



Date Provided

### Client Provided Financial Inventory

(A summary of financial data provided by the client. This is not a statement provided by Strategic Financial Planning)

Name		Birth Date	work phone	mobile phone	Email	
Occupation		Employer			Annual Income	
Name		Birth Date	work phone	mobile phone	Email	
Occupation		Employer			Annual Income	
Home Address		City	State	IN	Zip	home phone

#### Assets

Non-Qualified	Acct # / Goal	Owner	Current Value	%	Monthly Savings	Liability	Monthly Payment
Home							
2nd Mortgage / HELC							
Checking Acct.							
Checking Acct.							
Savings Acct							
Savings Acct							
Car Loan							
Student Loan							
<b>Total</b>			<b>0</b>		<b>0.00</b>	<b>0</b>	<b>0.00</b>

Qualified	Acct # / Goal	Owner	Current Value	%	Monthly Savings	% Emp Match	Monthly Match
401(k)							
IRA							
401(k)							
IRA							
<b>Total</b>			<b>0</b>		<b>0.00</b>	<b>0</b>	<b>0.00</b>

**Insurance**

Life Insurance	Insur	Owner	Bene	Death Benefit	Annual Premium	Cash Value

Disability Policy	Insur	Type	Monthly Benefit	Annual Premium	Elim Days	Bene Yrs

Long Term Care Policy	Insur	Type	Monthly Benefit	Annual Premium	Elim Days	Bene Yrs

**Issues of Concern**


**Significant Financial/Life Goals**


**Current Action Items**


**Future Action Items**


**Financial Hierarchy**

1	
2	
3	
4	
5	
6	