

Personal Financial Planning Profile

The following information is strictly confidential and will not be disclosed to anyone without your consent.

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Personal Financial Planning Profile

General Information

Today's date: _____

Client's name: _____

Co-Client's name: _____

Birth Date: _____ Age: _____

Birth Date: _____ Age: _____

Address: _____

Email: _____

Phone Numbers: _____ (home/Cell) _____ (work)

Please check one: Single Married Divorced Widowed Partner

Children:	Name	Birthdate
_____	_____	_____
_____	_____	_____
_____	_____	_____

Client

Co-Client

Please check: Employed Self-Employed Retired

Employed Self-Employed Retired

Occupation: _____

Financial Planning Priorities and Goals

What are your three most critical financial concerns or questions?

1. _____

2. _____

3. _____

Asset Information *Please estimate the value of the following:*

Checking, Savings/CD, Money Market Funds \$ _____
Retirement Accounts (IRA's, 401(k)'s 403(b)'s, etc.) \$ _____
Non-Retirement Investment Accounts \$ _____
Your Home \$ _____ Other Real Estate \$ _____
Monthly Pension and/or Social Security benefit \$ _____
Other Assets \$ _____

Liability Information *Please estimate the amount owed on each of the following. Include interest rate and time remaining on loan if possible:*

First Mortgage \$ _____ Second Mortgage(s) \$ _____
Installment Loans \$ _____ Credit Cards \$ _____
Other Liabilities \$ _____ Other Mortgages \$ _____

Annual Earned Income

Salary(ies) \$ _____ Commission \$ _____
Bonus \$ _____ Other Income \$ _____
Is income fairly uniform and reliable? Yes No

Contributions

Are you contributing on a regular basis to a retirement plan such as a 401(k), a 403(b), and IRA, or deferred compensation? If so, what %? _____ Yes No
Are you contributing to other savings? If so, what type? _____ How much? _____

Life Insurance

How much life insurance do you have?
Client \$ _____ Co-Client \$ _____

Wills

Do you have a will(s)? _____ Date Signed: _____
Do you have a trust(s)? _____ Date Signed: _____

Inheritances, Legal Settlements, or Gifts

Do you expect any inheritances, legal settlements, or gifts that may affect your financial plan? _____

Is anyone in your immediate family disabled? _____

If you answered yes to either question, please explain:

Household Expenses

What are your annual or monthly living expenses (excluding taxes)? _____

Do you use software to track your spending? _____

Other Information

What do you expect to earn on your investments?

2-4% _____ 4-6% _____ 6-8% _____ 8-10% _____ 10-12% _____ 12% + _____

What did you do the last time the stock market went down by 10% or more?

Have you ever been unhappy with the recommendations of a stockbroker, insurance agent, and/or financial advisor or consultant? _____ If yes, please explain:

If retirement is one of your goals, at what age would you like to retire?

Client _____ Co-Client _____

How were your current investments selected?

Is there any other information you would like to provide at this time?
