FINANCIAL ACCESS CHECKLIST

Do you or your spouse handle most of your financial activities? If your spouse were not here today, would you know the passwords to your Online accounts, how to pay your bills, be able to find the deed to your house, or access the contact information for your accountant? Below is a checklist of information that should be shared with your spouse to assure you each have access to manage important financial tasks independently.

In summary, it is important to make your partner aware of all financial aspects you manage to avoid any potential issues with gaining access to an account, locating important documents, or retrieving specific information. If you have any questions, contact us or learn more about our services.

QUESTIONS? Contact us at info@lutz.us or 402.496.8800



TRUSTED ADVISOR	INFORMATION	
ACCOUNTANT	Company Name:	
	Contact Name:	
	Phone and Email:	
	Additional Information:	
	Company Name:	
LAWYER	Contact Name:	
	Phone and Email:	
	Additional Information:	
	Company Name:	
FINANCIAL ADVISOR	Contact Name:	
	Phone and Email:	
	Additional Information:	
	Company Name:	
INSURANCE AGENT	Contact Name:	
	Phone and Email:	
	Additional Information:	
	Company Name:	
BANKER	Contact Name:	
	Phone and Email:	
	Additional Information:	



TRUSTED ADVISORS

POLICY	INFORMATION	
	Vendor:	
LIFE INSURANCE	Website:	
LIFE INSURANCE	Login Credentials:	
	Additional Information:	
	Vendor:	
HEALTH INSURANCE	Website:	
	Login Credentials:	
	Additional Information:	
	Vendor:	
DISABILITY INSURANCE	Website:	
	Login Credentials:	
	Additional Information:	
	Vendor:	
CAR INSURANCE	Website:	
	Login Credentials:	
	Additional Information:	
	Vendor:	
HOME INSURANCE	Website:	
	Login Credentials:	
	Additional Information:	
	Important Information:	
OTHER INSURANCE (THEFT, FIRE, EARTHQUAKE, UMBRELLA, ETC.)		



INSURANCE POLICIES

ACCOUNT	INFORMATION	
	Company Name:	
CHECKING ACCOUNT(S)	Website:	
	Login Credentials:	
	Additional Information:	
	Company Name:	
SAVINGS ACCOUNT(S)	Website:	
	Login Credentials:	
	Additional Information:	
	Company Name:	
BANK/CREDIT UNION INFORMATION	Website:	
	Login Credentials:	
	Additional Information:	
	Company Name:	
AGREEMENT(S)	Website:	
	Login Credentials:	
	Additional Information:	
	Important Information:	
CREDIT + DEBIT CARDS		
	Important Information.	
OTHER	Important Information:	
(MONEY MARKET ACCOUNT(S), CERTIFICATES OF DEPOSIT (CDS), SAFE DEPOSIT, ETC.)		





ITEM	INFORMATION	
SOCIAL SECURITY CARD	Location:	
	Additional Information:	
BIRTH CERTIFICATE(S)	Location:	
	Additional Information:	
DEATH CERTIFICATE(S)	Location:	
	Additional Information:	
OTHER INSURANCE (ARMED FORCES DISCHARGE PAPERS, MARRIAGE CERTIFICATE(S), DIVORCE CERTIFICATE(S), PRENUPTUAL AGREEMENT(S), DIVORCE SETTLEMENT(S), ETC.)	Important Information:	



PROOF OF IDENTITY + RELATIONSHIPS

TITLE/DEED	INFORMATION	
	Vendor:	
REAL ESTATE	Website:	
	Login Credentials:	
	Important Information:	
	Vendor:	
	Website:	
MOTOR VEHICLES	Login Credentials:	
	Important Information:	
	Vendor:	
DOATO	Website:	
BOATS	Login Credentials:	
	Important Information:	
	Vendor:	
AIRPLANES	Website:	
	Login Credentials:	
	Important Information:	



ITEM	INFORMATION	
	Vendor/Location:	
TAX RETURN(S)	Website:	
	Login Credentials:	
	Additional Information:	
	Important Information:	
OTHER (W-2 FORMS, GIFT TAX RETURNS, ESTATE PLANNING DOCUMENTS, DEPRECIATION SCHEDULES, ETC.)		
	Vendor:	
401 <i>(K</i>)	Website:	
401(K)	Login Credentials:	
	Additional Information:	
OTHER (403(B) PLANS, IRAS, ROTH IRAS, SIMPLIFIED EMPLOYEE PENSION (SEP) PLANS, SALARY REDUCTION SIMPLIFIED EMPLOYEE PENSION (SARSEP) PLAN, ETC.)	Important Information:	
INVESTMENT PORTFOLIOS (STOCKS, BONDS, MUTUAL FUNDS, BROKERAGE ACCOUNTS)	Important Information:	



FINANCIAL INFORMATION

ITEM	INFORMATION	
WILL	Location:	
	Copies of Previous Versions:	
	Created by (if applicable):	
	Additional Information:	
	Vendor/Location:	
DECLARATIONS OF TRUST/	Website:	
TRUST AGREEMENTS	Login Credentials:	
	Additional Information:	
	Company Name:	
NAME OF ATTORNEY/LAW FIRM THAT HELPED CREATE TRUST	Contact Name:	
(IF APPLICABLE)	Phone and Email:	
	Additional Information:	
	Company Name:	
BANK ACCOUNT(S) ASSOCIATED WITH	Contact Name:	
THE TRUST	Phone and Email:	
	Additional Information:	
	Name of Person Appointed to Power of Attorney:	
POWER OF ATTORNEY INFORMATION	Documentation:	
	Attorney + Law Firm:	
	Additional Information:	





ITEM	INFORMATION	
	Vendor:	
ELECTRICITY	Website:	
	Login Credentials:	
	Additional Information:	
	Vendor:	
GAS	Website:	
	Login Credentials:	
	Additional Information:	
	Vendor:	
WATER	Website:	
	Login Credentials:	
	Additional Information:	
	Vendor:	
TRASH	Website:	
	Login Credentials:	
	Additional Information:	
	Vendor:	
PHONE	Website:	
	Login Credentials:	
	Additional Information:	
	Vendor:	
CABLE	Website:	
	Login Credentials:	
	Additional Information:	
	Vendor:	
INTERNET	Website:	
	Login Credentials:	
	Additional Information:	



HOUSEHOLD UTILITIES

ITEM	INFORMATION	
EMAIL + SOCIAL MEDIA (EMAIL ADDRESSES, FACEBOOK, INSTAGRAM, LINKEDIN, OTHER SOCIAL MEDIA ACCOUNTS)	Important Information:	
RECURRING PAYMENTS (ONLINE SHOPPING, STREAMING SERVICES, GROCERY, MOBILE)	Important Information:	
OTHER	Important Information:	



OTHER CONSIDERATIONS