

## Exploring Longevity Planning Resources

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Please answer this questionnaire and bring it to our next meeting or send it back via email. This will help drive our discussion around the longevity planning resources offered to you as my client.

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Would you like help reviewing your Medicare options? You can be enrolling for the first time or evaluating a current plan.

Yes     No

Would you (or a family member or friend) like to know if your home is safe for aging in place?

Yes     No

Would you like help finding home health care services, an assisted living facility, or other caregiving options for yourself or a family member?

Yes     No

Would you like assistance coordinating care for a senior or individual with special needs?

Yes     No

Would you like access to a health care concierge to help you and your family if a health crisis or difficult diagnosis occurs?

Yes     No

Would you like protection against financial fraud?

Yes     No

Would you like your friends or family to help protect your accounts against financial fraud?

Yes     No

Would you like to help protect an elder family member or friend's accounts against financial fraud?

Yes     No

Are you interested in creating an archive to share your life and legacy with family and friends?

Yes     No

Would you like to have critical life details prepared for your family as a part of your legacy planning?

Yes     No

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