



**CONFIDENTIAL PERSONAL
FINANCIAL STATEMENT**

If there are any questions or concerns, please contact us:

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Or

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INDIVIDUAL 1 Information		INDIVIDUAL 2 Information	
Name: _____		Name: _____	
Address: _____ Yrs at Addr: ____		Address: _____ Yrs at Addr: ____	
City, State, Zip: _____		City, State, Zip: _____	
SS#: ____-____-____ DOB: ____/____/____		SS#: ____-____-____ DOB: ____/____/____	
DL#: _____		DL#: _____	
Issue Date: _____ Exp Date: _____		Issue Date: _____ Exp Date: _____	
Employer: _____ Yrs at Empl: ____		Employer: _____ Yrs at Empl: ____	
Phone #: ____-____-____ Home / Work / Cell		Phone #: ____-____-____ Home / Work / Cell	
Phone2 # ____-____-____ Home / Work / Cell		Phone2 # ____-____-____ Home / Work / Cell	
Email: _____		Email: _____	
Children's names/DOB (if applicable):		Children's names/DOB (if applicable):	
Annual Income (Individual 1)	Dollars	Annual Income (Individual 2)	Dollars
Salary & Wages		Salary & Wages	
Bonuses and Commissions		Bonuses and Commissions	
Interest and Dividends		Interest and Dividends	
Real Estate Income		Real Estate Income	
Rental Income		Rental Income	
Other Income (List Below)		Other Income (List Below)	
Other Expenses (List Below)		Other Expenses (List Below)	
Alimony/ Child Support		Alimony/ Child Support	
Annual Home Rental		Annual Home Rental	
GROSS INCOME:		GROSS INCOME:	

CASH ON HAND and IN BANKS				
Name of Deposit Institution	In Name of	Account Type	Amount	Pledged
Total				

<input type="checkbox"/> NONE IRAs & OTHER RETIREMENT ACCOUNTS				
Institution	Owner's Name	Current Balance	Loans (if any)	Elections with Match
Totals				

<input type="checkbox"/> NONE PARTNERSHIPS & CLOSELY HELD CORPORATIONS				
Entity Name	Business Function	Loan Amt	% Owned	Value

<input type="checkbox"/> NONE	REAL ESTATE—PRIMARY RESIDENCE & INVESTMENTS		
Property Type: SF= Single Family, MF= Multiple Family, C= Commercial, L= Land/Acreage			
Property Type:	Residence <input type="checkbox"/> SF <input type="checkbox"/> MF	<input type="checkbox"/> Vacation <input type="checkbox"/> Rental <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L	<input type="checkbox"/> Vacation <input type="checkbox"/> Rental <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L
Ownership %:	%	%	%
Title in Name of:			
Co-owned with Spouse?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Property Address:			
City, State, Zip:			
Year Acquired:			
Cost:			
Market Value:			
1 st Mortgage Balance:			
Mortgage Holder:			
Loan term (i.e. 15 yr)			
Interest Rate of loan			
Monthly Payment			
2 nd Mortgage Balance:			
Mortgage Holder:			
Monthly Rent Received:			
Monthly Payment:			
Interest Rate of loan			
Loan term (i.e. 15 yr)			

Additional	REAL ESTATE & INVESTMENTS		
Property Type:	Residence <input type="checkbox"/> SF <input type="checkbox"/> MF	<input type="checkbox"/> Vacation <input type="checkbox"/> Rental <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L	<input type="checkbox"/> Vacation <input type="checkbox"/> Rental <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L
Ownership %:	%	%	%
Title in Name of:			
Co-owned with Spouse?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Property Address:			
City, State, Zip:			
Year Acquired:			
Cost:			
Market Value:			
1 st Mortgage Balance:			
Mortgage Holder:			
Monthly Payment			
Interest Rate of loan			

Loan term (i.e. 15 yr)			
2 nd Mortgage Balance:			
Mortgage Holder:			
Monthly Rent Received:			
Monthly Payment:			
Interest Rate of loan			
Loan term (i.e. 15 yr)			

<input type="checkbox"/> NONE	AUTOMOBILES, BOATS & RECREATIONAL VEHICLES						
Year	Type	Model	Title in Name Of	Value	Loan Bal.	Lien Holder	Payment
Totals							

<input type="checkbox"/> NONE	OTHER PERSONAL PROPERTY & ASSETS (Including Notes & Loans Receivables)					
Description	Original Amount	Present Value	Loan Type	Monthly Payment	Loan Balance	Maturity Date
Totals						

<input type="checkbox"/> NONE	CREDIT CARDS				
Owner Name & Account Number	Name of Card	Present Balance	Monthly Payment		

Totals							
<input type="checkbox"/> NONE	NOTES, & LOANS PAYABLE (i.e. HELOC, Student Loans)						
Owning to & Account Number	Original Amount	Present Balance	Loan Type	Monthly Statement	Maturity Date	Secured By	
Totals							

<input type="checkbox"/> NONE	UNPAID TAXES & INTEREST				
Taxes Owed To	Original Amount	Present Balance	Tax Year	Monthly Payment	
Totals					

BALANCE SHEET (From Itemized Schedules)			
<small>**Totals from the itemized Schedules must be inserted in the applicable spaces in the Balance Sheet**</small>			
Assets	Dollars	Liabilities	Dollars
Cash on Hand & in Banks		Mortgage Payable—Primary	
IRAs and other Retirement Accts		Home Equity Lines	
Partnerships & Closely Held Corporations		Mortgages/Real Estate Investments	
Life Insurance and Annuities			
Disability Insurance		Credit cards total outstanding balances	
Long Term Care Insurance			
Real Estate – Primary Residence		Accounts, Notes, & Loans Payable	
Real Estate—Investment properties		Unpaid Taxes & Interest	
Autos, Boats & Recreational Vehicles		Loans for Autos, Boats, Rvs	
Other Personal Property			

		TOTAL LIABILITIES:	
TOTAL ASSETS:		TOTAL NET WORTH:	

CONTINGENT LIABILITIES		
If yes to any of the below, provide data on additional sheets.	YES	NO
Are you a guarantor, co-maker or endorser for any debt of an individual, corporation, or partnership?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any outstanding letters of credit or surety bonds?	<input type="checkbox"/>	<input type="checkbox"/>
Are there any suits or legal actions pending against you?	<input type="checkbox"/>	<input type="checkbox"/>
Are you contingently liable on any lease or contract?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a Will? If yes, list date of will and executor:	<input type="checkbox"/>	<input type="checkbox"/>
Are any assets held in a trust?	<input type="checkbox"/>	<input type="checkbox"/>
Have (either of) you or any firm in which you were a major owner ever declared bankruptcy.	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide details:		
Income tax returns filed through what date?		

VERIFICATION OF FINANCIAL INFORMATION

I certify, represent, warrant and covenant to you that the Financial Information provides a complete, true, and accurate statement of my financial condition and business transactions as of the date of the Financial Information. Unless we receive written notification from you to the contrary, we will consider the Financial Information a continuing statement, substantially correct in all respects.

I acknowledge that you will rely on the Financial Information in making credit decisions. I authorize you and your affiliates to make sure credit, employment or investigative inquiries about me from time to time as you and your affiliates deem appropriate to evaluate my financial strength, character, and credit history, to evaluate my credit applications(s), to administer any loan(s) made to others guaranteed by me and to collect any sums owing, and to determine my eligibility for other financial products and services you or your affiliates offer. You may verify this information about me and obtain consumer report(s) about each individual identified in this verification.

Signature /Authorization / Date

Signature / Authorization / Date

Print name

print name

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Columbia, SC 29204

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Addendum: Goals and additional information

Short term goals

What personal, financial, or professional goals are important to you in:

1 year?

3 years?

5 years?

Long term goals

What personal, financial, or professional goals are important to you in:

10 years?

15+ years?

Retirement

What age would you like to retire?

What yearly expenses (in today's dollars) do you anticipate in retirement?

What specific goals do you have for this phase of life?

Estate Planning

When did you last update your will? Any goals related to estate/trusts or estate planning?

Do you anticipate an inheritance from your family?

Collaboration

Who are the members of your professional/financial team (CPA, attorney, etc.)

Introductions

Who are 3 people that you know/care about/respect/admire that you think we should meet?