

Needs Analysis for Disability Insurance

Current monthly earned income	\$
Maximum monthly benefit allowable based on Insurance Company "Issued & Participation Limits"	\$
Monthly percentage or dollar amount necessary to meet lifestyle requirements	\$
Partial / residual required (50%)	\$

I have reviewed the key riders available and have chosen:

Regular OCC	
Future Needs	
Inflation Indexer	
Lifetime Benefits	

Name: _____

Signature: _____

Date: _____