

Net Worth Statement

Client Information

| | | |
|------|---------|------|
| Name | Address | Date |
|------|---------|------|

ASSETS

LIABILITIES

Savings and Non-Registered Investments

| | <i>Cost</i> | <i>FMV</i> |
|----------------------------|-------------|------------|
| Checking account: | _____ | _____ |
| Saving Account: | _____ | _____ |
| Life Insurance Cash Value: | _____ | _____ |
| Stocks: | _____ | _____ |
| GICs: | _____ | _____ |
| Bonds: | _____ | _____ |
| Mutual Funds: | _____ | _____ |
| Receivables: | _____ | _____ |
| Other Investment: | _____ | _____ |

Retirement Assets

| | | |
|------------------------|-------|-------|
| RRSP: | _____ | _____ |
| RIF Plans: | _____ | _____ |
| Employer Pension Plan: | _____ | _____ |
| Other: | _____ | _____ |

Personal Property

| | | |
|------------------------|-------|-------|
| Home: | _____ | _____ |
| Recreational Property: | _____ | _____ |
| Other Real Estate: | _____ | _____ |
| Vehicles: | _____ | _____ |
| Personal Valuables: | _____ | _____ |

Total Assets: _____

Personal Debt

| | | |
|--------------------|-------|--------------------------|
| Mortgage on home: | _____ | <input type="checkbox"/> |
| Other Mortgages: | _____ | <input type="checkbox"/> |
| Credit Cards: | _____ | <input type="checkbox"/> |
| Personal Loans: | _____ | <input type="checkbox"/> |
| Income Tax Owning: | _____ | <input type="checkbox"/> |
| Other Debt: | _____ | <input type="checkbox"/> |

Investment Debt

| | | |
|-------------------|-------|--------------------------|
| Investment loans: | _____ | <input type="checkbox"/> |
| RRSP Loans: | _____ | <input type="checkbox"/> |
| Business Loans: | _____ | <input type="checkbox"/> |
| Other Loans: | _____ | <input type="checkbox"/> |

Total Liabilities: _____

*Interest
Deductible*

| | | |
|--------------------|------------|-------|
| | <u>FMV</u> | |
| Total Assets: | \$ | _____ |
| Total Liabilities: | \$ | _____ |
| Net Worth: | \$ | _____ |

Notes
