

Financial Planning

Client A

Full Name: _____

Date of Birth: _____

Client B

Full Name: _____

Date of Birth: _____

Children

Name: _____

DOB: _____

Still Dependent: Yes No

Name: _____

DOB: _____

Still Dependent: Yes No

Name: _____

DOB: _____

Still Dependent: Yes No

Name: _____

DOB: _____

Still Dependent: Yes No

Grandchildren

Name: _____

DOB: _____

Parent: _____

Name: _____

DOB: _____

Parent: _____

Name: _____

DOB: _____

Parent: _____

Name: _____

DOB: _____

Parent: _____

Documents Needed

Personal Files

Latest income tax return

Employer

Payroll or other income statement (2 cycles)

Employee benefit booklet

Retirement Savings Plan Statement

Pension Plan Projections

Broker or Mutual Fund Company

Latest monthly/quarterly statements

Insurance Company

Most recent life insurance and annuity account statements

Disability income insurance policy information

Long term care policy information

This form and all requested documents may be submitted in one of the following ways:

- Mail or drop off in person to our Spencer Office location.
- Via email by replying to a secure, encrypted email we send first.
- Upload to your personal financial website (we will send you link information).

Cash Flow Worksheet

INCOME

| Housing | Monthly | Annual | |
|---------------------------|---------|--------|--|
| Client A Salary | _____ | _____ | |
| Client B Salary | _____ | _____ | |
| Interest Income | _____ | _____ | |
| Dividends | _____ | _____ | |
| Defined Benefit (Pension) | _____ | _____ | |
| Social Security | _____ | _____ | |
| Alimony/Child Support | _____ | _____ | |
| Rental Property | _____ | _____ | |
| Other Income | _____ | _____ | |

Are there anticipated changes to your income prior to retirement? Please explain.
 For retirement income such as pension and social security please include projected payout statements.

EXPENSES

| Savings/Investments | Monthly | Annual | Current Value | Interest Rate |
|--|---------|--------|---------------------------------|---------------|
| Bank Savings | _____ | _____ | _____ | _____ |
| Work Sponsored Plans <i>(% of income or monthly contribution)</i> | _____ | _____ | <i>Please Provide Statement</i> | |
| Roth or Traditional IRA Account | _____ | _____ | <i>Please Provide Statement</i> | |
| Investment Accounts | _____ | _____ | <i>Please Provide Statement</i> | |
| Investment Accounts | _____ | _____ | <i>Please Provide Statement</i> | |
| Education Accounts | _____ | _____ | <i>Please Provide Statement</i> | |

Notes



| | Monthly | Current Value | Interest Rate | Payoff Date | Loan Balance |
|--|----------------|---------------|---------------|-------------|--------------|
| Housing | | | | | |
| Mortgage/Rent Payment | _____ | _____ | _____ | _____ | _____ |
| Second Mortgage | _____ | _____ | _____ | _____ | _____ |
| Home Equity LOC | _____ | _____ | _____ | _____ | _____ |
| | Monthly | Annual | | | |
| Property Taxes | _____ | _____ | | | |
| Home Owner's Insurance | _____ | _____ | | | |
| Telephone/Cell | _____ | _____ | | | |
| Cable/Satellite/TV | _____ | _____ | | | |
| Internet | _____ | _____ | | | |
| Utilities | _____ | _____ | | | |
| Gardener/Maid | _____ | _____ | | | |
| Maintenance/Repairs | _____ | _____ | | | |
| Other: _____ | _____ | _____ | | | |
| Other: _____ | _____ | _____ | | | |
| Furnishings | Monthly | Annual | | | |
| Home | _____ | _____ | | | |
| Office | _____ | _____ | | | |
| Child Care | Monthly | Annual | | | |
| Day Care/Sitter | _____ | _____ | | | |
| Sports/Club Fees | _____ | _____ | | | |
| Child Activities/Involvement | _____ | _____ | | | |
| Private School Tuition | _____ | _____ | | | |
| Child Support Payment | _____ | _____ | | | |
| Entertainment | Monthly | Annual | | | |
| Movies | _____ | _____ | | | |
| Concerts/Theme Parks | _____ | _____ | | | |
| Other: _____ | _____ | _____ | | | |
| Other: _____ | _____ | _____ | | | |
| Vacations & Holidays | Monthly | Annual | | | |
| Annual Vacation | _____ | _____ | | | |
| Weekend Getaways | _____ | _____ | | | |
| Gifts - Birthday, anniversary, holiday | _____ | _____ | | | |
| Other: _____ | _____ | _____ | | | |

Food & Beverage

Monthly Annual

| | | |
|-----------|-------|-------|
| Groceries | _____ | _____ |
| Lunches | _____ | _____ |
| Meals Out | _____ | _____ |

Clothing

Monthly Annual

| | | |
|--------------|-------|-------|
| Adults | _____ | _____ |
| Children | _____ | _____ |
| Dry Cleaning | _____ | _____ |

Personal Care & Misc.

Monthly Annual

| | | |
|--------------------|-------|-------|
| Health & Beauty | _____ | _____ |
| Gym/Club Dues | _____ | _____ |
| Hair Cuts/Salon | _____ | _____ |
| Weekly Odds & Ends | _____ | _____ |
| Petty Cash Fund | _____ | _____ |
| Other: _____ | _____ | _____ |

Charitable Contributions

Monthly Annual

| | | |
|------------------|-------|-------|
| Church | _____ | _____ |
| Nonprofit: _____ | _____ | _____ |
| Nonprofit: _____ | _____ | _____ |
| Other: _____ | _____ | _____ |
| Other: _____ | _____ | _____ |

Miscellaneous

Monthly Annual

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Notes

Notes: _____



Personal & Add'l Secured Loans

(Boats, ATV, Camper, Motorcycle, etc.)

| | Monthly | | Current Value | Interest Rate | Payoff Date | Loan Balance |
|-------------|---------|--|---------------|---------------|-------------|--------------|
| Name: _____ | _____ | | _____ | _____ | _____ | _____ |
| Name: _____ | _____ | | _____ | _____ | _____ | _____ |
| Name: _____ | _____ | | _____ | _____ | _____ | _____ |
| Name: _____ | _____ | | _____ | _____ | _____ | _____ |
| Name: _____ | _____ | | _____ | _____ | _____ | _____ |
| Name: _____ | _____ | | _____ | _____ | _____ | _____ |

Vacation/Rental Property

| | Monthly | Annual | Current Value | Interest Rate | Payoff Date | Loan Balance |
|-------------|---------|--------|---------------|---------------|-------------|--------------|
| Name: _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Name: _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Name: _____ | _____ | _____ | _____ | _____ | _____ | _____ |

Hobbies/Collectables

| | Monthly | Annual | Current Value | Interest Rate | Payoff Date | Loan Balance |
|-------------|---------|--------|---------------|---------------|-------------|--------------|
| Name: _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Name: _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Name: _____ | _____ | _____ | _____ | _____ | _____ | _____ |

Notes



Medical Expenses

| | Monthly | Current Value | Interest Rate |
|----------------------|---------|---------------|---------------|
| HSA Contributions | _____ | _____ | _____ |
| Insurance Premium | _____ | _____ | _____ |
| Copayment/Deductible | _____ | _____ | _____ |
| Rx/Vitamins | _____ | _____ | _____ |
| Glasses/Contacts | _____ | _____ | _____ |
| Dental | _____ | _____ | _____ |
| Other: _____ | _____ | _____ | _____ |

Education/Self Improvement

| | Monthly | Annual | Interest Rate | Payoff Date | Loan Balance |
|-----------------------------------|---------|--------|---------------|-------------|--------------|
| Student Loan Payments- Client A | _____ | _____ | _____ | _____ | _____ |
| Student Loan Payments- Client B | _____ | _____ | _____ | _____ | _____ |
| Student Loan Payments- Child(ren) | _____ | _____ | _____ | _____ | _____ |
| Tuition/Books | _____ | _____ | _____ | _____ | _____ |
| Seminars/Workshops | _____ | _____ | _____ | _____ | _____ |
| Other: _____ | _____ | _____ | _____ | _____ | _____ |

Transportation

| | Monthly | Annual | Market Value | Interest Rate | Payoff Date | Loan Balance |
|------------------------|---------|--------|--------------|---------------|-------------|--------------|
| Vehicle: _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Vehicle: _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Vehicle: _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Registration | _____ | _____ | _____ | _____ | _____ | _____ |
| Auto Insurance | _____ | _____ | _____ | _____ | _____ | _____ |
| Gas | _____ | _____ | _____ | _____ | _____ | _____ |
| Oil Change/Maintenance | _____ | _____ | _____ | _____ | _____ | _____ |
| Repairs | _____ | _____ | _____ | _____ | _____ | _____ |
| Parking | _____ | _____ | _____ | _____ | _____ | _____ |
| Other: _____ | _____ | _____ | _____ | _____ | _____ | _____ |

Unsecured Debts

| | Monthly Payment | Interest Rate | Loan Balance |
|--------------------|-----------------|---------------|--------------|
| Credit Card: _____ | _____ | _____ | _____ |
| Credit Card: _____ | _____ | _____ | _____ |
| Credit Card: _____ | _____ | _____ | _____ |
| Store Card: _____ | _____ | _____ | _____ |
| Store Card: _____ | _____ | _____ | _____ |
| Store Card: _____ | _____ | _____ | _____ |

