Initial Appointment Checklist

Client Name: ______________________________

Appointment Date & Time: ____/____/____ at ____:____ ☐ AM ☐ PM
Appointment Type: ☐ IN PERSON ☐ ZOOM ☐ PHONE

Bank Statements

☐ Checking
☐ Savings
☐ CDs
☐ Joint
☐ Individual
☐ Children

Brokerage Accounts (Any & All)

☐ Stocks and Bonds
☐ Mutual Funds
☐ T-Bills
☐ 529 Plans

Retirement Plan Statements

☐ 401(k)
☐ 403(b)
☐ 457
☐ IRA / Roth
☐ SEP/Simple-IRA

Legal Documents

☐ Wills

Insurance Policies (Any & All)

☐ Life
☐ Health
☐ Disability
☐ Long Term Care

Employee Benefit Statements

☐ Group Disability Insurance Coverage
☐ Social Security Projection

Pay Stubs

☐ Self
☐ Spouse
☐ Prior Tax Year Returns

Additional Items

☐ Driver's License
☐ Void Check

This information will be part of the initial meeting to crystalize your goals and needs.

Have questions regarding this checklist? Contact us today!
609-296-6701 or aapgar@ft.newyorklife.com