

ESTATE PLANNING CASE PROFILE

SPOUSE A'S INFORMATION

Name: _____

County of Residence: _____

Address: _____

Children:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

Personal Representatives (Executor) of Will:

1. _____

2. _____

SPOUSE B'S INFORMATION

Name: _____

County of Residence: _____

Address: _____

Children:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

Personal Representatives (Executor) of Will:

1. _____

2. _____

MEDICAL POWER OF ATTORNEY

1. Primary Agent Name: _____

County of Residence: _____

Address: _____

Phone number: _____

2. Secondary Agent Name: _____

County of Residence: _____

Address: _____

Phone number: _____

STATUTORY DURABLE POWER OF ATTORNEY

1. Primary Agent Name: _____

County of Residence: _____

Address: _____

Phone number: _____

2. Secondary Agent Name: _____

County of Residence: _____

Address: _____

Phone number: _____