THE FAMILY PROTECTION CHECKLIST

Protect What Matters. Prepare for What's Next.

Check what you have in place. Leave unchecked anything you still need to review.

Name / Household _____ Date _____

01 INCOME & FINANCIAL PROTECTION

- ☐ I know how my household would cover expenses if my income stopped.
- ☐ I have reviewed my life insurance coverage and beneficiaries.
- ☐ I have considered disability or income-replacement protection.
- ☐ I know what benefits or coverage I have through work.

02 FAMILY & DEPENDENT NEEDS

- ☐ I have estimated what my family would need if I were no longer here.
- ☐ I have a plan for children or others who depend on my support.
- ☐ My partner or trusted person knows where to find key information.
- ☐ I have reviewed major debts and ongoing household obligations.

03 DOCUMENTS & DECISION-MAKING

- ☐ I have reviewed whether I need a will and/or trust.
- ☐ I have considered powers of attorney and health care directives.
- ☐ My beneficiary designations reflect my current wishes.
- ☐ Important documents are organized and securely accessible.

04 EMERGENCIES & LONG-TERM READINESS

- ☐ I have an emergency savings goal and a plan to reach it.
- ☐ I know how essential bills would be paid during an emergency.
- ☐ I have considered potential long-term care needs and costs.
- ☐ I review my protection plan after major life changes.

MY NEXT STEPS

Choose up to two areas to address first.

_____

_____

Target review date _____

Educational checklist only; not individualized legal, tax, insurance, or financial advice.