FE CALL WORKSHEET

- Hi, this is (Your Name) I am the **Licensed Insurance Agent** that will be working with you.
- Are you looking to compare **options for final expense coverage** today? (If yes, continue)
- Perfect, and you are between the ages of **50** and **80** years old, is that correct? (If yes, continue)
- Great, and you reside in **which state**?
- And for **discount purposes**, do you have an **active account** at a **local bank** or **credit union**?
- Thank you for that, and so I can better help you, can I have your **first** and **last name**, please?
- First Name: Last Name:

GIVE THEM YOUR CONTACT INFO

Perfect, and we definitely want you to know who you are working with,
do you have a pen and paper handy?

(Proceed to give your **Full Name** and **Contact Info** to them) **If Mobile Number, you can text it to them.

GET THE BENEFICIARY INFORMATION AND CONFIRM THE CLIENTS WHY

Now (Customer Name), is there someone you had in mind as **the beneficiary** or is there someone who would be **responsible for everything** after your passing

- Beneficiary Relationship: (Spouse, Sibling, Child, etc)
- First Name of Beneficiary:
- Is there a **main concern** that this coverage would help your beneficiary financially with?

  Final Expenses Burial/Funeral Cost

  Income Changes after Death Rent/Mortgage Payments

- Thank you for helping me understand your situation, I think we can definitely help go through your options to put (Enter beneficiary name here) in a better position for the future.

EXPLAIN OUR PROCESS AND REMOVE OBJECTIONS

Just so you know, our process is **pretty simple**...

- We work with over **20 different insurance carriers** for you
- All of our Insurance Carriers are **A Rated** (Name a few big Ones like Mutual of Omaha)
- We make sure you **don't get penalized** for any PreExisting Conditions
- We **compare Rates** to **fit your Budget**
- We do **not exchange any money today**
- If we find something you like, we can help you start the request for **Coverage Process Today.** Did you **have a date in mind** you would like **your coverage to start**? (Date)
- Great, so I can make sure we get you the best options, is it ok if I ask you a few basic health and lifestyle questions?

COLLECT BASIC HEALTH AND LIFESTYLE INFORMATION

- Client Name:
  Spouse? Y/N . Spouse on Call? Y/N
  Mobile Phone or Landline? M/L
  Does Customer have a working email? Y/N
- Current Age DOB
- In the last 12 months any tobacco use? Y/N
- Height Weight
- Ever diagnosed with congestive heart failure? Y /N
- Ever had any organ transplant? Y /N
- Any Oxygen use in the last 12 months? Y/N
  (If yes to any Qs above, **GUARANTEED ISSUE ONLY**)
- Any Major Medicals in the last 4 years?
  (Circle all that apply)
  Cancer, Heart Attack, Stroke, COPD, Blood Clots, Organ Failure/Renal Failure, Kidney Dialysis,
  OTHER
  Year and Month Of Diagnosis?
- Any Ongoing conditions? **(Circle all that apply)**
  Diabetes, Neuropathy, High Blood Pressure, Asthma, Anxiety/Depression, Bipolar/Schizophrenia,
  OTHER.
  Year and Month Of Diagnosis?
- **Monthly Income Sources and Amount**
  (COMPLETE ALL THAT APPLY)
- Work PT/FT
- SSI
- Retirement/Pension
  Veteran Benefits

Do you belong to a local bank or credit union? Y/N

- **ANY CURRENT LIFE INSURANCE?**

Provide All Current and Past Medications over the last 4 years. Including Medications no longer being taken.

Medication Name	Dosage	Year /Month Prescribed

Current Life Insurance Company Name	Coverage Type	Coverage Amount	Monthly Cost	Expiration Date (if term)

Anything that would help in a financial emergency? (IRA, 401k, TSP, Savings, Checking)	Approximate Amount		

GET QUOTES FOR YOUR CLIENT

Use the **FE worksheet** to find out which company your client will qualify for
(Send to a manager or use the quoting tool)

EXPLAIN THE POLICY TYPE AND BENEFITS

- The program we are looking at today is a **Whole Life Policy**, which means you have...
  - **Fixed Rates for Life**
  - **Fixed Coverage for Life**
  - and **Cash Value Accumulation** included along the way
- So this means **You Do Not Have To Worry About Your Policy** or **Prices Changing Later**, does that make sense?
- After you pass away (Client name) **100% of the Death Benefit** is **paid directly** to (Insert Beneficiary Name)
- The Death Benefit is **100% Tax Free**
- And is **not accessible to creditors** or **debtors**
- (If Available) Also please note, This is **Day 1 Coverage**, with **no waiting period for your Death Benefit**, your coverage starts right away. Thats nice to know right?

GO OVER THE COVERAGE YOU FIND

- The best A Rated carrier I found was ________ (If you can, provide a few facts on the company)
- I started with ________ (Coverage Amount) but can **go up or down in $1,000 increments** depending on your budget
- This coverage would **put** (Beneficiary Name) **in a good position** and That coverage would be just ________ (Price)

Carrier	Coverage Amount	Monthly Premium

- Is this **a comfortable option for you** or would you like me to adjust it up or down? (Confirm a comfortable option before continuing)
- Great and **nothing is set in stone yet** as we still need to go through the **Request For Coverage Process**, that usually takes about a week.
- Is there **a good mailing address** you usually like all your documents mailed to? (Cannot be a PO Box)

BEGIN APPLICATION ON CARRIER SITE