

# More About You

Use this form to prepare for your MoneyAdvice session



## You Significant Other

Name \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Date of Birth \_\_\_\_\_  
 Occupation \_\_\_\_\_  
 Gross Income \_\_\_\_\_  
 Life Ins Amount \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Single    Married    Cohabiting    Separated    Divorced    Widowed    Other

Dependent Name	Age	Dependent Name	Age	Dependent Name	Age

## What You Own

Assets	Value
Home:	\$ _____
Auto:	_____
Auto:	_____
Savings:	_____
Checking:	_____
Life Insurance Cash Value	_____
Other:	_____
Other:	_____

Assets	Value
401(k):	\$ _____
401(k):	_____
IRA:	_____
Roth IRA:	_____
Annuity:	_____
Other Retirement:	_____
Other Investments:	_____
Other Investments:	_____

Total Value: =  This is What You Own

## What You Owe

Loans	Value	APR	Monthly Payment	Revolving Debt	Value	APR	Min Payment	Actual Payment
Mortgage:	\$ _____	____%	_____	Credit Card	_____	____%	_____	_____
2nd Mortgage:	_____	____%	_____	Credit Card	_____	____%	_____	_____
Auto:	_____	____%	_____	Credit Card	_____	____%	_____	_____
Auto:	_____	____%	_____	Store Card	_____	____%	_____	_____
Personal:	_____	____%	_____	Store Card	_____	____%	_____	_____
Student:	_____	____%	_____	Store Card	_____	____%	_____	_____
Student:	+ _____	____%	_____	Other Card	+ _____	____%	_____	_____
Loan Total	= _____			Revolving Total	_____			

Loan + Revolving =  This is What You Owe

## What You Own - What You Owe

What you Own Total	-	<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></span>
What you Owe Total	=	<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></span>
Net Worth	=	<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></span>

Are you satisfied with the condition of your finances?

Yes    No

Why or Why not?

## What you Want

### Retirement

	You			Significant Other		
Retirement Age						
Life Expectancy						
Pretax 401k Contrib.	\$		Notes	\$		Notes
Roth 401k Contrib.	\$			\$		
Company Contrib.	\$			\$		
Pretax IRA Contrib.	\$			\$		
Roth IRA Contrib.	\$			\$		
Social Security Pension	\$	Age?		\$	Age?	
Other Income	\$	Age?		\$	Age?	

What percentage of your total income do you need to replace in retirement?  %

How did you come up with that percentage?

### Education

Do you plan to pay for your dependents college education?  Yes  No

If so, do you have a set dollar amount you are willing to contribute?  Yes  No Amount \$

What type of school are you considering? Private / Public In-State / Public Out of State / Technical College

### Other Goals

	Goal	Money needed to achieve Goal	Date you wish to achieve Goal	Compared to the other goals on this list, what is the priority of this goal? Why
1		\$	___/___/___	1 2 3 4, or 5. Why?
2		\$	___/___/___	1 2 3 4, or 5. Why?
3		\$	___/___/___	1 2 3 4, or 5. Why?
4		\$	___/___/___	1 2 3 4, or 5. Why?
5		\$	___/___/___	1 2 3 4, or 5. Why?

## Additional Details