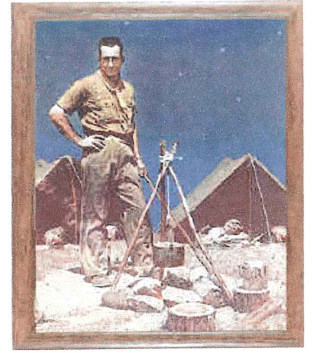
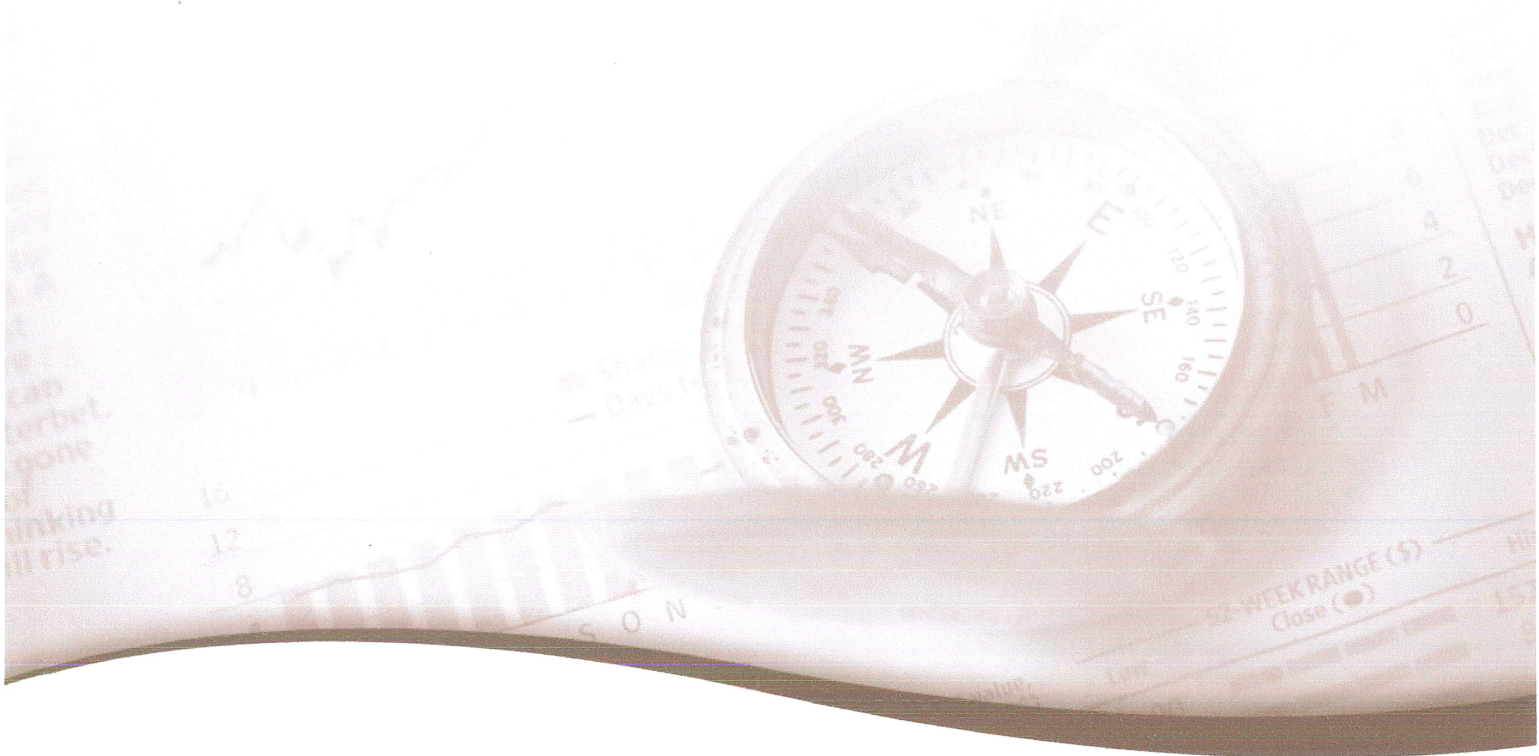




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Funeral & Burial Instructions - Documents Locator





Part A--Funeral & Burial Instructions for My Family & Friends

(When possible, complete these forms in consultation with your clergy/minster)

FINAL DIRECTIONS & INSTRUCTIONS UPON THE DEATH OF:

Name:

Address:

Birthdate: Male () Female ()

Birthplace:

Social Security #:

Business Name & Address:

INSTRUCTIONS FOR BURIAL:

PERSON RESPONSIBLE FOR CARRYING OUT ARRANGMENTS UPON MY DEATH AND WHO HAS CONSENTED TO DO SO, IS:

Name:

Address:

Work Phone: Home Phone: Cell Phone:

Email:

Relation to deceased:

Name of Funeral Home:

Address:

City, State, Zip:

Phone:

Name of Church:

Address:

City, State, Zip:

Phone:

Reception at Church: YES () NO ()





I have made arrangements to have certain parts or all of my body donated to:

I wish that the following service(s) take place:

Funeral Service at Funeral Home () Funeral Service at Church ()

Service at Disposition of Cremated Remains or at Casket Burial ()

Memorial Service at later date () Other()

I wish to have a:

Monument() Marker() Other()

and leave the following instructions:

I would like the following person(s) to speak publicly at the service(s)

I would like the following person(s) not to speak publicly at the service(s)

I have written my obituary; it may be found at:

I have not written my obituary, but include the following:

I would like to have the following Scriptures read:

Old Testament: by:

Psalm: by:

New Testament: by:

Gospel: by:

Other: by:

I would like the following hymns/songs sung by or played:

1. 3.

2. 4.





Other requests concerning the music at service:

Instead of flowers, many prefer to make a more lasting memorial. Most churches & charities have a memorial fund & a building fund. If you so desire, please indicate where you would like to have such contributions made:

I prefer **TO BE CREMATED** (check with your attorney regarding the legal ramifications of this request)

Ashes to be: Buried Columbarium Other

I prefer **NOT TO CREMATED**

Coffin specifications (circle) Least expensive Mid range Elaborate

I do / do not wish to have my coffin open at the funeral home

Suggested Pall Bearers:

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

My additional wishes or thoughts and any information for my survivors:





Spouse's Name & Address:

Birthdate/Place: _____ Living or date of death _____

Mother's Full Name & Address

Birthdate/Place: _____ Living or date of death _____

Father's Full Name & Address:

Birthdate/Place _____ Living or date of death _____

Names, addresses, and phone numbers of living brothers, sisters, and children:

1. _____

2. _____

3. _____

4. _____

5. _____

Names, addresses, and phone numbers of other persons to notify upon my death:

1. _____

2. _____

3. _____

4. _____





Armed Forces: Date of Service

Branch

Serial Number:

Discharge Certificate Located at:

Concerning the financial costs of my arrangements:

I have prepaid to:

Name:

Address & Phone:

I have set up a joint or pay-on-death account at the following institution:

Name:

Address & Phone:

Signature:

Date:





FINANCIAL INFORMATION & IMPORTANT DOCUMENTS

Bank Accounts/Savings Institution Account/Other Income Producing Accounts:

Name of Institution	Type	Account Number
1.		
2.		
3.		
4.		
5.		

Safe Deposit Box Number & Location:

Last Will Executed Date:

Life Insurance:

(a. Company; b. Amount; Type; c. Policy #; d. Beneficiary)

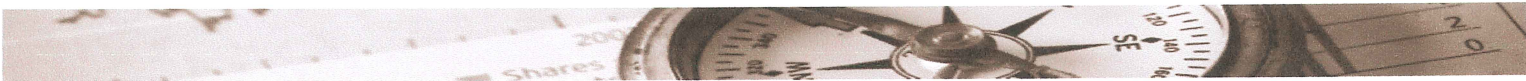
1. a.
b.
c.
d.
2. a.
b.
c.
d.
3. a.
b.
c.
d.

Credit Cards & Charge Accounts

Account #

1.
2.
3.
4.





Part B -- Personal Contacts

Attorney

Name	Firm Name
Address	City, State, ZIP
Phone Number(s)	

Tax Preparer

Name	Firm Name
Address	City, State, ZIP
Phone Number(s)	

Insurance Agent

Name	Company Name
Address	City, State, ZIP
Phone Number(s)	

Financial Advisor

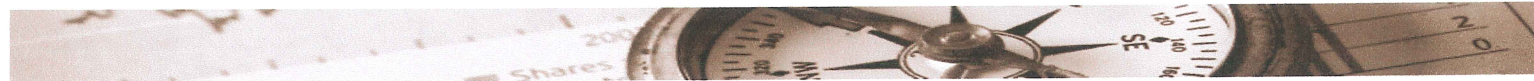
Name	Company Name
Address	City, State, ZIP
Phone Number(s)	





Part B continued -- Online Accounts		
Website Address (URL)	Username	Password
Notes		





Part C -- Location Key

Specify the location(s) where you keep your documents (e.g., home, office, safe, safe-deposit box). For each item in Part D, check the number that corresponds to the correct location.

Location 1

Location 2

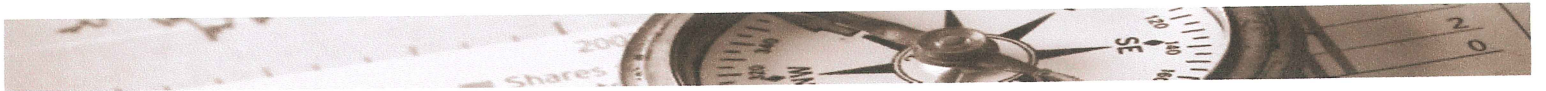
Location 3

Location 4

Location 5

Part D -- Important Documents	1	2	3	4	5
Will	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Durable Power of Attorney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health-Care Directives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trust Agreements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Birth Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Security Card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marriage Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Military Papers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adoption Papers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





Part D continued	1	2	3	4	5
Divorce/Separation Papers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle Titles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deeds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe-Deposit Box/Keys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bank Account Records (e.g., checking and savings accounts, CDs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tax Returns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mortgage and Loan Papers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insurance Policies -- Home and Vehicles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insurance Policies -- Property and Casualty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insurance Policies -- Life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insurance Policies -- Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Papers (e.g., incorporation papers, trademarks, patents)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retirement Account Papers (e.g., IRAs, annuities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Investment Papers (e.g., securities, stocks, bonds, mutual funds)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proof of Citizenship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Important Keys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Antiques and Heirlooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jewelry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Funeral Instructions (e.g., cemetery plot deed, burial instructions)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notes					



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