SAMPLE TOTAL NEEDS COMPLIANCE CHECKLIST

May 8, 2025

<Client Name>

I have discussed the following financial needs with the above-named client and made appropriate recommendations:

Topic	Discussed (Yes/No)	Date	Follow-up
Life Insurance			
Income Replacement			
Critical Illness			
Savings/Retirement			
Financial Planning			

Additional Discussion:

_____

Client Signature

_____

Producer Signature