



# Brokers Alliance Final Expense

## Sales Training Guide

# Final Expenses and Arrangements

## Final Arrangements Requests Kit



**BROKERS ALLIANCE FINAL EXPENSE**

**Final Arrangements Requests**

My Agent:  
Phone:  
Email:

To my Family and Friends,

I am aware of the emotional upset one may experience at a time such as this. So that I may spare you any additional unrest, I have prepared this packet to help you with the planning and decision making that must be done.

Within these pages I have outlined my final wishes. I have also provided a detailed list of all legal and financial information that will be needed when settling my estate. I hope this somewhat lessens the difficulties you may face upon my passing.

**PERSONAL INFORMATION**

Name  
First: \_\_\_\_\_  
Middle: \_\_\_\_\_  
Last: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_

Address  
P.O. Box: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_

Birthplace  
City/State: \_\_\_\_\_  
Date of birth: \_\_\_\_\_  
Country: \_\_\_\_\_

Occupation  
Retired: \_\_\_\_\_  
Employer: \_\_\_\_\_

**Marital Status**  
☐ Married ☐ Single ☐ Divorced ☐ Widowed  
Spouse's Name: \_\_\_\_\_

**Father's Name**  
Birthplace: \_\_\_\_\_

**Mother's Name**  
Birthplace: \_\_\_\_\_

**If you are a Veteran, please complete this information:**  
Service Number/Name of War: \_\_\_\_\_  
Branch/Rate: \_\_\_\_\_  
Date Enlisted/Date Discharged: \_\_\_\_\_  
Location of original discharge papers: \_\_\_\_\_

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# Final Arrangements Requests Kit

- Brokers Alliance Final Expense is proud to offer the unique and valuable services of the Final Arrangements Requests kit
- Show loved ones how much you care by alleviating not only the financial burden, but also much of the emotional burden that is often left behind
- At your time of passing, the smallest decisions that must be made can weigh heavily and cause stress to your loved ones
- With your Final Arrangements Requests kit in place, you will have relieved much of the emotional burden by making those decisions in advance for your loved ones



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Name  
First: \_\_\_\_\_  
Middle: \_\_\_\_\_  
Last: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_

Address  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
ZIP: \_\_\_\_\_  
Phone: \_\_\_\_\_

Birthplace  
City/State: \_\_\_\_\_  
Date of birth: \_\_\_\_\_  
Country: \_\_\_\_\_

Occupation  
Employer: \_\_\_\_\_  
Retired: \_\_\_\_\_

Marital Status  
☐ Married ☐ Single ☐ Divorced ☐ Widowed  
Spouse's Name: \_\_\_\_\_


Father's Name  
Birthplace: \_\_\_\_\_

Mother's Name  
Birthplace: \_\_\_\_\_

If you are a Veteran, please complete this information:  
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Branch: \_\_\_\_\_  
Date Enlisted: \_\_\_\_\_  
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**PERSONAL INFORMATION**

**Name**  
First: \_\_\_\_\_  
Middle: \_\_\_\_\_  
Last: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_

**Address**  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

**Birthplace**  
City/State: \_\_\_\_\_  
Date of birth: \_\_\_\_\_  
Country: \_\_\_\_\_

**Occupation**  
Do you retired: \_\_\_\_\_  
Employer: \_\_\_\_\_

**Martial Status**  
☐ Married    ☐ Single    ☐ Divorced    ☐ Widowed  
 Spouse's Name: \_\_\_\_\_

**Father's Name**  
Birthplace: \_\_\_\_\_

**Mother's Name**  
Birthplace: \_\_\_\_\_

If you are a Veteran, please complete this information:  
 Service Number Name of War: \_\_\_\_\_  
 Branch/Rate: \_\_\_\_\_  
 Date Enlisted/Date Discharged: \_\_\_\_\_  
 Location of original discharge papers: \_\_\_\_\_

Page 1

There are only two reasons someone asks about Final Expenses and Arrangements:

1. We love someone. If we didn't love anyone, we would just leave the bills behind.
2. Is to put our affairs in order.

This kit does just that!



# Final Arrangements Requests Kit



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**This section is vital in setting the proper final arrangements atmosphere.**



# Final Arrangements Requests Kit

Find out the marital status.  
If widowed, how long ago  
and did they have ample  
coverage?

**PERSONAL INFORMATION**

**Name**  
First: \_\_\_\_\_  
Middle: \_\_\_\_\_  
Last: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_

**Address**  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/ZIP: \_\_\_\_\_  
Phone: \_\_\_\_\_

**Birthplace**  
City/State: \_\_\_\_\_  
Date of birth: \_\_\_\_\_  
Country: \_\_\_\_\_

**Occupation**  
Date retired: \_\_\_\_\_  
Employer: \_\_\_\_\_

**Marital Status**  
☒ Married ☐ Single ☐ Divorced ☐ Widowed  
Spouse's Name: \_\_\_\_\_

**Father's Name**  
Birthplace: \_\_\_\_\_

**Mother's Name**  
Birthplace: \_\_\_\_\_

**If you are a Veteran, please complete this information:**  
Service Number Name of War: \_\_\_\_\_  
Branch Rank: \_\_\_\_\_  
Date Enlisted Date Discharged: \_\_\_\_\_  
Location of original discharge papers: \_\_\_\_\_

Did they serve? If so, thank  
them with a handshake.

Be sure to remind them that  
“it is a shame that Veterans  
are only guaranteed a flag, a  
thank you letter and a plot  
and marker at a government  
cemetery, if available.”

(This will save you from a  
future objection)



# Final Arrangements Requests Kit

Find out what type of service they wish to have: Burial or Cremation?

If cremation, have they discussed this with their children?

BROKERS ALLIANCE FINAL EXPENSE

Final Arrangements Requests

**FUNERAL REQUESTS**

I expect expenses for a casket and Mortuary Service to total approximately \$\_\_\_\_\_ and to consist of:

<b>I would prefer:</b> <input type="checkbox"/> Earth Burial <input type="checkbox"/> Cremation/Inurnment <input type="checkbox"/> Mausoleum/Entombment <input type="checkbox"/> Plot already purchased <input type="checkbox"/> Other: _____	<b>Type of casket:</b> <input type="checkbox"/> Cloth Covered Casket (moderate cost) <input type="checkbox"/> Metal Casket (average selection) <input type="checkbox"/> Metal Sealer Casket (finest protection)	<b>Flag:</b> <input type="checkbox"/> Folded <input type="checkbox"/> Draped <input type="checkbox"/> No flag Presented to: _____
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**Cemetery**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_



# Final Arrangements Requests Kit

This page is a “ROAD MAP” to all of your important paperwork

“How much, IF ANY, whole life insurance do you currently have?”

“Your Social Security check, does that go into your Checking account or your Savings account?”

**LEGAL DOCUMENTS (Location of Papers and Documents)**

Name of Estate Executor: \_\_\_\_\_

Last Will and Testament: \_\_\_\_\_

Birth Certificate: \_\_\_\_\_

Marriage Certificate: \_\_\_\_\_

Stock Certificates: \_\_\_\_\_

Bond Certificates: \_\_\_\_\_

Military Records: \_\_\_\_\_

Passport: \_\_\_\_\_

Trust Fund Information: \_\_\_\_\_

Insurance Documents: \_\_\_\_\_

Automobile Insurance Documents: \_\_\_\_\_

Home Owners Insurance Documents: \_\_\_\_\_

Mortgage Papers: \_\_\_\_\_

Deed to House: \_\_\_\_\_

Car Title or loans: \_\_\_\_\_

Citizenship Papers (if applicable): \_\_\_\_\_

Income Tax Information: \_\_\_\_\_

Passwords/PIN Numbers: \_\_\_\_\_

Safe Deposit Box Location(s) and Persons with access to it: \_\_\_\_\_

Persons with access to it: \_\_\_\_\_

**Checking Accounts**

Institution: \_\_\_\_\_ Account Number: \_\_\_\_\_ Address: \_\_\_\_\_

Institution: \_\_\_\_\_ Account Number: \_\_\_\_\_ Address: \_\_\_\_\_

**Savings Account**

Institution: \_\_\_\_\_ Account Number: \_\_\_\_\_ Address: \_\_\_\_\_

Institution: \_\_\_\_\_ Account Number: \_\_\_\_\_ Address: \_\_\_\_\_



# Term vs. Whole Life

**Do you want to RENT or OWN your family's security?**

## Term Insurance

- It's "rented" for a term of your life
- At the end of "term" the costs either go UP or the benefits GO AWAY

## Whole-Life

- You own policy
- Premiums never go up
- Benefits never go down
- *Secure*





# Final Expense Quote Finder

“Being America’s Premier Final Expense Agency we have our choice of carriers. To ensure I am placing you with the best fit, I need to ask you a few qualifying questions.”

Final Expense Finder

Level

Guaranteed

Face Amount

Is he/she a smoker?

☒ Non-Smoker ☐ Smoker

Your client's gender?

☒ Female ☐ Male

What is your client's AGE?

Is your client more than 70lbs overweight?

Does your client currently have any serious health conditions or have they been declined for insurance this year?

Does your client have diabetes, or suffer from a TIA in the past two years?

# Objections/Rebuttals

## I WANT TO THINK IT OVER

“I can appreciate that and that’s almost always the wise thing to do, but aren’t there just two things to ever think about? Do I need it and can I afford it? We’ve established that you need it, so the real question is WHICH ONE fits your budget.”

“I can appreciate that. This is a decision we would all like to put off and unfortunately by putting it off there are only three things that can happen. 1. You could die without coverage. 2. Your health could change and you would no longer be eligible for coverage. 3. Your age could change and that would make the price go up. Now (Name), when you die you do not want your loved ones sitting around this kitchen table trying to figure out how to deal with this, so why don’t we take the extra time right now and figure out which plan works best for you.”

# Objections/Rebuttals

## CAN'T AFFORD IT/ON FIXED INCOME

“We all know death is a huge financial burden, and what we are deciding here today is whether you want to accept that burden or leave it to your loved ones (or specific name), and I know you don’t want to leave it to them, that’s why you sent in the card. You sent it in so that you could take care of this yourself. So why don’t we do that today?”

“I wish I had a simple solution for you, but I don’t. Death is a financial burden and someone has to sacrifice. Either you or your loved ones (or specific person). Is it easier for you to sacrifice and pay this monthly premium, or have your loved ones (or specific person) pay for this all at once? I think we know the answer to that, it’s why you sent in the card, so why don’t we get this started today?”

# Objections/Rebuttals

## NEED TO TALK TO SOMEONE

“I can appreciate that it is important to let (name/your children) know what’s going on. However if you’re calling them to ask if it’s ok or if you should do it, I’ll tell you what they’re going to say. They’ll say (name/Mom/dad) don’t worry about it (I/we) will take care of it. They’ll say this not because they can take care of it, but because they love you and don’t want you to think about you dying. You and I both know that. That’s why you sent in the card, to take care of it for them. So why don’t we get this started today?”

# Objections/Rebuttals

## JUST SHOPPING/WANT TO COMPARE

“We are the largest final expense agency in the country. We have done the shopping for you.”

“I will never tell you to stop shopping, I am just saying you qualify today, wouldn't it be wise to be covered while you shop?”