



## Lifestyle and Financial Summary

Please answer the following questions to help us to determine how we are able to assist you.

| PERSONAL INFORMATION       | CLIENT ONE  | CLIENT TWO  |
|----------------------------|---|---|
| Title                      | <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss  | <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss  |
| Given Name                 |   |   |
| Middle Name                |   |   |
| Surname                    |   |   |
| Gender                     | <input type="checkbox"/> Male <input type="checkbox"/> Female   | <input type="checkbox"/> Male <input type="checkbox"/> Female   |
| Marital Status             |   |   |
| Date of Birth              | / /   | / /   |
| Dependant(s) (names, ages) |   |   |
|                            |   |   |
|                            |   |   |
| Employment Status          | <input type="checkbox"/> Full time <input type="checkbox"/> Part time<br><input type="checkbox"/> Unemployed <input type="checkbox"/> Self Employed<br><input type="checkbox"/> Home Maker <input type="checkbox"/> Retired | <input type="checkbox"/> Full time <input type="checkbox"/> Part time<br><input type="checkbox"/> Unemployed <input type="checkbox"/> Self Employed<br><input type="checkbox"/> Home Maker <input type="checkbox"/> Retired |

### CONTACT DETAILS

|   |   |   |
|---|---|---|
| Home Address                              |   |   |
|   |   |   |
|   |   |   |
| Postal Address<br>(if different to above) |   |   |
|   |   |   |
|   |   |   |
| Home Phone                                |   |   |
| Mobile Phone                              |   |   |
| Email Address                             |   |   |
| Preferred method of contact               | <input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email | <input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Email |

| <b>LIFESTYLE ASSETS</b>  | <b>OWNER (Client 1/Client 2/Joint)</b>   | <b>VALUE</b> |
|--------------------------|--|--------------|
| Home                     | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |
| Contents                 | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |
| Vehicles                 | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |
| Other (boat/caravan etc) | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |

| <b>INVESTMENT ASSETS</b>   | <b>OWNER (Client 1/Client 2/Joint)</b>   | <b>VALUE</b> |
|----------------------------|--|--------------|
| Property                   | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |
| Shares                     | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |
| Other                      | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |
| Cash/Savings/Term Deposits | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |

| <b>SUPERANNUATION</b>     | <b>Fund One</b>  | <b>Fund Two</b>  | <b>Fund Three</b>  | <b>Fund Four</b>   |
|---------------------------|--|--|--|--|
| Fund Name                 |  |  |  |  |
| Owner (Client 1/Client 2) | <input type="checkbox"/> Client 1<br><input type="checkbox"/> Client 2 | <input type="checkbox"/> Client 1<br><input type="checkbox"/> Client 2 | <input type="checkbox"/> Client 1<br><input type="checkbox"/> Client 2 | <input type="checkbox"/> Client 1<br><input type="checkbox"/> Client 2 |
| Account Balance           | \$   | \$   | \$   | \$   |

| <b>YOUR LIABILITIES</b> | <b>OWNER</b>   | <b>VALUE</b> |
|-------------------------|--|--------------|
| Home Loan(s)            | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |
| Investment Loan(s)      | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |
| Credit Card(s)          | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |
| Personal Loan(s)        | <input type="checkbox"/> Client 1 <input type="checkbox"/> Client 2 <input type="checkbox"/> Joint | \$           |

| <b>YOUR INCOME</b>     | <b>CLIENT ONE (p/a)</b> | <b>CLIENT TWO (p/a)</b> |
|------------------------|-------------------------|-------------------------|
| Salary/Business Income | \$                      | \$                      |
| Rental Income          | \$                      | \$                      |
| Pension Income         | \$                      | \$                      |
| Other                  | \$                      | \$                      |
| Total Income           | \$                      | \$                      |

