

***Financial Planning Worksheet***

Date: \_\_\_\_\_

Client Name: \_\_\_\_\_

Married: Y or N      Spouse Name: \_\_\_\_\_

Client DOB: \_\_\_\_\_      Spouse DOB: \_\_\_\_\_

Address: \_\_\_\_\_      Home Phone: \_\_\_\_\_

\_\_\_\_\_      Office Phone: \_\_\_\_\_

***Dependents:***

<b>Name</b>	<b>DOB</b>	<b>College Desired</b>	<b>Current College Savings</b>

***Social Security Benefits: (Circle One)***

- A. Do not include
- B. I expect partial benefits
- C. I expect full benefits

Client Job Title: \_\_\_\_\_      Employer: \_\_\_\_\_

Spouse Job Title: \_\_\_\_\_      Employer: \_\_\_\_\_

***Retirement:***

Desired Retirement Age of Client: \_\_\_\_\_      Expected Life Expectancy \_\_\_\_\_

Percent of Today's Income Desired for Retirement Per Year: \_\_\_\_\_

**Annual Income**

Annual \$\$

Salary (Client)	
Salary (Spouse)	
Self-Employment (Client)	
Self-Employment (Spouse)	
Interest & Dividends	
Pensions & Alimony	
Social Security	
Rental Property (Net)	
Other	
Total Annual Income	

**Assets**

Asset	Owner Code	Value	Rate of Return	Liability	Savings to Asset (Monthly)
Residence					
Real Estate					
Cash					
Savings					
CD's					
Mutual Funds					
IRA's Traditional					
IRA's Roth					
Bonds					
Other					
Total					

Owner Code: C=Client S=Spouse J=Joint

**Retirement Plans**

Type	Name of Plan	Owner Code	Value	Rate of Return	Monthly Savings	Match
Total						

Types: 401(k), Keogh, SEP, TSA  
 Owner Codes: C=Client S=Spouse

**Life Insurance**

Policy Carrier	Type	Insured	Beneficiary	Death Benefit	Cash Value
Total					

Types: VL (Variable Life), UL (Universal Life), WL (Whole Life), Term

**Disability**

Policy Carrier	Insured	Monthly Benefit	Maximum Per Month	Elimination Period (Mths)	Years Paid To (eg. - 65)

**Partnerships**

Income from Partnerships: \_\_\_\_\_

Partnership Assets: (List all in space below)

**Contingent Liabilities:**

Do you have any . . .	No	Yes	\$
Contingent liabilities (as endorser Co-maker or guarantor? . . . on leases ? on contracts ?	<input type="checkbox"/>		_____
Pending Legal Claims ?			_____
Outstanding letters of credit or Other special debt or circumstances ?			_____
Income Tax Liens ?			_____
If "yes" to any question (s) describe:			

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**General Information:**

Are you a Defendant in any Suits or Legal Action ?      No      Yes  
If yes, explain \_\_\_\_\_

Have your ever declared bankruptcy ?      No      Yes  
If yes, explain \_\_\_\_\_