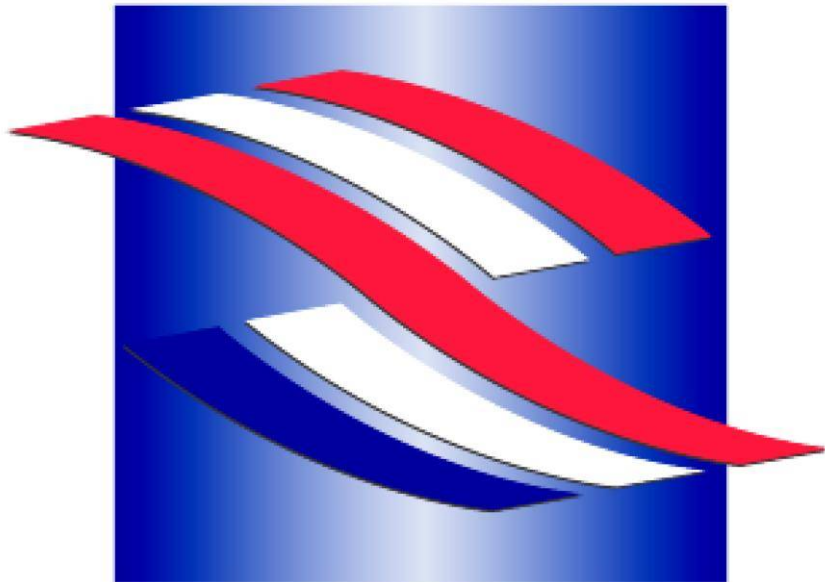


**TRANSITION FINANCIAL ADVISORS, INC.**  
**- PATHWAYS TO CANADA™ -**



**TRANSITION RNCPPPI**

**FACTFINDER**

## **INSTRUCTIONS**

1. Fill out the FactFinder in its entirety, keeping in mind that **some sections may not apply to your situation (such as rental property ownership or business interests)**. If a question does not apply, indicate so with N/A.
2. Check the appropriate currency (CDN\$, US\$) to ensure we record the information correctly.
3. Complete the Document Checklist by checking off each item you have enclosed. Please provide all of the documentation requested. It will help make the most of our time together.
4. Review the FactFinder to ensure it is filled out to the best of your ability.
5. Upload to your client lock box we have set-up for you.

**Transition Financial Advisors Group, Inc.  
2487 S Gilbert Road, Suite 106-618  
Gilbert, AZ 85295**

**Fax: 480/812-2090**

**Phone: 480/722-9414**

**\*\* PLEASE NOTE \*\***

**ALL INFORMATION CONTAINED HEREIN WILL BE  
HELD IN THE STRICTEST CONFIDENCE. IF USING A PEN,  
PLEASE USE BLACK INK ONLY.**

**I. GENERAL INFORMATION**

**CLIENT INFORMATION**

Name: _____	Business Phone: _____
US SSN:           -           -	In which State or Province do you hold a drivers license?
CDN SIN:           -           -	
Birth Date: _____      Place: _____	State                                  Province
(MM/DD/YY)                                  City, Province/State	License #                                  Expires:

**CO-CLIENT INFORMATION**

Name: _____	Business Phone: _____
US SSN:           -           -	In which State or Province do you hold a driver's license?
CDN SIN:           -           -	
Birth Date: _____      Place: _____	State                                  Province
(MM/DD/YY)                                  City, Province/State	License #                                  Expiration:

<b>Today's Date</b>

For Office Use Only

<b>Date Received</b>

For Office Use Only

**CHILDREN INFORMATION** (✓ as appropriate)

<b>Full Name &amp; SSN/SIN</b>	<b>Gender</b>	<b>Birth Date MM/DD/YY</b>	<b>Living in City, State/Province</b> (✓ if living with you)	<b>From Previous Marriage?</b>
	Male Female			Client's Co-Client's
	Male Female			Client's Co-Client's
	Male Female			Client's Co-Client's
	Male Female			Client's Co-Client's
	Male Female			Client's Co-Client's
	Male Female			Client's Co-Client's
	Male Female			Client's Co-Client's

**PARENT INFORMATION** (if living)

<b>Full Name</b>	<b>Current Age</b>	<b>Living In City, State/Province</b> (✓ if requires assistance from you)
Client's Father:		
Client's Mother:		
Client's Step Parent: Male Female		
Co-Client's Father:		
Co-Client's Mother:		
Co-Client's Step Parent: Male Female		



**II. NET WORTH & CASH MANAGEMENT**

**PERSONAL USE ASSET DETAILS**

**PRINCIPAL RESIDENCE**

**Not Applicable, I Rent**

<p><b>Address:</b>                  Unit #: _____                  Street: _____                  City: _____                  Province/State: _____                  Postal/Zip Code: _____</p>	<p><b>Title/Ownership: (✓one)</b></p> <ul style="list-style-type: none"> <li>Who has title of the property?                      Client                      Spouse                      Joint                          Other</li> <li>Please ✓ if property inherited:                      INHERITED</li> </ul>	<p><b>Purchase Details:</b>                  Date Purchased: _____                  (MM/DD/YY)                  Purchase Price: \$ _____                  Current Market Value: \$ _____</p>
<p><b>Major Additions Since Purchase:</b>                  Additions: _____                  \$ Spent: _____</p>	<p><b>Major Repairs Needed:</b>                  Repair: _____                  \$ Required: _____</p>	<p>Repair: _____                  \$ Required: _____</p>

<p><b>Mortgage Details:</b></p> <ul style="list-style-type: none"> <li>Is there a Mortgage on this property? YES NO                      If YES, →</li> <li>Amount borrowed: \$ _____</li> <li>Interest Rate: _____%</li> <li>Date loan taken out: _____                      MM/DD/YY</li> </ul> <p>Annual Property Taxes: \$ _____</p> <p>Annual Homeowners Insurance: \$ _____</p> <p>Annual Maintenance/Repair: \$ _____</p>	<ul style="list-style-type: none"> <li><b>Term:</b> 25 Years    30 Years    Other: _____</li> <li><b>Type:</b> Fixed    ARM    Balloon    Other: _____</li> <li><b>Frequency of Payments:</b>                      MONTHLY                      OTHER:</li> <li>Have you made extra payments to pay down the mortgage?                      YES                      NO</li> </ul> <p>Provide Details: _____</p>
--	--

**LEISURE PROPERTY, LOT, FARM LAND, TIMESHARE**

**Not Applicable**

<p><b>Address:</b></p> <p>Unit #: _____</p> <p>Street: _____</p> <p>City: _____</p> <p>Province/State: _____</p> <p>Postal/Zip Code: _____</p>	<p><b>Title/Ownership: (✓ one)</b></p> <ul style="list-style-type: none"> <li>Who has title of the property?</li> </ul> <p>Client                      Spouse</p> <p>Joint                        Other</p> <ul style="list-style-type: none"> <li>Please ✓ if property inherited: INHERITED</li> </ul>	<p><b>Purchase Details:</b></p> <p>Date Purchased: _____ (MM/DD/YY)</p> <p>Purchase Price: \$ _____</p> <p>Current Market Value: \$ _____</p>
<p><b>Major Additions Since Purchase:</b></p> <p>Additions: _____</p> <p>\$ Spent: _____</p>	<p><b>Major Repairs Needed:</b></p> <p>Repair: _____</p> <p>\$ Required: _____</p>	<p>Repair: _____</p> <p>\$ Required: _____</p>

<p><b>Mortgage Details:</b></p> <ul style="list-style-type: none"> <li>Is there a Mortgage on this property? YES NO If YES, →</li> <li>Amount borrowed: \$ _____</li> <li>Interest Rate: _____%</li> <li>Date loan taken out: _____ MM/DD/YY</li> </ul> <p>Annual Property Taxes: \$ _____</p> <p>Annual Homeowners Insurance: \$ _____</p> <p>Annual Maintenance/Repair: \$ _____</p>	<ul style="list-style-type: none"> <li>Term: 25 Years 30 Years Other: _____</li> <li>Type: Fixed ARM Balloon Other: _____</li> <li>Frequency of Payments: MONTHLY OTHER: _____</li> <li>Have you made extra payments to pay down the mortgage? YES NO</li> </ul> <p>Provide Details: _____</p>
--	--

**AUTOMOBILES**

How often do you replace your vehicles?

- Every \_\_\_\_\_ years (\_\_\_\_\_ miles) with average cost of \$ \_\_\_\_\_ CDN US

<p><b>Year:</b> _____ <b>Model:</b> _____</p> <p><b>Total Purchase Price:</b> \$ _____ CDN US</p> <p><b>Purchased:</b> _____ <b># of Miles:</b> _____ (MM/YY)</p> <p><b>Do You:</b> OWN LEASE CAR LOAN If LEASE OR LOAN →</p> <p><b>Annual License Registration Fee:</b> \$ _____</p> <p><b>Annual Insurance Fee:</b> \$ _____</p> <p><b>Title:</b> CLIENT CO-CLIENT JOINT</p>	<p><b>Lease Details:</b> Monthly Payment: \$ _____</p> <p>Term: 3 Year 4 Year 5 Year Other: _____</p> <p>Are you going to: RE-LEASE BUY-OUT</p> <p>If Buy-out, what is the Residual Value: _____</p> <p><b>Loan Details:</b> Monthly Payment: \$ _____ Interest Rate: % _____</p> <p>Amount Borrowed: \$ _____</p> <p>Term: 3 Year 4 Year 5 Year Other: _____</p>
<p><b>Year:</b> _____ <b>Model:</b> _____</p> <p><b>Total Purchase Price:</b> \$ _____ CDN US</p> <p><b>Purchased:</b> _____ <b># of Miles:</b> _____ (MM/YY)</p> <p><b>Do You:</b> OWN LEASE CAR LOAN If LEASE OR LOAN →</p> <p><b>Annual License Registration Fee:</b> \$ _____</p> <p><b>Annual Insurance Fee:</b> \$ _____</p> <p><b>Title:</b> CLIENT CO-CLIENT JOINT</p>	<p><b>Lease Details:</b> Monthly Payment: \$ _____</p> <p>Term: 3 Year 4 Year 5 Year Other: _____</p> <p>Are you going to: RE-LEASE BUY-OUT</p> <p>If Buy-out, what is the Residual Value: _____</p> <p><b>Loan Details:</b> Monthly Payment: \$ _____ Interest Rate: % _____</p> <p>Amount Borrowed: \$ _____</p> <p>Term: 3 Year 4 Year 5 Year Other: _____</p>
<p><b>Year:</b> _____ <b>Model:</b> _____</p> <p><b>Total Purchase Price:</b> \$ _____ CDN US</p> <p><b>Purchased:</b> _____ <b># of Miles:</b> _____ (MM/YY)</p> <p><b>Do You:</b> OWN LEASE CAR LOAN If LEASE OR LOAN →</p> <p><b>Annual License Registration Fee:</b> \$ _____</p> <p><b>Annual Insurance Fee:</b> \$ _____</p> <p><b>Title:</b> CLIENT CO-CLIENT JOINT</p>	<p><b>Lease Details:</b> Monthly Payment: \$ _____</p> <p>Term: 3 Year 4 Year 5 Year Other: _____</p> <p>Are you going to: RE-LEASE BUY-OUT</p> <p>If Buy-out, what is the Residual Value: _____</p> <p><b>Loan Details:</b> Monthly Payment: \$ _____ Interest Rate: % _____</p> <p>Amount Borrowed: \$ _____</p> <p>Term: 3 Year 4 Year 5 Year Other: _____</p>



**OTHER PERSONAL USE ASSETS** - ✓ which currency you are using: CDN\$      US\$

	<b>Total \$ Amount</b>	<b>Amount Owing</b>	<b>Net Amount</b>
Recreational Vehicles (boat, motorcycle, etc.):			
Artwork, Antiques & Collectibles:			
Jewelry:			
Furniture, Fixtures:			
Appliances (TV, fridge, computer, camera, etc.):			
Personal Effects (clothing, etc.):			
Hobby Items (wood shop, materials, etc.):			
Other:			

**CONSUMER DEBTS** (include family) - ✓ which currency you are using: CDN\$      US\$

<b>Debt Company</b>	<b>Type of Debt</b>	<b>Outstanding Balance</b>	<b>Interest Rate</b>
	Credit Card Home Equity Other	\$	%
	Credit Card Home Equity Other	\$	%
	Credit Card Home Equity Other	\$	%
	Credit Card Home Equity Other	\$	%

1. If you have any assets you wish you didn't own, please list the asset and the reason why below:

2. Please list any specific issues related to your Net Worth or Cash Inflows/Outflows you want addressed:

**OTHER INVESTMENT ASSET DETAILS**

**RENTAL PROPERTY DETAILS**

**Not Applicable**

<b>Address:</b> Unit #: _____ Street: _____ City: _____ Province/State: _____ Postal/Zip Code: _____	<b>Title/Ownership: (✓ one)</b> • Who has title of the property? Client                      Spouse Joint                          Other • Please ✓ if property inherited: INHERITED	<b>Purchase Details:</b> Date Purchased: _____ (MM/DD/YY) Purchase Price: \$ _____ Current Market Value: \$ _____
<b>Major Additions Since Purchase:</b> Additions: _____ \$ Spent: _____	<b>Major Repairs Needed:</b> Repair: _____ \$ Required: _____	Repair: _____ \$ Required: _____

Income Details:	Current Year	Next Year	Year + 2	Year + 3
Gross Rents:				
Expenses:				
Net Income:				

<b>Mortgage Details:</b> • Is there a Mortgage on this property? YES NO If YES, → • <b>Amount borrowed:</b> \$ _____ • <b>Interest Rate:</b> % • <b>Date loan taken out:</b> MM/DD/YY <b>Annual Property Taxes:</b> \$ _____ <b>Annual Homeowners Insurance:</b> \$ _____ <b>Annual Maintenance/Repair:</b> \$ _____	• <b>Term:</b> 25 Years    30 Years    Other: • <b>Type:</b> Fixed    ARM    Balloon    Other: • <b>Frequency of Payments:</b> MONTHLY                  OTHER: _____ • Have you made extra payments to pay down the mortgage? YES        NO Provide Details:
---	--

**BUSINESS INTEREST #1 DETAILS** **Not Applicable**

<p><b>Business Name:</b> _____</p> <p><b>Address:</b> Street: _____ City: _____ State: _____ Zip Code: _____</p> <ul style="list-style-type: none"> <li>• Amount Invested \$ _____</li> </ul>	<p><b>Type of Company:</b> (✓ only one) General Partnership Limited Partnership C-Corporation S-Corporation Limited Liability Co. Other: _____</p> <ul style="list-style-type: none"> <li>• Do you plan on selling your business or passing it on to your heirs upon retirement?  HEIRS      SELL</li> </ul>	<p><b>Purchase Details:</b> Date Purchased: _____ (MM/DD/YY) Purchase Price: \$ _____ Current Market Value: \$ _____ Estimated Selling Price: \$ _____</p>
---	--	--

**BUSINESS INTEREST #2 DETAILS** **Not Applicable**

<p><b>Business Name:</b> _____</p> <p><b>Address:</b> Street: _____ City: _____ State: _____ Zip Code: _____</p> <ul style="list-style-type: none"> <li>• Total Amount Invested \$ _____</li> </ul>	<p><b>Type of Company:</b> (✓ only one) General Partnership Limited Partnership C-Corporation S-Corporation Limited Liability Co. Other: _____</p> <ul style="list-style-type: none"> <li>• Do you plan on selling your business or passing it on to your heirs upon retirement?  HEIRS      SELL</li> </ul>	<p><b>Purchase Details:</b> Date Purchased: _____ (MM/DD/YY) Purchase Price: \$ _____ Current Market Value: \$ _____ Estimated Selling Price: \$ _____</p>
---	--	--

1. Are there any installment loans outstanding on these business interests?      YES      NO  
If yes, provide details:

2. Are there any other loans outstanding on these business interests?      YES      NO  
If yes, provide details:

LIVING EXPENSES - ✓ which currency you are using: CDN\$ US\$

<b>Housing</b>	<b>Monthly Expense</b>	<b>Entertainment/Recreation</b>	<b>Monthly Expense</b>
Mortgage or rent:	\$ per month	Dining/Take Out:	\$ per month
Homeowners/Contents Insurance:	\$ per month	Baby Sitting:	\$ per month
Property Taxes:	\$ per month	Hobby/Sports/Activities:	\$ per month
Electricity:	\$ per month	Vacation/Trips:	\$ per month
Gas:	\$ per month	Other:	\$ per month
Water:	\$ per month	<b>Clothing:</b>	\$ per month
Sanitation:	\$ per month	<b>Savings/Investments:</b>	\$ per month
Telephone/Cell:	\$ per month	<b>Medical Expenses</b>	
Repairs/Maintenance:	\$ per month	Doctor/Dentist Co-pays:	\$ per month
Cable/Satellite/Other:	\$ per month	Prescriptions/Vision Care:	\$ per month
<b>Groceries:</b>	\$ per month	Devices/Therapy/Other:	\$ per month
<b>Automobile</b>		<b>Miscellaneous Household</b>	
Loan Payments:	\$ per month	Toiletry/Cosmetics:	\$ per month
Gas & Oil:	\$ per month	Hair/Personal Care:	\$ per month
Auto Insurance:	\$ per month	Laundry/Dry Cleaning:	\$ per month
License/Registration:	\$ per month	Dues/Subscriptions:	\$ per month
Tires/Maintenance/Repair:	\$ per month	Gifts/Celebrations:	\$ per month
Other Transportation:	\$ per month	Pet Care:	\$ per month
<b>Insurance</b>		Bank/ATM Charges:	\$ per month
Life:	\$ per month	Postage/Stationary:	\$ per month
Medical:	\$ per month	Cash/Allowances/Other:	\$ per month
Other:	\$ per month	<b>Charitable Giving/Tithe:</b>	\$ per month
<b>Personal Debts</b>		<b>School/Childcare</b>	\$
Credit Card:	\$ per month	Tuition:	per month
Loans & Notes:	\$ per month	Books/Materials:	\$ per month
Other:	\$ per month	Transportation/Day Trips:	\$ per month
<b>Accounting/Tax/Legal:</b>	\$ per month	Day Care:	\$ per month
		Child Support/ Alimony Payments:	\$ per month

**III. INCOME TAX PLANNING**

1. Have you given any money, cars or other assets in excess of U\$10,000 to your children, relatives, etc. in the past 5 years? YES NO

If Yes, provide details:

2. Have you lent any money to children, family, business partners, friends, etc.? YES NO

If Yes, provide details:

What are the terms of repayment?

3. Have you ever been audited by the IRS or Canada Customs & Revenue Agency? YES NO

If Yes, provide details:

4. Do you have any outstanding issues, or balances, with the IRS or CCRA? YES NO

5. Please list any specific **Income Tax Planning** issues you want addressed:

**IV. EDUCATION PLANNING**

1. If you have any education plans at this time, please provide details (or N/A):

**Client:** # of Years \_\_\_\_\_ Annual Cost: \$ \_\_\_\_\_ CDN US Course of Study:

**Co-Client:** # of Years \_\_\_\_\_ Annual Cost: \$ \_\_\_\_\_ CDN US Course of Study:

2. Do any of your grand/children have any special education needs, please provide details/costs below (or N/A):

Family Member:

Family Member:

3. Do any of your grand/children have any other special needs that you would like us to be aware of? (Hearing, sight impairment, mobility, etc.) Please provide details:

Family Member:

Family Member: \_\_\_\_\_

4. What trade school, undergraduate or graduate college expenses do you anticipate providing to your grand/child(ren)?

TUITION

BOOKS

ROOM & BOARD

AUTOMOBILE

OTHER AS NEEDED:

5. Will you require the grand/child (your grand/children) to contribute to the expenses of attending college?

YES

NO

In what capacity?



**V. INDEPENDENCE PLANNING**

1. At what age did you, or do you, expect to retire: **Client:** \_\_\_\_\_ **Co-Client:** \_\_\_\_\_

2. Have you ever served in the Canadian or US military?

**Client:** YES NO If YES, which one? \_\_\_\_\_

**Co-Client:** YES NO If YES, which one? \_\_\_\_\_

3. Do you plan on working after retirement? If so, doing what?

**Client:** YES NO Occupation: \_\_\_\_\_

**Co-Client:** YES NO Occupation: \_\_\_\_\_

4. What do you estimate your working income to be during retirement and at what age will it cease?

**Client:** \$ \_\_\_\_\_/year CDN US Age/Year Income to Cease: \_\_\_\_\_/20

**Co-Client:** \$ \_\_\_\_\_/year CDN US Age/Year Income to Cease: \_\_\_\_\_/20

5. What do you anticipate to be the other major sources of your retirement income?

Company Pension Plan CLIENT CO-CLIENT

Investment Portfolio CLIENT CO-CLIENT

Government Pensions CLIENT CO-CLIENT

Severance CLIENT CO-CLIENT

Deferred Compensation CLIENT CO-CLIENT

OTHER:

6. How many total years have you lived in Canada after age 18?

(Deduct for time spent working/living out of the country) Client \_\_\_\_\_ Co-Client \_\_\_\_\_

7. How many years have you worked in the US? Client \_\_\_\_\_ Co-Client \_\_\_\_\_

8. How many years have you worked in Canada? Client \_\_\_\_\_ Co-Client \_\_\_\_\_

9. Please list any specific **Independence Planning** issues you want addressed:



**PENSION PLANS - CLIENT**

**I'M EMPLOYED & CONTRIBUTING - Company Name:**

<p>Are you currently contributing to a company pension plan? (✓one)</p> <p style="text-align: center;">YES      NO</p> <ul style="list-style-type: none"> <li>• If Yes, what percentage of your salary? _____%</li> <li>• What dollar amount are you contributing per year? \$ _____</li> </ul>	<p>Does your employer currently contribute or match your contributions? (✓one)</p> <p style="text-align: center;">YES      NO</p> <ul style="list-style-type: none"> <li>• If Yes, what percentage of your salary? _____%</li> <li>• What dollar amount does the company contribute per year? \$ _____</li> </ul>
---	---

**I'M RETIRED - Company Name:**

<p>How will the distribution take place?</p> <p style="padding-left: 20px;">Lump Sum Periodic Payments</p> <p>Indexed for Inflation?</p> <p style="padding-left: 20px;">YES NO</p> <p>Integrated with Social Security?</p> <p style="padding-left: 20px;">YES NO</p>	<p>Is there a spousal benefit?</p> <p style="padding-left: 20px;">YES If Yes, what percentage? 100% 75% 50% Other: ____%</p> <p style="padding-left: 20px;">NO</p> <p>Lump Sum distribution amount? \$ _____</p> <p>Period Payment distributions per month? _____</p> <p>When do the distributions START? _____ END? (MM/YY) (MM/YY)</p> <p>Did you make contributions to this plan? YES NO</p> <p>What is the total amount of your contributions to date? \$ _____</p>
--	---

**CLIENT GOVERNMENT PENSION PLANS**

U.S. Social Security	Canada Pension Plan	Old Age Security	Other: (✓ one)
Eligible for, but not retired	Eligible for, but not retired	Eligible for, but not retired	Veteran's Pension \$ _____ per month
Currently collecting \$ _____ per month	Currently collecting \$ _____ per month	Currently collecting \$ _____ per month	Disability Pension \$ _____ per month
I don't know if I am eligible to collect	I don't know if I am eligible to collect	I don't know if I am eligible to collect	Other: \$ _____ per month

**PENSION PLANS - CO-CLIENT**

**I'M EMPLOYED & CONTRIBUTING - Company Name:**

Are you currently contributing to a company pension plan? (✓one) YES      NO  • If Yes, what percentage of your salary? _____%  • What dollar amount are you contributing per year? \$ _____	Does your employer currently contribute or match your contributions? (✓one) YES      NO  • If Yes, what percentage of your salary? _____%  • What dollar amount does the company contribute per year? \$ _____
--	--

**I'M RETIRED - Company Name:**

How will the distribution take place? Lump Sum Periodic Payments  Indexed for Inflation? YES NO  Integrated with Social Security? YES NO	Is there a spousal benefit? YES If Yes, what percentage? 100% 75% 50% Other: ____% NO  Lump Sum distribution amount? \$ _____  Period Payment distributions per month? _____  When do the distributions START? _____ END? _____ (MM/YY) (MM/YY)  Did you make contributions to this plan? YES NO  What is the total amount of your contributions to date? \$ _____
--	---

**CO-CLIENT GOVERNMENT PENSION PLANS**

U.S. Social Security	Canada Pension Plan	Old Age Security	Other: (✓ one)
Eligible for, but not retired	Eligible for, but not retired	Eligible for, but not retired	Veteran's Pension \$ _____ per month
Currently collecting \$ _____ per month	Currently collecting \$ _____ per month	Currently collecting \$ _____ per month	Disability Pension \$ _____ per month
I don't know if I am eligible to collect	I don't know if I am eligible to collect	I don't know if I am eligible to collect	Other: \$ _____ per month

**VI. RISK MANAGEMENT**

1. Do either of you have any special needs that you would like us to be aware of?  
(Hearing, sight impairment, mobility, etc.)

**Client**      YES    NO    If Yes, provide details:

**Co-Client**   YES    NO    If Yes, provide details:

2. Have either of you had any health problems you would like us to be aware of?

**Client**      YES    NO    If Yes, provide details:

**Co-Client**   YES    NO    If Yes, provide details:

3. Have either of you ever been declined for health or life insurance?

**Client**      YES    NO    If Yes, provide details:

**Co-Client**   YES    NO    If Yes, provide details:

4. Have either of you ever had exclusions or riders on your health or disability insurance?

**Client**      YES    NO    If Yes, provide details: \_\_\_\_\_

**Co-Client**   YES    NO    If Yes, provide details:

5. Have either of you ever been sued in a personal liability case?

**Client**      YES    NO    If Yes, provide details:

**Co-Client**   YES    NO    If Yes, provide details:

6. Please list any specific **Insurance or Risk** issues you want addressed:

**VII. ESTATE PLANNING**

1. Do you currently have wills? YES NO
- If yes, when were your wills created or last updated? MM/YY
- In what state or province did you have your wills created or last updated? \_\_\_\_\_
2. In each of the spaces below, mark a number from 1 to 9 (one being highest priority) to show your priority of beneficiaries (NOTE: use each number only once).
- |                 |                     |               |
|-----------------|---------------------|---------------|
| _____ Spouse    | _____ Children      | _____ Parents |
| _____ Siblings  | _____ Nephew/Niece  | _____ Church  |
| _____ Charities | _____ Grandchildren | _____ Friends |
3. Are you named as executor, alternate executor, guardian or trustee in anyone's will or trust? YES NO  
Including your own or you spouse's.  
If yes, provide details:
- 
4. Do you have plans for gifts, or support, to your children or parents during your lifetime? YES NO  
If yes, provide details:
5. Will either of you be receiving a significant inheritance? YES NO  
If yes, provide details:
6. Are either of you listed as the beneficiaries of any trusts? YES NO  
If yes, provide details:
7. Please list any specific **Estate Planning** issues you want addressed:

**VIII. PORTFOLIO MANAGEMENT**

1. What do you foresee for the US/Canadian economies over the following time periods?  
(✓ only one for each time period)

US/Canadian Economies	<b>Very Positive</b>	<b>Modestly Positive</b>	<b>Neutral</b>	<b>Modestly Negative</b>	<b>Very Negative</b>	<b>Don't Know</b>
<b>1 year</b>						
<b>5 years</b>						
<b>10 years</b>						

2. What do you foresee for inflation over the following time periods? (✓ only one for each time period)

Inflation	<b>It Will Increase</b>	<b>It Will Be Steady</b>	<b>It Will Decrease</b>
<b>1 year</b>			
<b>5 years</b>			
<b>10 years</b>			

3. Please list Portfolio Management issues you want to be addressed:

# **FACTFINDER DOCUMENT CHECKLIST**

PLEASE ✓ ALL DOCUMENTS YOU ARE INCLUDING (copies wherever possible please).

## **NET WORTH AND CASH FLOW**

- Client's and Co-Client's most recent resume'
- Client's and Co-Client's previous month's pay stubs
- Copy of any Qualified Domestic Relations Order (QDRO) or divorce agreements

## **INCOME TAX PLANNING**

- Personal US tax returns filed for both of you in the **past three years**
- Other tax returns filed in the US (business, trust, gift tax, etc.): \_\_\_\_\_
- Personal Canadian tax returns filed for both of you in the **past three years**
- Other tax returns filed in Canada (business, trust, etc.): \_\_\_\_\_
- All other tax returns you or Co-Client filed with another country:
- Other (business financial statements, etc.): \_\_\_\_\_

## **INDEPENDENCE PLANNING**

- Client's most recent US employee compensation and benefits information (401k, 403b, 457, profit sharing, stock options, deferred compensation, etc.)
- Co-Client's most recent US employee benefits information (see above)
- Client's most recent Canadian employee compensation and benefits information (pensions, profit sharing, stock options, deferred compensation, group RRSP, etc.)
- Co-Client's most recent Canadian employee benefits information (see above)
- Any severance, buy-out, termination agreements
- Most recent employee benefits information for any other countries: \_\_\_\_\_
- Most recent Social Security statements for Client and Co-Client

## **RISK MANAGEMENT**

- All Homeowners, Contents, Renters or Condominium insurance policies (including rental property)
- All Automobile insurance policies
- All Recreational Vehicle insurance policies (boat, motor home, etc.)
- Any Personal Liability or Umbrella insurance policy
- All Life insurance policies (individual and group)
- All individual Health, Disability and/or Long Term Care insurance policies
- Client's and/or Co-Client's employer benefits booklet (outlining all group medical, dental, vision, disability, long-term care and life insurance benefits)

## **ESTATE PLANNING**

- Last Wills
- Revocable Living Trusts, Irrevocable Trusts
- Healthcare Directives
- Powers of Attorney

## **PORTFOLIO MANAGEMENT**

- Most recent statements for ALL US investment accounts and employee benefit accounts (checking, savings, brokerage, IRAs, 401k, 403b, stock options, employee stock purchase plan, etc.)
- Year-end statements for the previous year for ALL US investment accounts (brokerage, IRAs, etc.)
- Most recent statements for ALL Canadian investment accounts (chequing, savings, brokerage, RRSPs, RRIFs, Locked-In Retirement Accounts, etc.)
- Year-end statements for the previous year for ALL Canadian investment accounts (brokerage, RRSPs, RRIFs, Locked-In Retirement Accounts, etc.)
- Most recent statements for any other investment accounts in other countries