7650 Edinborough Way, Suite 100
Edina, MN 55435

For First Meeting **(please provide 5 business days ahead of mee**

***When available, statements are preferred over screen prints**

- ☐ **Client Agreement for service**
- ☐ **Authorization to Communicate form**
- ☐ **Credit Card Authorization form**
- ☐ **Client Questionnaire** *If you have completed a questionnaire similar to our form already, you may submit that instead.*
- ☐ **Bank Account Statement(s)** (checking, savings, money market, CD's, etc.)
- ☐ **Personal Investment Account Statement** (non-retirement accounts)
- ☐ **Kids Accounts** (529's, UTMA, joint bank accounts, etc.)
- ☐ **Retirement Plan Documents**
  - IRA's, 401k, 403b and etc.
  - Pension plan statements. Please provide a statement showing the monthly benefit assuming you terminate employment today. This is helpful to determine the marital monthly pension benefit since any service worked after the marriage is considered non-marital. This can usually be obtained online, from HR, or from the pension administrator.
- ☐ **Real Estate Information**
  - Current mortgage statement(s)
  - Current county tax statement(s)
  - Warranty deed or mortgage papers (something showing legal description other than county tax statement – usually found in your closing documents, attached to the deed, labeled "Exhibit A")
- ☐ **Debt Statements**. This includes credit cards, medical bills, and any other loans.
- ☐ **Vehicle Loan Statement(s)**
- ☐ **Vehicle Private Party Value from Kelly Blue Book (KBB.COM)**
- ☐ **NADA (NADA.COM) Book Values for RV's, Snowmobiles, Boats, Classic Cars, etc.**
- ☐ **Experian or Equifax Free Credit Report** from https://www.annualcreditreport.com (credit score is not required but helpful)
- ☐ **Business Tax Returns** (last three years)
- ☐ Any other information you feel would be helpful to understand your business
- ☐ **Current Profit Loss and Balance Sheet for the Business**
- ☐ **Current Pay Stubs** (last two)
- ☐ **Personal Tax Returns** (last 2 years)
- ☐ **Social Security Statement(s) -** Online at: http://ssa.gov/ or contact 1-800-772-1213
- ☐ **Existing Insurance Policy's** (Life/Disability/Long-term Care). It's important that we have information on the owner, insured, beneficiary, cash value, and annual premium.
- ☐ **Company Benefit Summaries** (if available)
- ☐ **Group Benefit and Insurance Information** from your employer
  - Life insurance summary of benefits
  - Disability insurance summary of benefits
  - Medical/Dental insurance - Provide the rates for Employee only, Employee + Children & Family coverage. Need from both spouses if eligible for benefits through an employer, even if coverage was waived. **If one spouse is not offered benefits through work, we will need COBRA rates from the employer of the spouse who covers the family on their benefits.**
- ☐ **Any other information that you feel might be pertinent**.

For Second Meeting (please provide 3 business days ahead of 2nd meeting)

Expenses	☐ **Completed 6-Month Historical Monthly Expenses.** (Available at ajwfinancial.com)
	Quick Tips: · If you have budget information available through an application like Mint or Quicken, you may send those reports · Most banks have historical checking/savings account data for download · If you have a budget in another format, let us review it as it may be just fine.