

Record of Personal Affairs

The following is a guide to assist you in consolidating information that will be beneficial for your loved ones at the time of your passing. This information is for your personal use only and **should NOT be submitted to VA.**

Be sure to keep the following guide in a secure location, as it will contain personally identifiable information.

MY RECORD OF PERSONAL AFFAIRS

First Name	Middle Name	Last Name
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Retired Military Grade	Branch of Service	Social Security Number
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Street Address	City/State	Zip Code
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Service Number	Date of Entry	Date/Type/Character of Separation from Military
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Date and Place of Birth

City/State/Zip	Month/Day/Year
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Parent’s Information

Father’s First Name	Father’s Middle Name	Father’s Last Name
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Mother’s First Name	Mother’s Middle Name	Mother’s Last Name
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Children’s Information

Child’s First Name	Child’s Middle Name	Child’s Last Name
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Child’s First Name	Child’s Middle Name	Child’s Last Name
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Child’s First Name	Child’s Middle Name	Child’s Last Name
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Child’s First Name	Child’s Middle Name	Child’s Last Name
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Your Marital History

Spouse's Name	Spouse's Social Security Number	Spouse's Birthdate
Location of Marriage (City/State/Country)		Date of Marriage
Spouse's Prior Name (if applicable)		Date of Prior Marriage
Your Total Number of Marriages	Your Spouse's Total Number of Marriages	

Trusted Associates: List a personal lawyer or a trusted friend who may be consulted regarding your personal or business affairs.

First Name	Middle Name	Last Name
Street Address		City/State/Zip
Phone Number	Email Address	

Location of Family Records: In the open space below, to aid your family, list the physical location of important documentation and records. Documents may include birth certificates, adoption paperwork, marriage certificates, naturalization papers, divorce decrees, death certificates, tax documents, etc.

Your Will:

Do you have a will? Circle One: **YES** or **NO**

Location of Will

Executor's Name and Contact Information

Lawyer's Name and Contact Information

Power of Attorney: (Personal, not VA assigned)

Do you have a Power of Attorney? Circle One: **YES** or **NO**

Name of POA

Location of Document

City/State/Zip

Phone Number

Bank Accounts: In the open space below, list your bank accounts, including the name of the financial institution, name of joint account holders, account numbers, and phone numbers.

Credit Cards: In the open space below, list your credit cards, including the name and phone numbers.

Location of Important Financial Documents: In the open space below, list the location of important financial documents, including savings bonds, stocks, mutual funds, 401K, safe deposit box, etc.

Beneficiary Information:

Name of Beneficiary

Mailing Address

Telephone Number

Payment Option

Other Insurance: In the open space below, list any additional health, vehicle, or other insurance you have.

Annuities: Government and private.

Payable to (full name)

Monthly Amount

Street Address (include City, State, Zip)

Phone Number

Employer Benefits: If employed or retired, list any survivor benefit that may be payable.

Employer

Survivor Benefit

Address (Include City, State, Zip)

Phone Number

Membership in Organizations or Associations: List any organizations with which you are affiliated that may assist your survivors. Also list other Veteran Service Organizations which may be of assistance.

Veteran Affairs Record: Survivors should contact the VA at 1-800-827-1000 to report a death and to discontinue benefits.

VA Claim Number (if applicable)

Social Security: Survivors should contact their local Social Security Administration office to see if burial benefits are available.

Social Security Monthly Payment	Location of Social Security Administration Papers
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Retirement Pay: Civilian and/or Military

Finance Center	Current Deposit Location
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Beneficiary or Any Unpaid Retired Pay	Relationship	Phone Number
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Military Documents:

Location of DD-214 (Separation Papers)
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Location of Other Military Documents (Awards, Medical, etc.)
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Military Survivor/Casualty Assistance Officer: Active and retired military personnel.

Name and Location	Phone Number
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Funeral and Burial Arrangements:

Funeral Location	Funeral Director
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Address	Phone Number
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Church, Clergy or Desired Officiant:

Clergyperson/Officiant Name	Office and/or Home Phone
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Name of Institution/Organization	Address of Institution/Organization
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For Those Who Wish to be Interred in a VA National Cemetery:

Date of Birth	Social Security Number	Rank/Branch of Service
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Date of Entry into Service	Date of Separation	Service Number
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Have you applied for pre-need Eligibility? Visit www.cem.va.gov to learn more.

Other Suggestions and Wishes: List in the space below.

Wishes for Burial and Funeral Service Arrangements:

Name of Resting Place	Phone Number
Hymns, Psalms, Scriptures, Poetry, or Special Requests	
Flowers/ Memorial (in lieu of flowers)	
Memorial and Remembrances	Indicate Emblem of Choice for VA Form 40-1330

Do you have a pre-paid burial/plot? Circle One: YES or NO

Pallbearers: List pallbearers in the space below.

Special Instructions: List any additional instructions in the space below.

Obituary Biography: Write in the space below.

Completing VA Forms

Applying for any VA benefit requires that you complete an application form, and possibly additional forms. To ensure speedy and accurate processing of any claim for VA benefits, it is very important to complete these forms correctly. The following pages contain sample copies of some VA forms previously mentioned in this document; you can reference these samples to see what a properly completed form may look like.

Tips on Completing VA Forms:

- Complete **every item** on the form, even if your answer is “not applicable”, “none”, or “0”. Incomplete applications are one of the major avoidable causes of denials and delays in processing.
- The person claiming benefits (the “claimant”; for instance, the surviving spouse claiming death pension) **must sign the form themselves**. VA cannot recognize private power-of-attorney agreements, and family members cannot sign documents for other family members.
- VA Forms are periodically updated. Current VA forms can be obtained at www.va.gov/vaforms or at your local Veterans service office.
- Visit www.benefits.va.gov/INSURANCE/resources-forms.asp to obtain forms related to life insurance claims.