



**SONS of  
NORWAY**



*Plan **Today** for Financial Security **Tomorrow***

# Financial Security Analysis

A Complimentary Financial Check-Up

A worksheet to help you:

- ◆ **Set Your Financial Goals**
- ◆ **Prioritize Your Financial Goals**
- ◆ **Initiate Your Plan of Action**
- ◆ **Review and Update Your Plan Regularly**

This Financial Security Analysis is provided as a complimentary service of your Financial Benefits Counselor and Sons of Norway at no cost or obligation to you.

## Personal Data

Your name \_\_\_\_\_ Date of birth \_\_\_\_\_  Male  Female

MM / DD / YY

Do you use nicotine?  Yes  No Phone \_\_\_\_\_

Email \_\_\_\_\_ Employer \_\_\_\_\_

Years at current occupation \_\_\_\_\_ Annual Income \$ \_\_\_\_\_ Other Income \$ \_\_\_\_\_

Spouse's name \_\_\_\_\_ Date of birth \_\_\_\_\_  Male  Female

MM / DD / YY

Does spouse use nicotine?  Yes  No Phone \_\_\_\_\_

Email \_\_\_\_\_ Employer \_\_\_\_\_

Years at current occupation \_\_\_\_\_ Annual Income \$ \_\_\_\_\_ Other Income \$ \_\_\_\_\_

Home Address \_\_\_\_\_

Do you  Own  Rent your home? Interest rate \_\_\_\_\_ % Mortgage balance \$ \_\_\_\_\_

Monthly payment \$ \_\_\_\_\_ Years remaining on your mortgage \_\_\_\_\_

Market value of your home \$ \_\_\_\_\_ Original term of your mortgage \_\_\_\_\_

Property tax \$ \_\_\_\_\_ Other fees \$ \_\_\_\_\_

## My Children

Name \_\_\_\_\_ Date of birth \_\_\_\_\_  Male  Female

MM / DD / YY

Spouse's Name \_\_\_\_\_ Date of birth \_\_\_\_\_  Male  Female

MM / DD / YY

Grandchildren \_\_\_\_\_

Name \_\_\_\_\_ Date of birth \_\_\_\_\_  Male  Female

MM / DD / YY

Spouse's Name \_\_\_\_\_ Date of birth \_\_\_\_\_  Male  Female

MM / DD / YY

Grandchildren \_\_\_\_\_

Name \_\_\_\_\_ Date of birth \_\_\_\_\_  Male  Female

MM / DD / YY

Spouse's Name \_\_\_\_\_ Date of birth \_\_\_\_\_  Male  Female

MM / DD / YY

Grandchildren \_\_\_\_\_

# Financial Security Goals and Objectives

## How important is it to:

- Have enough money to provide income for your family if premature death occurs?
- Pay off your mortgage early to save thousands of dollars in future interest payments?
- Provide income for a comfortable retirement?
- Maximize your company pension at retirement?
- Have tax deferral on savings?
- Earn a competitive rate of return on savings and investments?
- Accumulate college education funds?
- Retain adequate income in the event of long term disability?
- Minimize paying estate taxes and other estate settlement costs?

Very High	High	Med.	Low	Very Low
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## Life Insurance

Insured	Face Amounts	Type	Company	Issue Date	Premium	Cash Value

What do you want your life insurance to do for you? \_\_\_\_\_

How do you feel about your current life insurance plan? \_\_\_\_\_

## Savings, Investments and Retirement Plans

Savings and Investments	Yours	Spouse	Joint
Savings / CDs			
Annuities			
Cash Value Life Insurance			
Bonds			
Mutual Funds			
Stocks and Securities			
Real Estate			
Traditional or ROTH IRAs			
401K, 403B, 503C, 457			
<b>Total Assets</b>			
<b>Total Life Insurance</b>			
<b>Total Assets and Insurance</b>			

At what age do you plan to retire? \_\_\_\_\_ Are you satisfied with amount accumulated to date?  Yes  No

Your pension plan:  Company  Private Expected monthly retirement amount \$ \_\_\_\_\_

Expected lump sum balance at time of retirement \$ \_\_\_\_\_

Spouse's pension plan:  Company  Private Expected monthly retirement amount \$ \_\_\_\_\_

Expected lump sum balance at time of retirement \$ \_\_\_\_\_

## Notes

## Referrals

## How much money will be needed when I die?

Date     /    /      
MM DD YY

	You	Spouse
Final expenses (funeral, medical, estate and probate costs).....	\$ _____	\$ _____
Emergency fund (unexpected bills, major repairs).....	\$ _____	\$ _____
Debts (non-mortgage).....	\$ _____	\$ _____
Mortgage.....	\$ _____	\$ _____
Child/Home Care (so surviving spouse can continue to work).....	\$ _____	\$ _____
Educational Fund (college or vocational school).....	\$ _____	\$ _____
Income replacement.....	\$ _____	\$ _____
-OR-		
Annual Income _____ X 5 (minimum).....	\$ _____	\$ _____
Annual Income _____ X 10 (preferable).....	\$ _____	\$ _____
Amount of money needed when I die.....	\$ _____	\$ _____
Minus current life insurance and assets.....	\$ _____	\$ _____
New life insurance recommended.....	\$ _____	\$ _____