

# LEGAL TRACKER



Fill out this document to get all of your loved one's legal information in one place.

## PEOPLE

ROLE	LEGAL ESTABLISH DATE	NAME	CONTACT	RESPONSIBILITIES
Power of Attorney				
Health Care Proxy (if different than POA)				
Guardian				

## DOCUMENTS

TYPE	LEGAL ESTABLISH DATE	LOCATION OF DOCUMENT	NOTES
Last Will			
Advance Directive / Living Will			

Elder Law Attorney: \_\_\_\_\_ Contact: \_\_\_\_\_