

## Life Insurance

Reference Name	Carrier	Policy Date	Nickname	Insured	Owner	Beneficiary	Policy Type	Premium	Data Collected	Account Value	Cash Surrender Value	Face Amount
Whole Life *	Northwestern	N/A		Weller, Jacob	Weller, Samantha	-	Universal Life	\$30,000 / Annual	04/01/2019	\$537,000	\$0	\$1,000,000
Term Life to 2034 *	Ohio National	N/A		Weller, Jacob	Weller, Jacob	-	Term Life		04/01/2019	\$0	\$0	\$2,500,000
Group Life *	Paid by employer	N/A		Weller, Samantha	Weller, Samantha	-	Term Life		04/01/2019	\$0	\$0	\$180,000
Buy Sell *	Paid by Employer	N/A		Weller, Jacob	Weller, Jacob	-	Term Life		04/01/2023	\$0	\$0	\$1,000,000
								<b>\$30,000 / yr</b>		<b>\$537,000</b>	<b>\$0</b>	<b>\$4,680,000</b>

## Disability Insurance

Reference Name	Carrier	Policy Date	Nickname	Insured	Owner	Beneficiary	Policy Type	Premium	Data Collected	Elimination Period	Benefit Period	Benefit
Disability *	Guardian	N/A		Weller, Jacob	-	Weller, Jacob	Disability	\$980 / Annual	04/01/2023		65 Age	\$2,000/mo
Disability *	MassMutual	N/A		Weller, Jacob	-	-	Disability	\$3,800 / Annual	04/01/2023		65 Age	\$10,000/mo
Disability *	Standard	N/A		Weller, Jacob	-	-	Disability	\$1,400 / Annual	04/01/2023		65 Age	\$3,000/mo
Disability Insurance *	through work	N/A		Weller, Samantha	-	-	Disability		04/01/2023		65 Age	\$9,000/mo
								<b>\$6,180 / yr</b>				<b>\$24,000/mo</b>

## Long Term Care Insurance

Reference Name	Carrier	Policy Date	Nickname	Insured	Owner	Beneficiary	Policy Type	Premium	Data Collected	Elimination Period	Benefit Period	Benefit
No entries												

## Property and Casualty Insurance

Reference Name	Carrier	Policy Date	Nickname	Insured	Owner	Linked Asset	Linked Member	Premium	Data Collected	Coverage Amount
----------------	---------	-------------	----------	---------	-------	--------------	---------------	---------	----------------	-----------------