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# Estate planning information

## Will information

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| <b>Whose will?</b>                             |
| <b>Date last updated</b>                       |
| <b>Name of personal representative</b>         |
| <b>Phone number of personal representative</b> |
| <b>Address of personal representative</b>      |
| <b>Name of children's guardians</b>            |
| <b>Guardian's phone number</b>                 |
| <b>Guardian's address</b>                      |

## Revocable living trusts

|                                      |
|--------------------------------------|
| <b>Trust/Name</b>                    |
| <b>Established by</b>                |
| <b>Date executed</b>                 |
| <b>Current and successor trustee</b> |
| <b>Assets funding it</b>             |

## Irrevocable living trusts

|                           |
|---------------------------|
| <b>Trust/Name</b>         |
| <b>Date executed</b>      |
| <b>Insureds</b>           |
| <b>Death benefit</b>      |
| <b>Current cash value</b> |
| <b>Beneficiaries</b>      |
| <b>Name of trustee</b>    |

## Irrevocable life insurance trusts

|                           |
|---------------------------|
| <b>Trust/Name</b>         |
| <b>Date executed</b>      |
| <b>Insureds</b>           |
| <b>Death benefit</b>      |
| <b>Current cash value</b> |
| <b>Beneficiaries</b>      |
| <b>Name of trustee</b>    |

Do you have a Power of Attorney?  Yes  No

*If yes, name of power holder:* \_\_\_\_\_

Does your spouse/partner have a Power of Attorney?  Yes  No

*If yes, name of power holder:* \_\_\_\_\_

Do you have a Living Will/Health Care Power of Attorney or Directive?  Yes  No

*If yes, name of power holder:* \_\_\_\_\_

Does your spouse have a Living Will/Health Care Power of Attorney or Directive?  Yes  No

*If yes, name of power holder:* \_\_\_\_\_

The information provided in this piece is for general reference only and is not legal advice. You should consult an attorney who is licensed to practice law in your state of residence to interpret and apply this information to your particular situation.

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### Securian Financial Group, Inc.

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### Group Insurance

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