SC FINANCIAL GROUP LLC

FINANCIAL PLANNING FACT FINDER

PERSONAL INFORMATION:

Name: ______________________ Occupation : ______________________

Date Of Birth : DD/MM/YYYY Cell Phone : ______________ Email Address: ______________

Marital Status: ○ Single ○ Married ○ Divorced ○ Widowed ○ Together, Not Married

Spouse's Information (If applicable)

Spouse's Name: ______________________

Spouse's Date Of Birth : DD/MM/YYYY Cell Phone : ______________ Email Address: ______________

Children: ______________________

Please tell us about your main reasons for visiting us ______________________

FINANCIAL DATA:

Annual Gross Income : $ ______________ Spouse Gross Income : $ ______________

Other Income : $ ______________
(Ex : Bonus, Stock Awards)

Spouse Other Income : $ ______________
(Ex : Bonus, Stock Awards)

Net Monthly Income $ ______________ Spouse Other Income : $ ______________

SOCIAL SECURITY

(Statement Of Benefit Estimates Encouraged)

Client Name	Current Payment Amount (If Applicable)	Payment Amount At Age 62	Payment Amount At Full Retirement Age	Payment Amount At Age 70

PENSION

Client Name	Current Payment Amount	Payment Amount At Age 62	Payment at Full Retirement	Payment Amount At Age 70	Survivor %	Cost of Living adjustment included?	Lump Sum Option Available?

EXPENSES:

Total Monthly Expenses: $ ____________________ Average Monthly Credit Card Spending: $ ____________________

DEBTS & LIABILITIES

Type Of Liabilities	Monthly Payment	Balance	Interest Rate	Loan Start Date
Mortgage	$	$		
Home Equity	$	$		
Auto (1)	$	$		
Auto (2)	$	$		
Credit Card (1)	$	$		
Credit Card (2)	$	$		
Student Loan	$	$		
Other Debt (1)	$	$		
Other Debt (2)	$	$		

ASSETS

Bank Accounts			
Type Of Account	Owner	Balance	Monthly Additions
Total Checking			
Total Money Market / Savings			
Total Other Cash Accounts			

Emergency Fund : What is your target emergency fund? $ ____________________

Retirement Accounts
List retirement accounts separately; including account types: Traditional IRA, Roth IRA, 401K, 403B, 457, ESOP, SEP, SIMPLE, TSA, Annuities and Profit Sharing. Account statements are beneficial for analysis are encouraged

Owner	Account Type	Financial Institution	Balance	Monthly Additions	Company Match % (if applicable)
Eg: Mary	401k	Fidelity	$375,000	$1708.33	6%
			$	$	
			$	$	
			$	$	
			$	$	
			$	$	
			$	$	
			$	$	

Taxable Accounts
Please list accounts separately and include: Brokerage Accounts, Non-Qualified Annuities, Joint Accounts, Trust accounts, Stock Awards, Options, ESPP. Account statements are beneficial for analysis and are encouraged.

Owner	Name of Account	Financial Institution	Balance	Monthly Additions
Eg: Joint	Brokerage	Vanguard	$51,000	$250
			$	$
			$	$
			$	$
			$	$

Real Estate (Non-residence) & Other Assets

Name or Street Address	Purchase Price	Monthly Payment	Loan Balance	Rate %	Loan Start Date	Monthly Income	Monthly Expense
Eg: Seattle Rental	$325,000	$1179	$75,000	3.85	03/05/2015	$2500	$475

ESTATE PLANNING

Do you have a will? ○ Yes ○ No   Poa? ○ Yes ○ No   Trust? ○ Yes ○ No

Please list any life insurance or long-term care policies you or your spouse own:				
Policy Owner	Insurance Type	Beneficiary	Coverage Amount	Cash Value
			$	
			$	
			$	
			$	
			$	

CHILDREN & COLLEGE PLANNING

Please list names and dates of birth for all children still considered dependents. In addition, please fill out the remaining fields below for children you plan on providing any portion of their college education expenses.

Name	Date Of Birth	First Year Of Expense	Monthly Additions to Savings	Account Type (529 Plan, Csa, Utma, Etc)

SPECIAL EXPENSES			
Description	Expense Year	Target Amount	Numer of Years

What is your risk tolerance?

○ Conservative ○ Moderately conservative ○ Moderate ○ Moderately aggressive ○ Aggressive

How would you describe your level of understanding regarding your investments?

○ Minimal ○ Some Understanding ○ I know what I own & why ○ Significant investment knowledge