Date: ____________________

15-Minute Personal Money Master

This comprehensive personal financial planning summary is designed to help you take inventory and assign realistic values to your personal assets and liabilities. It is the essential first step in identifying potential savings.

Please bring the following documents

1. Last year's tax returns
2. All brokerage firm statements
3. All life insurance & annuity policies
4. All IRA & retirement statements

Personal Data

Name: ____________________ Nickname: ____________________

Age: __________ Birth Date: ____________ Social Security Number: ____________________

Address: ____

Home Phone: ______________ Fax: ____________ E-mail Address: ____________________

Employer (or former employer if retired): ____

Position: ____________________ Business Phone: ____________________

Spouse's Name: ____________________ Nickname: ____________________

Age: __________ Birth Date: ____________ Social Security Number: ____________________

Address: ____

Home Phone: ______________ Fax: ____________ E-mail Address: ____________________

Employer (or former employer if retired): ____

Position: ____________________ Business Phone: ____________________

Joint Children	Age	State of Residence	E-mail Address	Number & Ages of Grandchildren

Wife's Children	Age	State of Residence	E-mail Address	Number & Ages of Grandchildren

Husband's Children	Age	State of Residence	E-mail Address	Number & Ages of Grandchildren

CONFIDENTIAL

1. Advisors

		Yes	No
1.	Do you have a financial advisor, excluding stockbrokers? If so, whom? ____________________	☐	☐
2.	Do you have a living trust?	☐	☐
3.	Do you have a will?	☐	☐
4.	Do you have an attorney?	☐	☐
5.	Do you have an accountant?	☐	☐
6.	Do you expect to care for a child or parent?	☐	☐
7.	Do you expect an inheritance?	☐	☐
8.	Any problems with previous stockbrokers?	☐	☐
9.	Do you have long term care protection?	☐	☐

2. Financial Planning Objectives

"What's Important About Life to You?"

Rank the following according to your level of concern.
(Circle the most appropriate number)

	Not Concerned									Very Concerned
Planning for Children/ Grandchildren	1	2	3	4	5	6	7	8	9	10
Reducing Current Income Taxes	1	2	3	4	5	6	7	8	9	10
Increasing Current Income	1	2	3	4	5	6	7	8	9	10
Estate Planning	1	2	3	4	5	6	7	8	9	10
Desire for Professional Management	1	2	3	4	5	6	7	8	9	10
Maximum Growth	1	2	3	4	5	6	7	8	9	10
Combined Growth and income	1	2	3	4	5	6	7	8	9	10
Planning for Long Term Care	1	2	3	4	5	6	7	8	9	10

3. Collectibles/Collections (coins, stamps, etc.)

	Estimated Value
____________________	__________
____________________	__________
____________________	__________
Total	__________

4. Real Estate

A. Residence(s)

Estimated Value of Home $________
Remaining Mortgage $________
Equity in Home $________
(market value less mortgage)
Remaining Mortgage $________
Other Real Estate $________
Total Value of Residence(s) $________

B. Rental Property

____________________ $________ (net value)
____________________ $________ (net value)
____________________ $________ (net value)
____________________ $________ (net value)
Total Value $________

5. Sources of Monthly Retirement Income

Social Security
- You $________
- Spouse $________

Pension
- You $________
- Spouse $________

Other Income
- You $________
- Spouse $________

Total $________

6. Business Interests

	Name	Value
1.	__________	__________
2.	__________	__________
3.	__________	__________
	Total	__________

7. Current Stockbrokers

(Check any brokerage firms with whom you have an account)

☐ InterSecurities	☐ Smith Barney
☐ Merrill Lynch	☐ Prudential
☐ A.G. Edwards	☐ Paine Webber
☐ Raymond James	☐ Other_______
☐ Charles Schwab	☐ Other_______

CONFIDENTIAL

8. Individual Stocks, Bonds, and Brokerage Accounts (Non-Retirement Accounts)

Number of Shares	Name of Company	Original Investment	Market Value	Ownership	Date Acquired
		$	$		
		$	$		
		$	$		
		$	$		
		$	$		
		Total	$		

9. Mutual Funds/Limited Partnerships (Non-Retirement Accounts)

Number of Shares	Name of Company	Original Investment	Market Value	Ownership	Date Acquired
		$	$		
		$	$		
		$	$		
		Total	$		

10. Bank Accounts

Bank	Type of Account	Value
	Total	

11. CD's

Name of Bank	Rate of Return	Amount Invested	Current Value	Maturity Dates
		Total		

12. Vehicles

Make	Model	Year	Market Value
		Total	

CONFIDENTIAL

13. IRA and Other Retirement Account Information
(Bring latest reports/statements)

Name Where Account is Located (Banks, Brokers, Employers)	Type (401k, IRA, 403b, TSA)	Approximate Value
______________________	______________	______________
______________________	______________	______________
______________________	______________	______________
______________________	______________	______________
	Total	______________

14. Present Life Insurance
(Bring latest reports/statements)

Company	Term, VUL, Whole Life	Face Amount	Cash Value	Annual Premium	Name of Insured	Name of Beneficiary
________	________	______	______	______	________	________
________	________	______	______	______	________	________
________	________	______	______	______	________	________
________	________	______	______	______	________	________
		Total	______			

15. Annuities
(Bring latest reports/statements)

Company	Date Purchased	Original Investment	Rate of Return	Current Value
____________	________	____________	______	________
____________	________	____________	______	________
____________	________	____________	______	________
____________	________	____________	______	________
			Total	________

16. Other

____________	____________________	________________
____________	____________________	________________
____________	____________________	________________
	Total	________________

---**For Office Use**---

17. Notes:

Total Assets ____________ A.G.I. ____________ Lifestyle Income ________

Total Liab ____________ Taxes ____________ Available Dollars________

Net Worth ____________ SS ____________ Pension ________

Yrs. to Retirement ____________ Taxable SS ____________

CONFIDENTIAL

Independent Associates, Inc. 900 E. Fifty-Sixth Street, Suite 200
Brownsburg, Indiana 46112
Taxdoctor@roymstrong.com (317) 852-9774 (800) 287-9037 Fax: (317) 852-4199