

*Marion Syversen, President*



70 Main Road South | Hampden, ME 04444  
Ph 207.862.2952 | [www.NorumbegaFinancial.com](http://www.NorumbegaFinancial.com)

## Taking Control of Financial Records

### A.) FAMILY INFORMATION

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Partner's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Partner's Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Partner's Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Partner's Email: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ Partner's Social Security #: \_\_\_\_\_  
Employer: \_\_\_\_\_ Position: \_\_\_\_\_  
Human Resource Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
  
Partner's Employer: \_\_\_\_\_ Position: \_\_\_\_\_  
Human Resource Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### Children / Dependants

Names:	DOB:	SS#:
Names:	DOB:	SS#:
Names:	DOB:	SS#:

Accountant Name: \_\_\_\_\_ Number: \_\_\_\_\_  
Attorney Name: \_\_\_\_\_ Number: \_\_\_\_\_

Where are the keys to the Safety deposit box, or cash box or are there any secret hiding places?





Company Name 3:

Co. Address:

Contact Person:

Approx. Balance:

Company Name 4:

Co. Address:

Contact Person:

Approx. Balance:

Are You or Your Partner Participating in Self-Directed Plans such as IRA'S, ROTH IRA's, etc.?

(Have you checked the beneficiary to be certain this information is current?)

Institution 1:

Type:

Account #:

Approx. Balance:

Institution 2:

Type:

Account #:

Approx. Balance:

Institution 3:

Type:

Account #:

Approx. Balance:

**i. REAL ESTATE**

Do You Own Your Home?

Do You Have a Mortgage?

If so Name of Financial Institution:

Account #:

Address Where Bill Is Paid:

Interest Rate:

Fixed or Variable:

Mortgage Term remaining:

Jointly Held (Y/N):

Approx. Balance:

Approx. Value:

**Second Home**

Financial Institution:

Account #:

Address Where Bill Is Paid:

Interest Rate:

Fixed or Variable:

Mortgage Term remaining:

Jointly Held (Y/N):

Approx. Balance:

Approx. Value:

**ii. Other Real Estate**

If so Name of Financial Institution:

Account #:

Address Where Bill Is Paid:

Interest Rate:                      Fixed or Variable:                      Mortgage Term remaining:  
 Jointly Held (Y/N):                      Approx. Balance:                      Approx. Value:

**C.) ESTATE PLANNING**

**a. Will / Living Trust / Advanced Directive**

Do You Have a Will / Living Trust:                      Where is a Copy Kept?  
 Date of Last Review:                      Attorney's Name:                      Address:  
                     City:                      State:  
                     Phone Number:                      Fax:  
 Is Property Held in Trust?                      Dose It Have Power of Attorney?

Does Your Partner have a Will/Living Trust?

Do You Have a Living Will/ Advanced Directive?                      Where is it kept?

Does Your Partner Have a Will/Advanced Directive?                      Where is it kept?

**b. Life Insurance**

Agent:                      Company:  
 Type:                      Policy #:                      Death Ben.:  
 Annual premium:

**c. Disability Insurance**

Agent:                      Company:  
 Type:                      Policy #:                      Annual premium:

**d. Health Insurance**

Agent:                      Company:  
 Type:                      Policy #:                      Annual premium:

**e. Long-term Care Insurance**

Agent: \_\_\_\_\_ Company: \_\_\_\_\_  
 Type: \_\_\_\_\_ Policy #: \_\_\_\_\_ Annual premium: \_\_\_\_\_

**D.) LIABILITIES**

- a. Credit Cards (Who, Acct Number, Contact Info):
  
- b. Utilities (Who, Acct Number, Contact Info):
  
- c. Other Debt/ Loans / Liens (Who, Acct Number, Contact Info):

**E.) Funeral / Burial Arrangements**

Have You Pre-Paid Funeral Arrangement?

Name of Funeral Home: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Pre-Paid Cemetery Lot? \_\_\_\_\_ Name of Cemetery: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
 Pre-Paid Memorial? \_\_\_\_\_ Name of Monument shop: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Securities and advisory services offered through Wall Street Financial Group Inc., Registered Investment Advisor. Member NASD/ SIPC 800.836.4652 Norumbega Financial, WABI-TV 5, and Wall Street Financial Group, Inc. are separate entities and are not affiliated with each other in any way. They are separately owned and operated. This should not be construed as tax advice and you should speak with your tax advisor (or an attorney). Insurance Products (Life, Health, Disability), Estate Planning, Long-Term Care are not offered through Wall Street Financial Group Inc. Information herein is for educational purposes only and does not constitute a solicitation for a sale.