

Date: Client Information Client Information Name: Name: Address: Address: State: Zip: City: State: Zip: City: Phone: Phone: Email: Email:

Personal Assets (Cars, Jewelry, Collectibles, Furniture, Art, Boa	its, etc.)	
Type of Item & Description	Value ¹	Debt on Personal Assets ²
Total		

Personal or Consumer Debt (Credit Card, Student Loans, Taxes, Personal Loans, etc.)				
Name of Company	Description		Interest Rate	Personal or Consumer Debt ³
			Total	
Cash & Short-Term Investments (Checking, Savin	gs, CDs, Mone	y Market Funds, etc.)	
Cash & Short-Term Investments (Valuo ⁴
Cash & Short-Term Investments (Account Holder & Name of			y Market Funds, etc.) e of Investment	Value ⁴
				Value ⁴

Marketable Securities (Stocks, Bo	onds, Mutual Funds, etc.)		
Account Holder & Name of Institution	Description of Investment	Market Value ⁵	Margin Debt on Marketable Securities ⁶
			-

Total	
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Retirement Accounts (IRA, 401k, 403b, Annuity, HSA, etc.)				
Account Holder & Name of Institution	Type of Account	Description of Investment	Market Value ⁷	Debt on Retirement Accounts ⁸
			1	-
		Total		
Life Insurance				
Name of Comp	any	Type of Policy (Permanent or Term)	Cash Surrender Value ⁹	Debt on Life Insurance ¹⁰
		Total		

Real Estate- Personal			
Property	Residence, Rental, Second Home, Business	Market Value ¹¹	Debt on Real Estate ¹²
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	+		+
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			+
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Business Interests or Accounts Receivables			
Name	Type of Ownership	Fair Market Value of Business Interests (including receivables) or any other Accounts Receivable ¹³	Business Debt or Accounts Payable ¹⁴
	Total		



Statement of Net Worth

Date		
Total As	ssets	
	Personal Assets ¹ Cash & Short-Term Investments ⁴ Marketable Securities ⁵ Retirement Accounts ⁷ Life Insurance Cash Value ⁹ Real Estate ¹¹ Business Interests or Accounts Receivable ¹³	
Total Lia	abilites	
	Debt on Personal Assets ² Personal or Consumer Debt ³ Margin Debt on Marketable Securities ⁶ Debt on Retirement Accounts ⁸ Debt on Life Insurance ¹⁰ Debt on Real Estate ¹² Business Debt or Accounts Payable ¹⁴	
Total N	let Worth	

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