STEP 2 – I choo-choo-choose you!

My name is	and my address is	
carry out my estate plans.	The same person m	purposes only and choosing the individuals I would like to may serve in multiple capacities/roles. I will confirm that lese documents to prevent surprise.
Last Will and Testament –	The Executor who	can probate my Will and distribute per my instructions
Primary Executor:		
Altowasta Francista	Name	Address
Alternate Executor	 Name	Address
* For more alterna	tes, please write th	nem down on a separate sheet of paper
Statutory Power of Attorn	e y (SPOA) - To mal	ke financial decisions for me
Primary Agent:		
	Name	Address
Alternate Agent:	Name	Address
The SPOA starts: (c	heck one) The d	day I sign OR When I become incapacitated or disabled
The SPOA can: (che	ck all that apply) _	make gifts be compensated for their time
Medical Power of Attorne	y (MPOA) - To mak	ke medical decisions for me when I no longer can
Primary Agent:		
7	Name	Address
Alternate Agent:	Name o	
	Name	Auuress

I will keep the original MPOA document and decide where to keep a copy of it