RC = Replacement Cost

#### Jewelry

Article	Replacement Cost
Rings	8
Watches	1
Earrings	
Pins	
Necklaces	
Bracelets	
Charms	
Gems	
Tie Bars/Tie Tacks	
Cuff Links	
Total	8

#### Basement, Attic, Garage

Washer	S
Dryer	
Tubs	
Work Bench	
Tools	
Furniture	
Bar/Bar Supplies	
Lamps	
Piano	
Shelving	
Canned Goods	
Freezer	
Frozen Foods	
Lawn Mower	
Garden Tools	
Hose	
Bar-B-Q	
Dehumidifier	
Christmas Decorations	
Baby Equipment	
Luggage	
Tires/Rims	HE STANSIAL DESCRIPTION OF THE
Ladder	
Total	8

#### **Hobbies-Sports**

Article	Replacement Cost
Boats	\$
Motors	
Golf Equipment	
Photo Equipment	
Hunting Equipment	
Fishing Equipment	
Collections	
Toys	
Bicycles	
Power Tools	
Musical Equipment	
Exercise Equipment	
Camping Equipment	
Ski Equipment	
Tractor	
Camcorder	
0411001401	<del>                                     </del>
	<del></del>
	<del> </del>
	<del> </del>
	<del> </del>
	1
Total	8

#### Household Inventory Record

Name	
Initial Inventory	
Revised	

Summary	Room Totals/RC
Living Room	
Family Room	
Dining Room	
Recreation Room	
Kitchen	
Bathroom	
China & Glassware	
Silver	
Linen Closets	
Men's Clothing	
Boy's Clothing	
Women's Clothing	
Girl's Clothing	
Basement, Attic, Garage	
Hobbies, Sports	
Bedroom #1	
Bedroom #2	
Bedroom #3	
Bedroom #4	
Jewelry	
Miscellaneous	
Other Rooms	
Total Contents	8

Present Personal Property Insurance Limit	S	
---	---	--

Keep this inventory in a safe place outside your home.

genealogy religious records

#### **Research Calendar**



Family			Researcher					
		T						
DATE	CALL #/ MICROFILM #	DESCRIPTION OF SOURCE	TIME PERIOD/ NAMES SEARCHED	RESULTS				
		,						

# Ancestral Chart

Chart No.

A ancestry.com

CONT. ON CHART	CONT. ON CHART	CONT. ON CHART	CONT. ON CHART	CONT. ON CHART		CONT. ON CHART	CONT. ON CHART	
BORN	PLACE MARRIED PLACE DIED PLACE		BORN PLACE DIED PLACE		BORN PLACE MARRIED	DIED PLACE		BORN PLACE DIED
No. 1 on this chart is the same person as No	On Chart No.	PLACE MARRIED PLACE DIED		BORN PLACE MARRIED PLACE DIED	PLACE	NAME OF SPOUSE  BORN PLACE	DIEU PLACE	

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http://www.ancestry.com/save/charts/ancchart.htm

Form # F120



Alancestry.com Computer #.O.# State/Country Family Unit # Date of Death/Cause Date Will Written/Proved Cause of Death Date Will Written/Proved Name of Church Name of Church County Name of Church Cause of Death Religion City State or Country Ancestral Chart #\_ Date of first marriage/Place Name of Spouse County http://www.ancestry.com/save/charts/familysheet.ntm St/Ctry. County Date \_ Relationship to Preparer Birthplace City City Other Husbands Occupation(s) Occupation(s) Other Wives Cem/Place Cem/Place Day Month Year Birth Date-Day, Month, Year Given Names Form # F106 Children Wife maiden name NOTE=Direct Ancestor Husband Christened Christened Prepared By\_\_\_ 2 10 9 2 Married = Buried Buried Sex MF Born Died Born Died Address Mother Mother Father Father

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