



## Part 1: Financial Planning

Thank you for beginning your total financial plan. This worksheet begins the financial planning process and allows us to help you understand your life stage and the goals and dreams that you have for the future.

In order to accomplish this we need some of your background information.

The first step is to collect the following pieces of information:

- Recent tax returns.
- Recent pay stubs.
- Recent bank statements and credit card statements.
- Recent investment in retirement account statements.
- Statements regarding recent investments in retirement account
- Recent pension plan information.
- Mortgage and loan information.
- Life insurance policies.
- Disability and critical illness policies.
- Most recent Will, enduring power of attorney and personal directives

If any of the above do not apply to you please advise us. On occasion you may only be able to provide us with an estimate. This can always be revised when your updated information is available.

If you require any help or assistance to complete the information please don't hesitate to call us at: The Omell Financial Group: 780-429-8989 or email us at [theomell.financialgroup@cibc.ca](mailto:theomell.financialgroup@cibc.ca)

We value the time and effort you are taking to complete this information. Thank you.

Sincerely,  
CIBC Wood Gundy,

Penny Omell,  
M.Ed, CIMA, FCSI, CIM  
Vice-President, Investment Advisor

Ronald P. Omell,  
B.Admin, CIMA, CFP, FCSI, CIM  
First Vice-President, Investment Advisor

# A – Personal Information

Client Name: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Occupation: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Business Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Date of Birth (dd/mm/yy): \_\_\_\_\_

Male  Female

Smoker  Non-Smoker

Do you have a will?

Yes  No

Who prepared your will? \_\_\_\_\_

Last Reviewed: \_\_\_\_\_

Do you have a Power of Attorney?

Yes  No   For Property  
 For Personal Care

Do you have a personal directive?

Yes  No

I am:  Single  Married  Widowed  Common-Law  Engaged

I have been:  Widowed  Divorced  Separated  N/A

Spouse's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Occupation: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Business Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Date of Birth (dd/mm/yy): \_\_\_\_\_

Male  Female

Smoker  Non-Smoker

Do they have a Will?

Yes  No

Who prepared their Will? \_\_\_\_\_

Last Reviewed: \_\_\_\_\_

Do they have a Power of Attorney?

Yes  No   For Property  
 For Personal Care

Do you have a personal directive?

Yes  No

My spouse has been:  Widowed  Divorced  Separated  N/A

# A – Personal Information (cont.)

## Miscellaneous Information

Are you planning on becoming a non-resident of Canada?

Yes  No

Do you own a business that you intend to expand into international markets?

Yes  No

Have you recently immigrated to Canada with substantial investable assets?

Yes  No

## Children or Dependent Relatives

Please list below the names of all dependent children (including grandchildren), as well as any other relatives who are financially dependent on you. Also include in this list individuals to whom you are considering leaving assets.

	Name	Sex	Date of Birth (dd/mm/yy)
1.	_____		
2.	_____		
3.	_____		
4.	_____		
5.	_____		

Please list below the names of all children and grandchildren who have special needs, such as mental or physical disabilities, family problems, inability to manage finances, etc.

	Name	Sex	Date of Birth (dd/mm/yy)
1.	_____		
2.	_____		
3.	_____		
4.	_____		
5.	_____		

## Professional Advisors

Please list below all of the advisors who provide you with professional services or advice.

	Name	Firm	Telephone Number
Lawyer:	_____		
Accountant:	_____		
Investment Advisor:	_____		
Banker:	_____		
Other: (please specify)	_____		

# C – Personal Assets/Liabilities

The following Sheet allows you to calculate your current net worth. Please indicate the dollar value of each asset (in today's dollars) in the appropriate column. All dollar amounts should be in Canadian dollars.

<b>Assets</b>		Held in Your Name		Held in Your Spouse's Name		Jointly Held
<b>Cash and Cash Equivalents</b>						
Bank Accounts	\$	_____	\$	_____	\$	_____
Canada Savings Bonds	\$	_____	\$	_____	\$	_____
T-Bills	\$	_____	\$	_____	\$	_____
Money Markets	\$	_____	\$	_____	\$	_____
Short Term Deposits	\$	_____	\$	_____	\$	_____
Life Insurance	\$	_____	\$	_____	\$	_____
<b>Total Cash and Cash Equivalents</b>	\$	_____	\$	_____	\$	_____
<b>Investments</b>						
Mutual Funds	\$	_____	\$	_____	\$	_____
Equities	\$	_____	\$	_____	\$	_____
Bonds	\$	_____	\$	_____	\$	_____
Term Deposits	\$	_____	\$	_____	\$	_____
GICs	\$	_____	\$	_____	\$	_____
Business Partnership Interests	\$	_____	\$	_____	\$	_____
Annuities	\$	_____	\$	_____	\$	_____
Other, please specify	\$	_____	\$	_____	\$	_____
<b>Total Investments</b>	\$	_____	\$	_____	\$	_____
<b>Personal Assets</b>						
(1) Real Estate:						
Home	\$	_____	\$	_____	\$	_____
Vacation Property	\$	_____	\$	_____	\$	_____
Rental/Investment Property	\$	_____	\$	_____	\$	_____
Farm Property	\$	_____	\$	_____	\$	_____
Other, please specify	\$	_____	\$	_____	\$	_____
(2) Other Personal Property:						
Vehicles	\$	_____	\$	_____	\$	_____
Personal Household Effects	\$	_____	\$	_____	\$	_____
Collectibles/Antiques	\$	_____	\$	_____	\$	_____
Jewellery	\$	_____	\$	_____	\$	_____
Other, please specify	\$	_____	\$	_____	\$	_____
<b>Total Personal Assets</b>	\$	_____	\$	_____	\$	_____
<b>Registered Retirement Savings</b>						
RRSP	\$	_____	\$	_____	\$	_____
RRIF	\$	_____	\$	_____	\$	_____
Locked-In Plans	\$	_____	\$	_____	\$	_____
Company Pension Plan	\$	_____	\$	_____	\$	_____
<b>Total Retirement Savings</b>	\$	_____	\$	_____	\$	_____
<b>Business Assets</b>						
Net Fair Market Value	\$	_____	\$	_____	\$	_____
Miscellaneous Assets	\$	_____	\$	_____	\$	_____
Loans Made to Relatives/Friends	\$	_____	\$	_____	\$	_____
Anticipated Inheritance	\$	_____	\$	_____	\$	_____
<b>Total Business Assets</b>	\$	_____	\$	_____	\$	_____
<b>TOTAL ASSETS</b>	\$	_____	\$	_____	\$	_____

# C – Personal Assets/Liabilities (cont.)

<b>Liabilities</b>		Held in Your Name		Held in Your Spouse's Name		Jointly Held
<b>Short-Term</b>						
Credit Card Balance	\$		\$		\$	
Personal Loans						
Due Dates:						
(1) _____	\$	_____	\$	_____	\$	_____
(2) _____	\$	_____	\$	_____	\$	_____
(3) _____	\$	_____	\$	_____	\$	_____
Loans on Life Insurance	\$		\$		\$	
Due Dates:						
(1) _____						
(2) _____						
(3) _____						
Other, please specify						
_____	\$		\$		\$	
<b>Total Short-Term Liabilities</b>	\$	_____	\$	_____	\$	_____
<b>Long-Term</b>						
Mortgages						
Due Dates:						
(1) _____	\$	_____	\$	_____	\$	_____
(2) _____	\$	_____	\$	_____	\$	_____
Other, please specify						
_____	\$		\$		\$	
<b>Total Long-Term Liabilities</b>	\$	_____	\$	_____	\$	_____
<b>TOTAL LIABILITIES</b>	\$	_____	\$	_____	\$	_____

<b>AFTER-TAX VALUE OF ESTATE</b>	
<b>Total Assets</b>	\$ _____
<b>Minus Total Liabilities</b>	– \$ _____
<b>= Net Value of Estate</b>	\$ _____

<b>AFTER-TAX VALUE OF ESTATE</b>	
1. Total Net Value (excluding insurance)	\$ _____
2. Potential Income Tax Liability on Assets Owned at Death (from Worksheet C)	\$ _____
3. Present Life Insurance Coverage (from Worksheet D)	\$ _____
4. Probate*	\$ _____
5. Administrative Expenses	\$ _____
6. Value of Your Estate After Tax & Expenses (1 – 2 + 3 – 4 – 5)	\$ _____

\*Probate fees and administrative expenses will vary according to your province of residence and the size of your estate. Your Investment Advisor will help you in estimating these amounts.

## B – Family Income

This Sheet is used to determine if income replacement should be part of your estate plan. What sources of income will be available to your spouse upon your passing? Please indicate the total income from all sources, for you and your spouse. All dollar amounts should be in Canadian dollars.

	Your Income	Your Spouse's Income	Total Income
<b>Income from Employment</b>			
Gross Salary	\$ _____	\$ _____	\$ _____
Commission	\$ _____	\$ _____	\$ _____
Self-employment	\$ _____	\$ _____	\$ _____
Other	\$ _____	\$ _____	\$ _____
<b>Total Employment Income</b>	\$ _____	\$ _____	\$ _____
<b>Investment Income</b>			
Interest	\$ _____	\$ _____	\$ _____
Dividends	\$ _____	\$ _____	\$ _____
Rent (net of expenses)	\$ _____	\$ _____	\$ _____
Annuities	\$ _____	\$ _____	\$ _____
Trust Fund	\$ _____	\$ _____	\$ _____
Other	\$ _____	\$ _____	\$ _____
<b>Total Investment Income</b>	\$ _____	\$ _____	\$ _____
<b>Pension Income</b>			
RRIF/Locked-in Plan	\$ _____	\$ _____	\$ _____
Old Age Security	\$ _____	\$ _____	\$ _____
Canada/Quebec Pension Plan	\$ _____	\$ _____	\$ _____
Other Pension Income	\$ _____	\$ _____	\$ _____
<b>Total Pension Income</b>	\$ _____	\$ _____	\$ _____
<b>TOTAL INCOME FROM ALL SOURCES</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>

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