



# Your most important information

## Be prepared for emergencies

The best way to handle any emergency situation is to have trusted resources at the ready. Use this worksheet to catalogue your most important contacts and account numbers so that if and when a crisis arises, you'll know exactly what to do.

### Emergency services

Police _____	Phone _____
Fire _____	Phone _____
Hospital _____	Phone _____
Primary physician _____	Phone _____
Pediatrician _____	Phone _____
Dentist _____	Phone _____
Veterinarian _____	Phone _____
Attorney _____	Phone _____
Town/city hall _____	Phone _____
Mechanic/AAA/towing _____	Phone _____

### Utility providers

Plumber _____	Phone _____
Electrician _____	Phone _____
Electric company _____	Phone _____
Natural gas/oil _____	Phone _____
Cable _____	Phone _____
Phone carrier _____	Phone _____

### Nearest neighbors

Name _____	Phone _____
Address _____	
Name _____	Phone _____
Address _____	

# KEY INFORMATION

**Full legal name** \_\_\_\_\_

Email \_\_\_\_\_

Primary address \_\_\_\_\_

Mobile \_\_\_\_\_

Social Security # \_\_\_\_\_

Passport # \_\_\_\_\_

Home phone \_\_\_\_\_

Driver's license # \_\_\_\_\_

License plate # \_\_\_\_\_

Primary care physician \_\_\_\_\_

Phone \_\_\_\_\_

Specialist physician \_\_\_\_\_

Phone \_\_\_\_\_

Dentist \_\_\_\_\_

Phone \_\_\_\_\_

Health insurer \_\_\_\_\_

Policy # \_\_\_\_\_

Blood type \_\_\_\_\_

Allergies \_\_\_\_\_

Employer \_\_\_\_\_

Phone \_\_\_\_\_

**Spouse's legal name** \_\_\_\_\_

Email \_\_\_\_\_

Primary address \_\_\_\_\_

Mobile \_\_\_\_\_

Social Security # \_\_\_\_\_

Passport # \_\_\_\_\_

Home phone \_\_\_\_\_

Driver's license # \_\_\_\_\_

License plate # \_\_\_\_\_

Primary care physician \_\_\_\_\_

Phone \_\_\_\_\_

Specialist physician \_\_\_\_\_

Phone \_\_\_\_\_

Dentist \_\_\_\_\_

Phone \_\_\_\_\_

Health insurer \_\_\_\_\_

Policy # \_\_\_\_\_

Blood type \_\_\_\_\_

Allergies \_\_\_\_\_

Employer \_\_\_\_\_

Phone \_\_\_\_\_

**Notes** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## FAMILY MEMBER INFORMATION

**Dependent's full legal name** \_\_\_\_\_

Email \_\_\_\_\_

Primary address \_\_\_\_\_

Mobile \_\_\_\_\_

Social Security # \_\_\_\_\_

Passport # \_\_\_\_\_

Home phone \_\_\_\_\_

Driver's license # \_\_\_\_\_

License plate # \_\_\_\_\_

Primary care physician \_\_\_\_\_

Phone \_\_\_\_\_

Specialist physician \_\_\_\_\_

Phone \_\_\_\_\_

Dentist \_\_\_\_\_

Phone \_\_\_\_\_

Health insurer \_\_\_\_\_

Policy # \_\_\_\_\_

Blood type \_\_\_\_\_

Allergies \_\_\_\_\_

Employer \_\_\_\_\_

Phone \_\_\_\_\_

**Dependent's full legal name** \_\_\_\_\_

Email \_\_\_\_\_

Primary address \_\_\_\_\_

Mobile \_\_\_\_\_

Social Security # \_\_\_\_\_

Passport # \_\_\_\_\_

Home phone \_\_\_\_\_

Driver's license # \_\_\_\_\_

License plate # \_\_\_\_\_

Primary care physician \_\_\_\_\_

Phone \_\_\_\_\_

Specialist physician \_\_\_\_\_

Phone \_\_\_\_\_

Dentist \_\_\_\_\_

Phone \_\_\_\_\_

Health insurer \_\_\_\_\_

Policy # \_\_\_\_\_

Blood type \_\_\_\_\_

Allergies \_\_\_\_\_

Employer \_\_\_\_\_

Phone \_\_\_\_\_

**Dependent's full legal name** \_\_\_\_\_

Email \_\_\_\_\_

Primary address \_\_\_\_\_

Mobile \_\_\_\_\_

Social Security # \_\_\_\_\_

Passport # \_\_\_\_\_

Home phone \_\_\_\_\_

Driver's license # \_\_\_\_\_

License plate # \_\_\_\_\_

Primary care physician \_\_\_\_\_

Phone \_\_\_\_\_

Specialist physician \_\_\_\_\_

Phone \_\_\_\_\_

Dentist \_\_\_\_\_

Phone \_\_\_\_\_

Health insurer \_\_\_\_\_

Policy # \_\_\_\_\_

Blood type \_\_\_\_\_

Allergies \_\_\_\_\_

Employer \_\_\_\_\_

Phone \_\_\_\_\_

# FINANCIAL INFORMATION

**Financial advisor name** \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

**Accountant** \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

**Attorney** \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Checking account \_\_\_\_\_ Account # \_\_\_\_\_

Savings account \_\_\_\_\_ Account # \_\_\_\_\_

401(k) provider \_\_\_\_\_ Account # \_\_\_\_\_

IRA provider \_\_\_\_\_ Account # \_\_\_\_\_

529 plan provider \_\_\_\_\_ Account # \_\_\_\_\_

Life insurance provider \_\_\_\_\_ Policy # \_\_\_\_\_

Home insurance provider \_\_\_\_\_ Policy # \_\_\_\_\_

Other \_\_\_\_\_ Account # \_\_\_\_\_

Other \_\_\_\_\_ Account # \_\_\_\_\_

Other \_\_\_\_\_ Account # \_\_\_\_\_

**Second home** \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Maintenance name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Maintenance name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Neighbor name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Neighbor name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Other \_\_\_\_\_

Second home insurance policy # \_\_\_\_\_

Second home umbrella policy # \_\_\_\_\_

## ESTATE PLANNING INFORMATION

**Estate planning attorney** \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

**Power of attorney** \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

**Healthcare proxy** \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

**Heirs** \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

**Location of wills** \_\_\_\_\_

## LOANS

**Mortgage holder** \_\_\_\_\_ **Second mortgage holder** \_\_\_\_\_ **Home equity loan holder** \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_ Phone \_\_\_\_\_

Account # \_\_\_\_\_ Account # \_\_\_\_\_ Account # \_\_\_\_\_

**Car loan** \_\_\_\_\_ **Car loan** \_\_\_\_\_ **Miscellaneous loan** \_\_\_\_\_

Holder \_\_\_\_\_ Holder \_\_\_\_\_ Holder \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_ Phone \_\_\_\_\_

Account # \_\_\_\_\_ Account # \_\_\_\_\_ Account # \_\_\_\_\_

**Credit card** \_\_\_\_\_ **Credit card** \_\_\_\_\_ **Credit card** \_\_\_\_\_

Billing address \_\_\_\_\_ Billing address \_\_\_\_\_ Billing address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_ Phone \_\_\_\_\_

Account # \_\_\_\_\_ Account # \_\_\_\_\_ Account # \_\_\_\_\_

**Social Security Administration**  
800-772-1213  
ssa.gov

**IRS (Internal Revenue Service)**  
800-829-1040  
irs.gov

**FEMA (Federal Emergency Management Association)**  
800-621-FEMA (3362)  
fema.gov

# John Hancock Investments

## A trusted brand

John Hancock Investments is a premier asset manager representing one of America's most trusted brands, with a heritage of financial stewardship dating back to 1862. Helping our shareholders pursue their financial goals is at the core of everything we do. It's why we support the role of professional financial advice and operate with the highest standards of conduct and integrity.

## A better way to invest

We build funds based on investor needs, then search the world to find proven portfolio teams with specialized expertise in those strategies. As a manager of managers, we apply vigorous oversight to ensure that they continue to meet our uncompromising standards and serve the best interests of our shareholders.

## Results for investors

Our unique approach to asset management enables us to provide a diverse set of investments backed by some of the world's best managers, along with strong risk-adjusted returns across asset classes.

**A fund's investment objectives, risks, charges, and expenses should be considered carefully before investing. The prospectus contains this and other important information about the fund. To obtain a prospectus, contact your financial professional, call John Hancock Investments at 800-225-5291, or visit [jhinvestments.com](http://jhinvestments.com). Please read the prospectus carefully before investing or sending money.**

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