

Your personal financial plan will:

- identify goals and objectives
- gather information
- analyze your current position
- identify strengths and opportunities
- create a customized financial plan or retirement strategy to meet your goals
- implement and review your plan

Personal information

	CLIENT	SPOUSAL OR COMMON-LAW PARTNER
SIN		
Last name		
First name		
Street address		
City		
Province		
Postal code		
Home phone		
Work phone		
Fax		
E-mail		
Occupation		
Employer		
Birthdate		
Gender	M F	M F
Planned retirement age		
Marital status		
Date of marriage		

Dependent information

NAME	SIN	BIRTHDATE	AGE	RELATIONSHIP	DISABILITY	EDUCATION PLAN
		M D Y			Y N	Y N
		M D Y			Y N	Y N
		M D Y			Y N	Y N

My reasons for wanting to have my financial situation professionally evaluated are:

Personal information

	EXTREMELY IMPORTANT	VERY IMPORTANT	IMPORTANT	UNIMPORTANT
Capital growth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Safety of principal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Need for income	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Liquidity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Current lifestyle expenditures

USING MONTHLY AMOUNTS
 USING ANNUAL AMOUNTS

HOUSING	
Mortgage payment	\$
Rent	\$
Condo fees	\$
Property taxes	\$
Mortgage/homeowners insurance	\$
Maintenance & repairs	\$
Other:	\$
HOUSEHOLD & LIVING	
Food	\$
Telephone	\$
Personal care	\$
Clothing	\$
Medical/dental	\$
Child care	\$
Education	\$
Other:	\$
TRANSPORTATION	
Car payments	\$
Car insurance	\$
Gas/oil	\$
Maintenance & repairs	\$
Public transportation	\$
Other:	\$
INSURANCE	
Life insurance	\$
Disability insurance	\$
Public Health care	\$
Private health/dental	\$
Other:	\$

INVESTMENT	
Professional fees/accounting	\$
Business loan payment	\$
RRSP loan payment	\$
Investment loan payment	\$
RECREATION	
Travel	\$
Cable/satellite	\$
Recreational property expense	\$
Recreation/sports equipment	\$
Recreation/sports facility fees	\$
Recreation vehicle loan payments	\$
DISCRETIONARY	
Gifts	\$
Charitable donations	\$
Dining out	\$
Tobacco & alcohol	\$
Entertainment	\$
OTHER	
Miscellaneous	\$
CPP contributions deducted at source	\$
EI contributions deducted at source	\$
Personal loan payments	\$
Credit card/short term debt payments	\$
Professional/union dues	\$
Other deductions at source	\$
Other:	\$
TOTAL CURRENT LIFESTYLE EXPENDITURES	\$ <input type="text"/>
ESTIMATED LIFESTYLE EXPENDITURES DURING RETIREMENT (if different from current expenditure)	\$ <input type="text"/>

Employment income

ANNUAL
 MONTHLY
 QUARTERLY
 SEMI-MONTHLY
 BI-WEEKLY
 WEEKLY

	CLIENT	SPOUSAL OR COMMON-LAW PARTNER
Employer		
Gross amount		
CPP		
EI		
Income Tax		
Dues		
RRSP contributions		
RPP contributions		
Public health care		
Private health care		
Other deductions		
NET AMOUNT	\$ <input type="text"/>	\$ <input type="text"/>

INCLUDE PAY STUBS WITH QUESTIONNAIRE

Self-employment income

Business name	
Client % ownership interest	
Spouse % ownership interest	
Type of business	
Date business started	
Fiscal year-end	
Legal ownership	<input type="radio"/> PROPRIETORSHIP <input type="radio"/> PARTNERSHIP <input type="radio"/> INCORPORATED BUSINESS
Gross income	
Expenses	
Net income	

INCLUDE INCOME STATEMENT AND BALANCE SHEET FOR A MORE DETAILED ANALYSIS OF YOUR BUSINESS INCOME IN YOUR PLAN

Other income

USING MONTHLY AMOUNTS
 USING ANNUAL AMOUNTS

	CLIENT	SPOUSE	CLIENT/SPOUSE SPLIT
Pensions			
Government pensions/benefits			
Annuity			
LIF/LRIF			
RRSP/RRIF			
Other:			

INCLUDE STATEMENTS FOR A MORE DETAILED ANALYSIS OF YOUR INCOME. CPP AND PRIVATE PENSION STATEMENTS ARE PARTICULARLY IMPORTANT IN ACCURATELY DETERMINING YOUR RETIREMENT INCOME IF YOU ARE RETIRED OR YOUR ABILITY TO RETIRE IF YOU ARE PLANNING TO RETIRE.

Loans, debt and mortgages

DESCRIPTION (INSTITUTION)	TYPE ¹	USE OF FUNDS	AMOUNT	TERM	% INTEREST	PAYMENT	FREQUENCY	LEVERAGED
	T F D							Y N
	T F D							Y N
	T F D							Y N
	T F D							Y N
	T F D							Y N

¹ CIRCLE ONE: T=TERM, F=FIXED PRINCIPLE, D=DEMAND (interest only)

RRSP/RRIF

FUND NAME OR INSTITUTION	OWNER	SPOUSAL	VALUE	PLANNED CONTRIBUTIONS	CATEGORY ¹
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE	Y N			<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE	Y N			<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE	Y N			<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE	Y N			<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE	Y N			<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE	Y N			<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE	Y N			<input type="radio"/>

PLEASE INCLUDE ALL STATEMENTS

¹ INVESTMENT CATEGORIES: 1=LIMITED PARTNERSHIP, 2=ANNUITIES, 3=SEGREGATED FUNDS
 4=STOCKS, 5=MUTUAL FUNDS, 6=CORPORATE BONDS
 7=GOVERNMENT BONDS, 8= OTHER

Non-registered portfolio

FUND NAME OR INSTITUTION	OWNER	VALUE	PLANNED CONTRIBUTIONS	FREQUENCY	CATEGORY ¹
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE				<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE				<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE				<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE				<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE				<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE				<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE				<input type="radio"/>

PLEASE INCLUDE ALL STATEMENTS

¹ INVESTMENT CATEGORIES: 1=LIMITED PARTNERSHIP, 2=ANNUITIES, 3=SEGREGATED FUNDS,
4=STOCKS, 5=MUTUAL FUNDS, 6=CORPORATE BONDS,
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Major assets to be included in net worth

	OWNER	ADJUSTED COST BASE OR PURCHASE PRICE	CURRENT VALUE
Principle residence	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE	N/A	
Recreational property	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE		
Rental property	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE		
Other:	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE		

Insurance

INSURANCE COMPANY	INSURED	BENEFICIARY	PREMIUM	FREQUENCY	FACE AMOUNT	CASH VALUE	TYPE ¹
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE						<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE						<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE						<input type="radio"/>
	<input type="radio"/> CLIENT <input type="radio"/> SPOUSE						<input type="radio"/>

PLEASE INCLUDE ALL STATEMENTS

¹ INSURANCE TYPE: 1=TERM, 2=WHOLE LIFE, 3=DISABILITY, 4=UNIVERSAL LIFE,
5=MORTGAGE, 6=GROUP, 7= OTHER

Plans affecting finances

	APPROXIMATE YEAR	APPROXIMATE COST
Upgrade of home		
Purchase of recreational vehicle		
Vehicle replacement		
Travel		
Other:		

Investment knowledge

SELECT ONE

- I am just learning to invest. I would like to learn more about which financial instruments would best suit my needs.
- I have made some investments and understand basic financial concepts. I would like to learn more advanced concepts if it would help my financial situation.
- I am comfortable discussing complex financial concepts.
- I am an experienced investor and am comfortable with complex financial concepts.

CLIENT SIGNATURE

SPOUSE SIGNATURE