The Personal Record of

CONFIDENTIAL



Morris County Surrogate

Heather J. Darling, Esq.

www.morrissurrogate.com

973-285-6500 10 Court Street Morristown, NJ 07963



Dear Morris County Resident,

As Morris County Surrogate it is my duty to provide support to the citizens of this great County in matters germane to the Surrogate's Court. I have put together this booklet to provide you with an opportunity to organize and record your important personal information. Not only is organizing your personal information helpful but it may serve as a road-map for your family members in the event of an emergency.

Once you have completed the booklet, please keep it in a safe place which is available to your family or trusted person who may also be your executor, health care proxy or power of attorney, should the need arise.

I wish you all the best, and if I can be of assistance please contact my office.

Sincerely,

Heather J. Darling, Esq.

| MY LEGAL RESIDENCE |
|--|
| Primary Residence at time of death determines the venue for probating an estate. |
| Street: |
| City: |
| State: |
| |
| PERSONAL INFORMATION |
| I was born in: |
| Date: |
| I have a birth certificate: Yes 🔲 No 📃 |
| It is kept in: |
| I was married in: |
| Date: |
| Name of spouse: |
| My Maiden Name/Spouse Maiden Name: |
| My Marriage Certificate is located in: |
| |
| I have been divorced:times |
| Prior Spouse(s) Names: |
| |
| Date(s): |
| County of Divorce: |
| Divorce Papers are kept in: |
| |

| MILITARY SERVICE |
|---|
| Branch and Dates of Service: |
| Serial Number: |
| Discharge Papers are kept: |
| I am entitled to the following death related benefits: |
| |
| |
| MY LAST WILL AND TESTAMENT |
| I have a Will: Yes No I have a Codicil: Yes No |
| It is dated: It is dated: |
| It is kept: It is kept: |
| It was prepared by my attorney: It was prepared by my attorney: |
| |
| My Executor(s)/Phone #: |
| |
| Successor: |
| |
| Guardian(s) of my children: |
| |
| |
| Note: If you do not have a Will, it is advisable that you prepare one. Without |
| a Will specifying your wishes, your estate will be distributed in accordance with the laws of Intestate Succession and the Surrogate will appoint an |
| administrator as determined by NJ State Statute. |

| MY ADVANCE DIRECTIVE FOR HEALTH CARE, KNOWN AS A LIVING WILL |
|--|
| I have an Advance Directive for Health Care/Living Will: |
| Yes No |
| It is dated: |
| It is kept at: |
| Prepared by: |
| My health care representative is: |
| Primary: |
| Alternate: |
| |
| |
| MY POWER OF ATTORNEY |
| I have a Power of Attorney dated: |
| I have namedas my primary agent and |
| as my alternate agent. |
| Prepared by: |
| It is kept at: |
| My Safe Deposit box (do not keep your Will, POA or Living Will in your safe deposit box) |
| I have a safe deposit box: Yes 🔲 No 📃 |
| It is located at: |
| It can be opened by: |
| |
| |

| MY RESIDENCE |
|--|
| l own my residence: Yes 🥅 No 🕅 |
| Title is: 🔲 In my name only |
| In joint name with |
| Is there a mortgage? Yes 🔲 No 📃 |
| Mortgage is held by: |
| I rent and my landlord is: |
| |
| My security deposit is: |
| I own the following other real estate (address, type of property): |
| |
| |
| I have mortgage insurance with: |
| This policy is located at: |
| The following papers are kept at: |
| Copy of Mortgage Closing Statement(s) |
| Deed(s) Survey(s) |
| Title Abstract(s)/Insurance Insurance Policies |
| Lease(s) Tax Documents |
| |
| |
| |
| Note: List any other important papers |

| BANK ACCOUNTS |
|---|
| I have checking and savings accounts |
| My checking accounts are with the following banks: |
| |
| The following person has the power to sign checks on the |
| following accounts (include account numbers): |
| |
| |
| My branch is located at: |
| |
| My savings accounts are with the following banks (account numbers): |
| |
| |
| These accounts are: 🔄 In my name only |
| Joint with: |
| My checks and savings books are kept at: |
| I receive bank statements online at the following email address: |
| The password for my email address is: |
| · |
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| INVESTMENTS |
|--|
| I own stocks and bonds |
| Shares in my possession are kept at: |
| |
| Other shares are held at/by: |
| Records of their purchase and sale will be found at: |
| My brokerage accounts are with: |
| |
| |
| |
| My Broker is: |
| |
| Account #'s are: |
| I have a 401K/IRA with: |
| Account #'s are: |
| I have a Pension with: |
| |
| Contact(s): |
| |
| |
| |
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| MY PERSONAL PROPERTY |
|---|
| Includes household furnishings located at: |
| |
| |
| Vehicles & Titles: |
| |
| Jewelry kept at: |
| Other: |
| Location(s): |
| |
| |
| My personal property is insured: Yes 🔲 No 📃 |
| My insurance broker is: |
| My Life Insurance |
| |
| I do carry Life Insurance |
| I do not carry Life Insurance |
| My Policies are kept at: |
| My agent is (Name and Number): |
| Mulifo Incurance Delicu #'s area |
| My Life Insurance Policy #'s are: |
| |
| |
| |

OTHER DEATH RELATED BENEFITS

I am/was employed by:

I am entitled to the following death related benefits, as a result of this employment:

I am a member of the following organizations (name and contact info):

MY TAX RETURNS

Copies of my tax returns are kept at:

My Accountant is:

| MY FAMILY |
|---|
| Father: |
| Date / Place of Birth: |
| Date of Death: |
| Mother (Maiden Name): |
| Date / Place of Birth: |
| Date of Death: |
| Children |
| Names and Addresses of My Natural & Adopted Children: |
| |
| |
| |
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| |
| |
| Names and Addresses of My Children by Marriage: |
| |
| |
| Names and Addresses of My Siblings: |
| |
| |
| |
| |

<u>TRUSTS</u>

Established Trusts (List names of Beneficiaries)

Name of Attorney who prepared Trusts:_____

EMERGENCY

The following should be notified in the event of an emergency:

Please list NAME and CONTACT NUMBER: Include primary family member, attorney, clergy, doctor, employer and any others who should be contacted:

FUNERAL ARRANGEMENTS

My wishes for my funeral arrangements are kept:

<u>PETS</u>

(Dog(s), Cat(s), Bird(s), etc.) Please list Pet Name and who should be contacted with number in case of emergency to care for your Pet(s):

ACCESS INFORMATION

My List of how to access computers, phone, accounts, etc., User Names and Passwords is kept:

ADDITIONAL NOTES AND/OR DIRECTIONS

Surrogate Heather J. Darling, Esq., was elected Surrogate in 2019. She received her Bachelor's degree from New York University in Finance and International Business in 1990 and earned her Doctor of Jurisprudence in 2002 from Seton Hall School of Law.

Heather took over her family business in 2002 upon her father's passing and in 2004 opened her own law practice focusing on Family, Wills, Trusts and Estates in addition to Business and Criminal law, serving Morris County for over 15 years. She is a member of the New Jersey, New York, and Morris County Bar Associations.

Heather is a former Morris County Freeholder and Deputy of the Board. She took office as Morris County's first woman Surrogate in January of 2020. Heather has made significant advancements to the Surrogate's Office including services such as virtual filing of documents to probate Wills; an idea conceived by Heather to serve seniors and citizens with mobility issues which became indispensable to the public by COVID-19.

Heather is dedicated to community service. She has served her local municipality as Vice Chair of the Roxbury Economic Development Committee. She was a member of the Roxbury Zoning Board and also served on Roxbury's Environmental Commission and Dog Park Committee. She has been a member of the Morris County Chamber of Commerce, the Roxbury Chamber of Commerce, Leadership Morris, the Parsippany Chamber of Commerce and the Roxbury Rotary. She is also a charter member of the recently restarted Roxbury Kiwanis.

Heather spends much of her community service time helping those in need by serving at local food distribution events. She has also focused much of her attention, using her office as a platform, on the special needs community.

Heather Darling resides in Roxbury where she has lived most of her life in her family home.



Prepared and Distributed by

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