

Non-Retirement Asset	Institution	Balance	Name on Account
Savings		\$	
Savings		\$	
Checking		\$	
CDs / Money Market		\$	
Bonds		\$	
Mutual Funds	Please attach a recent statement.		
Stock Portfolio	Please attach a recent statement.		
Brokerage Accounts	Please attach a recent statement.		
Brokerage Accounts	Please attach a recent statement.		
Annuities	Please attach a recent statement.		
529 College Savings Plans	Please attach a recent statement.		
529 College Savings Plans	Please attach a recent statement.		
Other / Miscellaneous	Please attach a recent statement.		

Advisor Note Section:

Important Financial Documents

Traditional IRA's	Please attach a recent statement.
Roth IRA's	Please attach a recent statement.
401(k) / 403(b)	Please attach a recent statement.
SEP / SIMPLE IRA's	Please attach a recent statement.
Social Security	Please attach a recent statement.
Paystub	Please attach a recent statement.
Most Recent Tax Return	Please attach a recent statement.
Estate Planning Documents - will, Trust, Medical Directive, Power of Attorney	Please attach a recent statement.
Employer Match or Profit Sharing	Please attach a recent statement.
Deferred Compensation Plan	Please attach a recent statement.
Stock Options	Please attach a recent statement.
Other / Miscellaneous	Please attach a recent statement.
Employee Benefits and Retirement Plan	Please attach a recent statement.

Advisor Note Section:

Real Estate

	Estimated Market Value	Purchase Price	Owner
Residence	\$	\$	
Second / Vacation Home	\$	\$	
Rental Property	\$	\$	
Commercial Property	\$	\$	

Personal Assets

Automobile	Automobile	Collectibles	Jewelry	Other
\$	\$	\$	\$	\$

Business Ownership

Name of Company	Business Form	% Owned	Est. Market Value
			\$
			\$

Trust (Other)

Item	Description	Income	Est. Market Value

Advisor Note Section:

Liabilities	Loan Type	Years Remaining	Balance	Monthly Payment	Interest Rate
Primary Mortgage					
2nd Mortgage / Home Equity					
Mortgage on Vacation Home					
Auto Loan / Lease					
Auto Loan / Lease					
Student Loan					
Credit Card - _____					
Credit Card - _____					
Consumer Loan					
Insurance Policy Loan					
Misc./Other/Family - _____					

What is your credit score?

Miscellaneous Client Notes / Explanations Section:

Advisor Note Section:

Expense and Cash Flow Worksheet

The challenge here is that some expenses are not regularly paid, some are variable in cost, some are included in other venues like credit cards, and various other issues. As best as you can, we would like to get a good idea of monthly or annual costs that go out of your household, so we can better plan and budget. Do the best you can here. If you prefer to just summarize a monthly or annual number, that is fine too, as long as we have some expense outflow for planning purposes.

Fixed Expenses / Past Commitments

Living Expenses	If Paid Monthly	If Paid Annually
Mortgage/ Rent	\$	\$
Property Taxes	\$	\$
Homeowner's Insurance	\$	\$
Home Phone	\$	\$
Cell Phone	\$	\$
Cable/ Internet	\$	\$
Tax Payments (if applicable)	\$	\$
Life Insurance (Cumulative for Family)	\$	\$
Health Insurance	\$	\$
Disability/ LTC Insurance	\$	\$
Auto Insurance	\$	\$
Medications	\$	\$
Alimony / Child Support	\$	\$
Car Loan/ Lease	\$	\$
Credit Card Debt (cumulative if more than 1 - estimate)	\$	\$
Home Equity / Line of Credit	\$	\$
Gym / Health Club	\$	\$
Consistent Charitable Donations	\$	\$
Utilities- Electricity / Gas / Water	\$	\$
Lawn Care / Home Cleaning Person	\$	\$
Country Club/ Social Clubs	\$	\$
Private Schools	\$	\$
Student Loans	\$	\$
Home Security System	\$	\$
Financial Planning Fee	\$	\$
Netflix / Hulu / Spotify	\$	\$
Daycare	\$	\$
Other - _____	\$	\$

Advisor Notes Section:

Variable / Present Choices

Living Expenses	If Paid Monthly	If Paid Annually
Groceries	\$	\$
Recreation / Spending Money	\$	\$
Gas	\$	\$
Dining Out / Lunches/ Happy Hour	\$	\$
Shopping	\$	\$
Alcohol	\$	\$
Lattes/ Starbucks	\$	\$
Parking	\$	\$
Babysitting / Nanny	\$	\$
Misc. Care (Hair, Nails, Massage)	\$	\$
Pet Care	\$	\$
Dry Cleaning	\$	\$
Other - _____	\$	\$
Other - _____	\$	\$

Future Needs / Wants

Emergency Fund	\$	\$
Retirement Savings	\$	\$
Education Savings	\$	\$
Health Savings Account	\$	\$
Vacations/ Travel	\$	\$
Holidays	\$	\$
Home Improvements	\$	\$
Car Repair / Replacement	\$	\$
Gifts to Family or Non-Family Members (estimate)	\$	\$
Special Saving / Giving	\$	\$
Other - _____	\$	\$
Other - _____	\$	\$

Total Monthly & Annualized:	\$	\$
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