



Financial Health Check

Name: _____

Date: _____

Current Financial Position

Assets

House _____

Rental Properties _____

Vehicles _____

Bank Accounts _____

Term Deposits _____

Shares _____

Managed Funds _____

Business Assets _____

Superannuation Balance _____

Other - _____

Other - _____

Total Assets _____

Liabilities

	Repayments (\$)	Frequency	Balance
Mortgage #1 at %	_____	_____	_____
Mortgage #2 at %	_____	_____	_____
Other Loan at %	_____	_____	_____
Other Loan at %	_____	_____	_____
Credit Cards - average balance	_____	_____	_____
Other - Business Debts	_____	_____	_____
Other -	_____	_____	_____

Total Liabilities

Net Assets/Liabilities _____

Income/Savings

	You	Partner
Current Annual Salary	_____	_____
Investment Income	_____	_____
Super Contributions per year (employer & personal)	_____	_____
Savings Capacity (per month)	_____	_____
At What Age do You Plan to Retire?	_____	_____
How Much do You Want to Retire On? (per Year in Today's \$)	_____	_____
Do you believe your current rate of progress will achieve your financial objectives? (Y/N)	_____	_____



