



# Personal Record Book

Simplifying Your Life

Public  Trustee  
Every moment counts

## Personal Record Book: Simplifying Your Life

Important information is often difficult to find, particularly when it is needed urgently. Therefore, it is important that you keep clear documented records of your personal details and finances. This Personal Record Book will act as an important information source for loved ones, if for some reason you are unable to attend to your own affairs.

### How to Use Your Book

- 1. Fill it Out:** Complete the booklet as thoroughly as possible. Use PDF software on a computer or a pen on a printed copy. Skip sections that don't apply to you and use the Notes section at the end if you need more space.
- 2. Protect Your Information:** Do not record passwords in the booklet.
- 3. Store Safely:** Once completed, store the booklet in a secure but accessible place. Tell at least two trusted people where it is.

### Keep Records Up-to-Date

Keep your personal details and finances well-documented in this book for your loved ones. It is also important that all your estate planning documents are up-to-date and that this information is included in your Personal Record Book.

### For More Information

For more information on a Will and estate planning documents or to get additional copies of the Personal Record Book, visit our offices or download a copy from [publictrustee.tas.gov.au](http://publictrustee.tas.gov.au) or scan the QR code.



## Are you an Executor?

Being an executor of a Will can be complicated and time-consuming. Many people choose a friend or relative to show respect, but handling a loved one's estate can be very stressful, especially during a time of grief.

If you have been named an executor, remember you are not legally required to accept this role. It might not be the right fit for you, and the person who chose you likely didn't want to cause you stress. If you prefer not to act as executor, you can transfer the responsibility to a professional, like the Public Trustee.

Once someone has received a grant of probate, they usually can't renounce the role. Our team of estate managers, accountants, and solicitors are experts in estate administration and can handle any issues that arise.

## Are you an Attorney?

Even though you agreed to take on this responsibility many people underestimate the time and the tasks that will be required.

You can renounce your role to the Public Trustee.

# My Personal Information

If you need more space to provide any of the information, use the notes page at the back of the booklet. It's okay if you can't finish the booklet all at once and need to look up some information. Take your time to get it right.

Date this booklet was completed: \_\_\_\_\_

Full name: \_\_\_\_\_

Any previous name(s): \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

## Medical information

Medical conditions, allergies or therapies: \_\_\_\_\_

Current medications and where they're kept: \_\_\_\_\_

Medicare No.: \_\_\_\_\_

## Health insurance

Name of health insurance company: \_\_\_\_\_

Private health insurance No.: \_\_\_\_\_

## Religion

Religion: \_\_\_\_\_

Place of worship: \_\_\_\_\_

## Nationality

By birth: \_\_\_\_\_

By naturalisation: \_\_\_\_\_

Date of naturalisation: \_\_\_\_\_

Resident in Australia since: \_\_\_\_\_

## Emergency Contacts

In the event of an accident, illness or death, please notify the following person(s) immediately

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

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

Phone: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

## My Spouse or Partner

Relationship status:	Single	Married	De facto
	Widowed	Divorced	Separated
	Other: _____		

Spouse or partner's full name: \_\_\_\_\_

Any previous names: \_\_\_\_\_

Address (if different from yours): \_\_\_\_\_  
\_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Date of marriage: \_\_\_\_\_ Place of marriage: \_\_\_\_\_

Date of divorce or separation: \_\_\_\_\_ Date of death: \_\_\_\_\_

## Details of previous marriage(s)

Full name: \_\_\_\_\_

Any previous names: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Date of divorce: \_\_\_\_\_ Date of death: \_\_\_\_\_

# My Children

1. Full name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Date of birth: \_\_\_\_\_

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

Place of birth: \_\_\_\_\_ Date of death: \_\_\_\_\_

\_\_\_\_\_

2. Full name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Date of birth: \_\_\_\_\_

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

Place of birth: \_\_\_\_\_ Date of death: \_\_\_\_\_

\_\_\_\_\_

3. Full name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Date of birth: \_\_\_\_\_

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

Place of birth: \_\_\_\_\_ Date of death: \_\_\_\_\_

\_\_\_\_\_

4. Full name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Date of birth: \_\_\_\_\_

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

Place of birth: \_\_\_\_\_ Date of death: \_\_\_\_\_

\_\_\_\_\_

# Other Family Members or Close Friends

1. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Phone and/or Email: \_\_\_\_\_

2. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Phone and/or Email: \_\_\_\_\_

3. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Phone and/or Email: \_\_\_\_\_

4. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Phone and/or Email: \_\_\_\_\_

5. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Phone and/or Email: \_\_\_\_\_

# Other Contacts

## Employer

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

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

Contact person: \_\_\_\_\_

Phone: \_\_\_\_\_

## Professional services

Name of family doctor: \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

Name of Accountant: \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

Name of Financial adviser: \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

Name of Stockbroker: \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

Name of Solicitor: \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

Name of landlord or real estate agent: \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

Name of Aged care or home help service: \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

Name of other services : \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

# Membership of Clubs and Organisations and Significant Public Offices Held

Include things like clubs, committees, unions, churches, cultural groups, classes or hobby groups you are involved with.

1. Organisation name: \_\_\_\_\_

Contact person: \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

2. Organisation name: \_\_\_\_\_

Contact person: \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

3. Organisation name: \_\_\_\_\_

Contact person: \_\_\_\_\_

Phone and/or email: \_\_\_\_\_

## Your Estate Documents

Planning ahead now by creating an Enduring Power of Attorney, Enduring Guardianship, Advance Care Directive, and a Will is crucial for your future wellbeing and security.

These plans ensure your wishes are known and provide peace of mind for you and your loved ones. Without them, a court or tribunal might appoint someone to make decisions for you.

Taking these steps now lets you maintain control over your life choices and estate, no matter what the future holds.

For more information about planning ahead go to the Public Trustee website [publictrustee.tas.gov.au](http://publictrustee.tas.gov.au) or scan the QR code





# Documents I Have Prepared

## Will

Have you made a Will?                      Yes                      No

Date of last Will: \_\_\_\_\_

Name of executor(s): \_\_\_\_\_

Relationship: \_\_\_\_\_

Address(es): \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Where is the original copy of my current Will lodged?: \_\_\_\_\_

## Enduring Power of Attorney

Have you made an Enduring Power of Attorney?                      Yes                      No

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

Name of Attorney: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_

Is your Enduring Power of Attorney registered?                      Yes                      No

Where is the original copy of my current Enduring Power of Attorney?: \_\_\_\_\_

\_\_\_\_\_

## Enduring Guardianship

Have you made an Enduring Guardianship?                      Yes                      No

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

Name of guardian: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Is your Enduring Guardianship registered?                      Yes                      No

## Advance Care Directive

Have you made an Advance Care Directive?                      Yes                      No

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

Where is the original copy of my current Advance Care Directive?:  
\_\_\_\_\_

## Other Decision-making Documents

Have you made any other record of your preferences and wishes for personal, medical, financial or any other type of decisions?                      Yes                      No

If Yes, write here what documents you have made:  
\_\_\_\_\_

Where are the original copies of these documents located?:  
\_\_\_\_\_

## Funeral Wishes

Have you prepaid and/or made any funeral arrangements?                      Yes                      No

Name of Funeral Company: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Would you like to have:      Flowers                      No Flowers

Donations in lieu of flowers to: \_\_\_\_\_

Service to be held at:      Church                      Parlour                      Home                      Other

Funeral service to be given by: \_\_\_\_\_

Type of service required: \_\_\_\_\_

Do you have a preference for:      Burial                      Cremation

Preferred resting place: \_\_\_\_\_

## Organ Donation

Yes                      No

(Arrangements must be made with appropriate institution prior to death)

Details: \_\_\_\_\_

# My Estate

To protect your information, only write down identification numbers (like your tax file number, membership numbers, and Centrelink number) in this section if you have a secure place to keep your booklet.

## Home

Is your property owned:

Solely      Jointly      Tenants in common

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

Tenants in common with: \_\_\_\_\_

Mortgage details (if applicable): \_\_\_\_\_

Building & contents insured with: \_\_\_\_\_

## Vehicles

Details: \_\_\_\_\_

\_\_\_\_\_

Loans owing to: \_\_\_\_\_

Insurance details: \_\_\_\_\_

\_\_\_\_\_

## Significant Possessions

Details: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tax File No. : \_\_\_\_\_

## Bank/Credit Union/Building Society Accounts

1. Name and branch of institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account No.: \_\_\_\_\_

2. Name and branch of institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account No.: \_\_\_\_\_

3. Name and branch of institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account No.: \_\_\_\_\_

## Superannuation

Name and address of fund: \_\_\_\_\_

Member No.: \_\_\_\_\_

## Investments

Fund, company or organisation: \_\_\_\_\_

Contact person: \_\_\_\_\_

Account, customer or reference No.: \_\_\_\_\_

## Life Insurance

Name and address of company: \_\_\_\_\_

Life insured: \_\_\_\_\_

Policy No.: \_\_\_\_\_

## Insurance Policies on:

Real estate: \_\_\_\_\_

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

## Pension

Centrelink No.: \_\_\_\_\_

Veterans Affairs pension No: \_\_\_\_\_

Overseas pension No: \_\_\_\_\_

Military Service No: \_\_\_\_\_

## Loans and Liabilities

Name of creditor: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Loan details or customer reference No.: \_\_\_\_\_

## Location of Important Documents

State the location of where the following documents can be found.

Birth certificate:

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Marriage certificate:

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Cheque book:

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Passport:

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Bank statements:

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Securities, share certificates, bonds etc:

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Personal Insurance Policies:

---

Superannuation papers:

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Cemetery or cremation deed:

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The deed for your home:

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Other pieces of real estate:

---

Safe custody packet:

---

Military service record and discharge certificate:

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Pensioner Card (Centrelink/DVA):

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Any other documents (specify):

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## Digital Wishes

For each digital account you have you may want to specify how you'd like your executor to handle that account. While your wishes may conflict with some companies' terms of service it's still valuable for your executor to know what your wishes are for your social media and email accounts etc.

## Digital Asset Inventory

If you have made a list of digital assets you own (laptop, tablet etc) please provide the location of that document or list below. Make sure this document is secure especially if you have included your passwords and other digital asset access information.

List digital assets here as well as the name of any online storage companies you may have used:

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**Email:** [tpt@publictrustee.tas.gov.au](mailto:tpt@publictrustee.tas.gov.au) **Fax:** (03) 6235 5255

GPO Box 1565 Hobart TAS 7001