

# **IF/WHEN Something Happens, Here's What I Want You To Know**

A Gift to Those Who Might Need This Information

by Annie Rohrbach

Professional Organizer and Estate Organizer since 1987

If found, please return immediately to:

NAME:	
<b>PHONE:</b>	
EMAIL:	

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#### INDEX OF WORKBOOK FORMS

NOTES: 1. Below is a comprehensive Index of all the forms for the Workbook, **IF/WHEN Something Happens, Here's What I Want You to Know**. Notice that there are often added descriptions to help you find specific information. These details are included because they may trigger something that hadn't occurred to you before, and remind you of other information you may want to provide.

2. Forms considered "Essential" are marked with an asterisk (\*). Forms requiring EXTRA SECURITY are marked with a double asterisk (\*\*). If they are both Essential <u>and</u> need EXTRA SECURITY, they are marked with a triple asterisk (\*\*\*).

3. Review the entire Index to get an overview of how much information you could provide, recognizing that it might seem a bit overwhelming. However, this will help you decide:

(a) Which forms you want to complete first. You might want to circle the Form Number listed at the right (in pencil), so you can find those you want to work on with a quick glance. When you complete a Form, erase that circle and put a check mark in the space at the far left.

(b) Which forms are of no importance at all right now. In pencil, you could put an "X" in the space at the far left, next to the Name or Topic, so you don't have to review or complete that form unless your circumstances change. For example, you might not have Minor Children now, but you would then want to complete Form #13 IF/WHEN you do.

4. You could also use this Index to plan or prioritize which forms to complete, one form at a time. You could even number them, according the order in which you intend to complete them. Or prioritize them in groups, such as Priority A, B, C, etc.

5. When you have completed a form, use this Index as a Check List. Place a check mark in front of that form's Name or Topic in the space provided here. And please remember to acknowledge that you have completed it. Yay!

_ALLABOUT ME	***FORM #
This form is "Essential" because it includes everything that might be needed on	a
Death Certificate. It could also be used for an Obituary and/or for other purposes	5,
including family history and genealogy. Forms #2-#6 are also very helpful.	
Health Insurance	FORM #2
Health Care Providers	FORM #
Health Care Preferences	FORM #
Current Medications & Supplements	FORM #
Miscellaneous Medical Information	FORM #
IF/WHEN you have a SPOUSE/PARTNER/SIGNIFICANT OTHER	
All About Him/Her	***FORM #
This form is "Essential" because it includes everything that might be need	ded
on a Death Certificate. It could also be used for an Obituary and/or for oth	her
purposes, including family history and genealogy.	
His/Her Health Insurance	FORM #
His/Her Health Care Providers	FORM #
His/Her Health Care Preferences	FORM #1
His/Her Current Meds & Supplements	FORM #1
His/Her Miscellaneous Medical Information	FORM #1
IF/WHEN you have MINOR CHILDREN	FORM #1
School, Care, Guardian, Carpools, Providers, Friends, Activities, Medical and	
Food Info, Schedules, Favorites (Complete a separate form for each child.)	
IF/WHEN you have PETS/LIVESTOCK	FORM #1
Description, Care, Boarding, Providers, Allergies, Crating, Chips, Commands,	
Supplies, Routines, Exercise, Food, Favorites, Tricks, Medical Info, Insurance,	
Special Instructions (Convertes a consumption for each not /h and)	

IF/WHEN you are a GUARDIAN or CONSERVATORFORM #15
IF/WHEN you have OTHER DEPENDENTSFORM #16 (including Adult Children, Grandchildren, Nieces, Nephews, etc.)
IF/WHEN you are an EXECUTOR or TRUSTEEFORM #17
IF/WHEN you want FAMILY, FRIENDS and NEIGHBORS NOTIFIEDFORM #18 First Priority, Key Callers, Phone Trees, Important Neighbors, Organizations, Others
IF/WHEN IMPORTANT PROFESSIONALS Need to be Contacted (FINANCIAL, LEGAL)FORM #19 Accountant, Agents for Health Care & Financial & Legal Matters, Attorneys, Financial & Investment Consultants (Also see Estate Professionals & Contacts, Form #20.)
IF/WHEN ESTATE PROFESSIONALS & DESIGNEES Need to be Contacted— Agents, Attorneys, Estate Executors, TrusteesFORM #20 Clergy, Officiant, Mortuary, Funeral Home, etcFORM #21 (Also see Form #19 re other Professionals.)
IF/WHEN you want an OBITUARYFORM #22 Information, Photo(s), Relatives, Education, Employment, Armed Services, Memberships, Interest, Hobbies, Achievements, Flowers/Donations, Publications, Who writes it?

IF/WHEN you have BURIAL Preferences
Body Disposition, Placement of Remains, Markers, Prepaid Arrangements, Contacts
IF/WHEN you have MEMORIAL &/or RECEPTION PreferencesFORM #23b
What, if any, kind of Service(s), Music, Readings, Participants, Flowers,
Reception details, Invitation List.
IF/WHEN you are looking for ESSENTIAL DOCUMENTS*FORM #24
NOTE: This can be very helpful in locating your important papers. It is an extensive
list of possibilities that could be important to you, that may remind you of documents
you hadn't thought of. (Also see Form #31 for OTHER IMPORTANT DOCUMENTS.)
IF/WHEN you lose your WALLET**FORM #25
Credit and Debit Cards, ID cards, Insurance, Membership Cards, Blood Donor,
Emergency Info. Non-wallet cards.
IF/WHEN information is needed about your INCOME**FORM #26
Current Income (checks &/or auto-deposits), Dividends, Rental,
Loans Due, Royalties, etc.
IF/WHEN help is needed to PAY YOUR BILLS**FORM #27
Whom would you chose? What? To Whom? How much? Where?
Debts? Tithes? Charitable Gifts? Alimony? Allowances? Bonuses?
IF/WHEN you want a summary of your ASSETS, LIABILITIES
and NET WORTH**FORM #28

IF/WHEN you have FINANCIAL ASSETS & ACCOUNTS*	***FORM #29
Bank & Investment Accounts, Stocks, Bonds, Retirement Accounts, Annuities,	
Anticipated Inheritances, Money Owed to You, Debit & Credit Card Accounts,	
Misc. (Also see Form #25.)	
IF/WHEN you have INSURANCE	FORM #30
(Also see Forms #2 and #8 for Health Insurance.)	
IF/WHEN you want OTHER IMPORTANT PAPERS in Order	FORM #31
An extensive list to help you decide what other papers are important, and perhap	OS
help you discover things you hadn't thought about, for which you might have	
special instructions.	
IF/WHEN you are EMPLOYED	FORM #32
IF/WHEN you are EMPLOYED Salary, Vacation & Sick Pay, Insurance, Savings Plans, Car Pools	FORM #32
	FORM #32
Salary, Vacation & Sick Pay, Insurance, Savings Plans, Car Pools	
Salary, Vacation & Sick Pay, Insurance, Savings Plans, Car Pools (Complete a separate form for each employer.)	
Salary, Vacation & Sick Pay, Insurance, Savings Plans, Car Pools (Complete a separate form for each employer.) IF/WHEN you have YOUR OWN BUSINESS	
<ul> <li>Salary, Vacation &amp; Sick Pay, Insurance, Savings Plans, Car Pools (<i>Complete a separate form for each employer.</i>)</li> <li>IF/WHEN you have YOUR OWN BUSINESS</li> <li>Partners, Agreements, Employees, Colleagues, Clients/Patients, Insurance,</li> </ul>	
<ul> <li>Salary, Vacation &amp; Sick Pay, Insurance, Savings Plans, Car Pools (Complete a separate form for each employer.)</li> <li>IF/WHEN you have YOUR OWN BUSINESS</li> <li>Partners, Agreements, Employees, Colleagues, Clients/Patients, Insurance, Organizations (Complete a separate form for each business.)</li> </ul>	FORM #33
<ul> <li>Salary, Vacation &amp; Sick Pay, Insurance, Savings Plans, Car Pools (<i>Complete a separate form for each employer.</i>)</li> <li>IF/WHEN you have YOUR OWN BUSINESS</li> <li>Partners, Agreements, Employees, Colleagues, Clients/Patients, Insurance, Organizations (<i>Complete a separate form for each business.</i>)</li> <li>IF/WHEN you own your PRIMARY RESIDENCE and/or</li> </ul>	FORM #33 FORM #34

IF/WHEN you own RENTAL PROPERTY	FORM #35
Address, Type, Loans, Improvements, Keys/Access, Property Manager, Tenar	nts,
Co-Owners, Realtor, etc. (Complete a separate form for each property.)	
IF/WHEN you own TIME SHARE(S)	FORM #36
Address, Reservations, Keys/Access, Other (Co-Owners, etc.)	
(Complete a separate form for each property.)	
IF/WHEN you are a TENANT, RENTING Property	FORM #37
Address, Landlord, Property Manager, Expenses, Housemates,	
Important Contacts, etc.	
IF/WHEN you OWN or LEASE VEHICLES of any kind	**FORM #38
Description, ID, Registration, Location, Keys/Access, Location of Records	
& Pink Slip, What do with it? (Complete a separate form for each.)	
IF/WHEN you have LOCKS, KEYS, COMBINATIONS	**FORM #39
This information is critical if you want those you trust to be able to access	
properties, vehicles, furniture, equipment, lockers, safes, safe deposit &	
post office boxes, etc. And what about "special hiding places!?"	
IF/WHEN you have ELECTRONICS	**FORM #40
How do those you trust access your phones, computers, tablets, answering	
devices and voicemails?	

IF/WHEN you have DIGITAL ASSETS (non-financial)**FORM #41 Email Accounts, Social Media, Other Online Accounts, Photos, Websites, Seller Accounts, also known as your "virtual life." ( <i>Also see #29 for Financial Digital Assets.</i> )
IF/WHEN you have COMMITMENTS & PLANSFORM #42 Appointments, Work, Child Care, Volunteer Meetings, Classes, Lessons, Travel Plans, Tickets for Sports and Entertainment
IF/WHEN you have PERSONAL PROPERTYFORM #43 List your most treasured Possessions, Bequests, Instructions, Special Gifts to Friends, Charities, Who oversee?
IF/WHEN you have special PHOTOS & MEMORABILIAFORM #44 Where are they now? Where do they go? Organize them?
IF/WHEN you have to EVACUATEFORM #45 Emergency, Hospital, Extended Absence, Protecting Valuables
IF/WHEN you have to move to ASSISTED LIVINGFORM #46 Highest Priorities, Furnishings? Who help?
IF/WHEN there is OTHER PERSONAL INFORMATIONFORM #47 An extensive list to help you decide what is important and what is not; what to create, ponder, find and/or destroy.

Thank you so much!

 Extra Page, IF/WHEN you want to add MORE INFO/NOTESLast Page
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 IF/WHEN you want to order copies of Annie's classic organizing book, <i>Conscious Order: Clear Your Mind, Leave Clutter Behind,</i> go to www.consciousorder.com.