



**A SULLIVAN COUNTY
PARTNERSHIP OF SENIOR CITIZENS,
LAW ENFORCEMENT AND
SENIOR ADVOCATES**

LIFE FILE

**A SUMMARY RECORD OF
INFORMATION ON
FINANCES,
INVESTMENTS, LEGAL
DOCUMENTS, ESTATE
RECORDS, AND
EMERGENCY CONTACTS.**

**IT IS INTENDED TO
PROVIDE YOUR
SURVIVORS, ONE
CENTRAL PLACE FOR
VITAL INFORMATION
NEEDED UPON
YOUR DEATH.**

*LIFE FILES ARE NOT INTENDED TO REPLACE PROPER LEGAL
DOCUMENTATION, NOR IS IT INTENDED TO HOLD ALL
YOUR IMPORTANT PAPERS.*

*MAKE SURE YOUR SURVIVORS
(AND THOSE THAT WILL NEED TO KNOW YOUR WISHES)
ARE AWARE OF THIS FILE AND ITS LOCATION.*

CONCERNING THE ESTATE OF:

DATE: _____

Made possible through the generosity of
NYS Senator John Bonacic
Sullivan County United Way
Cornell Cooperative Extension of Sullivan County
Community Empowerment for Aging in the Community

CHECKLIST FOR LOOKING AHEAD

(For you and your survivors to review to be sure everything is in order)

INITIAL ARRANGEMENTS AND DECISIONS

- Which Funeral Director
- What burial Location
- Type of Memorial Service
- Casket, Vault, Crypt, Cremation
- Which Clergy for Ceremony
- Time and Place for Services
- Clothing for Deceased
- Time of Funeral Services
- Music and Flowers
- Information for the Eulogy
- Pallbearers
- Transportation for Family
- Newspaper Notification
- Check Will for Special Requests
- Order Death Certificates
- Compile a Thank-you list
- Greet all Friends and Relatives
- Special Selection from Scripture
- Provide Lodging for Relatives
- Food for Gathering

NOTIFICATIONS

- Doctor or Doctors
- Funeral Director
- Cemetery
- Relatives and Friends
- Employer (Union/Pension/Benefits)
- Newspaper Notices
- Pall Bearers
- Attorney
- Accountant or Executor of Estate
- Insurance Agents (home, auto, life)
- Veteran's Organizations
- Civic Groups
- Medicare/Medicaid
- Clergy

SECURE VITAL STATISTICS

- Name, Home Address and Zip
- Phone Number
- Occupation and Title
- How Long in State
- Social Security Number
- Date of Birth
- Place of Birth
- War Veteran's Serial Number
- Father's Name
- Father's Birthplace
- Mother's Maiden Name
- Mother's Birthplace

COLLECT DOCUMENTS

- Will
- Birth Certificate/Legal Proof of Age
- Social Security Card
- Marriage License/Divorce Decree
- Citizenship Papers
- Insurance Policies
- Bank Books
- Deeds to Property
- Title of Vehicles
- Income Tax Returns
- Disability Claims
- Veteran's Discharge Papers

FINANCIAL OBLIGATIONS

- Funeral Director
- Memorials
- Florist and Clergy
- Hospital and Ambulance
- Donations
- Doctor's, Nurses
- Medicine and Drugs
- Other Current and Urgent Bills
- (mortgage, rent, taxes, etc.)

Use additional paper if needed for anything covered in this Life File ~ detail as much as possible.

PERSON #1 INFORMATION:

Full Name: _____

Residence Address: _____

Birth Date: ____/____/____ Birth Place: _____

Social Security #: _____

Name of Spouse: _____ Date of Marriage: _____

Place of Marriage: _____ Location of Marriage Certificate: _____

Name and Birthplace of Father: _____

Name and Birthplace of Mother: _____

Are you a Veteran?: _____

Yes or No

Branch of Services

Veterans Number

Name of War or Dates Served: _____

Where is your discharge certificate?: _____

Are you eligible for military benefits?: _____

PERSON #2 INFORMATION:

Full name: _____

Residence Address: _____

Birth Date: ____/____/____ Birth Place: _____

Social Security #: _____

Name of Spouse: _____ Date of Marriage: _____

Place of Marriage: _____ Location of Marriage Certificate: _____

Name and Birthplace of Father: _____

Name and Birthplace of Mother: _____

Are you a Veteran?: _____

Yes or No

Branch of Services

Veterans Number

Name of War or Dates Served: _____

Where is your discharge certificate?: _____

Are you eligible for military benefits?: _____

Who is the executor of your estate? _____

Are you on Medicare or Medicaid?

PERSON #1

Medicare number ~ _____

Medicaid number ~ _____

Your case number?: _____

Your case worker?: _____

PERSON #2

Medicare number ~ _____

Medicaid number ~ _____

Your case number?: _____

Your case worker?: _____

CHILDREN: *NAME* *ADDRESS* *PHONE NUMBER*

ADDITIONAL INDIVIDUALS YOU WISH TO BE CONTACTED: _____

ADVISORS:

Doctor: _____

Lawyer: _____

Accountant: _____

Banker: _____

Financial: _____

Stock Broker: _____

Clergy: _____

ELDER ABUSE INFORMATION: Elder abuse is any knowing, intended, or careless act that causes harm or serious risk of harm to an older person— physically, mentally, emotionally, or financially.

1. **Physical abuse** Use of force to threaten or physically injure a vulnerable elder.
2. **Emotional abuse** Verbal attacks, threats, rejection, isolation, or belittling acts that cause or could cause mental anguish, pain, or distress to an elder.
3. **Sexual abuse** Sexual contact that is forced, tricked, threatened, or otherwise coerced upon another person, including anyone who is unable to grant consent.
4. **Exploitation** Theft, fraud, misuse or neglect of authority, and use of undue influence as a lever to gain control over an older person's money or property.
5. **Neglect** A caregiver's failure or refusal to provide for a vulnerable elder's safety, physical, or emotional needs.
6. **Abandonment** Desertion of a frail or vulnerable elder by anyone with a duty of care.
7. **Self-neglect** An inability to understand the consequences of one's own actions or inaction, which leads to, or may lead to, harm or endangerment.

What should I do if I suspect elder abuse?

You should call police or adult protective services right away if you suspect that an elder is being abused, neglected, or exploited. You do not need to prove abuse in order to make a report.

To report suspected elder abuse, neglect, or exploitation in New York:

- In Sullivan County: Office for the Aging (807-0241) or Adult Protective Services (292-0100)
- 1-800-342-3009 - select option #6 (For suspected elder mistreatment in the home).
- 1-888-201-4563 (For suspected elder mistreatment in nursing home facilities).
- 1-866-893-6772 (For complaints concerning assisted living facilities).
- 1-800-628-5972 (For complaints concerning home care).

Other pertinent information: *complete what is applicable to you and state where the documents are.*
When appropriate—use additional paper & insert it into this packet if necessary.

Durable Power of Attorney: _____

Health Care Proxy: _____

Living Will or Advance Directives: _____

Where is your Will?: _____

Where is your birth certificate?: _____

Where is your check book/bank book (s)?: _____

Are you an organ donor? _____ If so, where is that stated? _____
Yes or No

Do you have funeral arrangements? _____ If so, with whom: _____
Yes or No

Do you have a cemetery lot? _____ If so, where: _____

If you have neither funeral arrangements or a cemetery lot, do you have any preference? _____

A few thoughts on Estate Planning Documents:

Make the tough decisions now. Don't leave these difficult decisions up to your grieving family. Here are very brief descriptions on Durable Power of Attorney, Health Care Proxy, Living Wills, Living Trusts and DNR's. You are encouraged to consult an attorney to assist you in fully understanding and/or completing these documents.

Durable Power of Attorney: Power of Attorney is a legal instrument that is used to delegate legal authority to another. The person who signs a Power of Attorney is called the Principal. The Power of Attorney gives legal authority to another person called an Agent or Attorney-in Fact to make property, financial and other legal decisions for the Principal.

Health Care Proxy: lets you appoint a healthcare agent, that is, someone you trust to make health care decisions for you if you are unable to make decisions for yourself.

Living Will: allows you to leave written instructions that explain your health care wishes, especially about end-of-life care. You cannot use a Living Will to name a healthcare agent, you must use a Health Care Proxy.

Do Not Resuscitate Order (DNR): only lets you express your wish to do without cardiopulmonary resuscitation (CPR), that is, emergency treatment to restart your heart and lungs if your heartbeat or breathing stops.

Living Trust: is a popular estate planning tool that lets you 1) Retain control over the trust property while you are alive, 2) Avoid guardianship in case you become incapacitated and can no longer handle your own financial affairs, and 3) pass trust property outside of probate when you die.

Important Veteran's Information

Honorably discharged Veterans and their family may be entitled to educational, medical and death benefits. Most importantly, Veterans must apply for benefits. They are not automatically paid to you. There is also a time limit for claiming these benefits to you or your family.

When filing a claim, most often the following items will be needed:

- Veterans Death Certificate
- Veterans Discharge Certificate
- Copy of Veterans Marriage Certificate
- Birth Certificates of Veterans Minor Children
- Receipt of itemized funeral bill for veteran.

In Sullivan County:

Veterans Service Agency
Sullivan County Government Center
100 North Street, PO Box 5012
Monticello, NY 12701
Phone: 845-807-0233

For national assistance:

U.S. Department of Veterans Affairs
810 Vermont Avenue
N.W., Washington DC 20420
(202) 273-5400

Social Security Information

Most of us are entitled to some type of Social Security benefit. Benefits and qualifications are subject to change. As with V.A. benefits, Social Security benefits must be applied for. They are not just automatically paid. When filing for benefits, you will most likely need the following:

- Death Certificate
- Birth Certificate of Deceased
- Social Security Card of the Deceased
- Marriage Certificate (copy)
- Birth Certificate of Applicant
- Birth Certificate of Minor Children
- Disability Proof for Children over 18
- Funeral bill receipt

In Sullivan County:

Social Security Administration
60 Jefferson Street
Monticello, NY 12701
(845) 791-5619

For national assistance:

Social Security Administration
Baltimore, Maryland 21238
1-800-772-1213

SASSI ~ Supporting Awareness of Senior Safety & Independence!

This TRIAD project is available as a resource to Sullivan County seniors to help them or their families locate a county service or program that are *specifically related to 'senior safety'*.

Examples of safety services included in the database:

- Alzheimer's Association's 'Safe Return' and 'Comfort Zone'
- 9-1-1 FREE Cell Phone Bank
- Adult Protective Services information and guidance
- Personal Emergency Response Systems
- Educational programs for groups/individuals to prevent elder abuse, (such as financial abuse i.e. fraud/scams,) , etc.
- Adult day programs, and caregiver respite , etc

For more information.

Office for the Aging (807-0241), Sullivan NY Connects (807-0254), United Way (794-1771),
Caregiver Resource Center (292-5250), or Sull. Co. Public Health (292-0100).