Here is a list of important documents you will need to replace if they have been destroyed and whom to contact about replacement.

Driver's license ................................................ Wisconsin Department of Transportation – Drivers & Vehicles
dot.wisconsin.gov/drivers/index.htm

Government issued ID ........................................ Contact the issuing authority

Insurance policies ........................................... Your insurance agent or company

Military discharge papers ............................... Department of Veterans’ Affairs
1-800-827-1000 or TTY/TTD 1-800-829-4833

Passports ........................................................ U.S. Department of State – Passport Services
1-877-487-2778 or TTY/TTD 1-888-874-7793
travel.state.gov/passport/passport_1738.html

Birth, death and marriage certificates ............. Wisconsin Department of Health Services
1-608-266-1371
https://www.dhs.wisconsin.gov/vitalrecords/

Social Security or Medicare cards .................. Local Social Security Office
1-800-772-1213 or TTY/TTD 1-800-325-0778
ssa.gov/ssnumber

Credit cards ..................................................... The issuing companies as soon as possible
MasterCard, contact issuing financial institution
Visa, contact issuing financial institution
American Express, 1-800-528-4800
Discover Card, 1-800-347-2683
TTY/TTD 1-800-347-7449

Titles to deeds ................................................. Records department of the area in which the property is located

Stocks and bonds........................................... Issuing company or your broker

Wills ................................................................. Your attorney

Income tax record ........................................... The IRS Center where filed, your accountant or
1-800-829-1040

Citizenship papers........................................... Bureau of Citizenship and Immigration Services
1-800-375-5283

Mortgage papers ............................................. Lending institution

Medical records.............................................. Your health care provider