Financial Needs Analysis



Cash Flow

- Earn additional income
- Manage expenses



Debt Management

- Consolidate debt
- Strive to eliminate debt



Emergency Fund

- Save at least 3-6 months' income
- Prepare for unexpected expenses



Proper Protection

- Protect against loss of income
- Protect family assets



Build Wealth

• Strive to outpace inflation and reduce taxes



Preserve Wealth

- Reduce taxation
- Build a family legacy

Client 1 Name ______ Client 2 Name _____

Household Information

	Preferred Name		Age
City	State	Zip Code	
	Zip Code		
Mobile Phone	(Please Check Preferred) Personal Email Business Email Alternate Email		
	Preferred Name		Age
	State		-
			-
State	Zip Code		
Mobile Phone	(Please Check Preferred) Personal Email Business Email Alternate Email		
Dependents			
Name		Years Ed	
Name		Years Ed	
Name		Years Ed	
Name	🗆 M 🗆 F DOB	Years Ed	

To help guide our meeting today, I'd like to first discuss the personal, professional and financial goals that are most important and of greatest value/worth to you.

Goals

	Short-term	Mid-Range	Long-Term	
	1-3 years	3-7 years	7+ years	
Make a Major Purchase				
Build Retirement Wealth				
Buy a New Home				
Build Savings for Unexpected Expenses.				
Reduce or Pay Off Mortgage				
Education Funding				
Alternative Income in Case of Disability or Death				
Help Support Aging Parents				
Pay Off Credit Cards/Debts				
□ Start a Business				
□ Other				
□ Other				
□ Other				
When was the last time you reviewed your family's financial g	oals?			
Do you have an established monthly budget? \Box Yes \Box No	Do you	u have a regular sa	avings plan? 🗌 Yes	; 🗆 No

Is there a particular topic you want to make sure we cover in our time together today?

Income

Current Income

(Include salary, bonuses, commissions, rental income, interest and dividends, alimony and child support, annuity or pension income, and any other income sources)

Owner/Recipient	Source		Gross Amount	Frequency	Net Amount
Client 1 Total Income			Client 2 Total Incom	e	
Total Combined Gross Ho	usehold Income				
Current estimated combine Did you receive a tax refun				e to pay taxes at your las unt	
Anticipated Future Income (include military or civil ref Owner/Recipient		pension incor	ne, and any other retir Gross Amount	ement income sources) Start Age/Year	Frequency
Do you want to calculate ir			Client 1 Yes No Client 2 Yes No		
If yes, what is your current	estimated monthly	benefit?			
Employment					
What is the name of your of How long have you worked What is your job title? What are your specific job Describe the nature of the Who owns the business? What is the business struc Do you see yourself retiring What are your future caree	there? duties? business ture? g there?				
Emergency Fund Number of months to prov	ide Emergency Fund	S			
Provide for: All expense		-discretionary			
OR: How much do you nee	ed monthly in case of	f an emergeno	cy?		
How much do you currentl	y have saved in a de	dicated emer	gency fund?		

Expenses

Amou	nt Discretionary?		Amount	Discretionary?
Auto & Transportation		Mortgage/Rent Payment		
Fuel		Homeowners Insurance		
Insurance		Principal & Interest		
Loan/Lease Payment		Property Taxes		
Parking Tolls		Other		
Public Transportation				
Service		Other Debt Service Payments		
Other		Credit Cards		
		Personal Loans		
Food		Student Loans		
Dining Out				
Groceries		Other Monthly Expenses		
		Alimony & Child Support		
Health/Medical		Subscriptions/Memberships		
Insurance Premiums	— <u> </u>	Tithe/Charity		
Prescriptions		Travel & Entertainment		\square
Other		Other		
<u> </u>		Other		
Household		Other		
Child Care		Utilities		
Cleaning Services		Cable		
Clothing	— <u> </u>	Electric		
Clothing Educational	— —	Electric		
Gifte	— H	Gas		
Gifts		Internet		
Landscape Service	—	Mobile Phones		
Personal Care	H	Phone		
Pet Care		Trash Collection		
Sports and Lessons		Water		
Other		Other		

Total Monthly Expenses: _____

Total Non-Discretionary Expenses:

Debts

Description	Lender	Original Term	Year	Balance	IR	Current Payment	Minimum Payment
Mortgage 1					%		
Mortgage 2 or HELO	C				%		
Auto Loan					%		
Student Loans					%		
Credit Card					%		
Credit Card					%		
Credit Card					%		
Credit Card					%		
Credit Card					%		
Personal Loan					%		
Personal Loan					%		
Other Loan					%		
Other Loan					%		

Proper Protection: Life Insurance Need

What do you want your life insura	nce to accomplish?
Pay Off Debts	
Provide Income Replacement	Amount \$ or% of current combined household for years
Pay Off Mortgage	
Provide Education Funding	Approximate total cost of education: \$
Pay Final Expenses	Amount \$
Provide Emergency Fund	

Existing Life Insurance Policies

Insured	Owner	Beneficiary	Туре	Face Amount	Surrender Value	Premium	Premium Mode	Policy Year	Provider

Do you have Health Insurance? Yes No Provider: _____ Group Individual HMO PPO Other Monthly Premium:

Build Wealth

Retirement Goals

How do you feel about your current plans for retirement?

In retirement, is it safe to assume you would maintain the same lifestyle you have today? If not, what would be different?

At what age would you like to be in a position to retire? To what age do you need retirement income to continue (life expectancy)?

Client 1	Client 2
Client 1	Client 2

In today's dollars, how much monthly income do you need to support your desired lifestyle in retirement? Monthly amount ______ or ____ % of current combined household total

	Taxable				Tax Def	ferred			Tax Advantaged			
Assets in which in taxed in the year even if it is reinv when the asset is short-, mediu	in which th rested. Any sold. May l	iey are rec gains are t be positior	eived, axed ned for	Assets in which any income or gains are not taxed until withdrawn. May be positioned for long-term needs, such as retirement.			Assets in which with ce	withdrawa ertain limita		free,		
Investment/ Asset Name	Balance	Monthly Contrib.	RoR	Investment/ Asset Name	Balance	Monthly Contrib.	Employ Match	RoR	Investment/ Asset Name	Balance	Monthly Contrib.	RoR
Mutual Funds	Available	for: EF	R	401(K)/403(B) o	r other Qua	alified Plans	EF	R	Roth IRA⁺		EF	R
Stocks		EF	R	IRA/SEP-IRA			EF	R	Cash Value Life Ir	nsurance [*]	EF	R
Bank Savings/CD	S	EF	R	Annuities (Fixed/	Variable)		EF	R	* Please note: Only			
									Roth IRAs are tax- cash value life insi	urance are ta	ax-free up to	o the
									policy basis. Policy loans are tax-free whi policy remains in force; if the policy lapse			
									surrendered, the l			
Bonds/Treasuries	5	EF	R	Savings Bonds	ı	·	EF	R				

Other Assets (Real estate, automobiles, boats, collectibles, antiques, etc.)

Description	Current Market Value	Cost Basis
Preserve Wealth Do you have a Will? [Do you have a Trust? [Do you expect to receive a	☐ Yes ☐ No Last update: ☐ Yes ☐ No If yes, what kind: any lump sums or inheritance in the nea	Purpose of Trust r future? □Yes □No
Other Trusted Advisors (include accountant, attorney, etc.)	
Name	Role	
What is your biggest finar	ncial concern?	
	on a scale of 1 to 10 with respect to their Proper Protection Debt	
How much on a monthly b	oasis do you feel you can save towards y	our goals?
reason we could not do bu	ther, I can offer you solutions that may h usiness and get you started right away?	
Let's look at our schedule:	s and find a date and time to get back to	gether.
Next Appointment		
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