

Legal Note: The Documents here are provided for your information and that of your immediate family only. You are not permitted to copy any document provided to you. Each of these Documents provided are intended as general assistance in simple legal matters only. No document is intended to be used for any item, transaction, or other matter, where the total value of the item, transaction or matter is worth more than \$ 5,000.00. You are not authorized to use any document for any transaction which is in excess of \$ 5,000.00 in value or is not a simple matter. As a guideline to the meaning of simple, consider the following: if you can complete the document without any questions, it is likely a simple matter. However, if you need to ask any questions, you should consult with your Plan attorney. Do not speculate about completion of the blanks in this matter.

The information provided in the documents, and the instructions provided with each document are not intended to constitute legal advice. These documents are intended to assist consumers in protecting themselves in certain simple transactions, without incurring expensive attorneys fees. If you need legal advice, Plan Attorneys will be happy to provide a free legal consultation, at no cost, to you as a Plan member. Understand that if you contact a Plan Attorney, he/she may not advise you as to how to complete your documents. They may only be retained to prepare documents for you which they deem to be proper in your situation.

Certain documents can be completed with either a pen or a typewriter, unless indicated otherwise in the specific instructions. **You should not make changes or alterations to any documents, once you have completed the document.** You must complete a new document fully, even if you wish to make any changes, even a small change. If you make any changes to a document, you cannot be sure that the change conforms to legal requirements. For example, changes to a will, in some circumstances, may void the entire will, even if you intended to make the changes. Thus, it is a safer practice to make a new document, if you intend to make any changes.

If there are blanks which are not used or which contain no information, place an X, or a line through the blank. This ensures that no person can make unauthorized modifications to a document, by simply completing the blanks, and changing the entire crux of the document.

Certain documents may require a notary. Notaries are certified by each state, and can only operate in the states in which they are licensed to operate. An invalid notary may invalidate your document. Notaries serve the purpose of verifying that the signature of the person signing the document, is in fact, the person claiming to have signed the document. Certain institutions require a notary, even when state law does not. Be sure to check with the parties with whom you are dealing to see if they will require a notary. Banks often require notaries.

If you believe that you must record a document, you should consult with a Plan Attorney. No document provided here is intended for recording, and any such document must be prepared by a Plan Attorney. We have not included certain documents, despite repeated requests, because these documents require the skill and expertise of an attorney. These include trusts, deeds, Mortgages, Escrow Agreements and other documents. Always consult a Plan Attorney before drafting one of these documents on your own.

PERSONAL INFORMATION

Name: _____
Address: _____

Social Security Number: _____
Date of Birth: _____
Residence Phone: _____

Position/Occupation: _____
Employer: _____
Address: _____

Business Phone: _____

Spouse

Name: _____
Address: _____

Social Security Number: _____
Date of Birth: _____
Residence Phone: _____

Position/Occupation: _____
Employer: _____
Address: _____

Business Phone: _____

Child(ren)

Name: _____
Address: _____

Social Security Number: _____
Date of Birth: _____

Will Information

Executor: _____
Address: _____

Phone: _____

Co-Executor: _____
Address: _____

Phone: _____

Alternate: _____
Address: _____

Phone: _____

Alternate: _____
Address: _____

Phone: _____

Location of Will: _____

Living Trust Information

Trustee: _____
Address: _____

Phone: _____

Successor Trustee: _____
Address: _____

Phone: _____

Location of Living Trust Agreement:

Location of Pour Over Will:

Living Will Information

Agent: _____
Address: _____

Phone: _____

Alternate Agent: _____
Address: _____

Phone: _____

Location of Living Will:

Health Care Power of Attorney Information

Agent: _____
Address: _____

Phone: _____

Alternate Agent: _____
Address: _____

Phone: _____

Location of Health Care Power of Attorney:

Special Power of Attorney Information

Agent: _____
Address: _____

Phone: _____

Alternate Agent: _____
Address: _____

Phone: _____

Location of Special Power of Attorney:

General Power of Attorney Information

Agent: _____
Address: _____

Phone: _____

Alternate Agent: _____
Address: _____

Phone: _____

Location of General Power of Attorney:

Safety Deposit Box

Name of Bank: _____
Address: _____

Location of Safety Deposit Box Keys:

Additional Safety Deposit Box Information:

Owner: _____
Beneficiary: _____

Account: _____
Amount: \$0
Owner: _____
Beneficiary: _____

Account: _____
Amount: \$0
Owner: _____
Beneficiary: _____

Account: _____
Amount: \$0
Owner: _____
Beneficiary: _____

Total IRA Accounts: \$0

Retirement/Profit Sharing Plans

Plan Name: _____
Amount: \$0
Owner: _____
Beneficiary: _____

Plan Name: _____
Amount: \$0
Owner: _____
Beneficiary: _____

Plan Name: _____
Amount: \$0
Owner: _____
Beneficiary: _____

Plan Name: _____
Amount: \$0
Owner: _____
Beneficiary: _____

Plan Name: _____
Amount: \$0
Owner: _____
Beneficiary: _____

Total Retirement/Profit Sharing: \$0

Investment Accounts (brokerage accounts, mutual funds)

Account: _____
Amount: \$0
Owner of Account: _____

Account: _____
Amount: \$0
Owner of Account: _____

Account: _____
Amount: \$0
Owner of Account: _____

Total Investment Accounts: \$0

Stocks

Name of Stock: _____
Owner of Stock: _____
Purchase Date: _____
Number of
 Shares/Units: 0.00
Current Price: 0.00
Amount: \$0

Name of Stock: _____
Owner of Stock: _____
Purchase Date: _____
Number of
 Shares/Units: 0.00
Current Price: 0.00
Amount: \$0

Name of Stock: _____
Owner of Stock: _____
Purchase Date: _____
Number of
 Shares/Units: 0.00
Current Price: 0.00
Amount: \$0

Name of Stock: _____
Owner of Stock: _____
Purchase Date: _____
Number of
 Shares/Units: 0.00
Current Price: 0.00
Amount: \$0

Total Value of Stocks: \$0

Bonds

Name of Bond: _____
Owner of Bond: _____
Purchase Date: _____
Face Value: \$0.00
Amount: \$0.00

Name of Bond: _____
Owner of Bond: _____
Purchase Date: _____
Face Value: \$0.00
Amount: \$0.00

Name of Bond: _____
Owner of Bond: _____
Purchase Date: _____
Face Value: \$0.00
Amount: \$0.00

Name of Bond: _____
Owner of Bond: _____
Purchase Date: _____
Face Value: \$0.00
Amount: \$0.00

Total Value of Bonds: \$0

Real Estate

Type: _____
Address: _____

Owner: _____
Amount: \$0

Legal Description: _____

Type: _____
Address: _____

Owner: _____
Amount: \$0

Legal Description: _____

Business Interests

Business Interest: _____
Owner: _____
Amount: \$0

Explanation: _____

Business Interest: _____
Owner: _____
Amount: \$0

Explanation: _____

Business Interest: _____
Owner: _____
Amount: \$0

Explanation: _____

Business Interest: _____
Owner: _____
Amount: \$0

Explanation: _____

Total Business Interests: \$0

Motor Vehicles

Type of Vehicle: _____
Owner: _____
Amount: \$0

Type of Vehicle: _____

Owner: _____
Amount: \$0

Type of Vehicle: _____
Owner: _____
Amount: \$0

Total Motor Vehicles: \$0

Personal Property and Household Furnishings

Property: _____
Owner: _____
Amount: \$0

Property: _____
Owner: _____
Amount: \$0

Property: _____
Owner: _____
Amount: \$0

Total Personal Property/Household Furnishings: \$0

Other Assets

Type of Assets: _____
Owner: _____
Amount: \$0

Type of Assets: _____
Owner: _____
Amount: \$0

Type of Assets: _____
Owner: _____
Amount: \$0

Total Other Assets: \$0

Loans

Lender: _____
Borrower: _____
Account Number: _____

Date of Loan: _____
Due Date: _____
Amount of Loan: \$0
Payment: 0.00 per _____
Interest Rate: 0.00 percent
Collateral: _____

Additional Information:

Lender: _____
Borrower: _____
Account Number: _____
Date of Loan: _____
Due Date: _____
Amount of Loan: \$0
Payment: 0.00 per _____
Interest Rate: 0.00 percent
Collateral: _____

Additional Information:

Lender: _____
Borrower: _____
Account Number: _____
Date of Loan: _____
Due Date: _____
Amount of Loan: \$0
Payment: 0.00 per _____

Interest Rate: 0.00 percent

Collateral: _____

Additional Information:

Total Loans: \$0

Other Liabilities