Public Trustee

Personal Record Book

Personal record book

This book helps you keep important information in one place.

You can record details about:

- your personal information
- your loved ones
- your finances
- your important documents and wishes

Keeping this information up to date can make things easier for your loved ones if they need to help you in the future.

How to Use Your Book

1. Complete the book

Fill in as much information as you can.

You can complete the book on a computer or print it and write in it.

Skip any sections that do not apply to you, and you can use the notes pages if you need more space.

2. Protect your information

Do not write passwords in this book.

3. Keep it in a safe place

Store the book in a safe place. Tell at least two people you trust where it is kept.

Scan or click the QR code to learn more about Wills and estate planning, or to download a copy of the Personal Record Book

Disclaimer - *This information is general information and should not be considered personal legal advice.*

Keep your records up to date

Keep your personal information, financial details and important documents up to date in this book. This can make things easier for your loved ones and the people helping you if something happens to you.

It is also a good idea to review your estate planning documents regularly and record the details in this book.

Are you an executor or attorney?

You may have been asked to be an executor or attorney for someone.

An **executor** carries out the instructions in a person's Will after they pass away.

An **attorney** makes financial decisions for a person under an Enduring Power of Attorney.

Both roles are important and can involve managing paperwork, finances and other responsibilities.

Before accepting either role, make sure you understand what is involved and feel comfortable taking on the responsibility.

If you need support or more information about being an executor or attorney, the Public Trustee can help.

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

Write down people who should be contacted if you are unwell or if something happens to you.

Name: **Relationship:**

Address:

Phone:

Name: **Relationship:**

Address:

Phone:

Name: **Relationship:**

Address:

Phone:

My spouse or partner

Relationship status: ☐ Single ☐ Married ☐ De facto ☐ Widowed ☐ Divorced ☐ Separated

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:

Date of divorce: **Date of death:**

2. Full name:

Address:

Phone: **Date of birth:**

Email:

Date of divorce: **Date of death:**

3. Full name:

Address:

Phone: **Date of birth:**

Email:

Date of divorce: **Date of death:**

4. Full name:

Address:

Phone: **Date of birth:**

Email:

Date of divorce: **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:

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:

Memberships

Clubs, 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 can help make sure your wishes are known and respected.

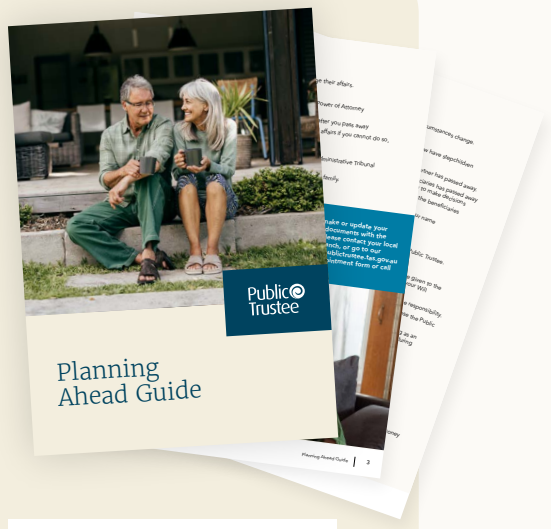
You may choose to prepare:

- a Will
- an Enduring Power of Attorney
- an Enduring Guardianship
- an Advance Care Directive

These documents can help the people you trust support you if you cannot make decisions for yourself.

They can also make things easier for your family and loved ones in the future.

For more information about planning ahead, visit 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(es):

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

Only write down identification numbers and details, if you can keep this book in a safe place.

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:

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.:**

2. 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:

Marriage certificate:

Cheque book:

Passport:

Bank statements:

Securities, share certificates,bonds etc:

Personal Insurance Policies:

Superannuation papers:

Cemetery or cremation deed:

The deed for your home:

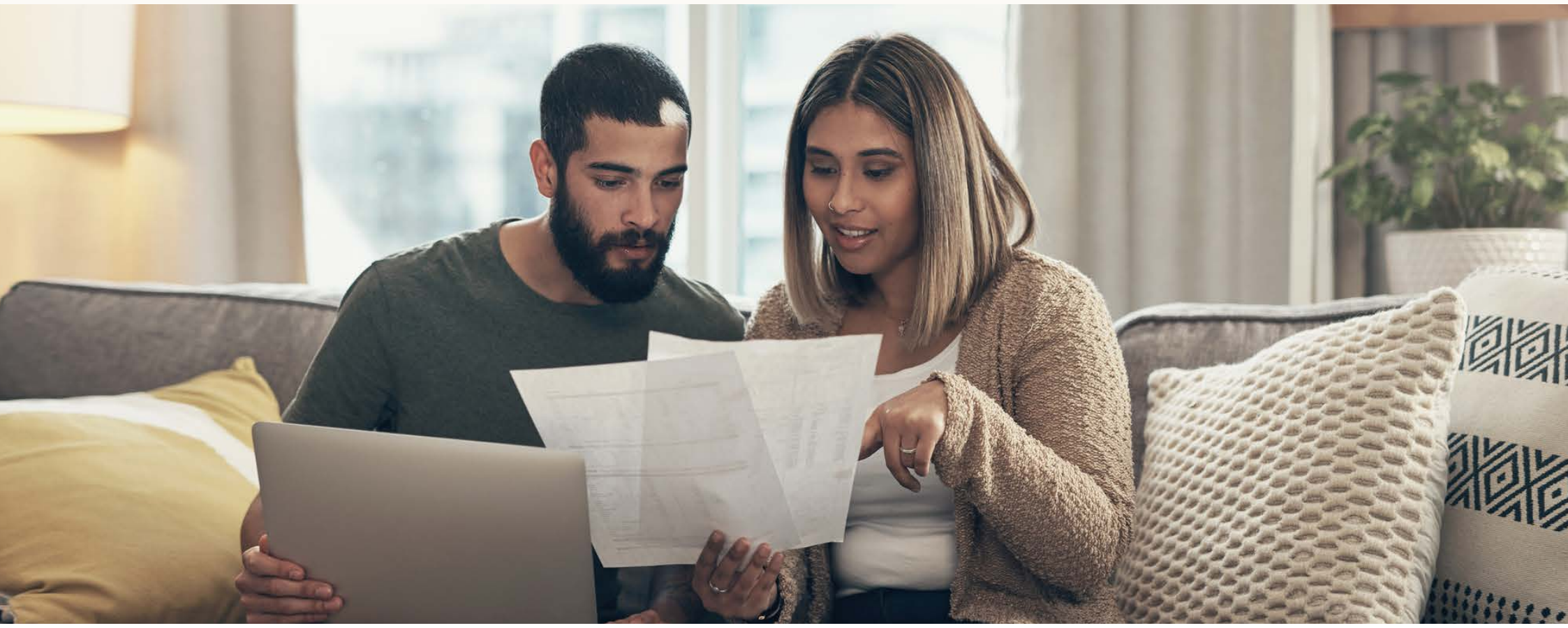
Other pieces of real estate:

Safe custody packet:

Military service record and discharge certificate:

Pensioner Card (Centrelink/DVA):

Any other documents (specify):



Digital wishes

Your digital accounts may include email accounts, social media accounts, online subscriptions, cloud storage services etc.

Use this section to record what you would like to happen to these accounts in the future.

This can help your executor or loved ones understand your wishes.

Digital asset inventory

Use this section to record your digital devices and online services. Examples include Computers, laptops, tablets, mobile phones online storage services, etc.

If you keep a separate list of digital assets, write down where it is stored. Keep any records with passwords or account details in a safe place.

My digital assets

List your digital assets and any online storage services you use.

Notes

Notes

Notes

Notes

Public Trustee

Call us on 1800 068 784

Email us at tpt@publictrustee.tas.gov.au

Visit us at publictrustee.tas.gov.au

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September 2026