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|  | C:\Users\m179992\Desktop\Principal_rgb_135.png |
| Annual review checklist |

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| --- | --- | --- | --- |
| Name: |       | Policy number: |       |
| Need help achieving your financial goals? **That’s why I’m here.** Let’s connect to make sure you’re on track. Please let me know what’s changed since we last spoke, as well as topics you’d like to discuss. |

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| --- | --- |
| **Since our last review, I’ve:**[ ]  Changed jobs[ ]  Changed address[ ]  Changed beneficiaries[ ]  Changed/made out a will[ ]  Entered a new business/occupation[ ]  Acquired group insurance[ ]  Had/adopted a child or am expecting to[ ]  Assumed new debt/had a mortgage increase[ ]  Eliminated debt[ ]  Quit smoking[ ]  Changed marital status[ ]  Experienced a health change[ ]  Changed number of dependents | **I’d like to discuss:**[ ]  General coverage review[ ]  My life insurance policies[ ]  Life insurance strategies[ ]  Disability income insurance[ ]  Health insurance[ ]  Long-term care insurance[ ]  Child/spouse insurance[ ]  My investments[ ]  Mutual funds[ ]  Retirement income[ ]  IRAs (Traditional and Roth)/IRA rollover[ ]  Pensions[ ]  Estate planning |
| [ ]  Other |       |  | [ ]  College education funding  |
|  |       |  | [ ]  UTMA/UGMA |
|  |       |  |  |
|  |  |  |  |

**What’s the best way to connect? I can:**

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| --- |
| [ ]  Call you to discuss over the phone or set up a time to meet |
| Phone number: |       | Best time to call: |       |
| [ ]  Email you to schedule a meeting time | Email address: |       |
| Other comments or questions: |       |
| Please return this form to the address below or email it to me at <email address>. Thank you. |

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| --- | --- | --- | --- |
|  |  | <First name> <Last name><Designations><Title 1><Title 2><Title 3> | Optional :<Title> <DBA company name><Address 1><Address 2><City>, <State> <ZIP><Phone><Email><Website><California license number> |