

TOTAL FUNDS

Name	Na		
Ph #	Ph		
Email Address	Email Address		
Address	Address		
City/State/Zip	Cit		

SIMPLE NEEDS ANALYSIS			
	Client	Spouse	
NAME			
Date of Birth			
Tobacco Use (Cigarettes, Cigars, Gum, Patch, etc)			
Height			
Weight			
Do you have any Medical Issues?			
Are you taking any Prescription Medications			
LOANS - Total Debt (CC, Student/ Presonal Loans)		_	
FINAL EXPENSE - Recommended \$15,000			
MORTGAGE/RENT - Total Balance or Rent for 5 Years			
EDUCATION - Recommended \$100,000 Per Child			
INCOME - Income Replacement for 5 Years			
TOTAL LIFE INSURANCE NEED			
RETIREMENT F	UNDING SOURCES		
Stocks, Bonds, Mutual Funds, etc.			
Current Life Insurance Premium			
Current IRA's, Roth IRA's, 401K's, 403B's, etc.			
How much are you currently saving			
How much can you commit monthly for Retirement?			
TOTAL MONTHLY SAVINGS			
OPTIONAL FUN	IDS TO REPOSITION		
Qualified Retirement Funds (401K, 403B, SEP, etc.)			
Non-Retirement Funds (Savings, MM, CD's, etyc.)			
College Funds (529 Plans, UTIMA, etc.)			
Cash Value Balance in Current Life Insurance Policies			

Desired Retirement Age		
Current Concerns		
Controlling Debt	Income	
Eliminateing Taxes	Expenses	
Childrens Education		
Retirement Savings		
Estate Planning		
Asset Protction		
NOTES:		
Children	Children	
Age	Age	
D.O.B.	D.O.B.	
Children	Children	
Age	Age	
D.O.B.	D.O.B.	