

# Your Celebration of Life



The following kit has been prepared for you by the  
**TORONTO POLICE WIDOWS AND ORPHANS FUND**

It is our hope it will allow you to share your personal  
*Celebration of Life* with your loved ones.



Anthony C. Saldutto's painting "Abandoned".

“Life is a series of experiences, each one of which makes us bigger, even though sometimes it is hard to realize this. For the world was **built to develop character, and we must learn that the setbacks and** grieves which we endure help us in our marching forward.”

HENRY FORD



# About the Toronto Police Widows and Orphans Fund

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## **The Widows and Orphans Fund was incorporated on May 23, 1952.**

It is exclusively for members of the Toronto Police Service and was conceived by members of the Toronto Police Amateur Athletic Association to provide benefits and care for the families of police officers who died. Prior to the incorporation of the WOF, members contributed \$2 per pay when a member of the police force past away. Since its inception in 1952, the Widows and Orphans Fund has been providing benefits to families of active and retired members of the Toronto Police Service.

In 1982, the retired endowment benefit was transferred from the Amateur Athletic Association to the Widows and Orphans Fund and is a benefit appreciated by all retiring members of the Fund.

The WOF is structured to provide benefits for both retired and active members who pass away. The Fund is regulated by the Financial Service Commission of Ontario which reviews the operations of the Fund annually to ensure resources are there to pay the benefits as promised.

The WOF also recognizes the importance of estate planning and offers a subsidy to encourage members to have current wills in place.

The WOF is managed by a Board of volunteer members of the TPS maintaining their focus of providing benefits of need to members of the TPS.

This booklet is another indication of how the WOF cares for its members in assisting them in future needs.



Anthony C. Saldutto's painting  
*"The Rookie"*.

# *A Celebration of Life*

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Every person's life has a life style story. A unique story, which includes special people, and creates many lasting memories. Sharing these memories is the finest tribute we can make to our special loved one. In addition, this is a positive healing experience, which helps us cope with our grief.

By planning the funeral ceremony around a person's hobbies, activities, faith and interests their families help recall the special moments and beliefs of the individual's life through the memorial service. Some of the themes seen at services today include:

- **Hobbies:** music, painting, collecting
- **Sports:** baseball, golf, football, fishing
- **Military service**
- **Family traditions**



# Cemetery Arrangements

## PRE-PLANNING ARRANGEMENTS

When services are required, notify funeral home that has been pre-planned

Name of Cemetery: \_\_\_\_\_

Address: \_\_\_\_\_

City & Province: \_\_\_\_\_

Telephone: \_\_\_\_\_

**PLEASE CHECK (✓)**

### GROUND BURIAL

- Cemetery
- Burial Vaults
- Bronze Memorial
- Granite Base
- Upright Monument
- Ground Opening & Closing

### CREMATION

- Cremation lots
- Cremation Vault
- Cremation Memorial
- Cremation Fees
- Crypt Fees

### MAUSOLEUM ENTOMBMENT

- Mausoleum crypt
- Crypt Memorial
- Vase
- Candle
- Picture

### CREMATION NICHE

- Columbarium Niche
- Niche Urns
- Niche Memorial
- Niche Vase
- Niche Opening & Closing Fees



# Children

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**NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

Address: \_\_\_\_\_

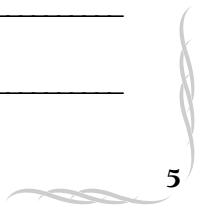
Phone Number: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_



# Relatives

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**NAME:** \_\_\_\_\_

Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_

Address & Phone no: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_

Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_

Address & Phone no: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_

Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_

Address & Phone no: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_

Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_

Address & Phone no: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_

Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_

Address & Phone no: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_

Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_

Address & Phone no: \_\_\_\_\_

# Final Arrangements

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The person or persons most likely responsible  
for carrying out your final arrangements

**NAME:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Tel no: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Tel no: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Tel no: \_\_\_\_\_

.....

**NAME:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Tel no: \_\_\_\_\_

# Funeral Arrangements

## AND SPECIAL WISHES

NAME: \_\_\_\_\_

Funeral Pre-arranged: \_\_\_\_\_

Funeral Home preferred: \_\_\_\_\_

### Person's wishes

Visitation preferred  Afternoon  Evening  Both

Embalming  Yes  No

Open Casket  Yes  No

Type of Casket  Wood  Metal  Cloth

Church service  Yes  No

Funeral Home Service  Yes  No

Fraternal Service  Yes  No

Glasses  Yes  No

Jewelry  Yes  No

Clothing  Yes  No

Flowers  Yes  No

Favorites: \_\_\_\_\_

Contribution in lieu of flowers  Yes  No

Charities: \_\_\_\_\_

Eulogy By: \_\_\_\_\_

Other special wishes (Music, poems): \_\_\_\_\_

Pallbearers: \_\_\_\_\_

Donation to Charities: \_\_\_\_\_

# Hospice

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## WHAT IS A HOSPICE PROGRAM?

When faced with mortality, we all react in different ways. Most people hope for a “good death” however they may define it. It’s important for a person to express preferences about health care at the end of life. This can be done through the use of formal legal documents which grant a durable power of attorney, for health care to someone you trust to make decisions for you should you become unable to do so yourself.

*Hospice* is a special concept of care designed to provide comfort and support to patients and their families when a life-limiting illness no longer responds to cure-oriented treatments

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*Hospice* care neither prolongs life nor hastens death. Hospice staff and volunteers offer a specialized knowledge of medical care, including pain management

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The goal of *Hospice* care is to improve the quality of a patient’s last days by offering comfort and dignity

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*Hospice* care is provided by a team-oriented group of specially trained professionals, volunteers and family members

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*Hospice* offers a variety of bereavement and counseling services to families before and after a patient’s death.

We have provided the e-mail address for Hospice Ontario [\*\*info@hospice.on.ca\*\*](mailto:info@hospice.on.ca)

# Important Medical Records

**List all special medical problems such as drug allergies or other conditions.  
Identify any member of the family who has a heart pacemaker**

**NAME:** \_\_\_\_\_

Registered with hospital: \_\_\_\_\_

Medical problems: \_\_\_\_\_

.....  
**My Physician is Dr:** \_\_\_\_\_ **Telephone no:** \_\_\_\_\_

Address: \_\_\_\_\_

**My Physician is Dr:** \_\_\_\_\_ **Telephone no:** \_\_\_\_\_

Address: \_\_\_\_\_

Health card no: \_\_\_\_\_

.....  
I have a pacemaker  YES  NO

I'm in favor of donating any required organs or tissue  YES  NO

I have a living Will  YES  NO

The status of my living will is as follows: \_\_\_\_\_

\_\_\_\_\_

# Life Insurance

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## TORONTO POLICE WIDOWS AND ORPHANS FUND (416-502-8711)

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Your Badge Number

Policy no.

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Amount

Beneficiary

Double Indemnity    Y    N   Waiver of Premium    Y    N

## TORONTO POLICE ASSOCIATION (416-491-4301)

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Policy no.

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Amount

Beneficiary

Double Indemnity    Y    N   Waiver of Premium    Y    N

## TORONTO POLICE SERVICE (416-808-2222)

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Policy no.

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Amount

Beneficiary

Double Indemnity    Y    N   Waiver of Premium    Y    N

# Life Insurance

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Company	Policy no.	Amount
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Phone no.	Primary Beneficiary
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Double Indemnity    Y    N   Waiver of Premium    Y    N

## DISABILITY INCOME

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Company	Policy no.	Amount
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Phone no.	Primary Beneficiary
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## HOME

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Company	Policy no.	Amount
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Phone no.	Primary Beneficiary
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## HEALTH

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Company	Policy no.	Amount
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Phone no.	Primary Beneficiary
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## AUTOMOBILE

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Company	Policy no.	Amount
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Phone no.	Primary Beneficiary
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# Investment Information

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## CREDIT CARDS

Name of Credit Card Issuer: \_\_\_\_\_

.....  
Name of Credit Card Issuer: \_\_\_\_\_

.....  
Name of Credit Card Issuer: \_\_\_\_\_

## STOCKS, BONDS, GIC, MUTUAL FUNDS, RRSP'S

Investment: \_\_\_\_\_

Held by: \_\_\_\_\_ Plan/Certificate no: \_\_\_\_\_

.....  
Investment: \_\_\_\_\_

Held by: \_\_\_\_\_ Plan/Certificate no: \_\_\_\_\_

.....  
Investment: \_\_\_\_\_

Held by: \_\_\_\_\_ Plan/Certificate no: \_\_\_\_\_

## REAL ESTATE INVESTMENTS

*(Residence, Business, Cottage, Investment Property)*

Type of Property: \_\_\_\_\_ Purchase Date: \_\_\_\_\_

Address/ Location: \_\_\_\_\_

Name and Address of Mortgagor: \_\_\_\_\_

.....  
Type of Property: \_\_\_\_\_ Purchase Date: \_\_\_\_\_

Address/ Location: \_\_\_\_\_

Name and Address of Mortgagor: \_\_\_\_\_



# Location of Important Papers

## INDICATE THE LOCATIONS OF THE VARIOUS PAPERS

(H) Home | (D) Safety box | (W) Work | (A) Attorney | (O) Other \_\_\_\_\_

- Will
- Deed to Home
- Legal Proof of age or Birth Certificate
- Bill of Sale on, or Title to, Automobile
- Marriage License
- Certificate of Ownership of Cemetery Lot, Crypt or Niche
- Life Insurance Policies
- Certificate of Funeral arrangements
- Accident & Health Policies
- Tax return, cancelled cheques and receipts
- Property damage Insurance
- Citizenship papers
- Stock Certificates, bonds, etc
- Copy of Mortgage or Lease
- Other important Documents

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# Memorable Events

## BAPTISMS, ENGAGEMENTS, WEDDINGS AND OTHER OCCASIONS

Name & Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Occasion: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

.....

Name & Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Occasion: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

.....

Name & Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Occasion: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

.....

Name & Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Occasion: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

.....

Name & Address: \_\_\_\_\_

Relationship: \_\_\_\_\_ Occasion: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

.....

Member of Clergy: \_\_\_\_\_

Church or Other Religious Institution: \_\_\_\_\_

Telephone: \_\_\_\_\_

# Banking Information

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## WITH BANKS OR TRUST COMPANIES

NAME AND ADDRESS OF  
FINANCIAL INSTITUTION: \_\_\_\_\_

Location of Deposit books, cheque books: \_\_\_\_\_

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NAME AND ADDRESS OF  
FINANCIAL INSTITUTION: \_\_\_\_\_

Location of Deposit books, cheque books: \_\_\_\_\_

.....

NAME AND ADDRESS OF  
FINANCIAL INSTITUTION: \_\_\_\_\_

Location of Deposit books, cheque books: \_\_\_\_\_

.....

NAME AND ADDRESS OF  
FINANCIAL INSTITUTION: \_\_\_\_\_

Location of Deposit books, cheque books: \_\_\_\_\_

.....

NAME AND ADDRESS OF  
FINANCIAL INSTITUTION: \_\_\_\_\_

Location of Deposit books, cheque books: \_\_\_\_\_

## SAFETY DEPOSIT BOXES

LOCATED AT: \_\_\_\_\_

LOCATED AT: \_\_\_\_\_

LOCATED AT: \_\_\_\_\_

# Personal Information

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NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SOCIAL INS: \_\_\_\_\_

DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

FATHER NAME: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

MOTHER MAIDEN NAME: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

MARITAL STATUS: \_\_\_\_\_ SPOUSE NAME: \_\_\_\_\_

NAME OF EXECUTOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

NEXT OF KIN: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

WORK HISTORY: \_\_\_\_\_ UNITS: \_\_\_\_\_

RETIRED: \_\_\_\_\_

YES  NO DATE: \_\_\_\_\_

# Things That Must be Done

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## WHEN A DEATH OCCURS IN A FAMILY

*\* Indicates details that can be planned or paid ahead of time*

**PLEASE CHECK (✓) WHEN COMPLETED**

### **NOTIFY AS SOON AS POSSIBLE**

- The doctor/coroner
- Funeral director
- The Toronto Police Services
- Minister
- Toronto Police Widows & Orphans Fund
- Lawyer
- Employers
- Newspaper
- Friends/ Relatives
- Pallbearers
- Insurance agents

### **COLLECT DOCUMENTS**

- Will
- Legal proof of age or birth certificate
- Social insurance number
- Marriage license
- Bank books
- Deeds to property
- Cemetery certificate of ownership
- Insurance policies

### **PAY FOR**

- Cemetery property
- Funeral arrangements
- Clergy
- Florist
- Clothing
- Hospitals & Ambulance

### **DECIDE AND ARRANGE WITHIN A FEW HOURS**

- Cemetery location
- Music
- Select Pall-bearers
- Casket type
- Order death certificate 8-10
- WOF
- Canada Pension
- TPS1
- Lawyers
- TPA
- Bank

# What Goes Into An Obituary

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When a loved one dies, the family often leaves the writing of the obituary up to the funeral director. When the obituary is left up to someone outside of the family, it often contains mistakes and doesn't really say what the family would like it to. This causes added pain when an incorrect obituary is placed in the paper and it feels like your loved ones' memory has been tainted somehow. It is best to write the obituary yourself because you are the one that knew the person the best and what is important to include and what is not. Some newspapers will not allow you to write the obituary as they have someone who does this job and the obituaries must follow a certain format. If this is the case, ask if you can collaborate with the newspaper instead of letting them deal exclusively with the funeral home. In any case, be sure to ask to see a final proof before the obituary goes into print.

When you are writing your obituary there are several important things to remember to include. Mention what your loved one did for a living. Even if they have been retired for many years, it is important to list their occupation. List any associations the person may have had such as Lion's Club, volunteer fire department, or any clubs they may have participated in.

When listing surviving relatives, it is important to keep the list short and limited to the immediate family as there is not much space given to obituaries. Save the room for something personal about the person that you would want them to be remembered by. Remember, many acquaintances are going to learn about the death of your loved one by reading the obituary, leave something touching there for them to keep.

Check over the obituary with a fine-toothed comb, making sure there are no typos or grammatical mistakes, be sure to include the person's age, or birthday and date of death and send your obituary to more than one paper. If your loved one had lived in another town or state for a portion of his life, send a copy to the newspapers in the other towns to notify people who may have knew him there.

People often save obituaries as remembrances of someone they loved, keep the obituary short but make sure it is something worthy of a scrap book and worthy of your loved ones' memory.

## AN OBITUARY SAMPLE

**BROWN, Edward Mike** – (Retired)  
Decorated Metropolitan Toronto  
Police Officer) At Hillside Estates on  
November 14, 2003 at the age of 73.  
Beloved husband of Doreen (nee  
Barker) Dear father of Cindy Johnston  
(nee Barker), Bill Barker, Tom Barker.  
Brother-in-law of Joan and Wally  
Thomas. Friends may call at Oshawa  
Funeral Service 905-551-5623.  
Memorial donations to the Canadian  
Cancer Society.

# *Will & Power of Attorney*

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## IMPORTANT FACTS ABOUT MY WILL

NAME: \_\_\_\_\_ My latest Will, dated: \_\_\_\_\_

Is deposited with: \_\_\_\_\_

Address: \_\_\_\_\_

The Executor of my Will is: \_\_\_\_\_ Telephone: \_\_\_\_\_

My Power of Attorney is: \_\_\_\_\_ Telephone: \_\_\_\_\_

The Lawyer who drew the Will is: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

# Important Phone Numbers

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Toronto Police Widows and Orphans Fund.....	416-502-8711
Toronto Police Association.....	416-491-4301
	1-888-462-8808
Police Pensioners Association .....	416-495-7091
Toronto Police Service .....	416-808-2222
	1-800-561-2557
Police Credit Union.....	416-226-3353
OMERS Pension Office .....	1-800-387-0813
Benefit Fund Pension Office.....	416-392-8399
Toronto Police Compensation & Benefits .....	416-808-7894
OHIP .....	1-800-268-1154
Employee Assistance .....	416-944-9123
Lawyer.....	_____
Church .....	_____
Canada Pension .....	_____
.....	_____
.....	_____
.....	_____
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