

## SUMMARY AND REASON FOR SALE

To be completed by the Advisor based on Policyowner's responses and needs and signed by the Policyowner

Name of Proposed Life Insured/Annuitant: \_\_\_\_\_

Name of Policy Owner if different from Life Insured/Annuitant: \_\_\_\_\_

*To assist in the analysis of my financial security needs as Policyowner, I have provided relevant information to my Advisor \_\_\_\_\_ (name) and a copy of the documents have been given to me.*

**An analysis of my current and future security needs was completed, more particularly with regards to:**

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**Based on the needs analysis, the following recommendations regarding the type of Insurance or Investments, the carrier and product name and how they address my needs and objectives were made to me by my Advisor:**

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**If I have agreed to pay any discretionary fees recommended by my Advisor, they are described below and I understand what they cover:**

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**Following my Advisor's recommendations, I will:    Not pursue for the moment  (please explain why):**

**Proceed with  (please describe products(s) purchased and any other recommendations made):**

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**Reason for purchase of Segregated Fund:**

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**Future follow-up dates to review and / or address any remaining gaps:**

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