

# Capital Plan Checklist

**NEW CLIENTS**

A complete guide to organizing financial documents for long-term security.

Below is a handy checklist of the types of documentation, if applicable, you should forward to us:

- Date(s) of Birth
- Checking and Savings account balances
- Loan and Credit Card information (If any)
- Mortgage interest rate, date, current balance (If any)
- Value of the home(s) and year of purchase
- Value of home contents/collectibles
- Investment statements
- Life and Disability Insurance policies (first 6 pages)
- Auto/Homeowner/Umbrella declaration pages
- Employee benefit summaries
- Retirement program information
- Trust(s) and Will(s)
- Business or Partnership Agreements/Value of business
- Federal, State, and Local Tax returns
- Most recent paycheck stub(s)
- Social Security Statement(s): You may get them online at [www.ssa.gov](http://www.ssa.gov)
- List of Long-term/Mid-term/Short-term goals

Desired age of retirement \_\_\_\_\_



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Prioritize any that apply to you from most to least important:

- \_\_\_\_\_ Build Savings/Emergency Fund
- \_\_\_\_\_ Education Funding
- \_\_\_\_\_ Debt Payoff
- \_\_\_\_\_ Risk Management/Insurance
- \_\_\_\_\_ Retirement Planning
- \_\_\_\_\_ Major Purchase Goals

If there are any expenses that may increase or decrease at any time, please describe details here:



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Enter your average monthly expenses in the column next to each item. Leave blank if not applicable.

MORTGAGE PRINCIPAL AND INTEREST	_____	AUTO FUEL	_____
ADDITIONAL MORTG PRINCIPAL (if any)	_____	REPAIRS/OIL/TIRES/INSPECTION	_____
SAVINGS IN BANK ACCOUNTS	_____	AUTO INSURANCE	_____
401(k)/403(b) or OTHER RET ACCOUNTS	_____	CLOTHING	_____
REPAIRS/UPKEEP/LAWN	_____	PERSONAL CARE/HAIR	_____
PROPERTY/SCHOOL TAX	_____	DISABILITY INSURANCE	_____
HOME OWNERS/UMBRELLA INS	_____	HEALTH INS/EYE & DENTAL INS	_____
WATER/GAS/CELL/CABLE/INTERNET	_____	CHILDREN'S ACTIVITIES	_____
GARBAGE PICKUP	_____	ENTERTAINMENT	_____
DONATIONS	_____	VACATION/TRAVEL	_____
GROCERIES	_____	MED COPAY/RX/DENTAL COSTS	_____
RESTAURANT DINING	_____	MISC SPENDING MONEY	_____
PARKING/TOLLS	_____	STUDENT LOAN PAYMENTS	_____
MISC/POSTAGE/BANK/DRY CLEANING	_____	OTHER LOAN PAYMENTS	_____
BDAY/HOLIDAY/GIFTS	_____	OTHER: (give details)	_____
CAR PAY'T/LEASE PAY'T	_____	<b>TOTAL PER MONTH</b>	_____
		<b>AVG LEFTOVER PER MONTH</b>	_____



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