

Your Financial Planning Situation

Financial Planner Contact Information

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Purpose of this Document / Confidentiality

The purpose of this document is to assist you in gathering all relevant personal and financial information required to provide you with financial planning and/or financial investment advice. The information you provide is strictly confidential and will be used exclusively for the preparation of your personal financial plan.



Personal Information

Client		
First and Last Name:		
Date of Birth:		
Address:		
Employer:	Occupation:	
Phone Number:	Email Address:	
Citizenship(s):		
Spouse (if applicable)		
First and Last Name:		
Date of Birth:		
Address (if different from above):	_	_
Employer:	Occupation:	
Phone Number:	Email Address:	
Citizenship(s):		



Financial Goals

Do you have any questions that we can help you answer through financial planning?
(E.g. Do I have enough money to retire comfortably? How long will my money last? What is the most I can spend so I will not run out of money in retirement?)
What is your desired monthly after-tax income in retirement?
What age should we use for you (and for your spouse) as retirement age?
Is it important for you to pass any assets to the family upon death?
Do you have any financial goals? (When do you want to reach these goals?)
(E.g. Home renovation projects, paying off debt, paying off credit cards, travel)



<u>Income</u>

Income (excluding investment income)

	Client	Spouse	
Employment Income (annually):	\$	\$	
Other Income (Rental? Trust?):	\$	\$	
How long do you expect to receive this income? Will it increase over time?			
CPP and OAS income: Please enter on Page	<u>ge 8</u> .		

Defined Benefit Pension Plan (DBPP)

	Client	Spouse
Pension will start at age?		
Pension Amount before 65 (annually):	\$	\$
Index before 65 (*):	%	%
Pension Amount from 65 onward (annually):	\$	\$
Index from 65 onward (*):	%	%

^(*) Index before / from indicates if the Pension Amount is increased year-by-year by the index. If the Pension is not indexed, please enter 0%.



<u>Assets</u>

Capital Assets

	Client	Spouse
RRSP:	\$	\$
Spousal RRSP:	\$	\$
LIRA:	\$	\$
TFSA:	\$	\$
Non-Registered:		
Bank Account Balance:	\$	\$
GICs:	\$	\$
Investment Accounts:	\$	\$
Other Investments:	\$	\$

RRSP and TFSA Contribution Room

	Client	Spouse
Unused RRSP Contributions:	\$	\$
Unused TFSA Contribution Room from past year(s): \$		\$



Defined Contribution Pension Plan (DCPP)

	Client	Spouse
Amount:	\$	\$
Annual Employee Contributions (*):	%	%
Annual Employer Contributions (*):	%	%

^(*) The annual employee / employer contributions expressed as a percentage of the annual Employment Income.

Real Assets

	Market Value	Purchase Price	Ownership (*)
Home:	\$	\$	
Vacation Property:	\$	\$	
Rental Property:	\$	\$	

^(*) Please indicate the ownership as owned by Client, Spouse or Jointly-Owned.



<u>Insurance</u>

Do you have any insurance in place? (E.g. Life insurance for Jason, Term 10, \$500K death benefit, \$500 annual premium, Jai is 100% beneficiary.)	ne

Liabilities / Debt

Long Term Debt

	Total	Monthly	Interest Rate
Mortgage:	\$	\$	%
Car Loan:	\$	\$	%
Other:	\$	\$	%

Short Term Debt

	Client	Interest Rate	Spouse	Interest Rate
Line of Credit:	\$	%	\$	%
Credit Cards:	\$	%	\$	%
Other:	\$	%	\$	%



Government Benefits

	Client	Spouse
CPP / OAS Income (if already being taken)		
CPP:	\$	\$
OAS:	\$	\$
Do you know the monthly CPP amount you wil	l receive at 65? (F	uture CPP Benefit)
CPP (dollar amount):	\$	\$
CPP (Percentage of the Maximum Benefit):	%	%

Have you been in Canada for 40 years after the age of 18 to qualify for full OAS?

(Back to Income Section)

Regular Contributions to Assets

Savings and Lump Sum Amounts

Do you contribute to any of your assets on a regular basis? If so, which assets and what amounts? Do you expect any lump sum amounts? (E.g. an inheritance)



Business / Corporation

Please provide all relevant information about your business. Please provide your accountant's information so we can contact them and request further information.

Business Income

Active Business Income (annually):	\$
All Expenses (annually):	\$
Non-Deductible Expenses (annually):	\$

Business Assets

Cash:	\$
Investments:	\$
Other (buildings, real estate, machinery):	\$

Your Income from Business

	Client	Spouse
Salary of Owner(s):	\$	\$
Non-Eligible Dividend:	\$	\$
Eligible Dividend:	\$	\$

Accountant

Accountant and firm's name:

Phone Number: Email Address: