



Financial Snapshot

Instructions:




First – Schedule a call
iwmfinancial.com/appointment




Second – Fill out the Financial Snapshot
Fill out the attached form as completely as possible.





Third – Submit the form
Email to: info@iwmfinancial.com

 (714) 263-1953

 info@iwmfinancial.com

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Securities and Advisory Services offered through Client One Securities, LLC Member FINRA/SIPC and an Investment Advisor. IWM Financial, Inc. and Client One Securities, LLC are not affiliated.



FINANCIAL

Intentional Wealth Management

Financial Snapshot

CONTACT INFORMATION

Client Name _____

Spouse Name (if applicable) _____

Phone: House Work Cell _____

Phone: House Work Cell _____

Email: Personal Work _____ Date of Birth _____

Email: Personal Work _____ Date of Birth _____

Physical Address _____

Mailing Address (if different) _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

PERSONAL INFORMATION

Occupation (If retired, former occupation) _____

Spouse Occupation (If retired, former) _____

Employer (If retired, former employer) _____

Spouse Employer (If retired, former) _____

Do you have dependent children or parents? _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Do you currently own or have the following:

- Trust (Family or Irrevocable) Yes No
- A Will Yes No
- Power of Attorney (assets) Yes No
- Power of Attorney (health) Yes No
- Children's names on your accounts Yes No
- Life Insurance Yes No
- Disability Coverage Yes No

Name of Accountant: _____

Name of Attorney: _____

Other Professionals: _____

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What is your biggest concern right now? _____

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INCOME & EXPENSES

	Client's Monthly NET Income (take home)	Spouse's Monthly NET Income (take home)
W2 Wages	\$	\$
Business Income	\$	\$
Pension Income	\$	\$
Social Security	\$	\$
Other Income: (Please specify)	\$	\$
TOTAL	\$	\$

What are your monthly expenses? \$ _____

Do you use a tool to track your budget? _____

How much are you saving now? \$ _____ Monthly Annually

FINANCIAL PLANNING QUESTIONS

Are you satisfied with your current monthly income? Yes No

Are you planning a major lifestyle changes (selling home, retiring...)? Yes No
If yes, please explain

Do you anticipate any changes in your annual income? Yes No

Do you foresee any large change in expenses within the next 2 to 5 years? Yes No
If yes, please explain

Do you feel you have achieved financial freedom? Yes No

Please rank from the importance of financial planning do you need most help in?

(Rank in order of importance – 1 being most important)

Investment Analysis	Budgeting	Debt Management	Business Planning	Retirement Income	Tax Planning Strategies

Other important financial planning concerns:



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Intentional Wealth Management

General Investment Knowledge and Experience

Limited Moderate Extensive None

General Risk Exposure (select one box only)

Low Moderate High Speculation

INVESTMENT HOLDINGS

Client Accounts		Spouse Accounts		Annual Additions (combined)
Cash/Checking	\$	Cash/Checking	\$	\$
Savings	\$	Savings	\$	\$
CD's	\$	CD's	\$	\$
Other:	\$	Other:	\$	\$
Retirement Accounts		Retirement Accounts		Annual Additions
Employer Plans (401(k), 403(b), 457, SEP)	\$	Employer Plans (401(k), 403(b), 457, SEP)	\$	\$
IRA	\$	IRA	\$	\$
Roth	\$	Roth	\$	\$
Other: _____	\$	Other: _____	\$	\$
Other: _____	\$	Other: _____	\$	\$
Investment Accounts		Investment Accounts		Annual Additions
Brokerage	\$	Brokerage	\$	\$
Annuities	\$	Annuities	\$	\$
Illiquid Investments	\$	Illiquid Investments	\$	\$
Other: _____	\$	Other: _____	\$	\$
Other: _____	\$	Other: _____	\$	\$
TOTAL	\$	TOTAL	\$	\$

NET WORTH SUMMARY

Value of Primary Residence	\$
Value of Investment Real Estate	\$
Value of Business(s)	\$
Other	\$
TOTAL ASSETS	\$
Primary Residence Mortgage	\$
Investment Real Estate Debt	\$
Credit Cards	\$
Auto Loans	\$
Student Loans	\$
Other Debt: _____	\$
TOTAL LIABILITIES	\$
NET WORTH	\$