

Beneficiary review form

Client name: _____

Client number: _____

Date last updated: _____

Plan type:

IRA 401(k) Life Annuity Other

Account owner name: _____

Provider: _____

Agent name: _____

Agent phone: _____

Account number: _____

Primary beneficiary(ies): _____

Contingent beneficiary(ies): _____

Who has current copies of the beneficiary form on file?

Notes: _____

Plan type:

IRA 401(k) Life Annuity Other

Account owner name: _____

Provider: _____

Agent name: _____

Agent phone: _____

Account number: _____

Primary beneficiary(ies): _____

Contingent beneficiary(ies): _____

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Notes: _____

Plan type:

IRA 401(k) Life Annuity Other

Account owner name: _____

Provider: _____

Agent name: _____

Agent phone: _____

Account number: _____

Primary beneficiary(ies): _____

Contingent beneficiary(ies): _____

Who has current copies of the beneficiary form on file?

Notes: _____

Your family tree

Parents

Father	Mother
_____	_____
Date of birth or age	Date of birth or age
_____	_____
Address	Address
_____	_____

Siblings

Name	Name
_____	_____
Date of birth or age	Date of birth or age
_____	_____
Address	

Name

Date of birth or age

Address

Name

Date of birth or age

Address

Name

Date of birth or age

Address

Grandchildren

Name	Name
_____	_____
Parent's name	Parent's name
_____	_____
Date of birth or age	Date of birth or age
_____	_____
Address	Address
_____	_____
Parent's name	Parent's name
_____	_____
Date of birth or age	Date of birth or age
_____	_____
Address	Address
_____	_____

Parents

Father	Mother
_____	_____
Date of birth or age	Date of birth or age
_____	_____
Address	Address
_____	_____

CLIENT 2

Name	Name
_____	_____
Date of birth or age	Date of birth or age
_____	_____
Address	

Name

Date of birth or age

Address

Name

Date of birth or age

Address

Name

Date of birth or age

Address

Grandchildren

Name	Name
_____	_____
Parent's name	Parent's name
_____	_____
Date of birth or age	Date of birth or age
_____	_____
Address	Address
_____	_____
Parent's name	Parent's name
_____	_____
Date of birth or age	Date of birth or age
_____	_____
Address	Address
_____	_____