



PARKER FINANCIAL LLC

*Plan well...to live well*

  
**WORKING**  
WOMAN'S DAY  
- 2009 -

---

***Charles County Chamber of Commerce  
2009 Working Woman's Appreciation Day  
April 23, 2009, The Waldorf Jaycees***

*The personal financial health journal of:*



## My Personal Information

CLIENT		SPOUSE	
NAME		NAME	
SEX		SEX	
DOB		DOB	
SSN		SSN	
MARITAL STATUS	ANNIVERSARY DATE (MM/DD/YY)		
HOME ADDRESS			
STREET ADDRESS			
CITY, STATE ZIP			
CLIENT CONTACT INFORMATION		SPOUSE CONTACT INFORMATION	
HOME TEL.		HOME TEL.	
OFFICE TEL.		OFFICE TEL.	
FAX		FAX	
E-MAIL		E-MAIL	
WK E-MAIL		WK E-MAIL	
CLIENT EMPLOYER INFORMATION		SPOUSE EMPLOYER INFORMATION	
COMPANY		COMPANY	
POSITION		POSITION	
ADDRESS		ADDRESS	
CITY, ST ZIP		CITY, ST ZIP	
CLIENT MEMBERSHIP AND ACTIVITIES		SPOUSE MEMBERSHIP AND ACTIVITES	
ALUMNI		ALUMNI	
ASSOCIATIONS		ASSOCIATIONS	
BOARD MBR		BOARD MBR	
CLUBS		CLUBS	
HOBBIES		HOBBIES	
INTEREST		INTEREST	
FAMILY MEMBERS (Children, Grandchildren, Others)			
NAME 1		NAME 2	
DOB		DOB	
SSN		SSN	
RELATION		RELATION	
NAME 3		NAME 4	
DOB		DOB	
SSN		SSN	
RELATION		RELATION	

## PROFESSIONAL ADVISORS

*Please indicate if you give permission to share information with professional advisors*

	NAME	COMPANY	TELEPHONE	FACSIMILE
Account				
Attorney:				
Insurance Agent:				
Financial Planner				

# My Goals

## SHORT TERM GOALS 1-3 YEARS

*Describe your short-term goals*

GOAL 1

YEAR OF GOAL	DOLLARS NEEDED SAVINGS GOAL
--------------	--------------------------------

GOAL 2

YEAR OF GOAL	DOLLARS NEEDED SAVINGS GOAL
--------------	--------------------------------

GOAL 3

YEAR OF GOAL	DOLLARS NEEDED SAVINGS GOAL
--------------	--------------------------------

## MID TERM GOALS 5-10 YEARS

*Describe your midterm goals*

GOAL 1

YEAR OF GOAL	DOLLARS NEEDED SAVINGS GOAL
--------------	--------------------------------

GOAL 2

YEAR OF GOAL	DOLLARS NEEDED SAVINGS GOAL
--------------	--------------------------------

GOAL 3

YEAR OF GOAL	DOLLARS NEEDED SAVINGS GOAL
--------------	--------------------------------

## LONG TERM GOALS 10 YEARS

*Describe your long-term goals*

GOAL 1

YEAR OF GOAL	DOLLARS NEEDED SAVINGS GOAL
--------------	--------------------------------

GOAL 2

YEAR OF GOAL	DOLLARS NEEDED SAVINGS GOAL
--------------	--------------------------------

GOAL 3

YEAR OF GOAL	DOLLARS NEEDED SAVINGS GOAL
--------------	--------------------------------

# My Cash Flow

CASH FLOW MANAGEMENT (BUDGET)				
INCOME	MONTHLY AVG		TOTAL FOR YEAR	
Wages, salary, tips				
Cash dividends and interest received				
Social Security income				
Pension Income				
Other Income				
<b>Total Monthly Income</b>				
EXPENSE DESCRIPTION	AVG. %	MONTHLY AVERAGE	AVG. %	TOTAL FOR YEAR
Income Taxes				
Federal income taxes				
State income taxes				
FICA				
Savings, Retirement				
Food	10%		10%	
Housing	27%		27%	
Mortgage, 2 <sup>nd</sup> home mortgage				
Insurance premiums				
Utilities, electric, gas, water				
Personal services child care, adult care				
Housing maintenance				
Lodging expenses, hotels, motels				
Housing property, furniture, fixtures, appliances, equipment				
Apparel	3%		3%	
Transportation Expenses	14%		14%	
Automobile notes				
Gas, maintenance, other				
Auto insurance				
Public transportation, air, train, bus				
Health care	5%		5%	
Health, dental, disability, long term care insurance				
Out-of-pocket expenses, prescriptions, services				
Entertainment	4%		4%	
Other Debt Payments	5-10%		5-10%	
Other Expenditures				
Charity	3%		3%	
<b>Net Cash Flows</b>				
Total Income				
Total Expenses				

# My Balance Sheet

## ASSETS

Write down the value of all the things you own.

Emergency Fund	\$
Checking Account	\$
Savings Account	\$
Cash Value of Life Insurance	\$
Retirement Account	\$
Investment Accounts	\$
Value of Home	\$
Value of Car(s)	\$
Value of Business	
Value of Other Real Estate	\$
Value of Personal Property	\$
Other	\$
<b>TOTAL ASSETS</b>	\$

## LIABILITIES

Write down what you owe, such as the balance of your mortgage or credit cards, or bills that are due.

Amount Owed on Mortgage	
Amount Owed on Car(s)	
Credit Card Balance	
Credit Card Balance	
Credit Card Balance	
Other Bank Loans	
Finance Company Loans	
Insurance Loans	
Taxes Owed	
Other	
Other	
<b>TOTAL LIABILITIES</b>	\$

## NET WORTH CALCULATION

Value of Assets	\$
Minus Value of Liabilities	
<b>NET WORTH</b>	\$

# My Liabilities

## DEBIT MANAGEMENT

List all of your creditors, the amount owed to each, the interest rates, and monthly minimum payments (Home & Land Loans, Vehicle Loans, Business Loans, Other Personal Debt)

CREDITOR	TOTAL OWED	INTEREST RATE	MINIMUM PAYMENT
1.	\$	%	\$
2.	\$	%	\$
3.	\$	%	\$
4.	\$	%	\$
5.	\$	%	\$
6.	\$	%	\$

Re-order your debts according to which you want to get rid of first. One way is from highest to lowest interest rate - that may save the most money in the long run. Another is from smallest to largest - that may help you build momentum by successfully eliminating one creditor from your list relatively quickly.

CREDITOR	TOTAL OWED	INTEREST RATE	MINIMUM PAYMENT
1.	\$	%	\$
2.	\$	%	\$
3.	\$	%	\$
4.	\$	%	\$
5.	\$	%	\$
6.	\$	%	\$

## My Action Plan

Write down the action plan to achieve your goals	Due Date	Completed



## My Important Documents

*Please check off all that apply to you and your spouse. Please bring a copy of all financial documents to your first meeting. We can make a copy of originals; if needed.*

	CLIENT	SPOUSE	RECORD RETENTION	LOCATION
<b>PERSONAL CERTIFICATES</b>				
Birth Cert., Marriage Cert., Passport			Permanently	
<b>FINANCIAL PLANNING DOCUMENTS</b>				
Bank and Savings Accounts, Pay stubs			1 Yr -Perm.	
Receipts, bills,			1 Yr - Perm.	
Investment Statements, Confirmations			Until Sold	
Loan Documents, Mortgage			Permanently	
<b>RETIREMENT PLANNING DOCUMENTS</b>				
Employer's Retirement Plan Summary Document			Permanently	
401(k), 403(b), TSP, Keogh Statements			Permanently	
Deferred Compensation, Stock Options			Permanently	
IRA, Roth IRA, Simple IRA			Permanently	
Pension and Profit Sharing Statements			Permanently	
Social Security Annual Statement			1 Yr	
<b>TAX PLANNING DOCUMENTS</b>				
Income Tax Returns and Receipts			7-Permently	
Estate and Gift Tax			Permanently	
W-2, 1099, Form K-1			7-Permently	
<b>INSURANCE - RISK MANAGEMENT DOCUMENTS</b>				
Emergency Preparedness Plan			Permanently	
Health Care, Dental, Disability, LTC			Permanently	
Life Insurance Policy			Permanently	
Homeowners, Property, Umbrella, Auto			Permanently	
<b>ESTATE PLANNING DOCUMENTS</b>				
Gen. Property Financial Power of Atty			Permanently	
Health Care Power of Attorney, HIPPA			Permanently	
Living Will / Advanced Dir. / Donor			Permanently	
Trusts, Wills, Planned Giving Documents			Permanently	

Disclaimer – Investment Advisory services are offered through Parker Financial, LLC. Parker Financial, LLC is an independent fee only registered investment adviser in the state of Maryland. The information provided here is for general informational purposes only and should not be considered an individualized recommendation or personalized investment advice. Any investments and strategies mentioned here may not be suitable for everyone. Parker Financial, LLC Address: 9300 Endowment Place, La Plata, MD 20646, Toll free 866-681-PLAN (7526) (4/24/09)