

Session 1

Tab 1 - Personal Information

- Primary Contacts
- My Information
- Spouse/Partner Information
- Child(ren)/Individual(s) Living in the Home
- Child(ren) and Sibling(s)
- Other Close Relative(s)
- Others Who Rely on Me

Tab 2 – Legal Information & Documents

- Birth Certificate
- Social Security
- Driver's License
- Marriage Certificate
- Divorce/Annulment/Legal Separation Papers
- Were you a Veteran?
- Passport
- Naturalization/Citizenship Documents
- Guardianship/Custody Documents

Tab 3 - Personal Contacts

- Professional Team
- Medical Providers
- Church
- Employer
- Additional Contacts

Session 1 – Continued

Tab 4 - Medical

- Personal Medical Information & History
- Significant Family Medical History
- Medical Information & Insurance
- Dental Information & Insurance
- Disability Insurance
- Long Term Care Insurance
- Prescription(s) & Insurance
- Healthcare Documents & DNR in Grab and Go Binder
- Veteran Benefits

Workshop

BINDER FOR LIFE

Personal & Financial Organizer

Facilitators: Judith Pirker & Dorinda Emerson

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TAB 1 - Personal Information

■ Primary Contacts

- Who to contact in an emergency; spouse/partner, sibling, child
- Give the phone number(s), address, email

■ My Information

- Names you have had, reason for change and date
- Nicknames

■ Spouse/Partner Information

- Full name, address and phone number(s) and email

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TAB 1 - Personal Information (continued)

■ Child(ren)/Individual(s) Living in the Home

- Full names, address, phone number(s) and email

■ Children and Sibling(s)

- Relationship and contact info

■ Other Close Relatives

- Parents, grandparents
- Nieces, nephews, grandchildren

■ Others Who Rely on Me

- Elderly parent(s), elderly sibling(s), assisted living child(ren) or adults

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TAB 2 - Legal Information & Documents

- **Birth Certificate**
 - Date and birth location
- **Social Security**
 - Number and location of card
- **Driver's License**
- **Marriage Certificate**
 - May have more than one
 - Marriage agreements (pre-post nuptial)
- **Divorce/Annulment/Separation Papers**
 - May have more than one

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TAB 2 - Legal Information & Documents (continued)

- **Were you a Veteran?**
 - Discharge papers
 - Veteran benefits; awards, flag, funeral, head/foot stones, death benefits
- **Passport**
- **Naturalization/Citizenship Documents**
- **Guardianship/Custody Documents**

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TAB 3 - Personal Contacts

- **Professional Team**
 - CPA, tax preparer, attorney, financial advisor, other advisors
- **Medical Providers**
 - Doctors, specialists, dentist, pharmacy
- **Church**
 - Pastors, congregational care, small group
- **Employer**
 - Supervisor, company human resources department
- **Additional Contacts**
 - Property manager, assisted living, neighbor, housekeeper, lawn care, etc.

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TAB 4 - Medical Information

■ Personal Medical Information & History

- Allergies
- Vaccinations/Immunizations card with dates
- Diseases/illnesses you experienced and approximate dates
- Contacts, glasses, dentures, pacemaker, hearing aid
- Replacement parts

■ Significant Family Medical History

- Diseases/illnesses or health issues my relatives have experienced

■ Medical Information & Insurance

- Medicare, Medicaid, and Supplemental Insurance

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TAB 4 - Medical Information (continued)

■ Dental Information & Insurance

■ Disability Insurance

■ Long-Term Care Insurance

■ Prescription(s) & Insurance/Rx Drug Card

■ Health Care Documents & DNR in Grab and Go Binder

■ Veteran Benefits

- Insurance
- Disability benefits

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