



FINAL EXPENSE WORKSHEET

- 1) No Burial Life Insurance
- 2) Need More Life Insurance
- 3) Leave behind money for legacy

Name and Age:

Retired / Employed:

Social Security / Pension / Both:

Medicare / Med Sup:

Life Ins / Annuity:

401K/IRA/Stock/SEP/TSP/MF/CD:

Burial / Cremation

QUALIFIED DISCOUNTS -

Tobacco: Yes / No

Credit Union / Financial Institution / Dex

Name and Age:

Retired / Employed:

Social Security / Pension / Both:

Medicare / Med Sup:

Life Ins / Annuity:

401K/IRA/Stock/SEP/TSP/MF/CD:

Burial / Cremation

QUALIFIED DISCOUNTS -

Tobacco: Yes / No

Credit Union / Financial Institution / Dex

Heart Attack / Stroke / TIA / Stents / Cancer / Diabetes (Pills vs Insulin) / Pain Meds / HBP / Cholesterol
 Asthma & COPD (Albuterol vs Corticosteroid) / Thyroid / Anxiety & Depression / Alzheimers / Dementia

Medical Conditions/Hospitalizations/Surgeries:

Prescription List (Name, Dosage, Frequency):

Medical Conditions/Hospitalizations/Surgeries:

Prescription List (Name, Dosage, Frequency):

OPTION #1

OPTION #2

OPTION #3

Name of Beneficiary:

DOB:

Relationship to Insured:

Name of Beneficiary:

DOB:

Relationship to Insured: