

## 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. Here is a checklist to get you started:

### 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 Management 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- Personal Information

<b>Name:</b>	Client A	Client B
<b>Date Of Birth:</b>		
<b>Home Address:</b>		

### Dependants/Children information

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

### Employment Information

<b>Occupation:</b>		Years of Experience		Years of Experience
<b>Employer :</b>		Years of Service		Years of Service
<b>How would you rate the stability of your employment?</b>				

If you are contemplating a change in career or position, please notify us of any additional information which may be helpful.

## Current Assets

<u>Assets</u>	<u>Description</u>	<u>Market Value</u>	
Home			
Recreational Property (Cottage)			
Investment/Rental Property			
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

\*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.

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

## Current Liabilities

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

## Current Budget: Income & Expenses

### Current Income

Income Source (Describe):	Annual Gross Amount	Annual Net Amount
Client A Employment Income		
Client B Employment Income		
Business Income		
Rental Income 1		
Rental Income 2		
Other:		
Other:		

### Current Expenses

<b>Housing Expenses</b>	Weekly	Monthly	<b>Consumer Staples</b>	Weekly	Monthly
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		
<b>Auto Expenses</b>	Weekly	Monthly	<b>Discretionary</b>	Annually	Monthly
Petrol			Gifts		
Auto Insurance			Travel		
Licensing			Luxury Items		
Maintenance			Non-Essential Shopping		
Replacement Frequency	5 , 7 , 10 , 15 years		Clubs & Memberships		
Number of Vehicles	1 , 2 , 3 vehicles		Other Discretionary		

## Current Savings

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What are your current savings per month for the following items:

<u>Item</u>	<u>Monthly Amount being saved</u>	<u>Savings to date (Goal)</u>
Retirement (RRSPs)	\$	
Children Education (RESP or other savings)	\$	
Rainy-day account	\$	
Traveling	\$	
Miscellaneous (Bigger home, new car, new ATV, home renovations)	\$	
Income Taxes owing (if applicable):	\$	
Other(describe):	\$	

Once you have paid off all outstanding debts, do you intend to use all the excess cash flow to invest for retirement? YES/NO

## Risk Management

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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.

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

Do you believe you and your family are adequately covered if something was to happen? If not, where do you feel it is lacking?

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## Part 2 – 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

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Goal 2

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Goal 3

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## Education Savings

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What portion of your children’s education would you like to cover? (\$/%for each child)

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Do you already have a Registered Education Savings Plan account started for your children ?

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How much are you currently saving for your children's education?

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What do you anticipate the annual cost per year, per child to be for post-secondary education?

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Do you believe this to be of higher or lower priority to your retirement savings?

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Are there any considerations you believe we should be made aware of regarding education savings? (For example, annual contributions from god-parents or grand-parents, etc.)

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## Estate Planning

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Do you have a will in place, and if so, is it up to date?

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Do you plan on leaving an inheritance?

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Do you have a specific amount in mind that you'd like to leave your benefactors? If so, please describe.

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Would you be interested in developing a savings plan dedicated solely to maximizing the inheritance you will leave?

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## Retirement Planning:

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Active retirement is defined as the years when you are more likely to be travelling, doing leisure activities, etc. while a passive retirement is more financially conservative. Please use today's dollars for all amounts.

What is your anticipated Active Retirement Age? Client A: \_\_\_\_\_ Client B: \_\_\_\_\_

How much money per month would you like/need during your "Active" retirement years? \$ \_\_\_\_\_/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

If you remain in good health, what is your Anticipated Life Expectancy?

Client A:      65 to 75      75 to 85      85 to 95      95 to 105+

Client B:      65 to 75      75 to 85      85 to 95      95 to 105+

Please tell us what you see yourself doing in active and in passive retirement, how you see yourself spending time, etc. The more details you can provide, and the potential costs associated, the better. (E.g. Travel, ~\$10,000 per year)

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## Projected Retirement Needs Analysis:

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How many years have you contributed to the Canada Pension Plan? \_\_\_\_\_

How many of those years were considered 'strong income years' wherein you would have earned over \$50,000 in today's dollars? E.g. Over \$28,000 in 1990. \_\_\_\_\_

Do you expect to earn employment income while in retirement? \_\_\_\_\_

If so, please enter the income that you expect to earn and the length of time, during which, you anticipate receiving it.

		Client A		Client B	
Monthly Amount \$:					
Starting Age	Ending Age				

Do you expect to have other sources of income in retirement? If so, please enter the monthly amount you expect to earn. These can include rental income or a pre-paid annuity.

		Client A		Client B	
Monthly Amount \$:					
Starting Age	Ending Age				

If you have a pension through your work: in today's dollars please enter the monthly pension income that you expect to earn in retirement from your current and or past Canadian employers and any survivor benefits provided.

		Client A		Client B	
Monthly Amount \$:					
Survivor Benefit \$:					
Starting Age					
Indexed to inflation? (Full or Partial)		Full / partial _____%		Full / partial _____%	

### Other Retirement Income

Do you expect to receive any lump-sums in retirement? These can include an inheritance, proceeds from selling some of your real estate, etc. If so, please describe below:

Source (Please describe): \_\_\_\_\_ Amount \$: \_\_\_\_\_

Source (Please describe): \_\_\_\_\_ Amount \$: \_\_\_\_\_

Source (Please describe): \_\_\_\_\_ Amount \$: \_\_\_\_\_





## Projected Retirement Expenses:

In today's dollars, please forecast how you expect your expenses to change by entering their estimated values should you be retired at the moment.

<b>Housing Expenses</b>	Weekly	Monthly		<b>Consumer Staples</b>	Weekly	Monthly
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		
<b>Auto Expenses</b>	Weekly	Monthly		<b>Discretionary</b>	Annually	Monthly
Petrol				Gifts		
Auto Insurance				Travel		
Licensing				Luxury Items		
Maintenance				Non-Essential Shopping		
Replacement Frequency	5 , 7 , 10 , 15 years			Clubs & Memberships		
Number of Vehicles	1 , 2 , 3 vehicles			Other Discretionary		

## Investment Experience

Please indicate the investment types you've had direct experience with;

Client A:                     None                     Rental Properties     Mutual Funds             Stocks/Bonds/ETF

Client B:                     None                     Rental Properties     Mutual Funds             Stocks/Bonds/ETF



How would you rate your own knowledge of investing?

Client A:  Novice  Fair  Good  Sophisticated

Client B:  Novice  Fair  Good  Sophisticated

Which of the following best describes your tolerance for risk?

- a) I am not willing to risk any of the capital in my investment for the potential for returns. (Guaranteed Deposits Only)
- b) I am willing to accept risk in my investment portfolio to the extent of losing up to **7%** of my portfolio in a calendar year if it means the potential to increase returns above inflation (3-4%). (Low-Risk, Low-Return Potential)
- c) I am willing to accept risk in my investment portfolio to the extent of losing up to **12%** of my portfolio in a calendar year if it means the potential to increase returns over time (4-5%). (Low-Medium Risk, Low-Return Potential)
- d) If I am comfortable with the strategy, I am willing to accept risk in my investment portfolio to the extent of losing up to **17%** of my portfolio in a calendar year if it means the potential to increase returns over a decade (5-6%). (Medium Risk)
- e) If I am comfortable with the strategy, I am willing to accept risk in my investment portfolio to the extent of losing up to **25%** of my portfolio in a calendar year if it means the potential to increase returns over a decade (6-7%). (Medium-High Risk)
- f) If I am comfortable with the strategy, I am willing to accept risk in my investment portfolio to the extent of losing up to **35%** of my portfolio in a calendar year if it means the potential to increase returns over a decade (7-8%). (High Risk)

Client A:  No Risk  Low-Risk  Low-Medium  Medium  Medium-High  High  
 Whatever is needed to reach my goals

Client B:  No Risk  Low-Risk  Low-Medium  Medium  Medium-High  High  
 Whatever is needed to reach my goals

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,

Jean-François Démoreé  
and the Innova Wealth Team