CLIENT QUESTIONNAIRE

Plan for a productive conversation with your financial professional

Before your meeting, please respond to the following questions. When you've finished, email this completed form to your financial professional.

Name: ____________________

1. When I think about my overall goal for my assets, do I plan to completely spend them down? Yes ☐ No ☐
   Do I want to pass wealth to my loved ones? Yes ☐ No ☐ How much? ____________________
2. Do I have a good understanding of what care costs in my area? For example, do I know the difference between skilled nursing home care and the cost of in-home care? Yes ☐ No ☐
3. If I had a need for care, is my preference to stay at home for as long as possible or would I choose to go to a facility if there's a cost savings involved? ____________________
4. If I went to a facility, I would want it to have a rating of? 5-star ☐ 4-star ☐ 3-star ☐ No preference ☐
5. Many people believe that Medicare or Medicaid will cover these costs, yet often long-term care becomes private pay for the family day one and dollar one. On the very first day, where is that money coming from? Which asset would I sell first? ____________________
6. Would that create any additional tax implications for me and/or my spouse? Yes ☐ No ☐
7. Taking affordability off the table, am I going to feel comfortable with that level of assets being spent to provide care for me? Yes ☐ No ☐
8. Am I concerned about what the stock market might be doing if and when I need care? Yes ☐ No ☐
9. Do I have financial powers of attorney to help someone have access to pay for my care? Yes ☐ No ☐
10. If I had a need for care, would it be valuable for me to have some level of advocacy and coordination services set up to have myself or my loved ones pick a care facility? Yes ☐ No ☐
11. Would I want a family member acting as a caregiver for me in any capacity? Yes ☐ No ☐
12. If I should ever need care, what is my family prepared to do physically and financially?

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    Are they willing to sacrifice time to provide assistance? Yes ☐ No ☐
    Are they even aware and feel comfortable that this is your plan? Yes ☐ No ☐