

SUMMARY of IMPORTANT DOCUMENTS

Notes

- (1) This (excellent) "Summary of Important Documents" was originally designed by Cmdre. W.J. (Bill) Broughton for use by his executors. It has since been completely de-personalized and it has undergone numerous structural and editorial changes. It will definitely require additional change(s) to suit YOUR needs, but, ...it's a "great" start.
- (2) This particular copy is intended for use by the Nova Scotia Naval Officers' Association. So, ... any and all suggestions that would help to make this "Summary" appropriate to the needs of our "Blue-Nose" Members will be most welcome. Please send all suggestions to the WebMaster at harley.kieran@gmail.com
- (3) Bereavement assistance is available from the Administrative Assistant of the Federal Superannuates National Association at (613) 737-2199.

Member's Full Name: S.I.N. ###-###-###
 Spouse's Full Name S.I.N. ###-###-###

XX Bank(s):
 (Location & Ph. No.)

- a. Personal Joint Chequing Account (PCA) No. #####
 - current PCA cheque book located (where)
 - spare cheque books, old cheque books and recent statements are (where)
- b. Member's Savings Account No. #####
 - purpose/use of this account
 - passbook and cheques located (where)
- c. Any line of credit Accounts:
 - purpose/use of account
 - statement and records are where

- d. Spouse's Savings Account
- purpose/use of this account
 - current cheque book is where.
 - spare cheque books, old cheque record books, statements . (where)

Safety Deposit Box (SDB):

- Member & Spouse jointly with either having access,
- Box No. ##### at XXX Bank
- keys No. ##### located (where.)
- agreement filed where

Wills & Powers of Attorney

- a. Member's Details:
- Executor is XXX XXXX and seconder is XXX XXXX
 - lawyer is XXX XXXX of XXXX & XXX,
 - Address and Phone No(s).
 - originals held by XXX XXXX and notarized copies where (where)
 - brief description of the content (intent) of each will and PofA.
- b. Spouse Details:
- Executor is XXX XXXX and seconder is XXX XXXX
 - lawyer is XXX XXXX of XXXX & XXX,
 - Address and Phone No(s).
 - originals held by XXX XXXX and notarized copies where (where)
 - brief description of the content (intent) of each will and PofA.

Life Insurance:

- a. Public Service Supplementary Death Benefit (Inquiries: Ph.) 1-(613) 995-8741
 - Who is covered
 - Details of coverage and payment
 - Files and Records (where)

- b. SISIP/CAR (Inquiries: Maritime Life Insurance Co.) 1-(800)-565-0701
 - Policy No. XXX, Member No. XXX
 - Who is covered
 - Details of coverage and payment,
 - Files and Records (where)

- c. CAA member's insurance see file (where)
 - Who is covered
 - Details of coverage and payment

- d. Other insurance – see file (where)
 - Name of Company, Agent, Contacts and Policy No(s).
 - Who is covered
 - Details of coverage and payment
 - Files and Records (where)

Health Care: (see file folder)

- Public Service Health Care Plan, No. (where)
 - Who is covered
 - Details of coverage and payment

Dental Care: (see file folder)	Public Service Health Care Plan, No.	(where)
	- Who is covered	
	- Details of coverage and payment	
Service Pension: (see file folder)	Pension No. ##### (Inquiries: Ph.)	1- (613) 952-9933
	- pension slips filed where	(where)
	- pension amount halved to Spouse on death of Member	
	- amount is indexed every January	
Canada Pension Plan:	Pension No. ##### (Inquiries: Ph.)	1-(613) 952-9933
	- see file folder	(where)
	- Who is covered	
	- Details of coverage and payment	
	- payment amount is indexed every January	
	- there is a monthly survivor amount on death of Member	(65% of total)
	- if prior death of Spouse, all reverts to Member	
Old Age Security	(Inquiries Ph.)	1-800-277-9914
	- see file folder	(where)
	- Who is covered	
	- Details of coverage and payment	
	- amounts are indexed quarterly	

Investments, or

Income generating assets:

- list each investment held jointly and separately
- where its records are held
- details of each, including, as a minimum:
 - managed by whom,
 - date of purchase,
 - up to date ACB
 - record of amount and type of return, (income)

Other Assets,

(listed for probate purposes)

- each investment held jointly and separately and where its record is held
- details of each, including as a minimum
 - managed by whom,
 - date, price and other details of purchase
 - details of insurance policies if applicable
 - date, price and other details of capital improvements since purchase,
 - and
 - details of 1994 Capital Gain Crystallization, if applicable

Income Taxes:

- past returns, and supporting documents (where)
- current charitable donations and medical receipts and other records (where)
- other documents currently being processed may be found (where)

Birth & Marriage Certificates:

- originals and notarized copies found (where)

Passports:

- Member (where)
- Spouse (where)

House(s), Condo(s), Cottage(s):

- Address and Phone No. of each,
- details of ownership - where held,
- deeds and de-registration of mortgages - (where)
- property taxes, records and how paid - file folder (where)
- routine maintenance, upkeep costs, records and supporting documentation are held, (where)
- location of all keys,
- access codes if applicable
- list of other persons having access to each.

Credit and Bank Access Cards:

- list type and details of each card held by Member and Spouse
- location of invoices and records of payment.

**Associations/Memberships
phone numbers and publication:**

- a. For Member and Spouse (Phone No.)
- b. For Member only (Phone No.)
- c. For Spouse only (Phone No.)

Subscriptions:

- Newspapers
- Magazines

Physicians and Dentists

- a. **(names, locations, contacts):**
- For both Member and Spouse,
 - For Member
 - For Spouse

Funerals and Burials

- a. **(details of locations, prepayment details, arrangements)**
- For both Member and Spouse,
 - For Member
 - For Spouse

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