The Disciplined Wealth Solution™

introduction

This booklet is designed to facilitate the planning process. Our goal is to make your life simpler, not more complex, so this booklet should not be a hindrance or a burden. You may complete as much as you like and gather the requested information, or we will develop this information together at our next meeting.

the next meeting

Copies of the items listed below will be required for the next meeting.

- This booklet
- Most recent statement from all investment accounts;
  - Brokerage statements
  - IRA statements
  - Mutual Fund statements
  - 401(k) statements
  - Trust Account statements
  - Annuity Statements
- Most recent U.S. Individual Income Tax Return
- Additional items detailed at back of booklet

financial independence

Financial independence means having the freedom to pursue what is really important to you. Petersen Hastings Investment Management developed the Diciplined Wealth Solution™ to assist you in making crucial decisions necessary to maximize your assets, enhance the quality of your life, and realize your goals.

personal data

	Date of Birth	Social Security #	Occupation
Client's Name*			
Spouse's Name*			
Home Address	Phone Fax E-Mail		
Client's Business Name & Address	Phone Fax E-Mail		
Spouse's Business Name & Address	Phone Fax E-Mail		

**If not U.S. citizen, indicate nationality*

	Name
Attorney Personal	
Business	
Accountant Personal	
Business	
Life Ins. Agent	
Property Ins. Agent	
Banker	

Children*/Grandchildren	Date of Birth	Occupation	Amount of Support *

**Indicate if by prior marriage or stepchild*

**By client or spouse*

personal data (continued)

Marital Status	☐ Married (Date)	☐ Divorced	☐ Widowed
Any former marriages?	☐ Yes	☐ No	
Are you paying alimony?	☐ Yes	☐ No	
Are you paying child support?	☐ Yes	☐ No	
Have you ever lived in a community property state?	☐ Yes	☐ No	
Note: Community property states are Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, Wisconsin			
Are there any significant family health problems or special needs? If so, please describe.			
Are your or any members of your immediate family beneficiaries of a trust?	☐ Yes*	☐ No	
**If yes, please provide copy of trust document(s) and latest asset listing.*			
Do you, your spouse, or your children expect to receive gifts/inheritances?	☐ Yes	☐ No	
How much?			
From whom?			
When?			
Are you or your spouse eligible for any benefits from military service?	☐ Yes*	☐ No	

**If yes, explain.*

financial information summary

financial assets*

Description	Amount	Owner	Comments

** There is no need to detail information for assets for which you can provide statements.*

real estate & business assets

Description	Amount	Owner	Comments

financial information summary (cont'd)

liabilities

	Original Amount	Interest Rate	Original Term	Approximate Current Balance	Monthly Payment
Home Mortgage					
Second Mortgage					

earned income

	Client	Spouse	Comments
Annual Income			
Annual Bonus			
Other			

pension & other income

	Client	Spouse	Comments

insurance (life, disability, long-term care)

Acct. Type/Amount	Owner	Insured	Cash Value	Premiums

living expenses

In answering each of the following questions, consider your needs *excluding* any income taxes or Social Security taxes and *excluding* debt repayment.

How much are your current monthly expenses? (see worksheet below for examples of various expense categories)

$___________________ per month

If today you had attained the age of your desired financial independence, living the lifestyle you expect to live at that time, what would your expenses be in *today's* dollars?

$___________________ per month

If the primary breadwinner were to die today, what would you estimate the survivor's expenses be in *today's* dollars excluding college expenses?

$___________________ per month—with dependent children

$___________________ per month—without dependent children

What would be the after-tax earning capacity of the surviving spouse?

$___________________ per month

expense worksheet*

Expense	Monthly Amount	Expense	Monthly Amount
Rent		Entertainment	
Gas		Dining Out	
Water		Gifts	
Cable		Charitable Donations	
Electric		Health Care	
Telephone		Hobbies	
Home Maintenance		Interest Expense	
Car Payments		Credit Cards	
Car Maintenance		Magazines/Newspapers	
Other Transportation		Pet Expenses	
Child Care		Vacations	
Auto Insurance		Property Taxes	
Home Owners Insurance		Mortgage	
Groceries			
Additional Expenses:			

* *This is only to provide an idea of various expense categories. You can provide all the detail, use your own format or just provide totals.*

living expenses (cont'd)

What private education and college expenses (in today's dollars) do you expect for your children?

Child's Name	Expenses Per School Year	Number of Years	% you wish to pay

What large or unusual expenses are you planning?

Item	Amount	When
New Automobiles/Boat		
Change of Residence		
Vacation home		
Travel/Vacation		
Charities		
Weddings		
Other (specify)		

other information

Please describe or provide any additional information you believe might be useful in advising you.

financial priority

Here are some common personal financial goals. Indicate the relative importance you attach to each goal by circling the appropriate number. Feel free to add other goals that are important to you.

Low		Med		High	
0	1	2	3	4	Maintain present standard of living
0	1	2	3	4	Improve present standard of living (spend more and save less)
0	1	2	3	4	Improve future standard of living (spend less and save more)
0	1	2	3	4	Financial independence at age _____
0	1	2	3	4	Total retirement at age _____
0	1	2	3	4	College education for children
0	1	2	3	4	Support of adult children
0	1	2	3	4	Passing considerable wealth to heirs
0	1	2	3	4	Support of parents or parents-in-law
0	1	2	3	4	Support of surviving (dependent) spouse
0	1	2	3	4	Support political or philanthropic causes
0	1	2	3	4	Change or modify career activities
0	1	2	3	4	Pursue family or social activities
0	1	2	3	4	Pursue other personal activities or experiences
0	1	2	3	4	Change nature or scope of business enterprise
0	1	2	3	4	Transfer control of business enterprise to heirs
0	1	2	3	4	Transfer ownership of business enterprise to others
0	1	2	3	4	Change of residence
0	1	2	3	4	New car
0	1	2	3	4	Vacation home or recreational item
0	1	2	3	4	Extraordinary travel
0	1	2	3	4	Education of self
0	1	2	3	4	Education of child
0	1	2	3	4	Wedding of child
					Other (please list):
0	1	2	3	4	
0	1	2	3	4	

other information and documents

	Copy Enclosed*
Your Will	_______
Spouse’s Will	_______
Trust Agreement(s)	_______
Statement of Capital Gains and Losses for current year if extraordinary (include dates acquired/sold, cost, proceeds)	_______
Summary of Income Tax Basis for all Investment Assets (if readily available)	_______
Latest Gift Tax Return	_______
Latest Corporate or Partnership Latest Individual Income Tax Return (if self employed)	_______
Latest Paycheck Stub(s)	_______
All Life Insurance Policies and recent annual statements	_______
Details regarding Other Insurance Coverage	_______
Disability Income (if known)	_______
List of children’s assets (if over $10,000) and tax returns	_______

If not applicable put N/A

The Disciplined Wealth Solution Scorecard™

To help you clearly understand your current situation, try *The Disciplined Wealth Solution Scorecard*™.
Rate your reactions to each pair of phrases. Decide where you lie on the scale from 1 to 10.
Add up your total from each column. Speak to one of our advisors to understand the significance of your score.

	1	2	3	4	5	6	7	8	9	10	
We don't have a clear vision of our future											We have a clear, well-defined vision of our future
We do not have clear financial goals											We have clear financial goals
We don't have a strategy to achieve our personal and financial goals											We have a strategy to achieve our personal and financial goals
We don't have a step-by-step action plan to achieve our goals, both personal and financial											We have a step-by-step action plan to achieve our goals, both personal and financial
Our investments are scattered and disorganized											Our investment portfolio is integrated and organized
We have not reviewed all of the tools which could help us achieve our vision											We have reviewed all of the tools which could help us achieve our vision
We do not review our vision, plan or progress on a regular basis											We review our vision, plan and progress on a regular basis
Our financial advisors work in isolation from each other											Our financial advisors work as a team to help us achieve our vision
We do not have a plan to use our wealth to perpetuate our values											We have a plan to use our wealth to perpetuate our values
We do not have as much confidence in the future as we would like											We have a strong sense of confidence about our future
ADD COLUMN TOTALS											YOUR SCORE ___________