

Financial Profile Questionnaire

Along with the questionnaire included herein, we ask that you provide the following documents, if applicable, so that we may have the precise numbers and details for all aspects of your financial profile. If there are any documents you believe would be useful to us in our analysis, please include these as well. We understand the deeply personal and confidential nature of this information and recognize the time it takes to assemble these documents. We sincerely appreciate your efforts, and the trust you have placed in our team.

Retirement Planning

	Statement of current investments (RRSPs, TFSAs, RESPs, Non-Reg, etc.)
	Statement for current liabilities (Mortgage statement & other loan statements)
	Monthly Budget, Cash flow statements or any other documents you deem useful
	Employer sponsored savings plans or Pension Plan Detailed statement of current investments Plan information (Stock option plan limits, etc.)
Risk Ma	nagement and Estate Planning
	Insurance coverage through work, including amount you pay from paystub
	Private Policies for Life Insurance, Disability Insurance, Critical Illness (if any)
	Any additional information regarding family health history that may be useful
Income	Tax
	Income Tax Documents from most recent tax year, two years if you have a rental property of a small business
	Notice of assessment from most recent tax year (Blue/Gray document from Canada Revenue Agency showing available RRSP room)
	Estimate on how much you have contributed to Tax-Free Savings Accounts



The following document is a questionnaire to help us get to know you and your family's financial profiles. We understand that you may not be able to provide all the information listed below, or that some terms may be foreign to you. We simply ask that you provide as much information as you are comfortable providing us so that we may prepare the most comprehensive and tailored recommendations we can. Thank you!

Part 1 - Goals & Objectives

Please summarize goals and objectives that you have for your family. You may want to include things that you would like to accomplish before you retire, during your retirement or even your target inheritance.

Goal 1		
Goal 2		
Goal 3		

Part 2 - Personal Information

Name:	Client A	Client B
Date Of Birth:		
Home Address:		

Dependants/Children Information

<u>Name</u>	Date of Birth	Notes



Employment (or Former) Information

Occupation:	Years of Experience	Years of Experience
Employer:	Years of Service	Years of Service
Current Income		
How would you rate the stability of your employment?		

*Do you have a Pension through your work? If so, please provide us with details below. A detailed statement and summary of your pension is **required** for retirement planning.

	Client A	Client B
Type of Pension? (Defined Contribution, Defined Benefit?):		
How much are you contributing to this pension per year?		
Estimated Benefits:		

Current Assets

<u>Assets</u>	<u>Description</u>	Marke	t Value
Home			
Recreational Property (Cottage)			
Investment/Rental Properties			
Vehicle 1			
Vehicle 2			
Other Fixed Assets		Client A	Client B
RRSPs, Locked-in RSP, etc.		Client A	Client B
Work Pension*		Client A	Client B
Tax-Free Savings Account		Client A	Client B
Non-Registered Savings		Client A	Client B
Education Savings (RESPs)		Client A	Client B
Bank Account		Client A	Client B
Other Liquid Assets (please describe)		Client A	Client B



Current Liabilities

Liabilities:	Carrier or Description:	Outstanding Amount:	Payment Amount:	Frequency (Monthly, bi- weekly, weekly?)	Rate:	Maturity Date:	Type: (Open-Variable, Closed-fixed, Closed-Variable)
Primary Mortgage							
Mortgage 2							
Mortgage 3							
Car Loan 1							
Car Loan 2							
Line of Credits							
Credit Card 1							
Investment Loan							

Current Budget: Income & Expenses

Other Income

Gross Income Source (Describe):	Client A	Client B
Business Income		
Pension Income		
Rental Income		
Other		



Expenses & Cash Flow Needs

Housing Expenses	Current/m	Projected	Consumer Staples	Current/m	Projected
Rent or Property Tax			Groceries		
Home Insurance			Cleaning Supplies		
Heat (Oil or Gas)			Health Care		
Hydro (Electricity)			Alcohol/Tobacco		
Water			Clothing		
TV/Phone/Internet			Entertainment		
Security/Lawn/Snow			Restaurants		
Maintenance			Leisure		
Interest on Debt			Shopping		
Other			Other		
Auto Expenses	Current	Projected	Discretionary	Current/year	Projected
Petrol			Gifts		
Auto Insurance			Travel		
Licensing			Luxury Items		
Maintenance			Non-Essential Shopping		
Replacement Frequency		years	Clubs & Memberships		
Number of Vehicles		vehicles	Other Discretionary		



Retirement Planning

Active retirement is defined as the years when you are mor retirement involves less discretionary spending. Please use	•	0	while a passive
What is your anticipated Active Retirement Age?	Client A:	Client B:	
How much money per month would you like/need during	your "Active" retirement y	vears? \$	/month
What is your anticipated Passive Retirement Age?	Client A:	Client B:	
How much money per month would you like/need during	your "Passive" retirement	years? \$	/month
Do you have any specific plans with regards to your real es	state holdings, like future d	ownsizing? Please share	what you can.
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Please tell us what you see yourself doing in active and in provide, and the potential costs associated as a second cost of the potential costs associated as a second cost of the potential costs as a second cost of the potential cost of the potential costs as a second cost of the potential cost of the potential costs as a second cost of the potential costs as a se	•		me, etc. The
Any other information you believe would be important for	r us to prepare a personaliz	ed plan for you?	



Part 3 - Risk Management & Estate Planning

Risk Management

Do you currently have any insurance policies in place? If so, please fill out the following information. Please make sure to also add any insurance that might be offered through your work.

Type of Insurance (Life, Disability, Critical Illness)	Name of Insured	<u>Carrier</u>	<u>Coverage</u> <u>Amount</u>	Monthly Payment	Renewal Date

Do you believe you and your family are adequately covered? If not, where do you feel it is lacking?
Estate Planning
Do you have a will in place, and if so, is it up to date?
Do you plan on leaving an inheritance?
Do you have a specific amount in mind that you'd like to leave your benefactors? If so, please describe.
Would you be interested in developing a savings plan dedicated solely to maximizing the inheritance you will leave?

If there are any other details you believe would further help us in our analysis, please provide it in any manner you deem fit.

Thank you very much for your time and for trusting us with this confidential information. We promise to make good use of this data and to provide you with a comprehensive analysis of our findings, all while keeping your private information secure.

Sincerely,

the Innova Wealth Team