ABC Financial Planning Pty Ltd
Australian Financial Services Licence 123456
ABN 12 345 678 910

Fact Find

Client Name: Peter + CARLY Richards

Date of Interview: 15th September 2015

IMPORTANT NOTICE TO CLIENTS

The Corporations Law requires that an advisor making investment recommendations must have reasonable grounds for making those recommendations. This means that an advisor must conduct an appropriate investigation as to the financial objectives, situation and particular needs of the clients. The information requested in the form is necessary to enable recommendations to be made and will be used solely for that purpose. We accept no liability for any advice given on the basis of inaccurate or incomplete information.

PERSONAL DETAILS

Client 1		Client 2	
Title	MR	Title:	MRS
Given Names:	Peter.	Given Names	CARLY
Preferred Name:	Peter	Preferred Name:	CARLY
Surname:	Richards	Surname:	Richards
Age:	34 DOB: 19/6/81	Age:	32 DOB: 26/11/82
Sex:	M.	Sex:	F
Marital Status:	Married	Marital Status:	Married
Home Telephone:	(03) 98426760	Home Telephone:	(03) 98426760
Work Telephone:	88267000	Work Telephone:	—
Mobile:	0417 584166	Mobile:	0418 696066
Fax:	—	Fax:	—
Email:	petrich@bigpond.com	Email:	carrich@bigpond.com.

Home Address: 43 Flight Rd

Suburb/Town: Surrey Hills State: Vic Postcode: 3127

Years at this address: 10.

If less than 3 years – Previous Address: ____

Postal Address (if different): As Above

Home Insurance:

Insurance Company: Allianz Insured Amount: 550,000 Policy Number: A124689

DEPENDANTS/CHILDREN

Name: Melissa . DOB: 25/10/2010 Age: 4 ~~Occupation~~/School Kinder.

Name: David DOB: 3/3/14 Age: 2. ~~Occupation~~/School —

Name: ______ DOB: ________ Age: ________ Occupation/School ________

EMPLOYMENT DETAILS

Client 1		Client 2	
Position Title:	Faculty Marketing Manager	Position Title:	Student Advisor.
Employer Name:	RMIT.	Employer Name:	VICTORIA Uni
Industry/Type of Bus:	Tertiary.	Industry/Type of Bus:	Tertiary.
Employment Type:*	Employee.	Employment Type:*	Employee
Employment Status:*	Permanent.	Employment Status:*	Permanent
Work Address:	RMIT.	Work Address:	VICTORIA Uni
	124 LaTrobe St		300 Flinders St
Suburb/Town:	MELBOURNE.	Suburb/Town:	MELBOURNE.
State/Postcode:	Vic 3000	State/Postcode:	3000
Contact Name:	DR WEBB.	Contact Name:	—
Contact Number:	99252000	Contact Number:	—
Start Date:	21/3/2006	Start Date:	26/5/2005.

Currently on Maternity leave.

* Employment Type	=	Self Employed, Employee, Pensioner, unemployed
* Employment Status	=	Permanent, Part-time, Casual, Contractor, Other

INCOME

Client 1		Client 2	
Annual Income	$125k.	Annual Income	ϕ - (normally 70k)
Tax	$32k.	Tax	≈ 16k.

		Client 1	Client 2
At what age would you like to attain Financial Independence?		60	60.
How much income per annum will you need?	Net/Gross	$ 80k	$ 80k
Do you foresee any substantial changes to your income in the next five years?*		Yes/No	Yes/No
Are you contemplating leaving your current employer?*		Yes/No	Yes/No
On retirement do you intend to work on either a full or part time basis?*		Yes/No	Yes/No

(* If yes please provide details)

Carly will return to work at the start of 2017. (The children will go to creche + school)

BUSINESS ENTITIES

Company: ______

Trust: ______

Super Fund: ______

PROFESSIONAL ADVISERS

	Name	Address	Telephone
Accountant:	J+J Associate	Union Rd Surrey Hills	87293000
Solicitor	MGA Lawyers	Surrey Hills	84294100
Financial Adviser:			
Other (eg Bank Mgr):			

Authority to Contact ☑ Accountant ☑ Solicitor ☐ Financial Adviser ☐ Other

ESTATE PLANNING

Do you have a will?	☑ Yes ☐ No	☐ Yes ☑ No
Do you have power of attorney?	☐ Yes ☑ No	☐ Yes ☑ No
Is it up to date?	☐ Yes ☑ ~~No~~	☐ Yes ☐ No NA.
When was it last reviewed?	4 years ago	

FINANCIAL CONCERNS

YOUR CONCERNS

Mark each dotted line with a number:

Not concerned: 1 Slightly concerned: 2 Concerned: 3 Very concerned: 4

1 ☐ keep pace with inflation

2 ☐ Easy access to your cash

3 ☐ Easy to manage in progress

4 ☐ legal, logical appropriate tax relief

3 ☐ Income from your investment each year (when retired)

4 ☐ Capital Growth

LENDING PROFILE

What type of borrower are you? (Including your house loans)

Conservative (No borrowings) ☐ Moderately Aggressive (LVR – up to 80%) ☐

Moderately Conservative (LVR – up to 40%)	☐	Aggressive (LVR – over 80%)	☑
Balanced (LVR – up to 60%)	☐		

FINANCIAL RESOURCES

Are the following resources available in the construction of a strategic plan to achieve my financial objectives?

Home	☐ Yes	☑ No
Investment Properties	☑ Yes	☐ No
Other asset	☑ Yes	☐ No
Shares	☑ Yes	☐ No
Savings	☐ $_____ or ____%	☐ No
Other (eg cash funds to be used)	☐ $_____ or ____%	☐ No

??

CLIENT OBJECTIVES/ COMMENTS/ OTHER INFORMATION

* Pay of Debt asap.
* Go on an overseas trip within 2 years.
* Retire at 60 yrs of age.
* Buy an investment property
* Buy shares/ invest!
* Send the children to private schools.
* Purchase two new cars with 2-5 years

ASSETS AND LIABILITIES

Details	Owner	Date Acq. (approx)	Purchase Price	Current Market Value $	Liabilities $	Rent/Income per week
Home	BOTH.	31/11/05	490K	≈ 750K	≈ 280K	—

Other Property:						
Other Property:						
Other Property:						
Other Property:						
Other Property:						
Motor Vehicle Falcon.	Peter	11/1/04	25K	≈ 3K.	—	—
Motor Vehicle Mazda 3	Carly	1/8/09	26K	≈ 14K.	—	—
Cash Savings/Deposits *	Both			8,965		
Term deposit (12 months)	Carly	1/3/15.	500K	?		
Household Contents	Both	?		≈ 75K.	—	
Other Assets [redacted] 100. NAB Shares	Peter	6/7/07.	4032	?	—	
Business Loan						
Business Interest						
Insurance Cash Value						
Personal Loan						
Personal Loan						
Other Liabilities						
TOTALS						

BUDGET $

Do not have one?

LOAN/BORROWING DETAILS

Lender	Owner	Property used as security for loan	Lender product name	P&I or Int only	Year Started	Fixed or variable	Current Amount Outstanding	Loan Limit/ LOC	Current Interest Rate	Calendar Monthly Repayments
NAB	BOTH.	HOME.	MORTGAGE	P/I	11/05	VARIABLE	280K		5.43%	$2504.

CREDIT CARD DETAILS

Card Type	Owner	Credit Limit	Balance Owing	Balance Paid Monthly
NB VISA	Peter	14000	2000	All when due.
NAB VISA	Carly.	10000	200	

CURRENT INVESTMENTS

Description	Owner	Purchase Date	Purchase Cost	Maturity Date	Current Value	Annual Income

CASH SAVINGS/DEPOSIT DETAILS

Bank	Owner	Account Type	Amount
NAB CLASSIC.	BOTH	ATM Acc.	10,230
NAB Term	CARLY	TERM	5000

SUPERANNUATION DETAILS

Client 1 Peter.	Main Fund	Other Fund
Fund Name	Uni Super.	
Type of fund	High Growth	
Earliest Service Date (ETP)		
Contributions		
Super. G'tee. Charge/Levy	17%	
Other Employer Contributions		
Salary Sacrifice Contributions	—	
Personal (undeducted) Contributions	—	
Personal (deducted) Contributions	—	
Life Cover	150 k	
Current Value	≃350 k	
Transfer Value	—	
Policy Numbers	33 814	
Undeducted Amount	—	
Does Binding Nomination of Beneficiary Presently Apply?	No	

Client 2 Carly	Main Fund	Other Fund
Fund Name	Unisuper.	
Type of fund	Socially Responsible - H. Growth.	
Earliest Service Date (ETP)		
Contributions		
Super. G'tee. Charge/Levy	17%	
Other Employer Contributions		
Salary Sacrifice Contributions	—	
Personal (undeducted) Contributions	—	
Personal (deducted) Contributions	—	
Life Cover	60k.	
Current Value	≃ 280k	
Transfer Value	—	
Policy Numbers	33 293	
Undeducted Amount	—	
Does Binding Nomination of Beneficiary Presently Apply?	No	

EXISTING RISK INSURANCE COVER

Client 1 Peter Type of Cover	Life	TDP	Trauma	Income Protection
Life Insured Unisuper	Peter 150k	Peter. 150k	—	—
Policy Owner	Peter.			
Sum Insured	150k	150k		
Name of Company	Unisuper	Unisuper.		
Commencement Date	21/3/06 →			
Premium	Part of super.			
Premium Frequency				
Surrender Value	150k	150k		

EXISTING RISK INSURANCE COVER

Client 2 Type of Cover	Life	TDP	Trauma	Income Protection
Life Insured	Carly	Carly.		
Policy Owner	Carly →			
Sum Insured	60k	60k		
Name of Company	Unisuper	Unisuper		
Commencement Date	26/5/2005 →			
Premium	Part of super			
Premium Frequency				
Surrender Value	60k	60k		

RISK INSURANCE COVER

		Client 1	Client 2
1.a	If you were unable to work for a long period of time due to illness or an accident, what percentage of your current income would your family require to meet everyday living expenses and ongoing medical expenses? (max 75%)	75 %	— %
1.b	How long should the income in 1a continue for? (eg 2yrs, 5 yrs, to age 60 or age 65)	60 age/yrs	60 age/yrs
1.c	If you were unable to work due to accident or illness how long could you reasonably last without your income? (days)	20 days	10 days
2.a	In the event of your untimely death, do you wish to fund all debts and education costs from insurance?	☑ Yes ☐ No	☑ Yes ☐ No
2.b	In the event of your untimely death, how much income would you require for your family while children are still dependent, (assuming education costs and debt repayment have already been met? (month/year) Not Sure.	$ 7000pm	$ 5000pm. ?
2.c	In the event of your untimely death, how much income would your spouse require once the children are no longer dependent. (Assuming debt repayment has already been met)? (month/year)	$ As Above	$ As Above.
3.	What capital sum do you consider adequate to meet emergency major medical expenses? (lump sum)	$ 15K	$ 15K

RISK INSURANCE BACKGROUND

Health Considerations	**Client 1**	**Client 2**
Describe Current Health	☐ Excellent ☑ Good ☐ Poor	☑ Excellent ☐ Good ☐ Poor
Do you smoke?	☐ Yes ☑ No	☐ Yes ☑ No
Do you have any health problems?	☑ Yes ☐ No	☐ Yes ☑ No
Does your family have any history of health problems? (Parents, Siblings).	☑ Yes ☐ No	☐ Yes ☑ No

Notes: High Blood pressure for Peter.

TAX FILE NUMBERS

I give permission for Mou who is an Authorised Representative with Finesse Financial Planning Pty Ltd to retain my tax file number on my personal client file, and to disclose this information as necessary to other Financial Institutions with which I choose to do business. I understand this is the only purpose for which my tax file number will be used.

Tax File Number:	43979127X	Tax File Number:	846213289
Name:	Peter Richards	Name:	Carly Richards
Signature:	P Richards	Signature:	C Richards

CLIENT DECLARATION

Correct and Accurate Information

I/we have read and checked the information contained in this Fact Find document and confirm that it is accurate.
I/we acknowledge that if we have chosen not to disclose any information, or the information provided is incorrect, it could seriously affect the suitability of any recommendations provided,
The information set out in this form accurately represents my/our investment objectives, financial situation and particular needs.
I/we are not aware of any other information, which may be relevant to the preparation of my/our financial plan.
I/we understand that a financial plan/investment recommendation will be based solely on the information supplied in this fact find, and should be implemented within a period of one month.
I/we understand that if we do not proceed with the implementation of the financial plan within a month, that it will be necessary to review the information, which has been supplied before proceeding with the financial plan.

Financial Services Guide

I acknowledge that I have received a Financial Services Guide on Date: 15/9/15

Privacy

I acknowledge that I have received a Privacy Policy Statement.

Client 1:	Name: P. Richard	Signature P Richards	Date: 22/9/15
Client 2:	Name: C Richard.	Signature C Richards.	Date: 22/9/5.

ADVISOR'S DECLARATION

The information recorded in this document was provided during a discussion held on Date:

The client received a "Financial Services Guide" on Date:

Advisor Name ____________ Signature ____________ Date: ____________

Risk Profile Questionnaire

1. How do you rate your willingness to take financial risks?	☑ Average	☐ Less willing	☐ More willing
2. When you think of 'risk' in a financial context, which comes to mind first?	☐ Possible gains	☑ Could gain or lose	☐ Possible loss
3. How easily do you adapt when things go wrong financially?	☐ With ease	☑ Can adapt	☐ With difficulty
4. How much confidence do you have in your ability to make good financial decisions?	☐ I am not very confident about financial decisions	☐ I am very confident in my financial decisions	☑ I am reasonably confident in my financial decisions
5. If you had to choose between more job security with a small pay rise, or less job security and a big pay rise, which would you pick?	☐ I am not sure	☐ I'd take more job security & a small pay rise	☑ I'd take less job security & a big pay rise
6. When faced with a major financial decision, do you concentrate more on possible gains or possible losses?	☐ Usually, if not always, the gains	☐ Usually, if not always, the losses	☑ Usually the gains, but sometimes the losses.
7. Would you borrow money to make an investment?	☑ Possibly	☐ Yes	☐ No
8. How much of your investment portfolio would you be willing to place in an investment that you thought had the potential for high returns but *also* had the potential for large losses?	☑ Less than 10%	☐ More than 50%	☐ 25% to 35%
9. How big a loss across all your investments would have to occur before you began to feel uncomfortable?	☐ I would be uncomfortable by the time my losses reached 10%	☑ I would get uncomfortable when my losses were between 10% to 20%	☐ It would take losses of at least 25% before I became uncomfortable

10. This chart below shows the highest one-year gain and the highest one-year loss on three different hypothetical investments of $10,000.

Which one would you see as your preferred investment?

☐ I would pick Investment A	☑ I would pick Investment B	☐ I would pick Investment C