

# **A Personal Record of**

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Name

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Email

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Date

**Important information that your loved ones  
need to know in case of an emergency**

**Monmouth County, New Jersey**



**By Maureen T. Raisch, Surrogate**

**A Publication of  
The Office of the Monmouth County  
Surrogate's Court**

**Freehold, NJ 07728**

***Give this book to a responsible family member  
or tell your family where it is kept.  
Review and update your Personal Record  
at least once a year***

MONMOUTH COUNTY  
OFFICE OF THE SURROGATE

MAUREEN T. RAISCH  
SURROGATE



Dear Monmouth County Resident,

As your County Surrogate, I am responsible for the probating of wills, appointing administrators where there is no will, naming of a guardian for minors or incapacitated persons, managing the trust funds of minors and processing applications for adoptions.

I've put together this guide to provide you with an easy to follow way to organize and record your important personal information. Feel free to insert additional pages for notes or to include more details.

Once you've completed filling out your information, you will need to decide where to safely keep it. Since this information is sensitive be sure you choose a secure digital or physical location. I highly recommend that you tell a trusted loved one where this guide is located.

If there is any way that my staff or I can be of assistance to you in matters related to the work of the Surrogate's Office, please call us at (732) 431-7330, or visit our website at [visitmomouth.com/surrogate](http://visitmomouth.com/surrogate).

All my best to you,

A handwritten signature in black ink that reads "Maureen T. Raisch". The signature is written in a cursive style and is enclosed in a light blue rectangular box.

Maureen T. Raisch  
Monmouth County Surrogate



*Office of the Monmouth County Surrogate*  
*[www.visitmonmouth.com/surrogate](http://www.visitmonmouth.com/surrogate)*

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# LEGAL RESIDENCE

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Country: \_\_\_\_\_

This information is vital since the primary residency of the decedent determines the venue for probating an estate.

I own my residence:  yes  no

Title is  in my name only  
 in joint name with

Is there a mortgage on this property?  yes  no

Mortgage is held by: \_\_\_\_\_

Website: \_\_\_\_\_

Login: \_\_\_\_\_

Password: \_\_\_\_\_

Hints/ Security questions/Cell# for verification codes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I rent and my landlord is: \_\_\_\_\_

\_\_\_\_\_

My security deposit is: \$ \_\_\_\_\_

I own additional real estate: \_\_\_\_\_

\_\_\_\_\_

## LEGAL RESIDENCE CONTINUED

I have mortgage insurance with:\_\_\_\_\_

\_\_\_\_\_

Website:\_\_\_\_\_

Login: \_\_\_\_\_

Password:\_\_\_\_\_

Hints/ Security questions/Cell# for verification codes:\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This policy can be located at:\_\_\_\_\_

This policy provides that my mortgage will be paid in full upon my death.

The following papers are kept at:\_\_\_\_\_

\_\_\_\_\_

- Copy of Mortgage(s)
- Deed(s)
- Insurance Policies
- Lease(s)
- Survey(s)
- Title Insurance
- Other:

## LEGAL RESIDENCE CONTINUED

My insurance broker/phone#: \_\_\_\_\_

\_\_\_\_\_

Website: \_\_\_\_\_

Login: \_\_\_\_\_

Name: \_\_\_\_\_

Password: \_\_\_\_\_

Hints/ Security questions/Cell# for verification codes: \_\_\_\_\_

\_\_\_\_\_

List of other important papers: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



*Office of the Monmouth County Surrogate*  
*[www.visitmonmouth.com/surrogate](http://www.visitmonmouth.com/surrogate)*

## PERSONAL INFORMATION

Legal Name: \_\_\_\_\_

Birthplace: \_\_\_\_\_

Birthdate: \_\_\_\_\_

I have a birth certificate: yes no

It is kept: \_\_\_\_\_

My Social Security Number is: \_\_\_\_\_

It is kept: \_\_\_\_\_

I was married in: \_\_\_\_\_

City

State

Date: \_\_\_\_\_

Name of spouse: \_\_\_\_\_

Maiden name/spouse maiden name: \_\_\_\_\_

My marriage certificate is located: \_\_\_\_\_

I have been divorced: \_\_\_\_\_ times \_\_\_\_\_

Prior spouse(s) names: \_\_\_\_\_

\_\_\_\_\_

Date(s): \_\_\_\_\_ County of divorce: \_\_\_\_\_

Divorce papers are kept: \_\_\_\_\_

\_\_\_\_\_

# MILITARY SERVICE

Military Service:  yes  no

Branch of service: \_\_\_\_\_

Dates of Service: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Discharge papers are kept: \_\_\_\_\_

I am a veteran of the United States Armed Forces. I am entitled to the following death-related benefits: \_\_\_\_\_



# LAST WILL AND TESTAMENT

I have a will:  yes  no Dated: \_\_\_\_\_

I have a Codicil:  yes  no Dated: \_\_\_\_\_

They are kept : \_\_\_\_\_

Attorney contact: \_\_\_\_\_

Executor(s) and trustee(s) Names, Phone and Email: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Guardian(s) of my children-Names, Phone and Email: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **NOTE:**

*If you have not made a Will, it is advisable that you do so. Without a Will specifying your wishes, your estate will be distributed in accordance with the laws of Intestate Succession and the Surrogate will appoint an administrator determined by NJ State Statute.*





## POWER OF ATTORNEY

I have prepared a Power of Attorney dated: \_\_\_\_\_

I have named \_\_\_\_\_ as my primary agent

and \_\_\_\_\_ as my alternate agent

It is kept at: \_\_\_\_\_

## SAFE-DEPOSIT BOX

I have a safe deposit box:  yes  no

It is located at: \_\_\_\_\_

The key can be located at: \_\_\_\_\_

It can be opened by: \_\_\_\_\_

phone #: \_\_\_\_\_



# BANK ACCOUNTS

## Checking accounts, saving accounts & CD's

My checking accounts are at the following banks:

Bank/Company

Account#

Bank/Company

Account#

Bank/Company

Account#

Bank/Company

Account#

The following person has the power to sign checks on these accounts.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

My savings accounts are with the following banks:

Bank/Company

Account#

Bank/Company

Account#

Bank/Company

Account#

The accounts are  in my name only

jointly with: \_\_\_\_\_

# BANK ACCOUNTS CONTINUED

My checks and savings books are kept: \_\_\_\_\_

I receive bank statements online:  Yes  No

Email address: \_\_\_\_\_

Password: \_\_\_\_\_

Login: \_\_\_\_\_

Hints/security questions/cell# for verification codes: \_\_\_\_\_

CD's: \_\_\_\_\_

Bank/Company: \_\_\_\_\_ Account #: \_\_\_\_\_

Bank/Company: \_\_\_\_\_ Account #: \_\_\_\_\_

Bank/Company: \_\_\_\_\_ Account #: \_\_\_\_\_

Bank/Company: \_\_\_\_\_ Account #: \_\_\_\_\_





# INVESTMENTS

I own stocks and bonds  Yes  No

They are kept at: \_\_\_\_\_

Records of their purchase and sale will be found at: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Brokerage accounts are with: \_\_\_\_\_

\_\_\_\_\_

My Broker: \_\_\_\_\_

Website: \_\_\_\_\_

Login: \_\_\_\_\_

Password: \_\_\_\_\_

Hints/ Security questions/Cell# for verification codes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Account #'s are: \_\_\_\_\_

\_\_\_\_\_

I have a 401k/IRA with: \_\_\_\_\_

Account #'s are: \_\_\_\_\_

\_\_\_\_\_



# PERSONAL PROPERTY

My personal property is insured  Yes  No

My insurance broker: \_\_\_\_\_

\_\_\_\_\_

Includes household furnishings located at: \_\_\_\_\_

\_\_\_\_\_

Vehicles and titles: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E-Z Pass Include login/username, passwords, and accounts:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Jewelry location: \_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_

Include a list of your valuables, collections, art: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# PERSONAL PROPERTY CONTINUED

Storage Unit location: \_\_\_\_\_

\_\_\_\_\_

Unit number(s): \_\_\_\_\_

\_\_\_\_\_

Login: \_\_\_\_\_

Password: \_\_\_\_\_

Hints/ Security questions/Cell# for verification codes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# LIFE INSURANCE

Yes  No

Policy #'s: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Policies are kept at: \_\_\_\_\_

\_\_\_\_\_

Agent: \_\_\_\_\_

Beneficiary (s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Website: \_\_\_\_\_

Login: \_\_\_\_\_

Password: \_\_\_\_\_

Hints/ Security questions/Cell# for verification codes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## OTHER RELATED BENEFITS

I am/was employed by: \_\_\_\_\_

I have been/was employed there for \_\_\_\_\_ years.

As a condition of my employment I am entitled to the following death-related benefits/life insurance:

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I am a member of the following organizations: (Include name, contact, email, and related benefits):

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## TAX RETURNS

Copies of my income tax returns are kept at: \_\_\_\_\_

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My Accountant: (Include name, address, phone, and email)

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# FAMILY

**MOTHER:** \_\_\_\_\_

Phone # and email: \_\_\_\_\_

Date & Place of Birth: \_\_\_\_\_

Date of Death: \_\_\_\_\_

**FATHER:** \_\_\_\_\_

Phone # and email: \_\_\_\_\_

Date & Place of Birth: \_\_\_\_\_

Date of Death: \_\_\_\_\_

**CHILDREN**—Name, address, phone#, email, and date of birth

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**CHILDREN BY MARRIAGE** —Name, address, phone #, email, and date of birth

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**SIBLINGS**—Name, address, phone, email, and date of birth:

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# TRUSTS

Established trust- Names and beneficiaries:

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Date established:\_\_\_\_\_

Attorney:\_\_\_\_\_

Attorney Phone # and email:\_\_\_\_\_

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Trust documents are kept:\_\_\_\_\_

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Other notations or instructions:\_\_\_\_\_

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## NOTIFY

Please notify the following people in the event of an emergency

Family Contact: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

The following: \_\_\_\_\_

Doctor: \_\_\_\_\_ Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

Clergyman/Rabbi: \_\_\_\_\_ Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

Attorney: \_\_\_\_\_ Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

Executor of Estate: \_\_\_\_\_ Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

## FUNERAL INSTRUCTIONS

Instructions for my funeral and arrangements are kept or as noted below:

\_\_\_\_\_

\_\_\_\_\_

# DIGITAL CHECKLIST

Providing access to your digital accounts can help save your family or executor time.

Be sure to update this information frequently, especially the passwords. It is vital that you provide this critical information to at least one trustworthy person and/or provide them with the location of this guide. This will allow your executor/administrator the ability to transfer digital assets to your designated beneficiary(s).

Cellphone#: \_\_\_\_\_

Login/username: \_\_\_\_\_

Password: \_\_\_\_\_

Company & Account #: \_\_\_\_\_

Computers/Laptops/Tablets -personal and business  
login/username, passwords, and accounts:

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Cloud storage account: \_\_\_\_\_

Login/username: \_\_\_\_\_

Password: \_\_\_\_\_

Digital assets - virtual real estate, fashion and goods. Include  
account name, login/username, passwords, and account #'s:

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## DIGITAL CHECKLIST CONTINUED

Digital money accounts Apple Pay, Cryptocurrency, PayPal, Venmo, etc. Include login/username, password, and accounts:

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Gaming, role-play games, and/or gambling accounts. Include login/username, passwords, and accounts:

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Home security system company name and phone#: \_\_\_\_\_

Company: \_\_\_\_\_

Email: \_\_\_\_\_

Login/username: \_\_\_\_\_

Password: \_\_\_\_\_

Account #: \_\_\_\_\_

## DIGITAL CHECKLIST CONTINUED

Media storage accounts, Audiobooks, Apps, Dropbox, music, photos and video. Include login/username, passwords, and accounts:

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Rewards/Frequent flyer programs - Include login/username, passwords and accounts

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Social Media accounts - personal and business - Include login/username, passwords and accounts

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Voicemail: Include login/username, passwords and accounts

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# MONMOUTH COUNTY SURROGATE OFFICE LOCATION

## MAIN OFFICE - FREEHOLD

Hall of Records  
One East Main Street  
Freehold, NJ 07728

Phone: (732) 431-7330

Fax: (732) 303-7656

Surrogate@co.monmouth.nj.us  
visitmonmouth.com/surrogate

### Office Hours

Monday through Friday 8:30 a.m. to 4:00 p.m.

To help expedite the process, the Will, death certificate, and a Decedents Information Form, which is found on our website, can be submitted before arriving to the office. This will allow time to prepare the necessary documentation for you in advance.



**Office of the Monmouth County Surrogate  
Maureen T. Raisch**

Hall of Records  
One East Main Street  
Freehold, NJ 07728  
732-431-7330

*[www.visitmonmouth.com/surrogate](http://www.visitmonmouth.com/surrogate)  
[Surrogate@co.monmouth.nj.us](mailto:Surrogate@co.monmouth.nj.us)*



**2022**

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