**Better Financial Management Starts Today!**

Studies show that most people are so busy making a living, they have very little time left over to keep up with all the tax laws, budgeting, and other financial decisions involved in planning a predictable financial future.

 The 1 Hour Financial Manager was created to help you organize and manage important financial planning decisions more simply and effectively.

Upon receiving your completed questionnaire, I will provide a concise review of your finances and help you identify and prioritize areas that are of financial importance to you.

 What’s the catch?

 There is none!

This financial review is the beginning of a complete financial advisement service I offer, and has proven to be the best way to introduce my services to people like you. The review is quick. Again, there is no obligation. However, if you are pleased with your review, I hope you will consider becoming a new client, and tell your friends about your experience.

**HOW TO GET STARTED**

 Your personal financial information is, of course, totally confidential and intended solely for use in preparing an informative financial plan to help you meet your financial goals. I call it *GAP Analysis*.

 The financial questionnaire on page 1 is used to prepare your report; it is simple but thorough. Invest 30 minutes of your time to complete your questionnaire now, and another 30 minutes on pages 3 thru 6. It is very important not to procrastinate. Better financial management starts today!

**YOUR FINANCIAL REVIEW**

 Once I’ve received your completed data sheets, I will review them, and call to arrange a convenient time to personally discuss my thoughts with you.

 I appreciate your interest in this preliminary study regarding your finances. I look forward to preparing an informative and usable *GAP Analysis* for you.

Securities offered through Triad-Advisors, LLC. A registered broker/dealer. Member SIPC & FINRA. Advisory services offered through Chestnut Investment Advisory. Chestnut Investment Advisory is not affiliated with Triad-Advisors, LLC.

Personal Information

Today’s Date: Click here to enter a date.

Your Name: Click here to enter text. Date of Birth: Click here to enter a date.

Spouse’s Name: Click here to enter text. Date of Birth: Click here to enter a date.

Address: Click here to enter text.

Phone Number: Click here to enter text. [ ]  Home [ ]  Mobile

Phone Number: Click here to enter text. [ ]  Home [ ]  Mobile

Monthly Employment Income: Self: Click here to enter text. Spouse: Click here to enter text.

Years with Current Employer: Self: Click here to enter text. Spouse: Click here to enter text.

Desired Retirement Age: Self: Click here to enter text. Spouse: Click here to enter text.

Monthly Retirement Income Desired (By Today’s Standards): Click here to enter text.

Current Monthly Savings for Retirement with Employer: Click here to enter text.

Current Monthly Savings for Retirement, Personal: Click here to enter text.

Current Monthly Savings for College: Click here to enter text. Total to Date: Enter

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dependent Children: | Age | Yrs of College to Fund | Starting at Age | Amt Per Yr in Today’s $ |
| Click here to enter text. | enter | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | enter | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | enter | Click here to enter text. | Click here to enter text. | Click here to enter text. |

Financial Planning Checklist!

**Tax Planning**

 Are you satisfied with the amount of taxes you pay? [ ] YES [ ] NO [ ]  ?

 Are you using all the legal tax loopholes to reduce your taxes? [ ] YES [ ] NO [ ]  ?

**Retirement Planning**

 Are you retired now? [ ] YES [ ] NO [ ]  ?

 Do you anticipate a rollover of company savings? [ ] YES [ ] NO [ ]  ?

 Do you anticipate a pension distribution? [ ] YES [ ] NO [ ]  ?

 Do you plan on retiring soon? [ ] YES [ ] NO [ ]  ?

 Do you know at what age you would like to retire? [ ] YES [ ] NO [ ]  ?

 Do you already have enough funds for retirement? [ ] YES [ ] NO [ ]  ?

**Educational Planning**

 Do you plan on having children? [ ] YES [ ] NO [ ] ?

 Do you have sufficient funds for your children’s education? [ ] YES [ ] NO [ ] ?

 Is the education money properly registered in the appropriate name? [ ] YES [ ] NO [ ] ?

 Are there any other family members (grandchildren)? [ ] YES [ ] NO [ ] ?

 Do you wish to assist them with their education? [ ] YES [ ] NO [ ] ?

**Investment Planning**

 Do you feel you need better financial organization? [ ] YES [ ] NO [ ] ?

 Has your portfolio been reviewed by an independent advisor? [ ] YES [ ] NO [ ] ?

 Do you have sufficient cash flow to meet your monthly expenses? [ ] YES [ ] NO [ ] ?

 Do you feel better budget planning would be helpful? [ ] YES [ ] NO [ ] ?

 Does your portfolio protect you from financial disaster? [ ] YES [ ] NO [ ] ?

 Is your portfolio safe from a stock and bond market crash? [ ] YES [ ] NO [ ] ?

 Do you have adequate investment asset diversification? [ ] YES [ ] NO [ ] ?

 Does your portfolio protect you from inflation? [ ] YES [ ] NO [ ] ?

 Does your portfolio match your risk tolerance? [ ] YES [ ] NO [ ] ?

 Do you plan on making additional investments in the future? [ ] YES [ ] NO [ ] ?

**Business Planning**

 Are you using all the tax loopholes available for your business? [ ] YES [ ] NO [ ]  ?

 Is your business tax planning coordinated with your personal tax planning? [ ] YES [ ] NO [ ] ?

 Will you be acquiring a business in the future? [ ] YES [ ] NO [ ] ?

 Will you be selling a business in the future? [ ] YES [ ] NO [ ] ?

**Insurance**

 Do you feel you are paying too much for your insurance coverages? [ ] YES [ ] NO [ ] ?

 Have you had an objective, independent insurance review? [ ] YES [ ] NO [ ] ?

 Do you have the right kind and amount of insurance coverage? [ ] YES [ ] NO [ ] ?

**Company Benefits**

 Are you taking full advantage of all your company benefits? [ ] YES [ ] NO [ ] ?

 Have you done proper planning with your company stock options? [ ] YES [ ] NO [ ] ?

 Do you expect an increase in income? [ ] YES [ ] NO [ ] ?

 Do you plan on changing jobs? [ ] YES [ ] NO [ ] ?

 Do you know if your company pension is adequate? [ ] YES [ ] NO [ ] ?

**Estate Planning**

Do you have wills or trusts? [ ] YES [ ] NO [ ] ?

 Have you had your wills reviewed recently? [ ] YES [ ] NO [ ] ?

 Do your wills have provisions for new family members? [ ] YES [ ] NO [ ] ?

 Have you done inheritance planning? [ ] YES [ ] NO [ ] ?

 Are you the beneficiary of any trusts or wills? [ ] YES [ ] NO [ ] ?

**Mortgage Planning**

Do you plan on moving? [ ] YES [ ] NO [ ] ?

 Do you plan on buying a home? [ ] YES [ ] NO [ ] ?

 Do you need or plan to refinance your home mortgage? [ ] YES [ ] NO [ ] ?

 Do you feel better budget planning would be helpful? [ ] YES [ ] NO [ ] ?

 Have you had a mortgage or refinancing analysis done? [ ] YES [ ] NO [ ] ?

**Financial Planning**

Do you have a coordinated, integrated financial plan? [ ] YES [ ]  NO [ ] ?

Do you spend careful time on planning your finances? [ ] YES [ ] NO [ ] ?

 Are you concerned or worried about your financial future? [ ] YES [ ] NO [ ] ?

 Do you know what a Financial Planning Professional does? [ ] YES [ ] NO [ ] ?

**Additional Comments or Financial Concerns**

**Financial Planning Goals**

List your financial goals. Categorize them into these three time spans.

**LONG-TERM** (10 years and longer)

1.
2.
3.
4.

 **MID-TERM** (4 – 9 years)

1.
2.
3.
4.

**SHORT-TERM** (1 – 3 years)

1.
2.
3.
4.

**Monthly Cash Flow**

**Income MONTHLY ANNUAL**

 Your Salary Click here to enter text. Click here to enter text.

 Spouse Salary Click here to enter text. Click here to enter text.

 Other Click here to enter text. Click here to enter text.

 **Gross Income** Click here to enter text.Click here to enter text.

**Paycheck Deductions**

Federal Taxes Click here to enter text. Click here to enter text.

 State Taxes Click here to enter text. Click here to enter text.

 Social Security Taxes Click here to enter text. Click here to enter text.

 Group Employer Benefits Click here to enter text. Click here to enter text.

 401K Savings (All Sources) Click here to enter text. Click here to enter text.

 **Total Deductions** Click here to enter text.Click here to enter text.

**Living Expenses**

Residence Mortgage Click here to enter text. Click here to enter text.

 Real Estate Tax Click here to enter text. Click here to enter text.

 Life Insurance Click here to enter text. Click here to enter text.

 Health Insurance Click here to enter text. Click here to enter text.

 Disability Insurance Click here to enter text. Click here to enter text.

 Auto Insurance Click here to enter text. Click here to enter text.

 Homeowners Insurance Click here to enter text. Click here to enter text.

 Alimony/Child Support Click here to enter text. Click here to enter text.

 Tuition/Education Funding Click here to enter text. Click here to enter text.

 Groceries Click here to enter text. Click here to enter text.

 Gas/Electric/Water Click here to enter text. Click here to enter text.

 Mobile & Land Phones Click here to enter text. Click here to enter text.

 Cable/Internet Click here to enter text. Click here to enter text.

 Clothing/Cleaning Click here to enter text. Click here to enter text.

 Medical/Rx/Dental Click here to enter text. Click here to enter text.

 Car Payments Click here to enter text. Click here to enter text.

 Personal Loans/Credit Cards Click here to enter text. Click here to enter text.

 Transportation Costs Click here to enter text. Click here to enter text.

 Home Repair/Maintenance Click here to enter text. Click here to enter text.

 Entertainment/Dining Out Click here to enter text. Click here to enter text.

 Gifts Click here to enter text. Click here to enter text.

 Donations Click here to enter text. Click here to enter text.

 Vacations/Travel Click here to enter text. Click here to enter text.

 Other Click here to enter text. Click here to enter text.

 **Total Living Expenses** Click here to enter text.Click here to enter text.

**Investment Assets**

*(Do Not Include Savings Allocated To College On This Page)*

**Cash Equivalents: Amount**

 **Cash On Hand** Click here to enter text.

 **Checking Account** Click here to enter text.

 **Savings Account** Click here to enter text.

 **Money Market** Click here to enter text.

 **Certificates of Deposit** Click here to enter text.

 **Other Cash Equivalents** Click here to enter text.

**Other Investment Assets:**

 **Total Stocks** Click here to enter text.

 **Total Bonds**

 **Government** Click here to enter text.

 **Savings** Click here to enter text.

 **Municipal** Click here to enter text.

 **Corporate** Click here to enter text.

 **Stock Mutual Funds** Click here to enter text.

 **Bond Mutual Funds** Click here to enter text.

 **Annuities** Click here to enter text.

 **Precious Metals** Click here to enter text.

 **Life Insurance Cash Value** Click here to enter text.

 **Real Estate Value (Investment)** Click here to enter text.

 **Limited Partnerships** Click here to enter text.

 **Miscellaneous** Click here to enter text.

**Personal Assets:**

 **Residence** Click here to enter text.

 **Automobiles** Click here to enter text.

 **Personal Property** Click here to enter text.

**Liabilities:**

 **Residential Mortgages** Click here to enter text.

 **Car Loan/Lease** Click here to enter text.

 **Credit Cards** Click here to enter text.

 **Other Loans** Click here to enter text.