

CLIENT DATA SHEET

Did you ask for referrals?

INSURED				
NAME		DATE OF BIRTH		AGE
ADDRESS		PHONE NUMBER		DECISION MAKER?
				Y / N
BANKING	checking		direct express	prepaid card
	1st	3rd	___ WED	Bi - Weekly

FACT FIND			
SS SSD SSI	Medicare	Medicaid	
Supplement		FS: Y / N	

SAVINGS CHECKLIST			
RX []	Dental []	Vision []	Hearing []
Life Benefit			

UNDERWRITING			
Condition	Date	Drill Downs	
Tobacco	Y / N	Quitting?	
Heart Attack		CHF*	Nitro
A-Fib		Pacemaker	Defib
Stroke			
Diabetes		Insulin	Neuropathy
Cancer		Treatment within 2 years?*	
COPD		Oxygen*	
MS / Lupus			
Liver/Kidney		Dialysis*	
HIV* / HEP		Treated?	/ /
Bi-Polar/Schizo			
Memory*			
Hospitalized		How Long:	

POLICY REVIEW			
Company		Policy #	
Effective Date		Draft Day	
Face Amount		Premium	
Cash Value	Surrender Value	Future Premiums (Term)	Cost of Ins (UL)
Loan Balance	Interest Rate		
Reduced Paid Up			
Beneficiaries			

MEDICATIONS & NOTES	

RED FLAGS	Diagnosis	Oxygen, Dialysis, Alzheimer's/dementia, HIV, Organ Transplant Congestive Heart Failure (CHF), Cancer (<2 yrs), Heart/Stroke/Circulatory (<12 months)
	RX	Antabuse, Aricept, Azathioprine, CellCept, Cognex, Digoxin, Disulfiram, Donepezil Entresto, Exelon, Imuran, Memantine, Mycophenolate, Mofetil, Namenda, Namzaric, Prograf Rapamune, Rapamycin, Razadyne, Rivastigmine, Suboxone, Subutex, Tacrolimus, Zubsolv