



2026
FINAL WISHES
&
LEGACY ORGANIZER

"A complete record end of life for personal, financial
and succession Organizer"



2026

JANUARY

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | | | 1 | 2 | 3 | 4 |
| 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 | 31 | |

FEBRUARY

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | |

MARCH

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | 31 | | | | | |

APRIL

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | | | |

MAY

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | | | | 1 | 2 | 3 |
| 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | 31 |

JUNE

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| 29 | 30 | | | | | |

JULY

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | 31 | | |

AUGUST

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | | | | | 1 | 2 |
| 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 24 | 25 | 26 | 27 | 28 | 29 | 30 |
| 31 | | | | | | |

SEPTEMBER

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | 29 | 30 | | | | |

OCTOBER

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | | | 1 | 2 | 3 | 4 |
| 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 | 31 | |

NOVEMBER

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | | | | | | |

DECEMBER

| M | T | W | T | F | S | S |
|----|----|----|----|----|----|----|
| | 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | 29 | 30 | 31 | | | |

2026 Name of Holiday

| Holiday Name | Holiday Date |
|----------------------------|--------------|
| New Year's Day | 1 Jan |
| Valentine's Day | 14 Feb |
| Martin Luther King Jr. Day | 19 Jan |
| Presidents' Day | 16 Feb |
| St. Patrick's Day | 17 Mar |
| Easter Sunday | 5 Apr |
| Easter Monday | 6 Apr |
| Tax Day | 15 Apr |
| Cinco de Mayo | 5 May |
| Mother's Day | 10 May |
| Memorial Day | 25 May |
| Flag Day | 14 Jun |
| Father's Day | 21 Jun |
| Juneteenth | 19 Jun |
| Independence Day | 4 Jul |
| Labor Day | 7 Sep |
| Columbus Day | 12 Oct |
| Halloween | 31 Oct |
| Election Day | 3 Nov |
| Veterans Day | 11 Nov |
| Thanksgiving Day | 26 Nov |
| Black Friday | 27 Nov |
| Christmas Day | 25 Dec |
| New Year's Eve | 31 Dec |

Personal Information

About

Full Name: _____

Date of Birth: _____

Country of Origin: _____

Occupation: _____

Phone Number: _____

Email Number: _____

Hobbies & Interests: _____

Personal Record

Full Name: _____

Nickname: _____

Address: _____

Phone: _____

Email: _____

Date of Birth: _____

Place of Birth: _____

Father's Name: _____

Mother's Name: _____



Personal Information

Iteration Information

Tax Id Number:

Social Security Number:

Accountant:

Pension Number:

Tax Agent:

Employers

Name & Company:

Contact Number:

Address:

Birth Details

Date:

Time:

Place:

Day of the week:

School University Information

School Name:

Address:

Id Information:

Contact Number:

Notes

Personal Information

Child

Birth Details

Date:

Time:

Place:

Day of the week:

Emergency Contact

Relationship:

Contact Number:

Address:

School Information

School Number:

Grade:

Class:

Teacher:

Contact Number:

Childs Details

Description:

Height & Weight:

Any Distinguishing:

Eyes Color:

Hair Color:

Notes

Personal Information

Child/ Children Recent Photo

Name:



Name:



Name:



Name:



Personal Information

Child/ Children Recent Photo

Name:



Name:



Name:



Name:



Important Contact

| | |
|-------------|--|
| Name | |
|-------------|--|

| | |
|--------------|--|
| Phone | |
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| Email | |
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| Address | |
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End of life information

Services to close and cancel

Service:

Account Details:

Contact:

Password:

Website:

Bank account & Credit Card

| | |
|---------------------|--|
| Account Number | |
| Account Holder Name | |
| Credit Card Type | |
| Card User Name | |
| Card Password | |
| Expiration Date | |

| | |
|---------------------|--|
| Account Number | |
| Account Holder Name | |
| Credit Card Type | |
| Card User Name | |
| Card Password | |
| Expiration Date | |

| | |
|---------------------|--|
| Account Number | |
| Account Holder Name | |
| Credit Card Type | |
| Card User Name | |
| Card Password | |
| Expiration Date | |

Internet accounts, emails, profiles, and other stuff

| | | | |
|-------|--|----------|--|
| Email | | Password | |

| | | | |
|-------|--|----------|--|
| FB Ac | | Password | |

| | | | |
|----------|--|----------|--|
| Inst. Ac | | Password | |

| | | | |
|--------|--|----------|--|
| Tw. Ac | | Password | |

January 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|-----|-----|-----|-----|-----|-----|
| | | | 1. | 2. | 3. | 4. |
| 5. | 6. | 7. | 8. | 9. | 10. | 11. |
| 12. | 13. | 14. | 15. | 16. | 17. | 18. |
| 19. | 20. | 21. | 22. | 23. | 24. | 25. |
| 26. | 27. | 28. | 29. | 30. | 31. | |

Notes

February 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|-----|-----|-----|-----|-----|-----|
| | | | | | | 1. |
| 2. | 3. | 4. | 5. | 6. | 7. | 8. |
| 9. | 10. | 11. | 12. | 13. | 14. | 15. |
| 16. | 17. | 18. | 19. | 20. | 21. | 22. |
| 23. | 24. | 25. | 26. | 27. | 28. | |

Notes

March 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|-----|---------------|-----|-----|-----|-----|
| | | | | | | 1. |
| 2. | 3. | 4. | 5. | 6. | 7. | 8. |
| 9. | 10. | 11. | 12. | 13. | 14. | 15. |
| 16. | 17. | 18. | 19. | 20. | 21. | 22. |
| 23. | 24. | 25. | 26. | 27. | 28. | 29. |
| 30. | 31. | Notes: | | | | |

April 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|-----|-----|-----|-----|-----|-----|
| | | 1. | 2. | 3. | 4. | 5. |
| 6. | 7. | 8. | 9. | 10. | 11. | 12. |
| 13. | 14. | 15. | 16. | 17. | 18. | 19. |
| 20. | 21. | 22. | 23. | 24. | 25. | 26. |
| 27. | 28. | 29. | 30. | | | |

Notes

May 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|-----|-----|-----|-----|-----|-----|
| | | | | 1. | 2. | 3. |
| 4. | 5. | 6. | 7. | 8. | 9. | 10. |
| 11. | 12. | 13. | 14. | 15. | 16. | 17. |
| 18. | 19. | 20. | 21. | 22. | 23. | 24. |
| 25. | 26. | 27. | 28. | 29. | 30. | 31. |

Notes

June 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|-----|-----|-----|-----|-----|-----|
| 1. | 2. | 3. | 4. | 5. | 6. | 7. |
| 8. | 9. | 10. | 11. | 12. | 13. | 14. |
| 15. | 16. | 17. | 18. | 19. | 20. | 21. |
| 22. | 23. | 24. | 25. | 26. | 27. | 28. |
| 29. | 30. | | | | | |

Notes

July 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|-----|-----|-----|-----|-----|-----|
| | | 1. | 2. | 3. | 4. | 5. |
| 6. | 7. | 8. | 9. | 10. | 11. | 12. |
| 13. | 14. | 15. | 16. | 17. | 18. | 19. |
| 20. | 21. | 22. | 23. | 24. | 25. | 26. |
| 27. | 28. | 29. | 30. | 31. | | |

Notes

August 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|---------------|-----|-----|-----|-----|-----|
| | | | | | 1. | 2. |
| 3. | 4. | 5. | 6. | 7. | 8. | 9. |
| 10. | 11. | 12. | 13. | 14. | 15. | 16. |
| 17. | 18. | 19. | 20. | 21. | 22. | 23. |
| 24. | 25. | 26. | 27. | 28. | 29. | 30. |
| 31. | Notes: | | | | | |

September 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|-----|-----|-----|-----|-----|-----|
| | 1. | 2. | 3. | 4. | 5. | 6. |
| 7. | 8. | 9. | 10. | 11. | 12. | 13. |
| 14. | 15. | 16. | 17. | 18. | 19. | 20. |
| 21. | 22. | 23. | 24. | 25. | 26. | 27. |
| 28. | 29. | 30. | | | | |

Notes

October 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|-----|-----|-----|-----|-----|-----|
| | | | 1. | 2. | 3. | 4. |
| 5. | 6. | 7. | 8. | 9. | 10. | 11. |
| 12. | 13. | 14. | 15. | 16. | 17. | 18. |
| 19. | 20. | 21. | 22. | 23. | 24. | 25. |
| 26. | 27. | 28. | 29. | 30. | 31. | |

Notes

November 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|---------------|-----|-----|-----|-----|-----|
| | | | | | | 1. |
| 2. | 3. | 4. | 5. | 6. | 7. | 8. |
| 9. | 10. | 11. | 12. | 13. | 14. | 15. |
| 16. | 17. | 18. | 19. | 20. | 21. | 22. |
| 23. | 24. | 25. | 26. | 27. | 28. | 29. |
| 30. | Notes: | | | | | |

December 2026

| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
|-----|-----|-----|-----|-----|-----|-----|
| | 1. | 2. | 3. | 4. | 5. | 6. |
| 7. | 8. | 9. | 10. | 11. | 12. | 13. |
| 14. | 15. | 16. | 17. | 18. | 19. | 20. |
| 21. | 22. | 23. | 24. | 25. | 26. | 27. |
| 28. | 29. | 30. | 31. | | | |

Notes

Marital Status:

Single

Married

Divorced

Others: _____

Spouse/s

Children's Name

Brother

Sister

Friends

Friends

Notes

My Properties

Type: _____

Location: _____

Co-owner: _____

Year of acquisition: _____

Type: _____

Location: _____

Co-owner: _____

Year of acquisition: _____

My Properties

Attorneys

| | |
|----------|--|
| Document | |
|----------|--|

| | |
|----------|--|
| Location | |
|----------|--|

| | |
|------------|--|
| What to Do | |
|------------|--|

| | |
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| Document | |
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| | |
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| Location | |
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| What to Do | |
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| Document | |
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| Location | |
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| What to Do | |
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| Document | |
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| Location | |
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| What to Do | |
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| Document | |
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| Location | |
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| What to Do | |
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| Document | |
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| Location | |
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| What to Do | |
|------------|--|

Safe Deposit Boxes

| | |
|-------------------|--|
| Number | |
| Location | |
| Other Info | |

| | |
|-------------------|--|
| Number | |
| Location | |
| Other Info | |

| | |
|-------------------|--|
| Number | |
| Location | |
| Other Info | |

| | |
|-------------------|--|
| Number | |
| Location | |
| Other Info | |

Insurance Information

| | |
|-----------------------|--|
| Insurance Type | |
| Company | |
| Agent | |
| Phone | |
| Email | |
| Notes | |

| | |
|-----------------------|--|
| Insurance Type | |
| Company | |
| Agent | |
| Phone | |
| Email | |
| Notes | |

| | |
|-----------------------|--|
| Insurance Type | |
| Company | |
| Agent | |
| Phone | |
| Email | |
| Notes | |

Financial Information

| | |
|-----------------------------|--|
| Number | |
| Address or Location | |
| Date Opened | |
| Period of Engagement | |

| | |
|-----------------------------|--|
| Number | |
| Address or Location | |
| Date Opened | |
| Period of Engagement | |

| | |
|-----------------------------|--|
| Number | |
| Address or Location | |
| Date Opened | |
| Period of Engagement | |

| | |
|-----------------------------|--|
| Number | |
| Address or Location | |
| Date Opened | |
| Period of Engagement | |

Investments

Company: _____

Account No: _____

Address: _____

City: _____

Phone: _____

Zip: _____

Username: _____

Password: _____

Security Question: _____

Answer: _____

Type to Account: _____

Important Belongings

Medications

| Items | Location |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |

Notes

Documents

| Items | Location |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |

Notes

Important Belongings

Jewelry

| Items | Location |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |

Notes

Collectibles

| Items | Location |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |

Notes

Home Security

Security Alarm

Description: _____ Username: _____

Location: _____ Code: _____

Front Door

Description: _____ Username: _____

Location: _____ Code: _____

Garage

Description: _____ Username: _____

Location: _____ Code: _____

Computer

Description: _____ Username: _____

Location: _____ Code: _____

Wi-Fi

Description: _____ Username: _____

Location: _____ Code: _____

Safe

Description: _____ Username: _____

Location: _____ Code: _____

My Pets

Pet Name:

Pet vet /Clinic:

Vet's Name:

Address:

Contact Number:

Pedigree information/certificates:

Vaccination information:

Microchip number:

Allergies:

Food Favorites:

Memberships/Subscriptions

Company: _____

Account No: _____

Address: _____

City: _____

Phone: _____

Zip: _____

Username: _____

Password: _____

Security Question: _____

Answer: _____

Payment Account: _____

Due Date: _____

Payment Method: _____

Utilities

Company: _____

Account No: _____

Address: _____

City: _____

Phone: _____

Zip: _____

Username: _____

Password: _____

Security Question: _____

Answer: _____

Payment Account: _____

Due Date: _____

Payment Method: _____

Vehicles

Year: _____ Make: _____ Model: _____

Own Financed

Finance Company

Account No: _____

Company: _____

Account No: _____

Address: _____

City: _____

Phone: _____

Zip: _____

Username: _____

Password: _____

Security Question: _____

Answer: _____

Payment Account: _____

Due Date: _____

Payment Method: _____

Electronic Devices Login

| | |
|-----------|--------------|
| Device: | Notes |
| Username: | |
| Password: | |

| | |
|-----------|--------------|
| Device: | Notes |
| Username: | |
| Password: | |

| | |
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| Device: | Notes |
| Username: | |
| Password: | |

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| Device: | Notes |
| Username: | |
| Password: | |

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| Device: | Notes |
| Username: | |
| Password: | |

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| Device: | Notes |
| Username: | |
| Password: | |

Blank Notes



