## **Top 25 Emergency Information Checklist**

Item	Name/Location	Phone/Acct #/Email
Address Book or Contacts		
Spouse Contact Info		
Child Contact Info		
Other Contact Info		
Employer Information		
Bank Account (1)		
Bank Account (2)		
Bank Account (3)		
77 1/1 7		
Health Insurance		
Life Insurance		
Oalessa		
Other Insurance		
Outstanding Debts		
Will		
VVIII		
Living Will		
Power of Attorney		
1 ower of Accorney		
Medical Records		
Allergies/Blood Type		
Primary Care Doctor		
Social Security Card		
boolar becarrey dar a		
Passport		
Important Keys		
PO Box or Lock Box		
ATM Cards		
Credit Cards		
Password File (encrypted)		

