

# FINANCIAL & INSURANCE PLANNING WORKSHEET

#### **CONFIDENTIAL - FOR FINANCIAL PLANNING PURPOSE ONLY**

\*Securities and advisory services offered through LPL Financial, a registered investment advisor. Member FINRA/SIPC.

### **HELPFUL DOCUMENTS**

- Recent Social Security Statement
- Recent Brokerage Account Statements
- Recent Retirement Plan Account Statements
- Recent Employer Stock Option Statements
- Power of Attorney Designations

- Loan Documents
- Insurance Policies
- Business Agreements
- Estate Plan Documents

### COMMENTS ON ADVICE THAT YOUR ARE SEEKING

### PERSONAL INFORMATION

Full Name		Full Name	
Date of Birth		Date of Birth	
Marital Status		Marital Status	
Home Address		Home Address	
City, State, Zip		City, State, Zip	
Best Contact Number		Best Contact Number	
Email		Email	
Receiving Social Security?	Y/N	Receiving Social Security?	Y/N
Occupation		Occupation	
Current Employer		Current Employer	
Years with Current Employer		Years with Current Employer	
Work Address		Work Address	
City, State, Zip		City, State, Zip	
Previous Employer		Previous Employer	
Annual Earned Income		Annual Earned Income	
Annual Bonus		Annual Bonus	
Other Income		Other Income	

### **CURRENT ADVISORS**

	Name	Employer	Contact Number	Email
Attorney				
Estate Attorney				
Accountant				
Insurance Agent				
Financial Advisor				

## **FAMILY**

Name	
Relationship	
Date of Birth	
Dependent?	Y/N
Name	
Relationship	
Date of Birth	
Dependent?	Y/N
Name	
Relationship	
Date of Birth	
Dependent?	Y/N
Name	
Relationship	
Date of Birth	
Dependent?	Y/N
Name	
Relationship	
Date of Birth	
Dependent?	Y/N

Name	
Relationship	
Date of Birth	
Dependent?	Y/N
Name	
Relationship	
Date of Birth	
Dependent?	Y/N
Name	
Relationship	
Date of Birth	
Dependent?	Y/N
Name	
Relationship	
Date of Birth	
Dependent?	Y/N
Name	
Relationship	
Date of Birth	
Dependent?	Y/N

### **ASSETS**

Account	Owner	Beneficiary Listed	Bank/Firm	Value	Busi	iness	
Primary Residence			N/A		Business Name		
Property			N/A		Business Type		
Property			N/A		Ownership Inter	est	% Owned
Property			N/A		Owner		
Automobile			N/A		Owner		
Automobile			N/A		Owner		
Automobile			N/A		Owner		
Jewelry			N/A		Owner		
Furniture			N/A		Annual Revenue		
Art			N/A		Business Value		
Collectibles			N/A		Commercial Real Estate Value		
Antiques			N/A		Business Assets		
Precious Metals			N/A		Cash		
Checking Account					Accounting Method		
Checking Account					Total Amount Invested		
Savings Account					Number of Authorized Shares		
Savings Account					Current Value of Shares		
Money Market Funds					Employment Agreement	Y	/N
Money Market Funds					Directors and Officers	Ti	tle
CD							
CD							
Cash Value of Life Insurance							
Cash Value of Life Insurance					Buy-Sell Agreement		
Brokerage Account							
Brokerage Account							
Brokerage Account						Y,	/N
Brokerage Account							
Brokerage Account							

## ASSETS (CONTINUED)

Account	Owner	Beneficiary Listed	Bank/Firm	Value
529 Plan				
529 Plan				
Coverdell Savings				
UGMA/UTMA				
Restricted Stock				
Restricted Stock				
Stock Options				
Stock Options				
IRA Account				
IRA Account				
IRA Account				
Roth IRA Account				
Roth IRA Account				
Health Savings Account				
Health Savings Account				

# 401(K), 403(B), 457, DEFINED BENEFIT

	Owner	Beneficiary Listed	Firm	Value	Non-Roth Contribution %	Roth Contribution %	Employer Match %
401(k), 403(b), 457 Plans							
401(k), 403(b), 457 Plans							
401(k), 403(b), 457 Plans							
401(k), 403(b), 457 Plans							
Pension Plan							
Pension Plan							
TOTAL INVESTMENTS							

### **LIABILITIES**

Account	Owner	Balance	Annual Percentage Rate	Fixed or Variable	Remaining Term	Monthly Payment
Primary Mortgage						
Mortgage						
Mortgage						
Mortgage						
Commercial Property						
Commercial Property						
Home Equity Loan						
Home Equity Loan						
Credit Card						
Credit Card						
Credit Card						
Credit Card						
Credit Card						
Credit Card						
Student Loan						
Student Loan						
Student Loan						
Student Loan						
Annual Property Tax						
Annual Property Tax						
Annual Property Tax						
Annual Property Tax						
Other						
Other						
Other						
TOTAL LIABILITIES						

<sup>\*\*</sup> Please use this for both personal and business liabilities \*\*

### **GUARANTEED RETIREMENT INCOME SOURCES**

Income Source	Amount Per Month	Surviving Spouse Benefit %
Social Security		
Government Pension		
Defined Benefit		
Asset Income		
Annuities		
Rental Income		
Royalties		
Oil & Gas		
Vesting Stock		
Other		

### **PROPERTY**

	Pri	mary Residence
Insured		
	Issuing Company	
	Policy Number	
	Policy Date	
	Policy Expiration	
	Annual Premium	
	Premium Due Date	
	Dwelling Coverage	
	Other Structures Coverage	
	Scheduled Property	
	Unscheduled Property	
	Living Expense Coverage	
	Personal Liability Coverage	
	Medical Expense Coverage	
ĺ	Endorsement	
	Endorsement	
	Flood Insurance?	Y/N

	Property
Insured	
Issuing Company	
Policy Number	
Policy Date	
Policy Expiration	
Annual Premium	
Premium Due Date	
Dwelling Coverage	
Other Structures Coverage	
Scheduled Property	
Unscheduled Property	
Living Expense Coverage	
Personal Liability Coverage	
Medical Expense Coverage	
Endorsement	
Endorsement	
Flood Insurance?	Y/N

	Property		Property
Insured		Insured	
Issuing Company		Issuing Company	
Policy Number		Policy Number	
Policy Date		Policy Date	
Policy Expiration		Policy Expiration	
Annual Premium		Annual Premium	
Premium Due Date		Premium Due Date	
Dwelling Coverage		Dwelling Coverage	
Other Structures Coverage		Other Structures Coverage	
Scheduled Property		Scheduled Property	
Unscheduled Property		Unscheduled Property	
Living Expense Coverage		Living Expense Coverage	
Personal Liability Coverage		Personal Liability Coverage	
Medical Expense Coverage		Medical Expense Coverage	
Endorsement		Endorsement	
Endorsement		Endorsement	
Flood Insurance?	Y/N	Flood Insurance?	Y/N

## **AUTO**

	Auto #1	Auto #2	Auto #3	Auto #4	Auto #5
Insured					
Issuing Company					
Policy Number					
Policy Date					
Policy Expiration					
Annual Premium					
Premium Due Date					
Comprehensive Deductible					
Liability Coverage					
Bodily Injury Per Person					
Bodily Injury Per Accident					
Property Damage					
Medical Payments					
Personal Injury (PIP)					
Uninsured Motorist					
Bodily Injury Per Person					
Bodily Injury Per Accident					
Under Insured Motorist					
Bodily Injury Per Person					
Bodily Injury Per Accident					
Endorsement					
Endorsement					

### PERSONAL AND PROFESSIONAL INSURANCE

Personal Liability Umbrella Policy			
Insured			
Issuing Company			
Policy Number			
Policy Date			
Policy Expiration			
Annual Premium			
Endorsement			

Business Liability Umbrella			
Insured			
Issuing Company			
Policy Number			
Policy Date			
Policy Expiration			
Annual Premium			
Endorsement			

Business Liability				
Bodily Injury				
Property Damage / Legal Defense				
Personal and Advertising				
Medical Payments				
Annual Premium				

Errors & Omissions			
% Personally Responsible For			
Deductible			
Annual Premium			

	Malpractice
Maximum Per Incident	
Aggregate Maximum	
Acts Covered	
Annual Premium	

#### **EXCLUSIONS**

- Coverage for bodily injury or property damage if the act that created the injury or damage was intentional.
- Liability that is a result of a business owned or conducted by the insured.
- Liability that arises from rental operation conducted by the insured.
- Liability that occurs on a uninsured location that is owned by the insured.

С	ommercial Package
Covered Property	
Additional Coverages	
Extension of Coverages	
Other Provisions	
Deductible	
Co-Insurance	
Valuation Provisions	
Optional Coverages	
Cause-Of-Loss	
Deductible	
Annual Premium	

#### PERSONAL LIABILITY UMBRELLA POLICY

- PLUP provides protection against legal obligations that arise from negligent acts.
- PLUP pays the costs, up to the face of the policy, that result in liability.
- PLUP usually provides defense for the insured in the event of a lawsuit.
- PLUP requires higher liability limits on underlying auto and homeowners policies.
- PLUP does not pay until the liability limits on the underlying policies are exhausted.
- Coverage is for the liability of the insured, the family members, or both.
- Coverage includes exposure at the premises of the residence or away from the residence.
- Provides coverage for the insured's legal obligation because of bodily injury or property damage.
- Provides payment for reasonable medical expenses for the injured party.
- Typical coverage is between \$1M \$3M.

## LIFE INSURANCE

Insured	Insured
Face Amount	Face Amount
Туре	Туре
Cash Value	Cash Value
Annual Premium	Annual Premium
Beneficiary	Beneficiary
Owner	Owner
Issue Date	Issue Date
Insured	Insured
Face Amount	Face Amount
Туре	Туре
Cash Value	Cash Value
Annual Premium	Annual Premium
Beneficiary	Beneficiary
Owner	Owner
Issue Date	Issue Date
Insured	Insured
Face Amount	Face Amount
Туре	Туре
Cash Value	Cash Value
Annual Premium	Annual Premium
Beneficiary	Beneficiary
Owner	Owner
Issue Date	Issue Date

	POLICY 1	SABILITY	POLICY	POLICY 2
Policy Owner			Policy Owner	
Insured			Insured	
Issuing Company			Issuing Company	
Policy Number			Policy Number	
Policy Issue Date			Policy Issue Date	
Age at Issue			Age at Issue	
Annual Premium			Annual Premium	
Premium Due Date			Premium Due Date	
Monthly Benefit			Monthly Benefit	
Elimination Period			Elimination Period	
Payable to Age			Payable to Age	
Disability Definition			Disability Definition	
Policy Rider 1			Policy Rider 1	
Policy Rider 2			Policy Rider 2	
Policy Rider 3			Policy Rider 3	

	POLICY 3		POLICY 4
Policy Owner		Policy Owner	
Insured		Insured	
Issuing Company		Issuing Company	
Policy Number		Policy Number	
Policy Issue Date		Policy Issue Date	
Age at Issue		Age at Issue	
Annual Premium		Annual Premium	
Premium Due Date		Premium Due Date	
Monthly Benefit		Monthly Benefit	
Elimination Period		Elimination Period	
Payable to Age		Payable to Age	
Disability Definition		Disability Definition	
Policy Rider 1		Policy Rider 1	
Policy Rider 2		Policy Rider 2	
Policy Rider 3		Policy Rider 3	

#### **DISABILITY POLICY CONTINUED**

Disability Insurance provides income to the insured in the event the insured is unable to work because of illness or injury.

#### **Policy Issues:**

- Coverage (Sickness and Accident)
- Term (To Retirement or To Death)
- Elimination Period (0 to 180 days)
- \* Serves as deductible
- Taxability of Benefits (Depends on Payor)
- Amount of Benefits (60%-70%)
- Definition of Disability (Own Occupation, etc.)
- Residual Benefit
- Probation Period

#### **Definitions of Disability**

#### **Any Occupation:**

- Considered disabled if insured cannot perform the duties of any occupation
- This definition provides the least expensive premium

#### **Modified Any Occupation:**

- Considered disabled if unable to perform duties of gainful occupation they're reasonably fitted by education, experience, training, and prior economic status.

#### Own Occupation:

- Considered disabled if insured cannot perform the duties of their "Own Occupation"
- More expensive, ideal for specialized, high paying fields.

#### **Split Definition:**

- Begins with own occupation, and moves into modified any occupation after a year or two under the own occupation definition

#### LONG-TERM CARE

POLI	CY 1	POLI	CY 2	POL	ICY 3
Insured		Insured		Insured	
Issuing Company		Issuing Company		Issuing Company	
Policy Number		Policy Number		Policy Number	
Policy Date		Policy Date		Policy Date	
Age at Issue		Age at Issue		Age at Issue	
Annual Premium		Annual Premium		Annual Premium	
Premium Due Date		Premium Due Date		Premium Due Date	
Benefit	Limits	Benefit	Limits	Benefi	t Limits
Nursing Home		Nursing Home		Nursing Home	
Home Health Care		Home Health Care		Home Health Care	
Benefit Period		Benefit Period		Benefit Period	
Nursing Home		Nursing Home		Nursing Home	
Home Health Care		Home Health Care		Home Health Care	
Eliminatio	on Period	Elimination Period		Eliminati	on Period
Nursing Home		Nursing Home		Nursing Home	
Home Health Care		Home Health Care		Home Health Care	
Inflation Provision		Inflation Provision		Inflation Provision	
Qualification for Benefits		Qualification for Benefits		<b>Qualification for Benefits</b>	
Exclusion 1		Exclusion 1		Exclusion 1	
Exclusion 2		Exclusion 2		Exclusion 2	
Exclusion 3		Exclusion 3		Exclusion 3	
Endorsement 1		Endorsement 1		Endorsement 1	
Endorsement 2		Endorsement 2		Endorsement 2	
Endorsement 3		Endorsement 3		Endorsement 3	