

Special Needs Legal & Future Planning

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INFORMATION REQUEST FORM

DOCUMENTS WILL BE SENT BY EMAIL (select 🗵 boxes below)

- 1. **D** Special Needs Alliance "Special Needs Trust Handbook"
- 2. **D** Letters of Intent ("Guidance & Information Form" for "future team")
- 3. Impact on Divorce & Child Support on SSI & Medicaid
- 4. C Keeping your Child on YOUR Health Insurance (past 26)
- 5. **Guardianship & Alternatives (Powers of Attorney)**
- 6. 🛛 Special Needs Trusts & Special Needs Future Planning
- 7. Adult Sibling Group & Sib Shop information for younger siblings
- 8. Impact of Guardianship on Driver's License
- 9. 🗖 Taxes & Special Needs Trusts
- 10. 🔲 Taxes & Adult HBSS Waiver
- 11. D ABLE Accounts
- 12. D Military Pension Benefit (SBP)
- 13. D Pre-Paid Funeral Arrangements Rules
- 14. D Please add me/us to your list to receive your newsletters by email

Check appropriate box and complete the needed information.

1. Do <u>not</u> contact me/us, just please send by email the information requested above. Email address is: _____

2. **D** Please contact me (us) to schedule an "Initial Consultation".

Day time phone number: ()	Email:
Name(s):	

3. **D** Please contact me (us) to schedule a presentation to a group, organization, school, or agency.

Day time phone number: (____) _____ Email: _____

Name(s): _____