

Financial Overview Form

ADVISER

NAME

APPOINTMENT DATE

WHAT ARE THE REASONS FOR SEEKING OUR SERVICES?

Important notice to clients

The Australian Securities and Investment Commission (ASIC) requires that when an investment adviser provides an investment recommendation he or she must have reasonable grounds for making that recommendation. This means that the investment adviser must conduct an appropriate investigation of your financial situation and your particular needs and objectives. The information requested in this form is necessary to enable the adviser to make recommendations on a reasonable basis and will be used for that purpose.

HOW DID YOU COME ACROSS RISE FINANCIAL?

- | | |
|----------------------------------|-----------------------------|
| Google Search | Top 10 Adviser Website |
| TV Advertising | IFAAA Website |
| FPA Website | Adviser Ratings Website |
| Prompted by our Monthly Snapshot | Previous experience with us |
| Referred By Existing client: | |
| Referred By Other Professional: | |
| Other: | |

PRIVACY STATEMENT

Your personal information is collected for the purpose of providing you with financial planning advice. We need to conduct an appropriate investigation of your financial and personal situation and your particular needs and objectives to enable us to make recommendations to you on a reasonable basis. If you do not provide the information requested by us, we may not be able to provide you with the advice you require.

We may disclose information about you to other companies and other professional advisers, such as an accountant or solicitor, in the process of preparing our financial planning advice.

You are entitled to obtain access to the information collected by contacting your Rise Financial Pty Ltd adviser.

You need to be aware that if you provide information to Rise Financial Pty Ltd on behalf of another person, it is your responsibility to inform them of your disclosure and to make them aware that they may obtain access to their information held by Rise Financial Pty Ltd.

PRIVACY STATEMENT – YOUR ACKNOWLEDGMENT

I/We acknowledge that, by completing and authorising this overview, its contents are correct to the best of my/our knowledge and that its role is to enable Rise Financial Pty Ltd to undertake an initial assessment of my/our situation.

FINANCIAL SERVICES GUIDE – YOUR ACKNOWLEDGMENT

I/We also acknowledge that I/we have been provided with a financial services guide (FSG) prior to, or in the first stage of my/our initial meeting with my/our Rise Financial Pty Ltd adviser.

TAX FILE NUMBER – YOUR ACKNOWLEDGMENT

I/We acknowledge that where required Rise Financial Pty Ltd may keep my/our tax file number on record for the purpose of providing advice and dealing only.

SIGNATURE – YOUR ACKNOWLEDGMENT

I/We acknowledge that when completing this document electronically and where I/we do not have an electronic signature, by checking this box I/we acknowledge this as being digitally signed.

Client 1 Name:

Client 2 Name:

Date:

Date:

Signature:

Signature:

The above signature fields are for digital signatures or signing manually when printed.

Financial Overview Form (continued)

PERSONAL DETAILS

	Client 1					Client 2				
Title:	Mr	Mrs	Ms	Miss	Dr	Mr	Mrs	Ms	Miss	Dr
Surname:										
Given Names:										
Preferred Name:										
Marital Status:	Single	Married	De facto	Separated	Divorced	Widow(er)				
Any Former Partner/ Spouse Issues?:	yes	no				yes	no			
Date of Birth:				Age:				Age:		
Health Condition:	great	good	fair	poor	great	good	fair	poor		
Private Health Insurance:	yes	no				yes	no			
Smoker:	yes	no				yes	no			
Hobbies / Interests:										
Tax File Number (if necessary):										
Australian Resident (tax purposes):	yes	no				yes	no			

CONTACT DETAILS

	Client 1		Client 2	
Telephone (H):				
Telephone (W):				
Mobile:				
Email:				
Residential Address:				
Postal Address:				

CHILDREN

Sex	Name	Date of birth	Age	Dependent	
male	female			yes	no
male	female			yes	no
male	female			yes	no
male	female			yes	no
male	female			yes	no
male	female			yes	no
male	female			yes	no

EMPLOYMENT DETAILS

	Client 1		Client 2	
Employer Name				
Occupation				
Work Status	full time casual not working	part time: retired self-employed	full time casual not working	part time: retired self-employed

INCOME

	Client 1 Gross Per Annum	Client 2 Gross Per Annum
Gross Salary		
Reliable Bonus		
Super Pensions		
Dividends		
Rental		
Centrelink		
Child Support		
Other		
Total Income		
Tax Payable	(adviser to complete)	(adviser to complete)
Net Income	(adviser to complete)	(adviser to complete)
Combined	(adviser to complete)	

SUPERANNUATION CONTRIBUTIONS AND SALARY PACKAGING

	Client 1			Client 2		
Does your employer contribute to super?	no	SGC	other:	no	SGC	other:
Do you salary sacrifice into super?	no	yes:		no	yes:	
Do you make personal contributions to super?	no	yes:		no	yes:	
Do you salary package a car?	no	yes (pre-tax): (post-tax):		no	yes (pre-tax): (post-tax):	
Do you salary package a mortgage?	no	yes (pre-tax):		no	yes (pre-tax):	
Do you salary package living costs?	no	yes (pre-tax):		no	yes (pre-tax):	

SAVINGS CAPACITY

What income do you need to meet current living costs? (Budget next page)					
Any savings capacity?	no	yes	unsure	If yes, how much per year?	

BUDGET

It is a good idea to take the time to complete this Budget, to ensure you fully understand where your cashflow is being used. This is also useful in determining whether you have any cashflow surplus or savings capacity.

Expenses \$	Week	F/Night	Month	¼ Year	½ Year	Annual
Super Contributions – Client 1						
Super Contributions – Client 2						
Mortgage repayments						
Other loan / lease repayments						
Rent						
Child support payments						
Child care						
Private school / boarding fees						
Other:						
Core Spending Below						
Food / groceries						
Telephone / mobile phone						
Broadband						
Electricity						
Gas						
Council rates						
Water rates						
Clothing						
Education expenses						
After school activities						
Home maintenance / gardening						
Petrol and oil						
Motor vehicle maintenance						
Motor vehicle registration						
Motor vehicle insurance						
Commuting and travel costs						
Private health insurance						
Property & contents insurance						
Life, TPD, trauma insurance						
Income protection insurance						
Professional subscriptions						
Newspapers and magazines						
Alcohol and tobacco						
Entertainment						
Foxtel / netflix						
Charities and gifts						
Social club subscriptions						
Short trips and holidays						
Doctor / Dental						
Haircuts						
Other:						
Column Total						
	X 52	X 26	X 12	X 4	X 2	X 1
Annual Column Total						
Total Annual Expenses						

Core Spending (advisor to complete)

ASSETS & LIABILITIES

	Owner			Current value	Current liability
Lifestyle Assets					
Home:	Client 1	Client 2	Joint		
Holiday Home:	Client 1	Client 2	Joint		
Contents:	Client 1	Client 2	Joint		
Motor Vehicle 1:	Client 1	Client 2	Joint		
Motor Vehicle 2:	Client 1	Client 2	Joint		
Other:	Client 1	Client 2	Joint		
Other Entities					
Company/Family Trust:	Client 1	Client 2	Joint		
Investment Assets					
Cash:	Client 1	Client 2	Joint		
Term Deposits:	Client 1	Client 2	Joint		
Direct Shares:	Client 1	Client 2	Joint		
	Reinvest income?:	yes	no	Purchase year:	Cost price:
Managed Funds:	Client 1	Client 2	Joint		
	Reinvest income?:	yes	no	Purchase year:	Cost price:
Investment Property 1:	Client 1	Client 2	Joint		
	Rent:			Purchase year:	Cost price:
Investment Property 2:	Client 1	Client 2	Joint		
	Rent:			Purchase year:	Cost price:
Other:	Client 1	Client 2	Joint		
	Income:			Purchase year:	Cost price:
Other:	Client 1	Client 2	Joint		
	Income:			Purchase year:	Cost price:
Other Liabilities					
Personal Loans:	Client 1	Client 2	Joint		
Credit Cards:	Client 1	Client 2	Joint		
Store Cards:	Client 1	Client 2	Joint		
Other (ie HECS, ATO):	Client 1	Client 2	Joint		
Superannuation					
Fund:	Client 1	Client 2			Beneficiary:
Fund:	Client 1	Client 2			Beneficiary:
Fund:	Client 1	Client 2			Beneficiary:
Fund:	Client 1	Client 2			Beneficiary:
Fund:	Client 1	Client 2			Beneficiary:
Fund:	Client 1	Client 2			Beneficiary:
Totals					
Total Assets:					
Total Liabilities:					
Net Assets					

INSURANCES

Life, Total Permanent Disability (TPD) and Trauma

Life Insured	Insurer	Policy Type			Sum insured	Premium PA
Client 1 Client 2		Life	TPD	Trauma		
Client 1 Client 2		Life	TPD	Trauma		
Client 1 Client 2		Life	TPD	Trauma		
Client 1 Client 2		Life	TPD	Trauma		
Client 1 Client 2		Life	TPD	Trauma		
Client 1 Client 2		Life	TPD	Trauma		
Client 1 Client 2		Life	TPD	Trauma		
Client 1 Client 2		Life	TPD	Trauma		
Client 1 Client 2		Life	TPD	Trauma		

Income Protection

Life Insured	Insurer	Waiting period	Benefit period	Monthly benefit	Premium PA
Client 1 Client 2					
Client 1 Client 2					
Client 1 Client 2					
Client 1 Client 2					

General Insurances (home, contents, motor vehicle)

Policy owner	Insurer	Item(s) insured	Do you feel adequately insured?	Sum insured	Premium PA
Client 1 Client 2 Joint		Home Contents Car Other	yes no		
Client 1 Client 2 Joint		Home Contents Car Other	yes no		
Client 1 Client 2 Joint		Home Contents Car Other	yes no		
Client 1 Client 2 Joint		Home Contents Car Other	yes no		

ESTATE PLANNING

	Client 1		Client 2	
Do you have a will?:	yes	no	yes	no
Does it reflect your current wishes?:	yes	no	n/a	yes no n/a
Does it include a testamentary trust?:	yes	no	n/a	yes no n/a
Will location:				
Executor(s):				
Have you given a power of attorney?:	yes	no	yes	no
Type:	General	Enduring	General	Enduring
Granted to:				



OTHER INFORMATION

If planning your retirement, what age do you plan to retire?

If planning your retirement, what spending (in today's \$'s) do you desire in retirement?

What significant expenditures are you planning now and into the future? Eg: new car, renovations, a holiday every year during retirement.

Item	Amount \$	When? (Years)	How frequently?

How much money do you require to be available at short notice for unforeseen expenses?

Do you wish to leave an estate to family members or causes you support, have any potential beneficiaries requiring additional care or have a preference to exclude any person from your estate?

Do you expect to receive any lump sum monies in the future? If yes, when? (Eg: inheritance)

Are there any other lifestyle or financial objectives that you think are relevant, at this stage?

Do you have any firm priorities with respect to your financial planning? (Eg: retirement age, retirement spending level, pre-retirement spending level, use of borrowed funds, etc)

OTHER RELEVANT INFORMATION / PLANNER'S NOTES

OTHER PROFESSIONALS

	Accountant	Solicitor	Mortgage Broker	Other:	
Business name:					
Contact person:					
Contact details:					

Financial Overview Form (continued)

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