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Financial Planning Review and CHECKLIST

Name: _____ Date: _____
Phone: _____ Email: _____

Please indicate on this form what most needs to review. Your response helps us determine how we might be of service to you in helping you keep your insurance, retirement and financial goals up-to-date. Information provided is added to your file and is kept in strict confidence.

Fixed Accounts cash

- *Checking and Saving accounts*
- *Money Market*

Securities and Investment

- *Brokerage accounts*
- *Mutual Funds, ETFs, Stocks*
- *Annuities*

Retirement Plan

- *401(K) Plan (Profit-Sharing), 403(b), Simple IRA, SEP, IRA, (traditional and Roth), ..*
- *Cash Balance Defined Benefit Plan*
- *Employee Stock Ownership*
- *Stock Option - Bonus Plan*
- *Social Security Statements*

Assets

- *Primary Residence, Vacation*
- *Automobiles, Valuable Personal*
- *Investment Real Estate*
- *Business value*

Liability

- *Mortgage and credit line.*
- *Credit Cards*
- *Auto Loan*
- *Student Loan*
- *Business Loan*
- *Taxes*

Protection and Insurance

- *Life Insurance (Whole life – Term - Group)*
- *Disability Insurance (personal or Group)*
- *Employee benefit GROUP*
- *Long-Term Care*
- *Property and Casualty – Umbrella Policy*

College Funds Plans

- *529 Plans Education Savings*
- *UTMA or UGMA accounts*
- *Cash Value*
- *Roth IRA for children*

Tax and Estate Documents

- *Tax return and W-2*
- *Currant Paystub*
- *Will and Trust*
- *Power of Attorney and Health Care Proxy*
- *Gifting Plan*

Business Document

- *Financial Statement*
- *Buy / Sell Agreement*
- *Key person benefits*
- *Group Benefits*
- *Corporate Tax return*
- *S-Corp – C-Corp – LLC*
- *Exit Strategy*

I would like to introduce you to a relative/friend/acquaintance of mine:

Name: _____ Telephone #: _____

Name: _____ Telephone #: _____

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