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Personal Financial Inventory

(Please complete the following and/or attach copies of statements i.e. brokerage, insurance, bank)

Individual 1:		
Individual 2:		
Income, Savings & Expenses		
Current Annual Income:	Individual 1	Individual 2
Salary	$	$
Bonus, Commissions	$	$
Pension	$	$
Social Security	$	$
Other:	$	$
Investment Income:		
From Taxable	$	$
Nontaxable/ Tax-Free	$	$
Total Annual Income =	$	$
Current Annual Savings:		
Personal Savings	$	$
IRA Contributions	$	$
Company Retirement Plan	$	$
Company Contributions	$	$
Total Annual Savings =	$	$
Current Annual Expenses:	Combined for Client 1&2	
Taxes	$	
Housing	$	
Food/Clothing	$	
Insurance	$	
Education	$	
Charity	$	
Other:	$	
Total Annual Expenses =	$	

Liabilities				
	Liability			
	Client 1	Client 2	Joint	
Mortgage	$	$	$	
Credit cards	$	$	$	
Lines of Credit	$	$	$	
Car Loans	$	$	$	
Business Loans	$	$	$	
Other Liabilities:				
1	$	$	$	
2	$	$	$	
3	$	$	$	
4	$	$	$	
Total Liabilities =	$	$	$	
Total Assets - Total Liabilities =	$	$	$	

Insurance					
Life Insurance					
Company Name	Type	Face Value	Premium	Beneficiary	
1					
2					
3					
4					
Disability Insurance					
Company Name	Insured	Monthly Benefit	Benefit Period	Elimination Period	Annual Premium
1		$			$
2		$			$
Long-Term Care Insurance					
Company Name	Insured	Monthly Benefit	Benefit Period	Elimination Period	Annual Premium
1		$	$	$	$
2		$	$	$	$

Other: