TRUST MATTERS

Confidential Information Sheet Complete all information that applies to this petition.

Case Number:				
Name of Trust:				
When Created:	Cre	eated by whom:		
Type of Trust:				
Settlor(s) of Trust:				
Settlor(s) Date of death:				
Pour-over Will(s) created and by whom:			Date of Will(s):	
Trustee(s):		Successor Trustee(s):	
Trust Amendments and/or Restat	ements:			
Beneficiary	☐ Minor _		Beneficiary	☐ Minor ☐ Adult
Beneficiary	☐ Minor ☐ Adult		Beneficiary	☐ Minor
Beneficiary	☐ Minor ☐ Adult		Beneficiary	☐ Minor
Contingent Beneficiary	☐ Minor _ ☐ Adult		Contingent Beneficiary	☐ Minor