



The family inventory



Wealth
Management



RBC Wealth Management

RBC Wealth Management® provides comprehensive services designed to address your multifaceted financial concerns, simplify your life, give you the freedom to pursue your other priorities and provide you with the confidence that your goals will be achieved.

Whether you need assistance managing your family's wealth, maximizing your business investments or providing stewardship for non-profit assets, RBC Wealth Management brings together the solutions you need in key areas such as financial planning, private banking, investment management and estate and trust services.

Tailored to your individual needs by your RBC® advisor, RBC Wealth Management provides the specific services you need, today and in the future. Your RBC advisor, supported by a team of specialists, helps you address your various wealth management needs through each stage of your life:

- **Accumulating wealth and growing your assets**
- **Protecting your wealth by managing risk**
- **Managing the affairs for a loved one**
- **Converting your wealth to an income stream**
- **Transferring wealth to your heirs**
- **Creating an enduring legacy**

RBC Wealth Management publications

To help you understand your choices and make informed decisions, RBC publishes a wide variety of financial, tax and estate publications, written by leading authorities on wealth management for high-net-worth Canadians. Please ask your RBC advisor for more information about other RBC Wealth Management publications.

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Introduction

If you have any questions while using this document, please contact your RBC advisor.

The family inventory guidebook has been designed to help you gather a comprehensive list of information pertaining to your family's current financial status, including:

- **Personal information**
- **Professional advisors**
- **Banking**
- **Investments**
- **Assets**
- **Pension**
- **Insurance**
- **Digital assets**

You may find this inventory a useful reference when creating or updating your financial plan. It may help you step back and look at your overall financial situation and ensure you have considered all aspects of your financial affairs.

Completing this inventory may also help in developing your estate plan. It may help you ensure that all assets are accounted for and considered, and that beneficiaries are taken care of. An up-to-date inventory may prove invaluable to your surviving heirs, executors, trustees and advisors as your estate is settled.

You should update this document whenever significant changes in your family's financial status occur. Due to the level of detail and personal information, be sure to keep the information safe and secure by, for example, adding password protection to your electronic copy and storing any printed copies in your safety deposit box.



Date prepared

Date of most recent update

Personal information

You and your spouse/partner

Your name: _____ **Place of birth:** _____

Date of birth: _____ **S.I.N.:** _____ **Location of S.I.N. card:** _____

Address: _____ **Phone:** _____

Spouse's or partner's name: _____ **Place of birth:** _____

Date of birth: _____ **S.I.N.:** _____ **Location of S.I.N. card:** _____

Address: _____ **Phone:** _____

Dependants

Name: _____ **Relation*:** _____

Date of birth: _____ **Place of birth:** _____ **S.I.N.:** _____

Address: _____ **Phone:** _____

Name: _____ **Relation*:** _____

Date of birth: _____ **Place of birth:** _____ **S.I.N.:** _____

Address: _____ **Phone:** _____

Name: _____ **Relation*:** _____

Date of birth: _____ **Place of birth:** _____ **S.I.N.:** _____

Address: _____ **Phone:** _____

Name: _____ **Relation*:** _____

Date of birth: _____ **Place of birth:** _____ **S.I.N.:** _____

Address: _____ **Phone:** _____

Name: _____ **Relation*:** _____

Date of birth: _____ **Place of birth:** _____ **S.I.N.:** _____

Address: _____ **Phone:** _____

* E.g., son, daughter, grandchild, niece, nephew

Professional advisors

Accountant

Name: _____ Firm: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Lawyer

Name: _____ Firm: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Investment advisor

Name: _____ Firm: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Banker

Name: _____ Firm: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Trust company

Name: _____ Firm: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Other

Name: _____ Firm: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Banking information

Accounts

Name of financial institution: _____ **Name of contact:** _____

Address: _____

Phone: _____ **Balance:** \$ _____

Account number: _____ **Account type*:** _____

Name of financial institution: _____ **Name of contact:** _____

Address: _____

Phone: _____ **Balance:** \$ _____

Account number: _____ **Account type*:** _____

Name of financial institution: _____ **Name of contact:** _____

Address: _____

Phone: _____ **Balance:** \$ _____

Account number: _____ **Account type*:** _____

Name of financial institution: _____ **Name of contact:** _____

Address: _____

Phone: _____ **Balance:** \$ _____

Account number: _____ **Account type*:** _____

Bank machine cards

Issuer: _____ **Card number:** _____

Issuer: _____ **Card number:** _____

Issuer: _____ **Card number:** _____

* Include all banking accounts — e.g., chequing, savings.

Credit information

Debts

Name of financial institution: _____ **Name of contact:** _____

Address: _____ **Phone:** _____

Balance: \$ _____ **Account number and loan type*:** _____

Loan amount: \$ _____

Name of financial institution: _____ **Name of contact:** _____

Address: _____ **Phone:** _____

Balance: \$ _____ **Account number and loan type*:** _____

Loan amount: \$ _____

Name of financial institution: _____ **Name of contact:** _____

Address: _____ **Phone:** _____

Balance: \$ _____ **Account number and loan type*:** _____

Loan amount: \$ _____

Name of financial institution: _____ **Name of contact:** _____

Address: _____ **Phone:** _____

Balance: \$ _____ **Account number and loan type*:** _____

Loan amount: \$ _____

Name of financial institution: _____ **Name of contact:** _____

Address: _____ **Phone:** _____

Balance: \$ _____ **Account number and loan type*:** _____

Loan amount: \$ _____

* Include all banking liabilities — e.g., mortgage, credit line, demand loans.

Credit information (continued)

Credit and other cards**

Issuer: _____

Card number: _____ Expiry date: _____ Credit limit: \$ _____

Issuer: _____

Card number: _____ Expiry date: _____ Credit limit: \$ _____

Issuer: _____

Card number: _____ Expiry date: _____ Credit limit: \$ _____

Issuer: _____

Card number: _____ Expiry date: _____ Credit limit: \$ _____

Issuer: _____

Card number: _____ Expiry date: _____ Credit limit: \$ _____

Issuer: _____

Card number: _____ Expiry date: _____ Credit limit: \$ _____

Issuer: _____

Card number: _____ Expiry date: _____ Credit limit: \$ _____

Issuer: _____

Card number: _____ Expiry date: _____ Credit limit: \$ _____

Issuer: _____

Card number: _____ Expiry date: _____ Credit limit: \$ _____

Issuer: _____

Card number: _____ Expiry date: _____ Credit limit: \$ _____

** E.g., include gas cards, retail store cards and points cards

Investment information

Investment accounts

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

* Include cash accounts, margin accounts, TFSAs, RRSPs, RRIFs, LIRAs, locked-in RRSPs, LIFs, LRIFs, prescribed RRIFs, RESPs, RDSPs, FHSAs, annuities, etc.

** If a registered account, indicate a beneficiary. If a cash or margin account, indicate whether held in single name, joint tenancy with right of survivorship or tenancy in common.

Investment information (continued)

Investment accounts

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

Firm: _____

Account type*: _____ Account number: _____

Ownership type/beneficiary**: _____ Value: \$ _____

* Include cash accounts, margin accounts, TFSAs, RRSPs, RRIFs, LIRAs, locked-in RRSPs, LIFs, LRIFs, prescribed RRIFs, RESPs, RDSPs, FHSAs, annuities, etc.

** If a registered account, indicate a beneficiary. If a cash or margin account, indicate whether held in single name, joint tenancy with right of survivorship or tenancy in common.

Personal assets

Assets (e.g., cars, jewellery, art, etc.)

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Personal assets (continued)

Assets (e.g., cars, jewellery, art, etc.)

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Personal assets (continued)

Assets (e.g., cars, jewellery, art, etc.)

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Personal assets (continued)

Assets (e.g., cars, jewellery, art, etc.)

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Item description: _____ **Location:** _____

Beneficiary: _____ **Value:** \$ _____

Real estate and pension plans

Real estate

Principal residence address: _____

Title held by: _____ Mortgage held by: _____

Date of purchase: _____ Deed location: _____

Purchase price: \$ _____ Current market value: \$ _____

Beneficiary: _____

Other property address: _____

Title held by: _____ Mortgage held by: _____

Date of purchase: _____ Deed location: _____

Purchase price: \$ _____ Current market value: \$ _____

Beneficiary: _____

Other property address: _____

Title held by: _____ Mortgage held by: _____

Date of purchase: _____ Deed location: _____

Purchase price: \$ _____ Current market value: \$ _____

Beneficiary: _____

Pension plans

Company name: _____ **Contact:** _____

Phone: _____ **Plan type*** and value: _____

Location of documents: _____ **Beneficiary:** _____

Company name: _____ **Contact:** _____

Phone: _____ **Plan type*** and value: _____

Location of documents: _____ **Beneficiary:** _____

* Defined benefit, money purchase or defined contribution; DPSP; or group RRSP.

Business investments

Business activities

Business name: _____

Type*: _____ Percentage of interest held: _____

Location of documents: _____

Legal counsel: _____ Accountant: _____

Business name: _____

Type*: _____ Percentage of interest held: _____

Location of documents: _____

Legal counsel: _____ Accountant: _____

Business name: _____

Type*: _____ Percentage of interest held: _____

Location of documents: _____

Legal counsel: _____ Accountant: _____

Business name: _____

Type*: _____ Percentage of interest held: _____

Location of documents: _____

Legal counsel: _____ Accountant: _____

*Sole proprietorship, partnership, corporation, etc.

Debts owed to me

Debt/loan details

Name: _____ **Phone:** _____

Address: _____

Amount owed: \$ _____ **Location of loan document:** _____

Name: _____ **Phone:** _____

Address: _____

Amount owed: \$ _____ **Location of loan document:** _____

Name: _____ **Phone:** _____

Address: _____

Amount owed: \$ _____ **Location of loan document:** _____

Name: _____ **Phone:** _____

Address: _____

Amount owed: \$ _____ **Location of loan document:** _____

Name: _____ **Phone:** _____

Address: _____

Amount owed: \$ _____ **Location of loan document:** _____

Name: _____ **Phone:** _____

Address: _____

Amount owed: \$ _____ **Location of loan document:** _____

Name: _____ **Phone:** _____

Address: _____

Amount owed: \$ _____ **Location of loan document:** _____

Note: Include prescribed rate loans to your spouse and/or family trust, loans to your corporation or other personal loans.

Life insurance

Individual coverage

Issuer: _____ **Insured:** _____

Agent's name: _____ Phone: _____

Insurance type*: _____ Policy number: _____

Face value: \$ _____ Cash surrender value: \$ _____ Death benefit: _____

Contract location: _____ Beneficiary: _____

Issuer: _____ **Insured:** _____

Agent's name: _____ Phone: _____

Insurance type*: _____ Policy number: _____

Face value: \$ _____ Cash surrender value: \$ _____ Death benefit: _____

Contract location: _____ Beneficiary: _____

Group coverage

Issuer: _____ **Insured:** _____

Agent's name: _____ Phone: _____

Insurance type*: _____ Policy number: _____

Face value: \$ _____ Cash surrender value: \$ _____ Death benefit: _____

Contract location: _____ Beneficiary: _____

Issuer: _____ **Insured:** _____

Agent's name: _____ Phone: _____

Insurance type*: _____ Policy number: _____

Face value: \$ _____ Cash surrender value: \$ _____ Death benefit: _____

Contract location: _____ Beneficiary: _____

* Indicate if term or permanent coverage.

Other coverage

Health card

Health card number: _____ Location of card: _____

Other life coverage (e.g., travel insurance, credit cards, etc.)

Issuer: _____ Insured: _____

Insurance type: _____ Policy number: _____

Death benefit: _____ Contract location: _____

Issuer: _____ Insured: _____

Insurance type: _____ Policy number: _____

Death benefit: _____ Contract location: _____

Group health insurance

Insurance company: _____

Contact name: _____ Phone: _____

Group: _____ Coverage for: _____

Insurance company: _____

Contact name: _____ Phone: _____

Group: _____ Coverage for: _____

Other coverage (continued)

Private disability insurance

Insurance company: _____

Contact name: _____ Phone: _____

Coverage type/person insured: _____ Policy number: _____

Coverage: \$ _____ Annual premium: \$ _____ Benefit period: _____

Insurance company: _____

Contact name: _____ Phone: _____

Coverage type/person insured: _____ Policy number: _____

Coverage: \$ _____ Annual premium: \$ _____ Benefit period: _____

Critical illness/disability insurance

Insurance company: _____

Contact name: _____ Phone: _____

Coverage type/person insured: _____ Certificate/policy number: _____

Coverage: \$ _____ Annual premium: \$ _____ Benefit period: _____

Property insurance (home/auto/other)

Property description: _____

Insurance company: _____ Contact name: _____

Phone: _____ Policy number: _____ Contract location: _____

Property description: _____

Insurance company: _____ Contact name: _____

Phone: _____ Policy number: _____ Contract location: _____

Other coverage (continued)

Property insurance (home/auto/other)

Property description: _____

Insurance company: _____ Contact name: _____

Phone: _____ Policy number: _____ Contract location: _____

Property description: _____

Insurance company: _____ Contact name: _____

Phone: _____ Policy number: _____ Contract location: _____

Other coverage (e.g., mortgage, credit cards, etc.)

Insurance company: _____

Coverage for: _____ Policy number: _____

Coverage: \$ _____ Contract location: _____

Insurance company: _____

Coverage for: _____ Policy number: _____

Coverage: \$ _____ Contract location: _____

Insurance company: _____

Coverage for: _____ Policy number: _____

Coverage: \$ _____ Contract location: _____

Insurance company: _____

Coverage for: _____ Policy number: _____

Coverage: \$ _____ Contract location: _____

Insurance company: _____

Coverage for: _____ Policy number: _____

Coverage: \$ _____ Contract location: _____

Location of other important documents



Your birth certificate: _____

Spouse's or partner's birth certificate: _____

Children's birth certificates: _____

Marriage licence: _____

Medical records: _____

Physician's name: _____ Phone: _____

Physician's name: _____ Phone: _____

Citizenship and passport papers: _____

Income tax returns: _____

Custody/adoption papers: _____

Pre-nuptial/cohabitation papers: _____

Separation/divorce papers: _____

Driver's licence: _____

Bank machine cards: _____

Pension plan documents: _____

Credit and other cards: _____

Stock certificates: _____

Utilities: _____

Other: _____

Your funeral and Will

Pre-planned funeral

Funeral home: _____
Contact name: _____ **Phone:** _____
Details: _____ **Cemetery plot:** _____
Plot location: _____ **Deed location:** _____

Your Will

Date of last Will/Codicil: _____ **Will location:** _____
Lawyer: _____ **Phone:** _____
Address: _____
Executor(s)/trustee(s): _____ **Phone:** _____
Address: _____

Beneficiaries

Name: _____ **Phone:** _____
Address: _____

Name: _____ **Phone:** _____
Address: _____

Name: _____ **Phone:** _____
Address: _____

Name: _____ **Phone:** _____
Address: _____

Notes: _____

Your spouse's or partner's funeral and Will

Your spouse's or partner's pre-planned funeral

Funeral home: _____
Contact name: _____ **Phone:** _____
Details: _____ **Cemetery plot:** _____
Plot location: _____ **Deed location:** _____

Your spouse's or partner's Will

Date of last Will/Codicil: _____ **Will location:** _____
Lawyer: _____ **Phone:** _____
Address: _____
Executor(s)/trustee(s): _____ **Phone:** _____
Address: _____

Beneficiaries

Name: _____ **Phone:** _____
Address: _____

Name: _____ **Phone:** _____
Address: _____

Name: _____ **Phone:** _____
Address: _____

Name: _____ **Phone:** _____
Address: _____

Notes: _____

Power of attorney

Power of attorney

Location: _____ **Type:** _____

Powers given to: _____ **Phone:** _____

Address: _____

Lawyer: _____ **Phone:** _____

Address: _____

Your spouse's or partner's power of attorney

Location: _____ **Type:** _____

Powers given to: _____ **Phone:** _____

Address: _____

Lawyer: _____ **Phone:** _____

Address: _____

Digital assets

Virtual assets (e.g., domain names, trademarks, intellectual property)

Description: _____ **Type:** _____

Additional information: _____

Description: _____ **Type:** _____

Additional information: _____

Description: _____ **Type:** _____

Additional information: _____

Description: _____ **Type:** _____

Additional information: _____

Subscriptions (e.g., digital magazines, Netflix, Amazon Prime)

Provider: _____ **Login ID:** _____

Web address: _____ **Password:** _____

Provider: _____ **Login ID:** _____

Web address: _____ **Password:** _____

Provider: _____ **Login ID:** _____

Web address: _____ **Password:** _____

Provider: _____ **Login ID:** _____

Web address: _____ **Password:** _____

Email accounts (e.g., Gmail, Outlook, Yahoo)

Provider: _____ **Login ID:** _____

Web address: _____ **Password:** _____

Provider: _____ **Login ID:** _____

Web address: _____ **Password:** _____

Digital assets (continued)

Electronic documents (e.g., photos, videos)

Description: _____ **Location:** _____

Access information: _____

Description: _____ **Location:** _____

Access information: _____

Description: _____ **Location:** _____

Access information: _____

Description: _____ **Location:** _____

Access information: _____

Description: _____ **Location:** _____

Access information: _____

Financial accounts (e.g., bank, brokerage or credit union accounts, employee benefit plans)

Provider: _____ **Login ID/Username:** _____

Web address: _____ **Password:** _____

Provider: _____ **Login ID/Username:** _____

Web address: _____ **Password:** _____

Provider: _____ **Login ID/Username:** _____

Web address: _____ **Password:** _____

Provider: _____ **Login ID/Username:** _____

Web address: _____ **Password:** _____

Provider: _____ **Login ID/Username:** _____

Web address: _____ **Password:** _____

Digital assets (continued)

Social media accounts (e.g., LinkedIn, Instagram, blogs)

Provider: _____ Login ID/Username: _____

Web address: _____ Password: _____

Provider: _____ Login ID/Username: _____

Web address: _____ Password: _____

Provider: _____ Login ID/Username: _____

Web address: _____ Password: _____

Provider: _____ Login ID/Username: _____

Web address: _____ Password: _____

Provider: _____ Login ID/Username: _____

Web address: _____ Password: _____

Provider: _____ Login ID/Username: _____

Web address: _____ Password: _____

Benefit accounts (e.g., airline miles, hotel or retailer reward/loyalty programs)

Provider: _____ Login ID/Username: _____

Web address: _____ Password/PIN: _____

Provider: _____ Login ID/Username: _____

Web address: _____ Password/PIN: _____

Provider: _____ Login ID/Username: _____

Web address: _____ Password/PIN: _____

Provider: _____ Login ID/Username: _____

Web address: _____ Password/PIN: _____

Digital assets (continued)

Electronic devices (e.g., computer, cell phone, tablet)

Device: _____ **Login ID (if applicable):** _____

Location: _____ **Password:** _____

Device: _____ **Login ID (if applicable):** _____

Location: _____ **Password:** _____

Device: _____ **Login ID (if applicable):** _____

Location: _____ **Password:** _____

Device: _____ **Login ID (if applicable):** _____

Location: _____ **Password:** _____

Other

Description: _____

Login ID: _____ **Password:** _____

Description: _____

Login ID: _____ **Password:** _____

Description: _____

Login ID: _____ **Password:** _____

Description: _____

Login ID: _____ **Password:** _____

Description: _____

Login ID: _____ **Password:** _____

Notes

Please indicate any other pertinent information; e.g., child support, any other outstanding debts, trusts, etc.



For more information on your wealth management needs,
speak with an RBC advisor or visit rbcwm.com.



Wealth
Management

This document has been prepared for use by the RBC Wealth Management member companies, RBC Dominion Securities Inc. (RBC DS)*, RBC Phillips, Hager & North Investment Counsel Inc. (RBC PH&N IC), RBC Wealth Management Financial Services Inc. (RBC WMFS), Royal Trust Corporation of Canada and The Royal Trust Company (collectively, the “Companies”) and their affiliates, RBC Direct Investing Inc. (RBC DI)* and Royal Mutual Funds Inc. (RMFI). *Member – Canadian Investor Protection Fund. Each of the Companies, their affiliates and the Royal Bank of Canada are separate corporate entities which are affiliated. “RBC advisor” refers to Private Bankers who are employees of Royal Bank of Canada and mutual fund representatives of RMFI, Investment Counsellors who are employees of RBC PH&N IC, Senior Trust Advisors and Trust Officers who are employees of The Royal Trust Company or Royal Trust Corporation of Canada, or Investment Advisors who are employees of RBC DS. In Quebec, financial planning services are provided by RMFI or RBC WMFS and each is licensed as a financial services firm in that province. In the rest of Canada, financial planning services are available through RMFI or RBC DS. Estate and trust services are provided by Royal Trust Corporation of Canada and The Royal Trust Company. If specific products or services are not offered by one of the Companies, RBC DI or RMFI, clients may request a referral to another RBC partner. Insurance products are offered through RBC Wealth Management Financial Services Inc., a subsidiary of RBC Dominion Securities Inc. When providing life insurance products in all provinces except Quebec, Investment Advisors are acting as Insurance Representatives of RBC Wealth Management Financial Services Inc. In Quebec, Investment Advisors are acting as Financial Security Advisors of RBC Wealth Management Financial Services Inc. RBC Wealth Management Financial Services Inc. is licensed as a financial services firm in the province of Quebec. The strategies, advice and technical content in this publication are provided for the general guidance and benefit of our clients, based on information believed to be accurate and complete, but we cannot guarantee its accuracy or completeness. This publication is not intended as nor does it constitute tax or legal advice. Readers should consult a qualified legal, tax or other professional advisor when planning to implement a strategy. This will ensure that their individual circumstances have been considered properly and that action is taken on the latest available information. Interest rates, market conditions, tax rules, and other investment factors are subject to change. This information is not investment advice and should only be used in conjunction with a discussion with your RBC advisor. None of the Companies, RMFI, RBC WMFS, RBC DI, Royal Bank of Canada or any of its affiliates or any other person accepts any liability whatsoever for any direct or consequential loss arising from any use of this report or the information contained herein. In certain branch locations, one or more of the Companies may carry on business from premises shared with other Royal Bank of Canada affiliates. Notwithstanding this fact, each of the Companies is a separate business and personal information and confidential information relating to client accounts can only be disclosed to other RBC affiliates if required to service your needs, by law or with your consent. Under the RBC Code of Conduct, RBC Privacy Principles and RBC Conflict of Interest Policy confidential information may not be shared between RBC affiliates without a valid reason. ®/™ Trademark(s) of Royal Bank of Canada. Used under licence. © Royal Bank of Canada 2024. All rights reserved. (07/2024)