
LETTER OF INSTRUCTION

I recommend that you draft a written letter of instruction to guide your family and friends in handling your personal affairs. The letter of instruction is an organized way of providing your family with all the facts about your finances, including all the important details you cannot put in a will. The letter may be as important to your family as your will, especially if you are incapacitated by a serious illness or injury.

To assist you in writing your letter of instruction, I have compiled the attached form letter. The form accomplishes two main tasks:

1. It tells your family where to find all your important papers and assets, and
2. It expresses any personal desires about how to handle your affairs.

Remember, a will typically is not opened and read until some time after death. Any immediate instructions for your family, including preferences for your funeral, should therefore be included in a letter of instruction which can be opened and read immediately.

However, a letter of instruction is not a substitute for a will. Your will tells your executor how to dispose of your property. A letter of instruction helps your executor do the best possible job. In completing this letter, you will put your affairs in order.

Once you have completed this letter, make several copies. Attach one to your copy of the will. Send one copy to me (austin@wilkersonlegal.com), and one to your executor. You might also keep a copy in a desk or file drawer where your family will look first. Do not forget to update your letter of instruction if needed.

Please call me if you have questions.



R. Austin Wilkerson
austin@wilkersonlegal.com
502-442-2980
[WilkersonLegal](http://WilkersonLegal.com)

LETTER OF INSTRUCTION

My Name: _____

Revised and updated on: _____

Copies sent to:

Name

Telephone or email

Name

Telephone or email

Name

Telephone or email

First Things To Do

Call these family members/friends for help

Name

Telephone number

Name

Telephone number

Name

Telephone number

Name

Telephone number

Name

Telephone number

Name

Telephone number

Notify my employer

Name of employer

Telephone number



Make funeral arrangements

Name of funeral home

Telephone number

Request at least 10 copies of the death certificate

Usually the funeral director will get them for you.

Call my attorney

Name of attorney

Telephone number

Contact the social security office

Location of Social Security office

Telephone number

Get and process insurance policies

See insurance sections.

Notify the bank(s) which holds the home mortgage(s)

Name of bank

Telephone number

Name of bank

Telephone number

Cash in on insurance policies

See insurance sections.

Take my pets to these people

Name

Telephone number

Name

Telephone number

Notify these organizations

Organization name

Telephone number

Organization name

Telephone number

—WL—

How Much You Should Expect

From My Employer

Life insurance: \$ _____

Profit-sharing: \$ _____

Accident insurance: \$ _____

Other benefits: \$ _____

Name of contact at employer

Telephone number

From Insurance Companies

First life insurance: \$ _____

Name of insurance company

Name of insurance contact

Telephone number

• • •

Second life insurance: \$ _____

Name of insurance company

Name of insurance contact

Telephone number

• • •

Accident insurance: \$ _____

Name of insurance company

Name of insurance contact

Telephone number

• • •

Other insurance: \$ _____

Name of insurance company

Name of insurance contact

Telephone number

• • •

From Social Security

Lump sum: \$ _____

Plus monthly benefits: \$ _____

From the Veterans Administration (You Must Inform the VA)

Amount: \$ _____

Veteran number

Name of contact at Veterans Administration

Telephone number

—WL—

Location of Personal Papers

Last will: _____

Birth and baptismal certificates: _____

Communion and confirmation certificates: _____

School diplomas: _____

Marriage certificates: _____

Military records: _____

Naturalization papers: _____

_____ (adoption, etc.): _____

_____ (adoption, etc.): _____

_____ (adoption, etc.): _____

—WL—

Savings Accounts

*The bank may freeze the account when it is notified of my death.

Name of bank

Address of bank

Name on account

Account number

Location of passbook (or certificate), if applicable

Any special instructions

• • •

Name of bank

Address of bank

Name on account

Account number

Location of passbook (or certificate), if applicable

Any special instructions

• • •

Name of bank

Address of bank

Name on account

Account number

Location of passbook (or certificate), if applicable

Any special instructions

—WL—

Checking Accounts

*The bank may freeze the account when it is notified of my death.

Name of bank

Address of bank

Name on account

Account number

Location of canceled checks and statements, if applicable

Any special instructions

• • •

Name of bank

Address of bank

Name on account

Account number

Location of canceled checks and statements, if applicable

Any special instructions

• • •

Name of bank

Address of bank

Name on account

Account number

Location of canceled checks and statements, if applicable

Any special instructions

—WL—

Income Tax Returns

Location of Previous Tax Returns

Federal

State

City

—WL—

Life Insurance

*A copy of the death certificate must be sent to each company to collect benefits.

First Life Insurance Policy

Policy amount: \$ _____

Insurance company

Telephone number

Company address

Agent, if any

Email

Location of policy

Name of insured on policy

Kind of policy

Insurance policy number

Beneficiaries of life insurance policy

Issue Date

Maturity Date

Description of pay out for life insurance policy

Description of other pay out options for life insurance policy

Any special instructions



Second Life Insurance Policy

Policy amount: \$ _____

Insurance company

Telephone number

Company address

Agent, if any

Email

Location of policy

Name of insured on policy

Kind of policy

Insurance policy number

Beneficiaries of life insurance policy

Issue Date

Maturity Date

Description of pay out for life insurance policy

Description of other pay out options for life insurance policy

Any special instructions



Third Life Insurance Policy

Policy amount: \$ _____

Insurance company

Telephone number

Company address

Agent, if any

Email

Location of policy

Name of insured on policy

Kind of policy

Insurance policy number

Beneficiaries of life insurance policy

Issue date

Maturity date

Description of pay out for life insurance policy

Description of other pay out options for life insurance policy

Any special instructions

Veteran's Life Insurance Policy

Policy amount: \$ _____

Veteran number

Person to contact at Veterans Administration

Telephone number

—WL—

Other Insurance

First Other Insurance (Accident, Credit Life, Travel Club, Fraternal Benefits, etc.)

Policy amount: \$ _____

Insurance company

Telephone number

Company address

Agent, if any

Email

Location of policy

Name of insured on policy

Description of coverage

Insurance policy number

Beneficiaries of policy

Issue Date

Maturity Date

Any special instructions

• • •

Second Other Insurance

Policy amount: \$ _____

Insurance company

Telephone number

Company address

Agent, if any

Email

Location of policy

Name of insured on policy

Description of coverage

Insurance policy number

Beneficiaries of policy

Issue date

Maturity date

Any special instructions

• • •

Third Other Insurance

Policy amount: \$ _____

Insurance company

Telephone number

Company address

Agent, if any

Email

Location of policy

Name of insured on policy

Description of coverage

Insurance policy number

Beneficiaries of policy

Issue date

Maturity date

Any special instructions

• • •

Medical Insurance

Description of health insurance coverage

Insurance company

Telephone number

Company address

Agent, if any

Email

Location of policy

Name of insured on policy

Policy number

Name of employer or group

Group number

Auto Insurance

Description of car insurance coverage

Term (when to renew)

Insurance company

Telephone number

Company address

Agent, if any

Email

Location of policy

Name of insured on policy

Policy number



Home or Renter's

Description of home insurance coverage

Term (when to renew)

Insurance company

Telephone number

Company address

Agent, if any

Email

Location of policy

Name of insured on policy

Policy number

Mortgage Insurance

Description of mortgage insurance coverage

Term (when to renew)

Insurance company

Telephone number

Company address

Agent, if any

Email

Location of policy

Name of insured on policy

Policy number

—WL—

Vehicles

First Vehicle

Year, make, and model of vehicle

Body type, number of cylinders, and color of vehicle

Identification number of vehicle (VIN)

Location of papers (title, registration, warranty)

Purchase price: \$ _____

Seller

Telephone number

Seller address

Second Vehicle

Year, make, and model of vehicle

Body type, number of cylinders, and color of vehicle

Identification number of vehicle (VIN)

Location of papers (title, registration, warranty)

Purchase price: \$ _____

Seller

Telephone number

Seller address



Third Vehicle

Year, make, and model of vehicle

Body type, number of cylinders, and color of vehicle

Identification number of vehicle (VIN)

Location of papers (title, registration, warranty)

Purchase price: \$ _____

Seller

Telephone number

Seller address

—WL—

Social Security

Location of Social Security office

Telephone number

My name on Social Security card

Social Security account number

Location of Social Security card

You must apply to get Social Security benefits. Call the Social Security office for an appointment. They will tell you what to bring.

—WL—

Funeral Preferences

Choice of funeral home, if any

Telephone number

Funeral home address

Type of funeral preferred

If possible, please donate my organs: [] Yes [] No

Location of donor card

Description of other personal preferences or desires:

—WL—

Relatives and Friends to Inform

Key Family Members/Friends (Same as First Page)

Name

Telephone number

Address

Email

• • •

Name

Telephone number

Address

Email

• • •

Name

Telephone number

Address

Email

• • •

Name

Telephone number

Address

Email

• • •

Name

Telephone number

Address

Email

• • •

Name

Telephone number

Address

Email

• • •

Additional Family Members/Friends

Name

Telephone number

Address

Email

• • •

Name

Telephone number

Address

Email

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Name

Telephone number

Address

Email

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Name

Telephone number

Address

Email

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Name

Telephone number

Address

Email

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Name

Telephone number

Address

Email

—WL—

Obituary Information (4 Pages)

Newspapers to Alert

Newspaper name

Telephone number

Address

Email



Newspaper name

Telephone number

Address

Email

Personal Information (Send These Four Pages to Newspapers and Funeral Home)

My name

Date of birth

Address

Birthplace

Length at current residence

Marital Status

Date of Marriage

Spouse's name (include maiden name)

Place of marriage

Military service: [] Yes [] No

Period of military service (beginning of military service end of military service)

Military awards, if any

Occupation

Social Security Number

Father's Name

Father's birthplace

Mother's Name (include maiden name)

Mother's birthplace



School

Location

Dates

Degree

• • •

School

Location

Dates

Degree

• • •

Employment

Significant previous employment

Church

Location

Special honors/awards

Community activities

Professional memberships

Other memberships

Volunteer activities:

Send Donations to This Organization (Send These Four Pages)

Donee organization

Telephone number

Address

Email

Have mourners send donations instead of flowers: [] Yes [] No

• • •

Current Surviving Family (Parents, Siblings, and Children) (Send These Four Pages)

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

Number of grandchildren

Number of great-grandchildren

Number of great-great-grandchildren



Additional obituary information:

Add Death Information (Send These Four Pages to Newspapers and Funeral Home)

Place of death

Date of death

Cause of death

Funeral home

Telephone number

Funeral home address

Viewing location (if different from funeral home)

Viewing address (if different from funeral home)

Viewing times

Cemetery

Telephone number

Cemetery address

Cemetery Information

Cemetery Plot

Cemetery name

Cemetery address

Date of purchase of cemetery plot

Deed number

Location of deed

—WL—

Doctors' Names and Addresses

Doctors

Name

Telephone Number

Address

Specialty

Email

• • •

Name

Telephone Number

Address

Specialty

Email

• • •

Name

Telephone Number

Address

Specialty

Email

Dentist

Name

Telephone Number

Address

Specialty

Email

—WL—

Safe Deposit and PO Boxes

Safety Deposit Box

*The bank may seal the owner's box when notified of death.

Name of bank

Address

Name of owner of safe deposit box

Safe deposit box number

Location of key for safe deposit box

Description of key contents of safe deposit box

Post Office Boxes

Address

Name of owner of PO Box

PO Box number

Location of key or combination for PO Box

• • •

Address

Name of owner of PO Box

PO Box number

Location of key or combination for PO Box

—WL—

Credit Cards and Merchant Cards

Find all credit cards and merchant. Those in my name should either be canceled or converted to a new name.

Name of credit card company

Address

Name on card

Account number

Location of card

• • •

Name of credit card company

Address

Name on card

Account number

Location of card

• • •

Name of credit card company

Address

Name on card

Account number

Location of card

• • •

Name of credit card company

Address

Name on card

Account number

Location of card



Name of credit card company

Address

Name on card

Account number

Location of card



Name of credit card company

Address

Name on card

Account number

Location of card

—WL—

My House

General Information

Name(s) of owner

Address

Location of real estate documents (closing statement, title insurance, deed, etc.)

Lot number, block number, section number, etc.

Legal or other descriptions:

Mortgage

Bank holding mortgage

Telephone number

Address

Name on mortgage

Account number

Original mortgage: \$ _____

Amount owed: \$ _____

Monthly payment: \$ _____

Method of payment

Location of payment book, if any



Second Mortgage or Home Equity Line of Credit (HELOC)

Bank holding mortgage or HELOC

Telephone number

Address

Name on mortgage or HELOC

Account number

Original amount: \$ _____

Amount owed: \$ _____

Monthly payment: \$ _____

Method of payment

Location of payment book, if any

Life Insurance on Mortgage

Mortgage life insurance policy number

Location of mortgage life insurance policy

Notify bank immediately of my death; the unpaid mortgage may be automatically paid by the insurance. If you have purchased credit life insurance, the house may then be owned free and clear.

Veterans Exemption Claim, If Any

Amount: \$ _____

Location of veterans exemption claim

House Taxes

Amount: \$ _____ (est. annual real estate taxes]

Location of real estate tax receipts

—WL—

Selling the House

Costs

Improvements: \$ _____

Initial buying price: \$ _____

Closing fee on purchase: \$ _____

Other buying costs: \$ _____ (agent, attorney's fees, taxes, etc.)

Final cost of house: \$ _____ (total of all figures)

Itemized House Improvements

Description of improvement

Improvement Cost: \$ _____

• • •

Description of improvement

Improvement Cost: \$ _____

• • •

Description of improvement

Improvement Cost: \$ _____

• • •

Location of bills for improvements

Real Estate Attorney

Name of real estate attorney

Telephone number

Address

Email

—WL—

Second Home or Vacation Home

General Information on Second Home

Name(s) of owner of residence

Address of residence

Location of real estate documents (closing statement, title insurance, deed, etc.)

Lot number, block number, section number, etc.

Legal or other descriptions:

Mortgage on Second Home

Bank holding mortgage

Telephone number

Address

Name on mortgage

Account number

Original mortgage: \$ _____

Amount owed: \$ _____

Monthly payment: \$ _____

Method of payment

Location of payment book, if any

—WL—

Selling the Second Home

Costs of Second Home

Improvements: \$ _____

Initial buying price: \$ _____

Closing fee on purchase: \$ _____

Other buying costs: \$ _____ (agent, attorney's fees, taxes, etc.)

Final cost of house: \$ _____ (total of all figures)

Itemized Improvements for Second Home

Description of improvement

Improvement Cost: \$ _____

• • •

Description of improvement

Improvement Cost: \$ _____

• • •

Description of improvement

Improvement Cost: \$ _____

• • •

Location of bills for improvements

Real Estate Attorney for Second Home

Name of real estate attorney

Telephone number

Address

Email

—WL—

Leases or Other Real Estate

Location or description of lease

Amount: \$ _____ [] Annually [] Monthly

Name on lease

Account number

Lease Expiration

• • •

Location or description of lease

Amount: \$ _____ [] Annually [] Monthly

Name on lease

Account number

Lease Expiration

• • •

Location or description of lease

Amount: \$ _____ [] Annually [] Monthly

Name on lease

Account number

Lease Expiration

—WL—

Loans Other Than Mortgages

Bank holding loan

Telephone number

Address

Name on loan

Account number

Description of loan collateral, if any

Type of loan

Original amount: \$ _____

Amount owed: \$ _____

Monthly payment: \$ _____

Method of payment

• • •

Bank holding loan

Telephone number

Address

Name on loan

Account number

Description of loan collateral, if any

Type of loan

Original amount: \$ _____

Amount owed: \$ _____

Monthly payment: \$ _____

Method of payment

• • •

Bank holding loan

Telephone number

Address

Name on loan

Account number

Description of loan collateral, if any

Type of loan

Original amount: \$ _____

Amount owed: \$ _____

Monthly payment: \$ _____

Method of payment

—WL—

Investments

Broker Information

Name of broker

Telephone number

Address

Email

Name on account

Account number

Location of brokerage account statements

Accountant

Name of accountant

Telephone Number

Address

Email

Significant Investment Accounts

Account Name

Account description

Current value: \$ _____

Location of account statements

• • •

Account Name

Account description

Current value: \$ _____

Location of account statements

• • •

Significant Stock Holdings

Company

Trading symbol

Name of owner on certificate

Number of shares

Stock certificate numbers

Purchase price: \$ _____

Location of stock certificates

• • •

Company

Trading symbol

Name of owner on certificate

Number of shares

Stock certificate numbers

Purchase price: \$ _____

Location of stock certificates

• • •

Company

Trading symbol

Name of owner on certificate

Number of shares

Stock certificate numbers

Purchase price: \$ _____

Location of stock certificates

• • •

Bonds (United States Savings and Others)

Bond issuer

Name of owner on bond

Bond number

Bond amount: \$ _____

Purchase price: \$ _____

Maturity Date: _____

Location of bond

• • •

Bond issuer

Name of owner on bond

Bond number

Bond amount: \$ _____

Purchase price: \$ _____

Maturity Date: _____

Location of bond

• • •

Bond issuer

Name of owner on bond

Bond number

Bond amount: \$ _____

Purchase price: \$ _____

Maturity Date: _____

Location of bond

Other investments:

A large, empty rectangular box with a black border, intended for listing other investments.

—WL—

Warranties, Guarantees, Purchase Receipts

Description of property

Location of warranty

Location of receipt

• • •

Description of property

Location of warranty

Location of receipt

• • •

Description of property

Location of warranty

Location of receipt

• • •

Description of property

Location of warranty

Location of receipt

—WL—

Accounts and Subscriptions

Utilities

Gas company

Telephone number

Address

Email

Account number

\$ _____
Typical cost

• • •

Electric company

Telephone number

Address

Email

Account number

\$ _____
Typical cost

• • •

Water company

Telephone number

Address

Email

Account number

\$ _____
Typical cost

• • •

Telephone company

Telephone number

Address

Email

Account number

\$ _____
Typical cost

• • •

Cable company

Address

Account number

• • •

Internet company

Address

Account number

Telephone number

Email

\$

Typical cost

Telephone number

Email

\$

Typical cost

Periodicals (Newspapers and Magazines)

Publication

Account number

• • •

Publication

Account number

• • •

Publication

Account number

• • •

Publication

Account number

• • •

Telephone number

\$

Typical cost

Telephone number

\$

Typical cost

Telephone number

\$

Typical cost

Telephone number

\$

Typical cost

Publication

Telephone number

Account number

\$ _____

Typical cost

• • •

Publication

Telephone number

Account number

\$ _____

Typical cost

Other Accounts

Additional accounts or information:

—WL—

Online Passwords and Accounts

See notes on passwords and accounts at end of document. I advise against writing down your usernames and passwords in an unprotected document. Instead you should store them in an online database that encrypts your data and will provide emergency access to the people you choose.

You may add me as an emergency contact: austin@austinwilkerson.com.

Password Management

Password management software

Emergency contacts (must be set up in your password management software):

Name

Email

Name

Email

Name

Email

Location of physical password notebook (not ideal)

Special instructions for social media accounts or postings:

—WL—

Special Instructions to Executor or Other Persons

Special instructions to executor or other persons:

—WL—

A Word about Online Passwords and Accounts

Every year there are more studies revealing that the most-popular passwords are plain awful. Obvious passwords like "123456" and "password" always top the lists. Worse, many people use the same password everywhere. It doesn't take a hacker to break into an account that uses one of these terrible passwords, just a good guesser. The problem is, avoiding weak passwords is hard—too hard for most people to manage without help. Fortunately, help is available in the form of password management software.

For your own sanity and security, install a password manager and change all of your passwords so each is different, and each is long and hard to crack. Everybody needs a password manager.

The typical password manager installs as a browser plug-in to handle password capture and replay. When you log in to a secure site, it offers to save your credentials. When you return to that site, it offers to automatically fill in those credentials. And, if you've saved multiple logins for the same site, the password manager offers you multiple account login options. Most also offer a browser-toolbar menu of saved logins, so you can go straight to a saved site and log in automatically.

I use [LastPass.com](https://lastpass.com)¹ to protect my passwords and generate random passwords. LastPass is free to use on your desktop or laptop, but I pay for a premium membership (\$12/year) so I can use it on my cell phone, too. I recommend you use a service like this, too.

Other reputable password managers are:

Dashlane- <https://www.dashlane.com/>² (free on one device, \$39.99/year for all devices)

Keepass- <http://keepass.info> (free, open-source, and stored locally)

1Password- <https://agilebits.com/onepassword> (one-time fee, \$49.99 and up)

While password managers are ideal, if you prefer a low-tech method you can also write down your username, passwords, and related information in a notebook. Just keep the information stored securely and updated regularly.



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¹ If you sign up through this link with my referral id (<https://lastpass.com/f?11096136>), we both get a free month of premium LastPass service.

² If you sign up through this link with my referral id (<https://www.dashlane.com/en/cs/3be17e1>), we both get a 6 free months of premium Dashlane service.