





HOW TO WRITE A

# *Memorandum of Intent*

Planner/Attorney Name Name  
Firm Name Firm Name







# How to Write a Memorandum of Intent

*A Guide When Writing  
Your Letter*




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The information in this guide should not be considered legal advice. While we strive to provide as detailed, reliable and understandable legal information as possible in our ASNP Guides, they cannot substitute for an attorney applying the law and years of experience to a particular client situation. We urge readers to use the Guides as background material and to consult with one of our members before taking action.



*A Memorandum (or Letter) of Intent communicates and documents your preferences regarding the care of John Doe as beneficiary of the special needs trust you created. It provides a guideline for those people who may become responsible for decisions about John as beneficiary of the special needs trust.*





*The Memorandum of Intent is a personal letter drafted by you that is intended to give your trustees insight and information regarding services, supports and other personal matters affecting John. This letter differs from the trust because it does not convey legally binding directions like those in a trust. Rather, it is a personal letter to those people who will have responsibility for John when they must make important decisions.*



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## **POINTS TO REMEMBER**

- 1** Parents, brothers, sisters, other family members, and especially John should contribute to the letter.
- 2** The contents of the letter should reflect your expectations. Future circumstances may make it difficult for others to carry out strict demands. You must trust that those carrying out your plan will try to adhere to your expectations.
- 3** You should gear the preferences in the letter toward enhancing John's independence and growth. Your requests should not accommodate





the convenience of other family members or service providers.

**4** The letter should be written in non-technical language by you. It should communicate to the reader your heartfelt desires.

**5** A letter of intent is not legally binding like your trust. However, its contents should not contradict your trust. Please provide the law firm of [NAME OF YOUR LAW FIRM] with your letter (plus any later revised letters) so we can make sure that it is consistent with the terms of your trust.

**6** Periodically review, and if necessary, update your letter. Make sure that it still reflects not only your expectations, but also the preferences of other family members and John. Age and circumstances may alter what you want in your letter.



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## THE LETTER SHOULD INCLUDE:

**1** The letter should begin by stating John's full name, date of birth, place of birth, name of the trust, date of trust, and John's Social Security Number.



**2** You should then name the agencies that relatives, trustees, and guardians should contact for advice and help (e.g., local chapter of the ARC, the law firm of [NAME OF YOUR LAW FIRM], case manager, care providers, physicians, therapists, close family members and friends, etc.).



### **3** *Financial and Other Support for John*



- List all government benefits that John receives or may be eligible to receive.
- List any arrangements with a corporate trustee, care manager or other entity for John's continued care. Include the name and address, plus any special instructions.
- If appropriate, list John's current employment or the type of employment he might like.

### **4** *Current Living Arrangements*



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- Describe the type of living situation you anticipate for John (e.g., live with a particular relative or in a small group home or apartment with support).
  - The location of the living situation you anticipate for John (e.g., the geographic locale you prefer and type of physical and natural environment, if that is important).
  - The qualities of the living arrangement (e.g., non-smoking home, adhere to a certain religion, only allows certain types of disabilities).
  - Regular routines in the person's schedule (e.g., daily schedule of getting ready for school, weekly appointments).

### **5** *Programs and Services*

- Name the type of school or day program setting expected.
- List the name and address of day programs, sports programs, habilitation programs or other programs and activities in which John regularly participates.

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- List the type of services, therapies, or medical interventions that are needed, or may be needed (e.g., job training, speech therapy, behavioral evaluations).
  - Describe John's routine medical care (e.g., regular check-up schedule, annual eye examination) and the names and locations of preferred medical professionals.
  - Identify any health insurance that should be maintained, including addresses, phone numbers and insurance number. Make a copy of the insurance card and attach it to the letter.

## **6** *Personal Preferences*

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- Describe John's grooming preferences (e.g., type and color of clothes, hair style, preferred toilet articles).
  - Describe likes and dislikes about food, chores, and other routine daily activities.
  - List favorite personal items (e.g., personal radio, certain furniture, personal pet).
  - Describe personal habits that it would be important for someone else to know about.
  - List all friends and relatives, their addresses, and how often John likes to visit these people.
  - List John's favorite recreation and other leisure activities and the level of independence in these activities. Include how often John likes to participate in these activities.
  - Describe any religious preferences and how often John participates in religious activities.



## 7 **Abilities**

- Describe John's level of independence for getting around the community (e.g., ability to ride public transportation, independence in shopping, ability to go out alone).
- Describe John's ability to handle money (e.g., change-making, independence in purchasing items).
- Describe John's abilities in reading, writing, communicating, and understanding what others say. If John does not use verbal communications, note how John communicates desires or replies to others.
- Describe any aspects of John's disability that you feel are particularly important to be aware of (e.g., needs a structured environment, must be kept from food, does not like loud noises).



## 8 **Completing the Letter**



- Some clients find it easier to write the letter if they keep a daily journal for several weeks, which records the daily, weekly and monthly activities of both John and those people who provide support and care. The journal can then be condensed into a letter.
- List any other information you feel is particularly important.
- You should sign and date the letter. The letter (and any revised letters) should be sent to the law firm of [NAME OF YOUR LAW FIRM]. Keep a copy for yourself and a copy with your trust. Distribute the letter to those who may be responsible for decisions about John.

Planner/Attorney Name Name

FIRM NAME FIRM NAME

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Firm City, Firm State

Phone Number

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