



Agent Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name: M  F  \_\_\_\_\_

Desired Retirement Age: \_\_\_\_\_

Spouse Name: M  F  \_\_\_\_\_

Desired Retirement Age: \_\_\_\_\_

Number of Children: \_\_\_\_\_ Ages \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

State of Issue: \_\_\_\_\_

Birth Date: \_\_\_ / \_\_\_ / \_\_\_

Birth Date: \_\_\_ / \_\_\_ / \_\_\_

## Current Concerns

- |  |  |
|--|--|
| <input type="checkbox"/> Controlling Spending                                  | <input type="checkbox"/> Creating your own Family Bank |
| <input type="checkbox"/> Eliminating Debt                                      | <input type="checkbox"/> Wills/Trust                   |
| <input type="checkbox"/> Reducing Taxes  | <input type="checkbox"/> Asset Protection              |
| <input type="checkbox"/> Providing for children's or grandchildren's education | <input type="checkbox"/> Estate Planning               |
| <input type="checkbox"/> Maximizing Savings                                    |  |

Future Expenditures: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## Real Estate

### Personal Residence Information:

Mortgage Payment (P&I only) \$ \_\_\_\_\_

Outstanding Mortgage \$ \_\_\_\_\_ Term Remaining \_\_\_\_\_ years

Type of Mortgage (check one & circle applicable term)

Fixed Term (30 year, 15 year, etc.)       ARM (5 yr, 7 yr, 10 yr, etc.)

Interest Rate: \_\_\_\_\_%

Interest Only

### Other Property Owned:

Mortgage Payment (P&I only) \$ \_\_\_\_\_

Outstanding Mortgage \$ \_\_\_\_\_ Term Remaining \_\_\_\_\_ years

Type of Mortgage (check one & circle applicable term)

Fixed Term (30 year, 15 year, etc.)       ARM (5 yr, 7 yr, 10 yr, etc.)

Interest Rate: \_\_\_\_\_%

Interest Only



## Debt Related

Please list any outstanding debts other than mortgages

Name	Amount Owed	Interest Rate	Minimum Payment	Actual Payment
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____
_____	\$ _____	_____ %	\$ _____	\$ _____

## Insurance

### Husband Life Insurance

General Health: \_\_\_\_\_

Preferred  Standard Non-tobacco:  Tobacco:

Permanent or Term

Yearly Premium: \$ \_\_\_\_\_ Death Benefit \$ \_\_\_\_\_ Cash Value \$ \_\_\_\_\_

Permanent or Term

Premium: \$ \_\_\_\_\_ Death Benefit \$ \_\_\_\_\_ Cash Value \$ \_\_\_\_\_

### Wife Life Insurance

General Health: \_\_\_\_\_

Preferred  Standard Non-tobacco:  Tobacco:

Permanent or Term

Premium: \$ \_\_\_\_\_ Death Benefit \$ \_\_\_\_\_ Cash Value \$ \_\_\_\_\_

Permanent or Term

Premium: \$ \_\_\_\_\_ Death Benefit \$ \_\_\_\_\_ Cash Value \$ \_\_\_\_\_





# Redirected Money

Monthly Over-Payments from Debts	_____
Monthly Contribution to Investments	_____
Spending Planner (Found discretionary money)	_____
Amount to Pull from Qualified Accounts (5% to 10% a year or 72T)	_____
Amount to Pull from non-Qualified Accounts	_____
1035 Exchange	_____
Life Ins. Premium Being Replaced Monthly	_____
Other Available Money (Future)	_____
Total:	_____

**Producer's thoughts on case:**

