

CMPlanning.com

Case type: Pre-Planning Crisis Planning Coordinated Benefits (VA & Medicaid) Review State

Husband _____ Age _____ D/O/B _____ Wife _____ Age _____ D/O/B _____

Current Health Concerns: Home Healthcare _____ Assisted Living _____ Skilled Nursing _____

Children: Deceased _____ Living _____ Any children legally disabled or receiving SSDI or SSI? Yes No

Husband: Will Living Trust Special Trust POA Financial POA Medical Living Will None

Wife: Will Living Trust Special Trust POA Financial POA Medical Living Will None

H u s b a n d ' s decision maker: Wife as POA POA Agent or Conservator (circle one):

Wife's decision maker: Wife as POA POA Agent or Conservator (circle one):

ASSET SUMMARY	
Asset Type	Net Values
Real Estate	
Checking Savings	
Investments: Stocks/Bonds/Brokerage	
Qualified Investments: IRA/Roth IRA/401k/SEP/etc.	
Life Insurance	
Annuities	
Funeral or Burial Space	
Miscellaneous	

INCOME SUMMARY		
Recipient	Type:	Amount:
Husband	Social Security	
	Pension	
	Others	
Wife	Social Security	
	Pension	
	Others	

Special concerns: _____

RETURN VIA: cfgins@rcn.com 800-368-3211 FAX: 800-776-2286