TOPICS FOR REVIEW

Client Name:____

This form tries to keep track of some of your current needs, wants, wishes, and requests for information. Should any changes occur after the time this is first started, it is your responsibility to contact Jim Zientara, Financial Planner, or his office, of the changed or new circumstances. Two way communication is important for both clients and prospects.

Comprehensive Financial Planning. Goal Planning and Monitoring **Social Security, Medicare, acct aggregation, digital assets**	Already covered _____	Let's talk_____	Not interested_____
Depleting assets and outliving your money. Investment review. **Guaranteed lifetime income**	Already covered_____	Let's talk_____	Not interested_____
Three longevity questions: **Light bulb, ice cream cone, lunch**	Already covered_____	Let's talk_____	Not interested_____
Diversification, professional money management, risk **Investment objectives**	Already covered_____	Let's talk_____	Not interested_____
Trust, special needs trust, and estate planning with an attorney. **Advanced healthcare directive/incapacity/surrogate**	Already covered_____	Let's talk_____	Not interested_____
Insurance: Long Term Care, life insurance, annuities **Medicare, Medicaid**	Already covered_____	Let's talk_____	Not interested_____
Disability income insurance for workers.	Already covered_____	Let's talk_____	Not interested_____
Asset Protection from creditors. **Annuities: fixed, variable, indexed**	Already covered_____	Let's talk_____	Not interested_____
Taxes and tax planning with your tax advisor.	Already covered_____	Let's talk_____	Not interested_____
Lending, mortgage, and debt management.	Already covered_____	Let's talk_____	Not interested_____
Real estate. Where to live. Continuing Care Retirement Center **Memory care**	Already covered_____	Let's talk_____	Not interested_____
Wealth transfer. Planned charitable giving. Funeral plans. **Beneficiary review. 529 College Savings Plan**	Already covered_____	Let's talk_____	Not interested_____

Other Topics. ____

Client/Prospect Signature:______________________________ **Date:**_________

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