Checklist for Comprehensive Plan Submission

1.	Client data – a narrative or list with client information must include: □ Name □ Address □ Employer □ How long on job □ Birth date(s) □ Marital status □ Date of marriage □ Children □ Bankruptcy? □ Law suits? □ Citizenship □ Anything else pertinent				
	☐ Adequate ☐ Inadequate				
2. Written client goals and objectives.					
	☐ Adequate ☐ Inadequate				
3.	Assumptions used in the plan must include: ☐ Inflation rates ☐ Mortality ☐ Rates of return (net of fees) ☐ College inflation ☐ Medical inflation ☐ Social security inflation ☐ Salary increases ☐ Emergency fund ☐ College years per child ☐ Residence growth rate ☐ Retirement distribution rate				
	☐ Adequate ☐ Inadequate				
4.	4. A net worth statement – one page list of assets and liabilities by account, by owner, by tax deferred vs. taxable.				
	☐ Adequate ☐ Inadequate				
5.	Recommendations, observations, and findings made with respect to assets and liabilities on net worth statement.				
	☐ Adequate ☐ Inadequate				
6.	 A detailed current cash flow for the client. Income sources must be broken out by person a indicate whether earned, unearned, or other. Expenses must minimally include fixed, discretionary, taxes and savings. 				
	☐ Adequate ☐ Inadequate				
7.	Recommendations, observations, and findings made with respect to current cash flow.				
	☐ Adequate ☐ Inadequate				
8.	Last year's actual tax worksheet and projections for current year and future years as applicable Projections should include AMT calculations.				

	☐ Adequate ☐ Inadequate			
9.	Recommendations, observations, and findings made with respect to income taxes.			
	☐ Adequate ☐ Inadequate			
10.	Detailed analysis of insurance Life Named insured Owned by Company Beneficiary Contingent beneficiary Policy type Death benefit Premium Face value Cash value Loan balance	Medical ☐ Named insured ☐ Company ☐ Plan type ☐ Deductible ☐ Premium ☐ Personal or group ☐ Co-pay	Disability Named insured Company Personal or group Pre-tax or after tax Monthly benefit Definition of disability Cost of living adjustment Elimination period Benefit period Riders	
	Long-term Care ☐ Named insured ☐ Company ☐ Benefit period ☐ Benefit amount ☐ Elimination period ☐ Home health vs. nursing h ☐ COLA	☐ Automobi☐ Umbrella☐ Others as	er's declaration page le declaration page declaration page needed	
	☐ Adequate ☐ Inadequate			
11.	11. Recommendations, observations, and findings made with respect to all areas of insurance pertinent to the client's situation.			
	☐ Adequate ☐ Inadequate			
12. A detailed list of the client's investment assets in taxable and tax-deferred account account name, amount and cost basis for taxable investments (if available).				
	☐ Adequate ☐ Inadequate			

13. Recommendations, observations, and findings made with respect to all areas of investment

pertinent to the client's situation. Do not include Morningstar style reports.

	☐ Adequate ☐ Inadequate		
14.	Retirement/financial independence projection(s) for one or more scenarios as required.		
	☐ Adequate ☐ Inadequate		
	Recommendations, observations, and findings made with respect to retirement/financial independence.		
	☐ Adequate ☐ Inadequate		
16. A detailed description of the current estate plan.			
	☐ Adequate ☐ Inadequate		
	Recommendations, observations, and findings made with respect to estate planning. Will Power of attorney Living will Titling and beneficiary for all accounts Health care proxy		
	☐ Adequate ☐ Inadequate		
18.	Planner concerns regarding items not recognized by client.		
	☐ Adequate ☐ Inadequate ☐ Not Applicable		
19.	Any other goals and objectives raised by the client with recommendations as necessary.		
	☐ Adequate ☐ Inadequate ☐ Not Applicable		
	An implementation checklist or plan. Although not required, we believe clients are best served by a one to two page action plan.		
	☐ Adequate ☐ Inadequate		