

# Confidential Financial Planning Questionnaire

Date: \_\_\_\_\_

## HOUSEHOLD MEMBERS

\_\_\_\_\_  
Name Age Occupation

\_\_\_\_\_  
Name Age Occupation

\_\_\_\_\_  
Name Age Occupation

\_\_\_\_\_  
Name Age Occupation

\_\_\_\_\_  
Name Age Occupation

▶ Use the Additional Comments section on page 2 if more lines are needed

## FINANCIAL PLANNING GOALS

Please describe the goals and objectives you want to accomplish through financial planning.

## INCOME & SPENDING

Average monthly take-home income: \$\_\_\_\_\_

Average monthly spending: \$\_\_\_\_\_

## DEBTS AND ASSETS

<b>Non-Mortgage Debt</b> <i>Total balances owed from student loans, auto loans, personal loans, credit cards not paid in or any other non-mortgage related debt.</i>	\$
<b>Mortgage Debt</b>	\$

<b>Cash</b> <i>Total value of checking/savings/money market accounts, money market funds, certificates of deposit, and U.S. Savings bonds.</i>	\$
<b>Retirement Accounts</b> <i>Total value of IRAs, Roth IRAs, 401(k) plans, 403(b) plans, Thrift Savings Plans, or any other employee retirement account.</i>	\$
<b>Other Investments (non-real estate)</b> <i>Total value of investments that are not held in a retirement account such as mutual funds, stocks, bonds, limited partnerships, or other investments.</i>	\$
<b>Your Home's Market Value</b>	\$
<b>Other Real Estate</b>	\$
<b>Other Assets</b>	\$

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## SELF ASSESSMENT

Please rate each statement by circling the most accurate number ( 1 = strongly disagree, 5 = strongly agree)

	1	2	3	4	5
I/we follow a spending plan.					
I/we avoid debt.					
I/we save regularly.					
I/we don't try to beat market returns.					
I am/we feel well prepared for financial emergencies.					
I/we have made arrangements for our survivors.					
I/we understand how income taxes work.					
I am/we are comfortable making financial decisions.					
I/we want to learn more about personal finance.					

## FINANCIAL RESOURCES AND HISTORY

Please check all that apply.

- |   |                                      |
|---|--------------------------------------|
| Pension benefits                          | Social Security benefits             |
| Employer matches retirement contributions | Current estate planning documents    |
| Stock option grants                       | Typically receive income tax refunds |
| Flexible spending accounts                | Typically owe additional income tax  |
| Health savings accounts                   | Divorced/Widowed                     |
| Health insurance coverage                 | Children outside the household       |
| Term life insurance                       | Viewed credit reports recently       |
| Permanent life insurance                  | Identify theft victim                |
| Long-term care insurance                  | Behind on mortgage payments          |
| Renter's insurance                        | Mortgage modification                |
| Homeowner's insurance                     | Foreclosure                          |
| Umbrella liability insurance              | Bankruptcy                           |
| College funding                           | Turned down for insurance            |

## ADDITIONAL COMMENTS

Please share any additional information that you think may be relevant to your financial situation or plans.

### **Financial Bridges**

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