

FAMILY SNAPSHOT FORM

Prepared For:

Date Completed:

HOUSEHOLD INFORMATION

Client Name:

Date of Birth:

Phone:

Email:

Occupation:

Employer:

Annual Income:

State:

ZIP:

Home Address:

City:

SPOUSE INFORMATION

Spouse Name:

Date of Birth:

Occupation:

Employer:

Annual Income:

CHILDREN & DEPENDENTS

Name

Relationship

Age

The purpose of this form is not perfection. It is simply to create a clear snapshot of where things stand today.

FAMILY SNAPSHOT FORM

CURRENT FINANCIAL SNAPSHOT

Mortgage Balance:

Monthly Payment:

Vehicle Loans:

Other Debt:

Approx. Savings:

Retirement Assets:

EXISTING PROTECTION

Coverage Amount:

Coverage Type

Employer

Term

Permanent

Multiple Policies

Unsure

MONTHLY PLANNING COMFORT ZONE

What monthly amount would feel comfortable to allocate toward protection and planning?

Under \$100

\$100-\$250

\$250-\$500

\$500-\$1,000

\$1,000+

ONE FINAL QUESTION

If something happened tomorrow, what would you want protected first?

FOR OFFICE USE ONLY

Date Received: _____ Illustration Prepared:

Follow-Up Scheduled: _____ Review Completed: