

Date: _____

CLEARPATH WEALTH MANAGEMENT

Personal Information

	Self	Spouse
First Name	_____	_____
Last Name	_____	_____
SIN	_____	_____
Birthday	_____	_____
Employer	_____	_____
Work Phone	_____	_____
Work Fax	_____	_____
Email	_____	_____
Drivers License	_____	_____

Address _____

Home Phone _____ Home Fax _____

Date married, divorced, widowed? _____

Children's Names	Birthdate	SIN
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other persons for whom you provide support. _____

Accountant _____

Lawyer _____

Attitudes/Concerns

1. What is your most important financial concern at this time?

2. What other financial priorities do you have? (Cash Management, Income tax Planning, Investment Planning, Retirement Planning, Risk Management/Insurance, Estate Planning, Funding Educational Costs, Other Capital Needs)

Income Replacement

Are you concerned with the inconvenience of a disability or the catastrophe that a disability could cause? _____

How do you feel about your present disability program? _____

Life Insurance/Estate Planning:

Do you have a will? _____

Last Time Updated? _____

Life Insurance Policies? _____

Education Funding:

How are you going to fund your child's/children's education?

Financial Interests

- Estate Planning
- Life and Disability Insurance Strategies
- Mortgage Services
- Multi-Generational Financial Planning
- Registered Education Savings Plans (RESP'S)
- Retirement Planning Strategies
- Tax Planning Strategies

REVENUES: _____

Mortgage Payment: _____

ASSETS:

LIABILITIES:

Liquid Assets

Bank Accounts: _____

Credit Cards _____

Retirement Assets

RRSP's: _____

Personal Loans: _____

TFSA's: _____

RESP's: _____

Personal Assets

Principal Residence _____

Investment Loan: _____

Other Real Estate _____

Mortgage(s): _____

Vehicles _____

Other Personal Assets _____

Business Assets _____

Other Debt(s): _____

Other Information to provide:

- **Copy of last personal tax return and Notice of Assessment (NOA)**
- **Copy of latest investment statements, this includes RRSP, RESP, Investment Account, etc.**
- **Copy of summary page of any life insurance, disability insurance, critical illness insurance, etc.**
- **Copy of latest Pension Statement(s)**