

# Sec. 79 Champion Agency Proposal Request Form

Date Requested \_\_\_\_\_

## PRODUCER INFORMATION

Requested by (proposals will be sent to the person listed here)

Address \_\_\_\_\_

Phone # \_\_\_\_\_

Fax # \_\_\_\_\_

E-Mail \_\_\_\_\_

Producer \_\_\_\_\_

Is the Producer's primary line of business insurance or investments?  Insurance  Investments  
Name of Broker Dealer: \_\_\_\_\_

Marketing Group Affiliation (if any) \_\_\_\_\_

**Delivery Instructions:** Proposals will be sent by the requested delivery method at the end of the 3<sup>rd</sup> full business day from receipt of complete information. Please choose one of the following options:"

Email  Regular or Priority Mail  Fax  Overnight Mail  Will pick up at \_\_\_\_\_

## INSURANCE ILLUSTRATION INFORMATION

State of Issue \_\_\_\_\_

Exchange Policy:  UL  EIUL  VUL Interest Rate: \_\_\_\_\_%

## TAX RELATED INFORMATION

Fiscal Year Ends \_\_\_\_\_

Tax Brackets

Corporate \_\_\_\_\_%

Individual \_\_\_\_\_%

Does the business have an existing group term plan?

Yes  No

If Yes, number of employees participating in the group plan \_\_\_\_\_

## BUSINESS INFORMATION

Name of Business/Case Name (C Corporations only) \_\_\_\_\_

## CENSUS

\*Key Person: an officer of the company with annual compensation of more than \$130,000 – or – a more than 5% owner –or- a more than 1% owner with annual compensation of more than \$150,000.

Participant's Name	% of Ownership	Key Person?* Y/N	Date of Birth	Gender (M/F) & Underwriting Class**	Compensation	Contribution Desired (Keys Only)

\*\*Indicate if participant is Preferred Non Tobacco (PNT), Standard Non Tobacco (SNT), or Tobacco (T) user.

**RETURN TO: Champion Agency, Inc. 8801 Horizon Blvd NE Suite 320 Albuquerque NM 87113**  
**TEL: (800) 274-0433 FAX: (505) 265-8513 EMAIL: ken@champion-agency.com**

Internal use only

CM

AM

REX # \_\_\_\_\_

2<sup>nd</sup> Entity

Discriminatory

Under 10

Effective Date of Plan \_\_\_\_\_

Policy Issue Date \_\_\_\_\_

# ADDITIONAL CENSUS PAGE

## CENSUS \*Key Person: an officer of the company with annual compensation of more than \$130,000 – or – a more than 5% owner –or- a more than 1% owner with annual compensation of more than \$150,000.

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# Champion Supplemental Client Questionnaire

**The questionnaire is designed to help the financial advisor identify qualified clients for our plans and gather key information to be used in case design. This form may be retained by the financial advisor, or sent with the Proposal Request Form to Champion Agency. Completion of this Supplemental Questionnaire is not required by Champion Agency to produce a proposal. However, the Proposal Request Form is required.**

Name of client/business \_\_\_\_\_

Is the client a business owner?  Yes  No

What type of business entity is it?  Sole Prop.  Partnership  LLC  S Corp  C Corp

What is the nature of business (i.e.: medical, construction, manufacturing, etc.)  
\_\_\_\_\_

Does the client have ownership interest in more than one entity?  Yes  No

How many owners are there in the primary business? \_\_\_\_\_

How many other employees? \_\_\_\_\_

Does the client own a company/practice with historically a stable cash flow?  Yes  No

Is it realistic to expect this cash flow to remain the same or improve for the next 5 years?  Yes  No

How much is the client able/willing to contribute to the plan annually? \$ \_\_\_\_\_

Can/will the client commit to funding the plan for at least 5 years?  Yes  No

Does the client feel he/she paid too much in taxes last year?  Yes  No

Does the client currently have a qualified plan?  Yes  No

If "Yes", what type?  401(k)  Profit Sharing  IRA  SIMPLE  SEP  Defined Benefit.

What was the last contribution amount? \$ \_\_\_\_\_

When was it made? \_\_\_\_\_

Check the area(s) of financial planning your client is currently interested in discussing.

- Tax Savings
- Retirement Savings
- Increase Current Income Flow
- Death Benefit Protection
- Business Succession Planning
- Employee Benefit Programs
- Creditor Protection
- Estate Planning

*For Financial Advisor Use Only*

**CHAMPION AGENCY**  
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**(800) 274-0433**