Financial Data Form – Personal & Confidential

PERSONAL DATA

SPOUSE A	SPOUSE B
Name:	Name:
Date of Birth:	Date of Birth:
Planned Retirement Age: ____ Or ____ currently retired	Planned Retirement Age: ____ Or ____ currently retired
Employer:	Employer:
Number of years with employer:	Number of years with employer:
Work Phone:	Work Phone:
Address:	
E-mail Address:	
Home Phone:	Fax:

PRIORITIES

(1= low priority; 5 = high priority)

What are your pressing needs for Retirement Planning?

1. Debt Management ______
2. Retirement Savings and Income ______
3. Pension Planning ______
4. Retirement Lifestyle ______
5. Estate Planning ______
6. Taxation ______

GOALS

What are your financial goals and dreams?

(No more than 3) For example you may want to retire debt free, buy a motorhome or travel the world.

GOAL #1
GOAL #2
GOAL #3

TELL US ABOUT YOURSELF

1. What can you tell us about your family situation. For example Married with two children, second marriage or divorced.

2. What is important to you about financial independence. For example you may value the flexibility to retire when you want or the ability to travel or visit family, what is most important to you.

PRESENT SOURCES OF INCOME *(gross monthly)*

SPOUSE A		SPOUSE B	
Source	Amount	Source	Amount

MONTHLY EXPENDITURES

Savings - What amounts do you average on a monthly basis?

Savings Plan	Monthly Amount
RSP	
TFSA	
Open or Taxable	
Pension	
Emergency Fund	
Other	

Child Expenses (If Applicable) – What does it cost on average to raise your children?

Child Costs	Monthly Amount

INFORMATION LIST

Compile the following documents to complete your financial plan.

1. Provide a copy of your latest notice of assessment for income tax and or full tax return.
2. Provide company pension statements. ***mandatory***
3. Include all of your investment statements. ***mandatory***
4. Statements of Insurance including life, disability, critical illness and mortgage.
5. Copy of current financial plan

REAL ESTATE INVESTMENTS

Type	Owner	Value	Mortgage Balance	Monthly Payment	Interest Rate	Life Insured
Principal Residence						
Recreation Property						
Rental Property						
Rental Property						
Rental Property						

OTHER ASSETS

Type	Description	Owner	Value
Business			
Business			
Tangible Assets			
Tangible Assets			
Money Owed You			

OTHER DEBTS

Type	Description	Monthly Payment	Balance	Interest Rate	Term	Life Insured
Line of Credit						
Investment Use						
Loans On Insurance						
Credit Card						
Other						

EDUCATION FUNDING

Enter your children that you are planning to assist with education planning and the specifics of their investments.

Child's Name	Age	Annual Assistance – Amount & Number of Years	Type of Account (RESP, In Trust, Scholarship Plan)	Investment	Amount

ESTATE PLANNING

ITEM	SPOUSE A			SPOUSE B		
	✓			✓		
	Need	In Place	Needs Update	Need	In Place	Needs Update
Will						
Enduring Power of Attorney						
Personal Directive						
Asset List Updated						
Executor Notified						

CONTACT US

410 - 1100 8th Ave. SW, Calgary, AB T2P 3T8
Tel.: 403-508-1516 Fax: 403-231-8631
www.planningprofessionals.ca