

# Inforce Policy Review

## PRECalc Analysis Worksheet

### Individual Planning

#### Identify the opportunity

##### CLIENT INFORMATION

Client / Insured Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ State of Residence: \_\_\_\_\_

Gender: M  F  Nicotine Use: Current  Past  N/A

If nicotine use is current indicate type used and frequency, if past indicate type used and last date of use:

Health / Underwriting class issued on existing policy: \_\_\_\_\_

Has the client had any health change since the issuance of the original policy? Yes No \*If yes, please provide details below

##### EXISTING POLICY INFORMATION

Insurance company: \_\_\_\_\_

Policy # (if available): \_\_\_\_\_ Current death benefit: \$ \_\_\_\_\_

(information below can be obtained from most recent annual statement)

Current premium \$ \_\_\_\_\_ Mode: Annual  Semi-Annual  Quarterly  Monthly

Current premium scheduled to be paid for: \_\_\_\_\_ (Indicate of years left to pay planned premium)

Current case value: \$ \_\_\_\_\_ Current cash Surrender value: \$ \_\_\_\_\_

##### CLIENT'S CURRENT OBJECTIVES

What is the main objective client(s) is/are looking to accomplish with a new policy if recommendation to replace is deemed suitable? (Check all that apply)

Lower premiums	<input type="checkbox"/>	Guaranteed death benefit (Estate / legacy planning)	<input type="checkbox"/>
Stop premium payments (Paid up death benefit)	<input type="checkbox"/>	Increase death benefit (Desired amount: \$ _____)	<input type="checkbox"/>
Cash value accumulation (Retirement planning)	<input type="checkbox"/>	Living benefits (Long-term care / Chronic illness)	<input type="checkbox"/>

Other: \_\_\_\_\_

##### FINANCIAL PROFESSIONAL INFORMATION

Representative name: \_\_\_\_\_

Broker dealer affiliation (if applicable): \_\_\_\_\_

Primary phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Please return this completed form to your AIMCOR affiliated agency.**

Approved for consumer use under the guidance of a financial professional

Most insurance policies contain exclusions, limitations, reductions of benefits, and terms for keeping them in force. Ask your financial professional to provide you with costs and complete details. Guarantees are based on the claims-paying ability of the issuing insurance company. AIMCOR Group, LLC is not an insurer and does not issue contracts for coverage. This material is being provided for informational or educational purposes only and does not take into account the investment objectives or financial situation of any client or prospective clients. **The information is not intended as investment advice.**