



Financial planning data and information requests

MML Investors Services, LLC



Name _____ Advisor _____

Name _____ Date _____

This workbook is designed to assist you with the gathering of financial data and documents necessary for the development of your financial plan. Additional information could be requested based on the complexity or unique situation that may exist.



Document check list

(Please supply the following documents, if available, at our next meeting)

Personal Documents:

- ☐ Personal financial statement
- ☐ Wills
- ☐ Trusts
- ☐ Marital property agreements
- ☐ Power of attorney for financial matters
- ☐ Health care power of attorney
- ☐ Living will
- ☐ Life insurance policies and most recent policy statement
- ☐ Disability insurance policies
- ☐ Long term care insurance policies
- ☐ Income tax returns for last two years
- ☐ Most recent profit sharing, 401(k), 403(b), 457, pension plan or any other retirement plan statements
- ☐ Any governmental retirement plan statement or projection
- ☐ Copy of employee benefit booklet
- ☐ Investment statements — brokerage, mutual funds, IRA's, etc.
- ☐ Annuity contracts and most recent statements
- ☐ Property agreements
- ☐ Pre-nuptial agreements if in place
- ☐ Dissolution of marriage agreements
- ☐ Personal liabilities (mortgage, credit cards, installment, auto, margin, etc.)
- ☐ Any other documents you believe would be helpful

If You Have a Business:

- ☐ Business financial statements, two years
- ☐ Business tax returns, two years (if available)
- ☐ Stockholders agreements
- ☐ Benefit plan books
- ☐ Profit sharing, pension, stock option plans
- ☐ Corporate investment statements
- ☐ Corporate or business owned life insurance policies and recent statement(s)
- ☐ Corporate disability insurance policies
- ☐ Corporate loan agreements
- ☐ Executive benefit agreements (split dollar, deferred compensation, etc.)
- ☐ Any other documents you believe would be helpful

Personal Budget

| | MONTHLY | ANNUAL |
|--------------------|---------|--------|
| Housing | | |
| Mortgage | | |
| Community Dues | | |
| Electricity/Gas | | |
| Water | | |
| Trash Pickup | | |
| Cell Phone | | |
| Telephone | | |
| Cable/Satellite TV | | |
| Security System | | |
| Pool Service | | |
| Lawn Service | | |
| Maid Service | | |
| Maintenance | | |
| Property Taxes | | |
| Other | | |
| TOTAL | | |
| Child Care | | |
| Support Payments | | |
| Daycare | | |
| Sports Activities | | |
| General Activities | | |
| Other | | |
| TOTAL | | |

Personal Budget

| | MONTHLY | ANNUAL |
|-------------------------------------|---------|--------|
| Transportation | | |
| Loan/Lease | | |
| Gas | | |
| Maintenance | | |
| Plates/Inspection | | |
| Other | | |
| TOTAL | | |
| Food/Beverages | | |
| Groceries | | |
| Household Supplies | | |
| Beverages | | |
| Other | | |
| TOTAL | | |
| Clothing | | |
| Adults | | |
| Children | | |
| TOTAL | | |
| Furnishings | | |
| Inside | | |
| Outside | | |
| TOTAL | | |
| Medical/Dental/Prescriptions | | |
| Vision | | |
| Copays | | |
| Deductible | | |
| Medication/Vitamins | | |
| Other | | |
| TOTAL | | |

Personal Budget

| | MONTHLY | ANNUAL |
|-----------------------------------|---------|--------|
| Personal Care and Cash | | |
| Dry Cleaning | | |
| Hair/Nails/Other | | |
| Cosmetics | | |
| Shoe Shine | | |
| Massage | | |
| Health Club | | |
| Other | | |
| TOTAL | | |
| Education/Self-Improvement | | |
| Private School/College | | |
| Classes | | |
| Hobbies | | |
| Association Fees | | |
| Other | | |
| TOTAL | | |
| Installment Debt Payments | | |
| Student Loans | | |
| Credit Cards | | |
| Rental Property/Mortgage | | |
| Other | | |
| TOTAL | | |

Personal Budget

| | MONTHLY | ANNUAL |
|------------------------------------|---------|--------|
| Entertainment | | |
| Dining Out | | |
| Sports Tickets | | |
| Theater Tickets | | |
| Golf, etc. | | |
| Movies/Videos | | |
| Clubs | | |
| Other | | |
| TOTAL | | |
| Vacations and Holidays | | |
| Travel Tickets | | |
| Hotels | | |
| Food | | |
| Entertainment | | |
| Auto | | |
| Other | | |
| TOTAL | | |
| Charitable Contributions | | |
| | | |
| | | |
| | | |
| TOTAL | | |
| Reinvested Dividends/Distributions | | |
| | | |
| | | |
| TOTAL | | |

Personal Budget

| | MONTHLY | ANNUAL |
|---------------------------------|---------|--------|
| Gifts | | |
| Holidays | | |
| Birthdays | | |
| Weddings | | |
| Other | | |
| TOTAL | | |
| Pets | | |
| Food | | |
| Veterinarian | | |
| Other | | |
| TOTAL | | |
| Miscellaneous | | |
| Support/Alimony | | |
| Personal Computer | | |
| Other | | |
| TOTAL | | |
| Life Insurance | | |
| Policy 1 | | |
| Policy 2 | | |
| Policy 3 | | |
| Policy 4 | | |
| TOTAL | | |
| Long-term Care Insurance | | |
| Policy 1 | | |
| Policy 2 | | |
| TOTAL | | |

Personal Budget



Notes:

Handwriting practice lines consisting of 20 horizontal dotted lines.



Financial planning services offered through investment adviser representatives of MML Investors Services, LLC
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