

CLIENT INFORMATION

Instructions: This form is provided in order to efficiently establish your financial picture. Please answer all parts.

Full Name			Full Name		
Address			Address		
Home Telephone			Home Telephone		
Office Telephone			Office Telephone		
Social Security Number	Date of Birth	Ages of Dependents	Social Security Number	Date of Birth	Ages of Dependents

INCOME INFORMATION

Client #1 Husband: Occupation		Client #2 Spouse: Occupation	
Employer	Gross Monthly Income \$	Employer	Gross Monthly Income \$
Deductions	Net Take Home Pay \$	Deductions	Net Take Home Pay \$
Federal Taxes \$	Retirement Income \$	Federal Taxes \$	Retirement Income \$
State Taxes \$	Unemployment Income \$	State Taxes \$	Unemployment Income \$
Social Security \$	Alimony/Child Support \$	Social Security \$	Alimony/Child Support \$
Credit Union \$	Rental Income \$	Credit Union \$	Rental Income \$
Other \$	Worker's Compensation \$	Other \$	Worker's Compensation \$
Total Deductions \$	Other \$	Total Deductions \$	Other \$

ASSETS

Real Estate #1: What is the Fair Market Value? \$		Address	
Name of Bank	1st mortgage balance \$		%
Name of Bank	2nd mortgage balance \$		%
Name of Bank	3rd mortgage balance \$		%
lien/attachment	balance \$		
lien/attachment	balance \$		
Real Estate #2: What is the Fair Market Value? \$		Address	
Name of Bank	1st mortgage balance \$		%
Name of Bank	2nd mortgage balance \$		%
Name of Bank	3rd mortgage balance \$		%
lien/attachment	balance \$		
lien/attachment	balance \$		
Cash: Savings	Retirement \$	401K \$	
Cash Value Insurance \$	Settlement \$	Inheritance \$	Other \$
Automobiles: Yr/Make/Model	NADA FMV	Monthly Payment \$	Loan Balance \$
Yr/Make/Model	NADA FMV	Monthly Payment \$	Loan Balance \$

LIVING EXPENSES: MONTHLY

HOUSING:	TRANSPORTATION:	PERSONAL:
Rent/Mortgage \$	Auto Payment \$	Hair Cuts \$
2nd Mortgage \$	Gas/Oil \$	Cosmetics \$
Property Taxes \$	Car Insurance \$	Hosiery \$
Condo fees \$	Car Repair \$	Vacations \$
	Taxis/Bus \$	Cigarettes \$
UTILITIES:		Alcohol \$
Heating Oil \$	TAXES:	Gifts \$
Gas \$	Real Estate Taxes \$	Books \$
Electric \$	Car Taxes \$	Papers \$
Water \$	Other \$	Magazines \$
Trash Removal \$		Entertainment \$
Telephone \$	INSURANCE:	Church \$
Cable TV \$	Life Insurance \$	Dues \$
	Disability \$	Donations \$
FOOD:	Contents \$	Other \$
Groceries \$	Disability \$	
Household \$		CHILD EXPENSES:
Supplies \$	MEDICAL:	Day Care \$
Restaurants: Lunch \$	Dental \$	Tuition \$
Restaurants: Dinner \$	Orthodontic \$	Alimony/Child Support \$
	General Medical \$	
CLOTHING:	Medicine \$	OTHER:
General \$		Pet Food \$
Shoes \$		Pet Care \$
Laundry \$		
Dry Cleaning \$		
		Total Expenses \$

List only credit card debt in this section, i.e. Master Card, Visa, Citibank, Discover, Exxon, Sears, Filene's, J.C. Penney's, Bradley's Jordan Marsh, D&L, etc.

Name of Creditor	Account #	Interest Rate %	Monthly Payment	Total Balance
1) Sears			\$	\$
2) MasterCard			\$	\$
3)			\$	\$
4)			\$	\$
5)			\$	\$
6)			\$	\$
7)			\$	\$
8)			\$	\$
9)			\$	\$
10)			\$	\$
11)			\$	\$
12)			\$	\$
13)			\$	\$
14)			\$	\$
15)			\$	\$
16)			\$	\$
17)			\$	\$
TOTAL			\$	\$

List all other debts including personal loans, student loans, car loans, medical bills, hospital bills, utility bills, cable tv, fuel bills, judgments, general debts such as for magazines subscriptions, rent, property damage, any obligation for which you owe.

Credit Card Name	Account #	Interest Rate %	Monthly Payment	Total Balance
1) car loan			\$	\$
2) car loan			\$	\$
3) personal loan			\$	\$
4) personal loan			\$	\$
5) student loan			\$	\$
6) medical			\$	\$
7) medical			\$	\$
8) medical			\$	\$
9) hospital			\$	\$
10) utility			\$	\$
11) cable tv			\$	\$
12) fuel bill			\$	\$
13) judgment			\$	\$
14) magazines			\$	\$
15)			\$	\$
16)			\$	\$
17)			\$	\$
TOTAL			\$	\$