

# Assets

*Owned by:*

	Self	Spouse	Joint	Total
<b>LIQUID ASSETS</b>				
Cash and chequing A/C	\$ _____	\$ _____	\$ _____	\$ _____
Savings A/C	\$ _____	\$ _____	\$ _____	\$ _____
Short-term deposits	\$ _____	\$ _____	\$ _____	\$ _____
Treasury Bills	\$ _____	\$ _____	\$ _____	\$ _____
Canada/Quebec Savings Bonds	\$ _____	\$ _____	\$ _____	\$ _____
Cash value of life insurance	\$ _____	\$ _____	\$ _____	\$ _____
Other _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL LIQUID ASSETS:</b>	\$ _____	\$ _____	\$ _____	\$ _____
<b>INVESTMENT ASSETS</b>				
Term deposits and GICs	\$ _____	\$ _____	\$ _____	\$ _____
Company savings plan	\$ _____	\$ _____	\$ _____	\$ _____
Bonds	\$ _____	\$ _____	\$ _____	\$ _____
Preferred stocks	\$ _____	\$ _____	\$ _____	\$ _____
Common stocks	\$ _____	\$ _____	\$ _____	\$ _____
Mutual funds	\$ _____	\$ _____	\$ _____	\$ _____
Options/commodities	\$ _____	\$ _____	\$ _____	\$ _____
Real estate (excluding principal residence)	\$ _____	\$ _____	\$ _____	\$ _____
Tax shelters	\$ _____	\$ _____	\$ _____	\$ _____
Collectibles	\$ _____	\$ _____	\$ _____	\$ _____
Other _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL INVESTMENT ASSETS:</b>	\$ _____	\$ _____	\$ _____	\$ _____
<b>PERSONAL ASSETS</b>				
Principal residence	\$ _____	\$ _____	\$ _____	\$ _____
Furnishings	\$ _____	\$ _____	\$ _____	\$ _____
Vehicles	\$ _____	\$ _____	\$ _____	\$ _____
Other _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL PERSONAL ASSETS:</b>	\$ _____	\$ _____	\$ _____	\$ _____
<b>RETIREMENT ASSETS</b>				
Registered Pension Plans	\$ _____	\$ _____	\$ _____	\$ _____
Registered Retirement Savings Plans	\$ _____	\$ _____	\$ _____	\$ _____
Deferred Profit Sharing Plans	\$ _____	\$ _____	\$ _____	\$ _____
Other _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL RETIREMENT ASSETS:</b>	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL ASSETS (A)</b>	\$ _____	\$ _____	\$ _____	\$ _____

# Liabilities

	Self	Spouse	Joint	Total
<b>SHORT-TERM OBLIGATIONS</b>				
Credit cards	\$ _____	\$ _____	\$ _____	\$ _____
Personal loans	\$ _____	\$ _____	\$ _____	\$ _____
Borrowing on life insurance	\$ _____	\$ _____	\$ _____	\$ _____
Accrued income taxes	\$ _____	\$ _____	\$ _____	\$ _____
Other _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL SHORT-TERM OBLIGATIONS:</b>	\$ _____	\$ _____	\$ _____	\$ _____
<b>INVESTMENT LOANS</b>				
Tax shelters	\$ _____	\$ _____	\$ _____	\$ _____
Bank loans	\$ _____	\$ _____	\$ _____	\$ _____
Broker loans	\$ _____	\$ _____	\$ _____	\$ _____
Other _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL INVESTMENT LOANS:</b>	\$ _____	\$ _____	\$ _____	\$ _____
<b>PERSONAL ASSET LOANS</b>				
Mortgage(s) on personal residence	\$ _____	\$ _____	\$ _____	\$ _____
Auto loan	\$ _____	\$ _____	\$ _____	\$ _____
Other _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL PERSONAL LOANS:</b>	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL LIABILITIES (B)</b>	\$ _____	\$ _____	\$ _____	\$ _____
<b>NET WORTH (A - B)</b>	\$ _____	\$ _____	\$ _____	\$ _____

# Annual Expenses

Expense	Current	Future
<b>Food</b>	\$	\$
meals at home		
eating out		
<b>Shelter</b>		
rent / mortgage / condo fees		
property taxes		
property insurance		
water and sewage		
heating		
hydro		
cleaning / maintenance		
telephone		
cable / internet		
<b>Clothing</b>		
new purchases		
laundry / dry cleaning		
<b>Transportation</b>		
car lease or loan payments		
gas		
maintenance / repairs		
car insurance		
parking / tolls		
car registration and permits		
public transit		
<b>Health care</b>		
dental		
medication		
health insurance		
glasses, contact lens, hearing aids		
other		
<b>Personal care</b>		
cosmetics / toiletries		
hairdressing / other		

<b>Expense</b>	<b>Current</b>	<b>Future</b>
	<b>\$</b>	<b>\$</b>
<b>Recreation</b>		
hobbies and sports		
club memberships		
travel		
cultural / sporting events		
activities and summer camps for children		
reading material		
<b>Pet care</b>		
food		
veterinary / medical insurance		
<b>Tobacco</b>		
<b>Alcohol</b>		
<b>Allowances</b>		
children		
alimony / child support		
<b>Donations</b>		
<b>Gifts</b>		
birthdays		
annual holidays		
<b>Other insurance</b>		
life insurance premiums		
disability insurance		
umbrella liability		
critical illness / long-term care		
travel medical coverage		
<b>Daycare</b>		
<b>Other expenses</b>		
<b>Savings</b>		
RRSP contributions		
children's education		
other		
<b>Total annual expenses</b>		