

MANAGING DIGITAL ASSETS

NAME: _____

DATE LAST UPDATED: _____

My Agent or Trustee will need access to my “digital life” in order to care for me in the event of incapacity, or to carry out my wishes after I am gone. I have compiled the following information in order to make sure that my wishes are carried out. Some of my bills are paid electronically. You will need access to my email account, to access these bills and or make arrangements for payment. You may also need access to other online accounts (banks, insurance, Apple account) to close my accounts. **This information should not be stored digitally but should be stored in a LOCKED and secure location.**

Computer Access:

I maintain one or more personal computers secured with a password.

Computer: _____ Location: _____

User Name: _____ Password: _____

Computer: _____ Location: _____

User Name: _____ Password: _____

Password Keeper:

I maintain a digital password keeper.

Service Provider: _____

User Name: _____ Password: _____

E-Mail Accounts:

I maintain one or more email addresses that should be monitored for recurring bills or other important information in the event of my incapacity or death.

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

Online Bill Payment:

I receive online bills from the following service providers. Some are set up to automatically debit an account for payment. If that account is closed or “frozen” because of my death or incapacity; payment may not be effective.

Company: _____ User Name: _____ Password: _____

Linked To Bank Account? Yes No Account Institution & #: _____

The information contained herein is extremely confidential and unauthorized access could subject me and my assets to significant risk. This form should be secured by lock and key, preferably in a safe deposit box. This form should not be stored electronically where security could be breached.

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Online Bill Payment (continued):

Company: _____ User Name: _____ Password: _____

Linked To Bank Account? Yes No Account Institution & #: _____

Company: _____ User Name: _____ Password: _____

Linked To Bank Account? Yes No Account Institution & #: _____

Company: _____ User Name: _____ Password: _____

Linked To Bank Account? Yes No Account Institution & #: _____

Company: _____ User Name: _____ Password: _____

Linked To Bank Account? Yes No Account Institution & #: _____

[] Cloud Storage and Computing:

I maintain digital storage of files and/or use cloud based storage (Cobalt, i365, Microsoft 365) for certain accounts. These accounts should be closed after my death.

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

[] Online-Banking:

I have electronic access to the following financial institutions. I may or may not receive paper statements.

Institution: _____ User Name: _____ Password: _____

Institution: _____ User Name: _____ Password: _____

Institution: _____ User Name: _____ Password: _____

Institution: _____ User Name: _____ Password: _____

Institution: _____ User Name: _____ Password: _____

Institution: _____ User Name: _____ Password: _____

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[] Social Media Accounts:

The following social media accounts (Facebook, Twitter, LinkedIn, etc.) should be closed after my death.

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

[] Photo-Sharing:

I maintain digital libraries of photos and other mediums (iPhoto, Flickr, Picasa etc.). The photos should be collected or disposed of after my death.

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

[] Audio and Video Content:

I maintain digital libraries of music, videos and other recordings (iTunes, Pandora, YouTube, GarageBand, etc.). The audio/video files should be collected or disposed of after my death.

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

[] Gaming and Virtual World Accounts:

I maintain digital accounts for online games (Xbox 360). These accounts should be collected or disposed of after my death.

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

Service: _____ User Name: _____ Password: _____

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