



DIGITAL ASSET & ONLINE ACCOUNT **INVENTORY**

For Estate Planning & Emergency Access

Important Note:

This worksheet is intended to help you organize information.

Do not attach this worksheet to a will or file it with the court.

Store it securely and review it regularly.

SECTION 1: CORE ACCESS INFORMATION (START HERE)

Primary Email Address (Gateway Account):

Email Provider: _____

Email Address: _____

Password Location (not password itself):

- Password manager
- Secure vault
- Physical location: _____

Two-Factor Authentication Used?

Yes No

If yes, device or method: _____

SECTION 2: PASSWORD MANAGEMENT SYSTEM (IF APPLICABLE)

Do you use a password manager?

Yes No

If yes:

Name of Password Manager: _____

Access Instructions (not password):

Emergency / Legacy Access Enabled?

Yes No

SECTION 3: PERSONAL & COMMUNICATION ACCOUNTS

Account Type Platform / Provider Username / Email Password Location Notes

Email
(secondary)

Cloud storage

Photo storage

Messaging apps

Social media

Special instructions (memorialize, delete, download, transfer):

SECTION 4: FINANCIAL & TRANSACTIONAL ACCOUNTS

Account Type Institution / Platform Username Password Location Auto-Pay?

Online banking

Payment apps

Credit cards

SECTION 7: SUBSCRIPTIONS & DIGITAL SERVICES

| Service | Provider Login Location | Cancel or Transfer? |
|----------------|-------------------------|--------------------------|
| Streaming | | <input type="checkbox"/> |
| Software | | <input type="checkbox"/> |
| Cloud services | | <input type="checkbox"/> |
| Memberships | | <input type="checkbox"/> |

SECTION 8: MEDICAL & CAREGIVING PORTALS

| Portal | Provider Username | Access Location | Notes |
|-------------------|-------------------|-----------------|-------|
| Patient portal | | | |
| Insurance portal | | | |
| Care coordination | | | |

SECTION 9: DIGITAL INSTRUCTIONS & PREFERENCES

If something happens to me, I would like the following actions taken:

- Accounts memorialized
- Accounts deleted
- Content downloaded and preserved
- Business accounts transitioned
- Specific accounts closed immediately

Additional instructions or messages:

SECTION 10: AUTHORIZED PERSONS

Digital Fiduciary / Trusted Contact:

Name: _____

Relationship: _____

Phone / Email: _____

Backup Contact:

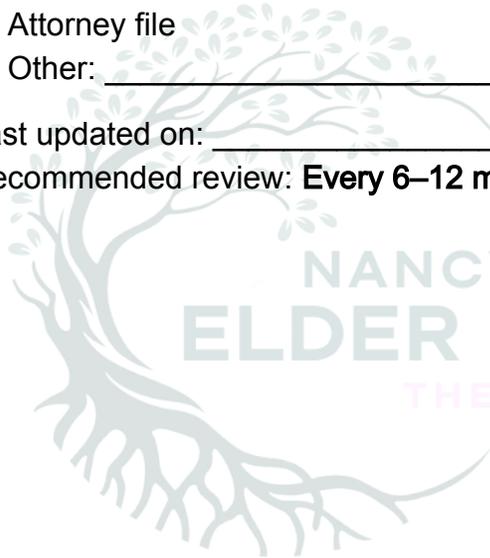
STORAGE & REVIEW REMINDER

This worksheet is stored at:

- Secure digital vault
- Fireproof home safe
- Attorney file
- Other: _____

Last updated on: _____

Recommended review: **Every 6–12 months**



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