

ASSEMBLY CHECKLIST FOR OUR UPCOMING MEETING

Please Assemble The Following Information For Our Meeting As It Pertains To Your Situation

FINANCIAL INFORMATION

- Most recent FINANCIAL STATEMENTS
 - Include all Mutual Funds, Brokerage Accounts, IRAs, Employer Plans, Annuities, CDs, Bonds
- Most recent LIABILITY STATEMENTS
 - Include all Mortgages, Home Equity Loans, Vehicle, Credit Cards, etc.
 - Please provide the Interest Rate, Term, and Monthly Payment Amount
- Most recent PAY STUB from your employer(s)
- Summary list of all REAL ESTATE owned
- Copies of all original LIFE INSURANCE POLICIES (and their most recent statements)
- Copies of your LAST TWO TAX RETURNS (federal and state)
- Copies of your most recent SOCIAL SECURITY STATEMENTS
 - Your most recent benefit information is available online at www.ssa.gov/myaccount

EMPLOYER BENEFITS

- Current & Future PENSION ESTIMATES and SURVIVORSHIP OPTIONS
 - Provide estimates for all potential retirement dates and an estimate assuming employment ends today
- Latest statement on your EMPLOYER RETIREMENT PROGRAM - 401(k) Plan, 403(b) Plan, etc.
 - Provide all available plan investment options, if not already listed on the statement
- Latest information on your GROUP LIFE INSURANCE COVERAGE
- Copies of any DISABILITY INCOME policies
- If you have STOCK OPTIONS please provide: type, shares, expirations, and strike prices

LEGAL DOCUMENTS

- Copies of your WILLS
- Copies of FINANCIAL POWERS OF ATTORNEY
- Copies of HEALTHCARE POWERS OF ATTORNEY and/or LIVING WILLS
- Copies of any TRUST AGREEMENTS (that you have established or are a beneficiary of)

BUSINESS OWNERS

- As business structures and activities are unique, please contact me to discuss what information might be appropriate to accurately review your situation

BUDGET WORKSHEET: WHAT ARE YOU CURRENTLY SPENDING?

Please Fill Out The Following Based On Your Current Living Needs

HOUSING	Monthly	Annual	Debt Balance	Interest Rate
Mortgage Payment (or Rent)				
Association Fees				
TV / Internet / Home Phone				
Cell Phone(s)				
Electricity				
Gas / Oil				
Water / Sewer				
Trash Pick-Up				
Household Help (Yard, Pool, etc.)				
Other:				
DAILY LIVING	Monthly	Annual		
Groceries				
Dining Out				
Entertainment				
Clothing / Dry Cleaning				
Salon / Barber				
Subscriptions				
Day Care / Babysitting				
Pet Expenses				
Other:				
HEALTH	Monthly	Annual		
Doctors , Dentist, etc.				
Medicine / Prescriptions				
Health Insurance				
Long-Term Care Insurance				
Disability Insurance				
Life Insurance				
Other:				
VACATIONS / MISC.	Monthly	Annual		
Vacations (Travel, Dining, etc.)				
Gifting (Birthdays, Holidays, etc.)				
Charitable Donations / Church				
Other:				
VEHICLES	Monthly	Annual	Debt Balance	Interest Rate
Vehicle Loan (1)				
Vehicle Loan (2)				
Gasoline				
Transportation / Parking				
Auto Insurance				
Maintenance				
OTHER LIABILITIES	Monthly	Annual	Debt Balance	Interest Rate
Home Equity Loan(s)				
Tuition / Student Loan(s)				
Credit Card(s)				
Other:				
Other:				
	Monthly	Annual		
Total Current Living Needs:				

Breakdown of Mortgage Payment	
<i>Principal & Interest:</i>	
<i>Real Estate Taxes:</i>	
<i>Homeowners Ins:</i>	