



This comprehensive, personal financial review is designed to help you take inventory and assign realistic values to your personal assets and liabilities.

It's the essential first step in organizing a sensible financial strategy for your future.

Your Personal Financial Review

Please bring the following documents to your appointment:

- 1. Last year's tax return
- 2. All brokerage firm statements
- 3. All life insurance & annuity policies
- 4. All IRA & Retirement statements

Today's Date: _____

FAMILY INFORMATION

Name _____ Age _____ yrs.

Address _____

Email _____

Phone (Cell) _____

Spouse's Name _____ Age _____ yrs.

Email _____

Phone (Cell) _____

Children	Age	State of Residence	529 Accounts (Y/N, Amount)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

1. Personal Questions

- | | | |
|-------------------------------------------------|-----|----|
| 1. Do you have a living trust? | Yes | No |
| 2. Do you have a will? | Yes | No |
| 3. Do you have income from real estate? | Yes | No |
| 4. Do you have an attorney? | Yes | No |
| 5. Do you have an accountant? | Yes | No |
| 6. Do you expect to care for a child or parent? | Yes | No |
| 7. Do you expect an inheritance? | Yes | No |
| 8. Do you have long term care protection? | Yes | No |

3. Real Estate

- | | |
|---------------------------------------------|----------------|
| Estimated Value of Home | \$_____ |
| Remaining Mortgage | \$_____ |
| Equity in Home (market value less mortgage) | \$_____ |
| Other Real Estate | \$_____ |
| Remaining Mortgage | \$_____ |
| Total Value of Real Estate | \$_____ |

"Start by doing what's necessary; then do what's possible; and suddenly you are doing the impossible."
 – Frances of Assisi

2. Financial Objectives

Rank the following according to your level of concern. (Please circle the most appropriate number)

4. Bank and Credit Union Inventory

(Checking, Savings, Money Market Accounts, CDs)

	Not Concerned / Very Concerned	Name of Institution	Average Balance
Planning for children or Grandchildren	1 2 3 4 5 6 7 8 9 10	_____	_____
Reducing Current Income Taxes	1 2 3 4 5 6 7 8 9 10	_____	_____
Increasing Current Income	1 2 3 4 5 6 7 8 9 10	_____	_____
Estate Planning	1 2 3 4 5 6 7 8 9 10	_____	_____
Desire for Professional Management	1 2 3 4 5 6 7 8 9 10	_____	_____
Maximum Growth	1 2 3 4 5 6 7 8 9 10	_____	_____
Combined Growth /Income	1 2 3 4 5 6 7 8 9 10	_____	_____

5. Sources of Monthly Retirement Income

SOCIAL SECURITY

You \$ _____

Spouse \$ _____

PENSION

You \$ _____

Spouse \$ _____

6. IRA & Other Retirement Account Information

(Please bring in latest reports/statements)

Name Where Account Is Held (Bank, Brokers, Employer)	Type [401(k), 403(b), TSP, IRA, Roth IRA]	Approximate Value
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

“Setting goals is the first step in turning the invisible into the visible.”
— Tony Robbins

7. Nonretirement accounts

(Please bring in latest reports/statements)

Name Where Account Is Held (Bank, Brokers, Employer)	Type	Approximate Value
_____	_____	_____
_____	_____	_____

8. Annuities

Company	Approximate Value	Date Purchased
_____	_____	_____
_____	_____	_____

