

FINANCIAL FOCUSER™

CONFIDENTIAL

The first step in working towards a more secure financial future is to identify your goals and resources. We will guide you through this process by asking questions that are necessary to draft a personal financial plan. We will keep the data that you provide confidential.

FAMILY DATA

YOU

Name: _____ Date of Birth: _____ U.S. Citizen: Yes / No
Social Security: _____ Previously Married: Yes / No Phone: _____
Home Address: _____ Fax: _____
_____ Email Address: _____

SPOUSE

Name: _____ Date of Birth: _____ U.S. Citizen: Yes / No
Social Security: _____ Previously Married: Yes / No Phone: _____
Home Address: _____ Fax: _____
_____ Email Address: _____

CHILDREN

Name	Date of Birth	Funds Set Aside	Saving For:	
			College	Graduate School
_____	_____	\$ _____	Yes / No	Yes / No
_____	_____	\$ _____	Yes / No	Yes / No
_____	_____	\$ _____	Yes / No	Yes / No
_____	_____	\$ _____	Yes / No	Yes / No

EMPLOYMENT DATA

YOU

Name of Business: _____ Title: _____
Business Address: _____ Phone: _____
_____ Fax: _____
Name of Assistant / Secretary: _____ Email Address: _____

SPOUSE

Name of Business: _____ Title: _____
Business Address: _____ Phone: _____
_____ Fax: _____
Name of Assistant / Secretary: _____ Email Address: _____

Optional: Attach business card(s) instead of completing above.

PREPARED BY:
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FINANCIAL FOCUSERTM

Please check title of assets carefully when completing this section.

ASSETS	YOU	SPOUSE	JOINT
Cash & Cash Equivalents	\$ _____	\$ _____	\$ _____
Long-term CDs	\$ _____	\$ _____	\$ _____
Bonds	\$ _____	\$ _____	\$ _____
Bond Mutual Funds	\$ _____	\$ _____	\$ _____
Stocks	\$ _____	\$ _____	\$ _____
Stock Mutual Funds	\$ _____	\$ _____	\$ _____
Private Equity Investments	\$ _____	\$ _____	\$ _____
Retirement Assets:			
IRA	\$ _____	\$ _____	\$ _____
401(k)	\$ _____	\$ _____	\$ _____
Deferred Compensation Plan	\$ _____	\$ _____	\$ _____
Employer Stock Options	\$ _____	\$ _____	\$ _____
Primary Residence	\$ _____	\$ _____	\$ _____
Second Home	\$ _____	\$ _____	\$ _____
Investment Real Estate	\$ _____	\$ _____	\$ _____
Personal Property:			
Cars/Boats	\$ _____	\$ _____	\$ _____
Antiques/Collectibles	\$ _____	\$ _____	\$ _____
Household Furnishings	\$ _____	\$ _____	\$ _____
Other (Jewelry, Furs, etc.)	\$ _____	\$ _____	\$ _____
Closely-held Business	\$ _____	\$ _____	\$ _____
Other Non-Investment Assets	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

LIABILITIES/DEBTS	YOU	SPOUSE	JOINT
Primary Residence Mortgage	\$ _____	\$ _____	\$ _____
Home Equity Line of Credit	\$ _____	\$ _____	\$ _____
Second Home Mortgage	\$ _____	\$ _____	\$ _____
Margin Loan	\$ _____	\$ _____	\$ _____
Personal Loans, Credit Cards, etc.	\$ _____	\$ _____	\$ _____
Estim. Current Fed. & State Taxes	\$ _____	\$ _____	\$ _____
Loans Against Retirement Plans	\$ _____	\$ _____	\$ _____
Loans Against Life Insurance	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

INHERITANCE	YOU	SPOUSE	
Anticipated Inheritance	\$ _____	\$ _____	Would you consider passing your inheritance directly to your children if you had the control to do so? Yes / No
In	Year _____	Year _____	

LIFE INSURANCE

TYPE*	COMPANY	INSURED	OWNER**	BENEFICIARY	DEATH BENEFIT
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____

* Type: T= Term, WL=Whole life, UL=Universal life, VUL=Variable universal life, (Indicate survivorship policies with an "S")

** Owner: H=Husband, W=Wife, J=Joint with spouse, C=Community property, T=Irrevocable trust

EARNED INCOME

INCOME	YOU Annual	SPOUSE Annual
Salary	\$ _____	\$ _____
Bonus	\$ _____	\$ _____

LONG - TERM DISABILITY INSURANCE

INSURED	COMPANY-SPONSORED PLANS Monthly Benefit	PERSONALLY OWNED POLICIES Monthly Benefit
You	\$ _____	\$ _____
Spouse	\$ _____	\$ _____

PERSONAL OBJECTIVES

Please indicate the relative importance of each of the following personal objectives to you and your spouse.

OBJECTIVE	YOU			SPOUSE		
	Very	Somewhat	Not	Very	Somewhat	Not
Making a major purchase (e.g. second home)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minimizing personal income taxes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developing or revising your investment strategy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Investing for a comfortable retirement income	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing for your children's education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making gifts to charity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minimizing estate tax	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Determining how your estate assets will be distributed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing for your family in the event of your or your spouse's death	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing for your family in the event of your or your spouse's disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing for your parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PLAN ON PURPOSE

- Is it your goal to transfer as much of your estate as possible to your children/grandchildren? Yes / No
- If yes, at what age would you like them to receive the money? _____
- If not, how much is "enough"? \$ _____
- Are you concerned that "too much" money may harm your children/grandchildren? Yes / No
- Have you considered transferring a portion of your wealth to charity? Yes / No

ADVISORS

Permission
to Contact?

Name, address, telephone and fax numbers of those that apply:

CPA: _____

Attorney: _____

Insurance Advisors: _____

Banker and Trust Officer: _____

Investment Advisor: _____

Stockbroker: _____

Trustee(s): _____

Executor(s): _____

Guardian(s) for Children: _____

CHECKLIST

- Completed **Financial Forms**
- Copies of prior year's federal and state income tax returns
- Copies of prior years' gift tax returns (if any)
- Copies of wills and trust agreements (and summaries, if available)
- Copies of beneficiary designations on life insurance, IRAs and retirement plans
- Information pertaining to any investment ventures, including partnerships, joint ventures, etc.
- Employee benefits handbook
- Life and health insurance policies

Your thoughts ...
Setting expectations ...

If we were meeting three years from today - and you were to look back over those three years to today, what has to have happened during that period for you to feel happy about our progress?

