



Online Estate Planning Just Got Easier!

# PREPARE YOUR FAMILY LEGACY

## NETLAW DOCUMENT SUITE

### **Last Will & Testament**

Dictates debt arrangements, asset distribution, and guardianship for minor children at death. Usually called a Will.

### **Revocable Living Trust**

Often pairs with your Will to distribute certain assets and funds through the Trust instead of your Will to avoid probate court and maintain privacy.

### **Power of Attorney**

Authorizes those responsible for making financial decisions and transactions if you are incapacitated.

### **Health Care Surrogate Designation**

Names a person to make healthcare decisions if incapacitated. Also called a Health Care Power of Attorney.

### **HIPAA Authorization**

Designates a person or party that may receive access to your confidential medical and mental health information protected by the Health Insurance Portability and Accountability Act of 1996.

### **Living Will Declaration**

Instructs physicians and loved ones whether to keep you alive or not if you are permanently unconscious or have a terminal condition. Also called an Advance Directive.

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# IS ESTATE PLANNING IS RIGHT FOR YOU?

## TAKE A SHORT QUIZ!

1. Do you already have proper arrangements to settle debts and a personal representative to oversee the settlement of your estate? **Yes or No**
2. If you have children, have you specified a caretaker should something happen to you? **Yes or No**
3. Are you aware of the necessary documents that allow you to access your child's medical records and influence medical decisions even after they turn 18? **Yes or No**
4. Are you comfortable letting your children control their inheritance when they turn 18? **Yes or No**
5. Are you comfortable with the state freezing your assets and deciding what happens to your possessions at your death? **Yes or No**
6. Have you identified who will handle your financial and legal affairs should you become incapacitated? **Yes or No**
7. Do you know who will make healthcare and life decisions for you if something happens to you? **Yes or No**
8. Do you know which family members (including your spouse) will have access to your medical info in writing? **Yes or No**
9. Have you acknowledged what treatments to administer or withhold even when recovery isn't likely? **Yes or No**
10. Have you updated your estate plan to reflect your most recent life changes? **Yes or No**

Did you answer "No" to any of the above questions?

## Reach out to your advisor today!

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