

# TRANSFER ASSISTANCE *Check List*

## ASSETS THAT NEED CHANGE OF TITLE OR CHANGE OF BENEFICIARY\*

At the time of the *Portfolio* delivery, the following types of assets need to be 1) **retitled** into your Clients' Living Trust or 2) have the beneficiary **changed** to their Living Trust. Forms to make these changes are located in the last section of the *Portfolio*. For each form used, you should attach a copy of the Certificate of Trust, see Section Four of the *Portfolio*. This is also an appropriate time to determine with your Clients which assets, if any, should be repositioned into a different asset. - see **Meets Your Objectives**.

Asset Type

- |                      |                          |                       |
|----------------------|--------------------------|-----------------------|
| (1) BANK ACCOUNTS    | (4) STOCKS & BONDS       | (7) ANNUITIES *       |
| (2) BROKERAGE ACCTS. | (5) US SAVINGS BONDS     | (8) QUALIFIED PLANS * |
| (3) MUTUAL FUNDS     | (6) LIMITED PARTNERSHIPS | (9) LIFE INSURANCE *  |

NOTE: If married, the Trust should be the Secondary (Contingent) Beneficiary of assets #(7) & (8)

## INVENTORY OF TITLED ASSETS FOR \_\_\_\_\_

TYPE	WHERE ASSET HELD	BY WHO C - S - J	CURRENT ASSET VALUE	MEETS YOUR OBJECTIVES			DATE RETITLED/ RETITLED BY
				YES	NO	NOT SURE	
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____
( )	_____	( )	_____:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	____/____

### CLIENT STATEMENT

I understand that even though I am being assisted with the retitling and the change of beneficiary of assets, it is my responsibility to make sure these changes are completed.

\_\_\_\_\_ x \_\_\_\_\_

Client Name