

# SpecialCare<sup>SM</sup>

## TRUE OR FALSE

1. I have identified a legal guardian and trustee to handle my child's special needs: ☐TRUE ☐FALSE
2. I have planned where my child will live if I'm not around: ☐TRUE ☐FALSE
3. I have made provisions to fund my loved one's expenses over time: ☐TRUE ☐FALSE
4. My family knows my hopes and goals for my loved one's quality of life: ☐TRUE ☐FALSE
5. I have a contingency plan for my loved one should something happen to me: ☐TRUE ☐FALSE
6. I have drafted a Letter of Intent: ☐TRUE ☐FALSE
7. I have begun setting aside money for the future care of my loved one: ☐TRUE ☐FALSE
8. I fully understand the government benefits available to a person with special needs: ☐TRUE ☐FALSE
9. My child will have adequate health insurance in the future: ☐TRUE ☐FALSE
10. I have an estate plan in place: ☐TRUE ☐FALSE

*Are there any "False" answers that you would like to be "True"?  
We welcome your call and the opportunity to discuss your needs.*

- Telephone: 480-538-2900
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