



Personal Information Form

Date created: _____

This list can be helpful for general use as well as before or after an emergency. Remember to take a list to work, too—emergencies don't only happen at home. Fill out a form for each family member. Keep this form in a safe place.

Person's name _____

Emergency contact name _____ **Phone** _____

Birth Certificate

Issuing location/department _____

Location of original _____

Number/Location of copies _____

Marriage Certificate

Issuing location/department _____

Location of original _____

Number/Location of copies _____

Divorce Certificate

Issuing location/department _____

Location of original _____

Number/Location of copies _____

Driver's License

License number _____

Expiration date _____

Number/Location of copies _____

Passport

Passport number _____

Expiration date _____

Number/Location of copies _____

Social Security Card

Location of original _____

Date issued _____

Number/Location of copies _____

Identification (ID) Card

Card number _____

Expiration date _____

Number/Location of copies _____

Government Health Card

Card number _____

Number/Location of copies _____

Will

Location of original _____

Number/Location of copies _____

Living Will

Name _____

Location of original _____

Number/Location of copies _____

Power of Attorney

Full Name of designate _____

Address _____

Phone number _____

Relationship _____