## **EXHIBIT "A": GUARDIANSHIP - ADULTS**

PLEASE BRING THE FOLLOWING DOCUMENTS WITH YOU AND WE WILL COPY THEM HERE DURING YOUR APPOINTMENT:

- 1. LAST WILL & TESTAMENT; CODICIL TO THE WILL.
- 2. SEPARATE WRITTEN LIST OF TANGIBLE DEVISES.
- 3. TRUST AGREEMENT; TRUST AMENDMENTS.
- 4. CERTIFIED COPY OF SPOUSE'S DEATH CERTIFICATE.
- 5. PROOF OF PUBLIC ASSISTANCE (I.E. MEDICAID).
- 6. DEED, CURRENT TAX BILL AND HOMEOWNER'S INSURANCE BILL FOR HOME AND ANY OTHER REAL ESTATE YOU OWN.
- 7. CAR TITLE/VEHICLE REGISTRATION, INSURANCE POLICY AND BILL FOR ALL AUTOMOBILES IN WHICH YOU HAVE AN INTEREST.
- 8. STOCK CERTIFICATES OR RECENT STOCK STATEMENTS FOR STOCKS IN WHICH YOU HAVE AN INTEREST.
- 9. MORTGAGE PAPERS.
- 10. RECENT BANK STATEMENTS FOR ALL BANK ACCOUNTS, IRA'S AND CERTIFICATES OF DEPOSIT IN WHICH YOU HAVE AN INTEREST.
- 11. LIFE INSURANCE POLICIES IN WHICH YOU ARE THE OWNER OR NAMED INSURED.
- 12. ANNUITY CONTRACTS, RETIREMENT AND PENSION PLANS.
- 13. DOCUMENTS EVIDENCING OTHER TYPES OF INVESTMENTS IN WHICH YOU HAVE AN INTEREST.
- 14. DURABLE POWER OF ATTORNEY.
- 15. LIVING WILL OR MEDICAL ADVANCE DIRECTIVE.
- 16. DESIGNATION OF HEALTH CARE SURROGATE.
- 17. LIVING/REVOCABLE TRUST.
- 18. PRE OR POST NUPTIAL AGREEMENT.
- 19. COPIES OF HEALTH INSURANCE INFORMATION (MEDICARE; HMO; LONG TERM CARE INSURANCE) INCLUDING THE COST.
- 20. DOCUMENTATION ON MONTHLY EXPENSES.
- 21. STATEMENT FROM SOCIAL SECURITY IDENTIFYING THE TYPE OF BENEFITS (RETIREMENT; SURVIVORS; SSI; SSDI) AND AMOUNT.
- 22. LETTER/NOTES FROM MEDICAL PROFESSIONAL WITH DIAGNOSIS OF MENTAL INCAPACITY/DISABILITY.