



above the line



Personal Financial Health Check Assessment



Our Financial Health Check is designed to assist you in gaining a snapshot of your current financial situation and highlight any areas that could benefit from more attention. Invest a few minutes in your financial future and celebrate the potential rewards for life.

Personal Details

All personal details are required for the successful creation of your report

Client 1

Title: Miss ☐ Ms ☐ Mrs ☐ Mr ☐ Other: _____
Given Name: _____
Surname: _____ DOB: ____ / ____ / ____
Occupation: _____ Phone: _____
Gross Annual Salary (Before Tax) : _____
Other Income: (Investments, etc.) \$ _____
E-mail: _____

Client 2

Title: Miss ☐ Ms ☐ Mrs ☐ Mr ☐ Other: _____
Given Name: _____
Surname: _____ DOB: ____ / ____ / ____
Occupation: _____ Phone: _____
Gross Annual Salary (Before Tax) : _____
Other Income: (Investments, etc.) \$ _____
E-mail: _____

Postal Address: _____

Marital Status: Please tick

☐ Single ☐ Defacto ☐ Married ☐ Partnered

Financial Dependents: Please tick

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4+

If something unexpected occurred, could you afford a housekeeper or nanny to look after the children?

☐ Yes ☐ No ☐ Not Sure ☐ Not Applicable

Estimated **monthly** Living Expenses: \$ _____

Joint Assets and Liabilities

Please complete the table below

| Component | Owner: • Name • Joint • Tenants in common | Approx Value \$ | Approx Debt \$ |
|----------------------------|---|-----------------------|----------------------|
| Property | | | |
| Principle residence (Home) | | | |
| Investment property 1 | | | |
| Investment property 2 | | | |
| Financial Investments | | | |
| Cash at bank | | | |
| Cash at bank | | | |
| Term Deposit | | | |
| Term Deposit | | | |
| Shares | | | |
| Shares | | | |
| Managed Funds | | | |
| Managed Funds | | | |
| Superannuation Client 1 | | | |
| Superannuation Client 2 | | | |
| Additional Liabilities | | | |
| Credit Card /s | | | |
| Car Loan | | | |
| Personal Loan | | | |

If additional space is required please attach a page to the back of this questionnaire.



Modoras was born from a passionate desire to develop liberating, life-long financial strategies for our clients. As a privately owned business, we are dedicated to ensuring that every client's path to financial freedom is laid down with clarity and confidence.

The Day-To-Day

Please tick one option per question

1. Do you save any money?

- ☐ Yes (please indicate below) ☐ No
☐ Not Sure

Approx. Savings \$_____ / Week / Fright / Mth / Yr

2. How well do you survive on your income?

- ☐ Fine, I/we can afford what I want, when I want and often have surplus left over. ☐ Okay, I/we can usually afford what I want, but don't always have money left over.
☐ Not so good. I/we struggle to pay bills and never have any money left over. ☐ I/We have no idea where my/our money goes.

3. What would you do if you needed money urgently?

- ☐ I/We could get it easily. ☐ I'd/We'd find it but it wouldn't be easy.
☐ I'd/We'd be in trouble; I/we wouldn't know where to get it from.

Fact.

There is a significant gender gap in personal savings and superannuation for women. Women have sixth-tenths the personal savings of men and only half the super of their male counterparts.

Source: Dr Simon Kelly, University of Canberra Associate Professor

Planning Ahead

4. Are you confident you have enough expertise to maximise your money's earning potential?

- ☐ Yes ☐ No ☐ Unsure

5. Has a qualified Financial Planner reviewed your financial position / investment portfolio / superannuation recently?

- ☐ Yes ☐ No ☐ Not Sure

Mortgage / Borrowing Sensibly

6. How are you coping with any loans / debts you have?

- ☐ I/We don't have any borrowings.
- ☐ No problems, I am / we are up-to-date with the mortgage and don't have any other loans or money outstanding on any cards.
- ☐ It's ok, I am / we are up-to-date with the payments on the mortgage, other loans and cards. I/We know how we will repay what we owe.
- ☐ It's hard to stay out of trouble. We sometimes miss payments on the mortgage, other loans or cards and I/we don't know how I/we will pay what is owed.
- ☐ I am / We are behind with the mortgage or have serious problems with other borrowings.

7. Do you think you'll have enough money to repay your mortgage when the time comes?

- ☐ Yes, we've made some plans and I'm confident we will provide enough money to pay off our mortgage.
- ☐ Not sure, I've/we've made some plans but are not sure they will provide enough money to pay off the mortgage.
- ☐ No – I don't know how we will pay off our mortgage.

Fact.

Making additional and /or larger lending repayments increases the actual cost of borrowing.

8. Do you feel your mortgage could be working smarter for you?

- ☐ Yes ☐ No ☐ Not Sure

9. Did you know you can utilise the equity in your home to create wealth?

- ☐ Yes ☐ No ☐ Not Sure

10. Did you know you can borrow money to increase the value of your investments?

- ☐ Yes ☐ No ☐ Not Sure



Estate Planning



11. Do you have a Will?

- ☐ Yes, last complete _____ (go to question 12) ☐ No (go to question 13)

12. Since your last will have you married, separated, divorced, become a parent or grandparent or loaned significant amounts to one child and not others?

- ☐ Yes ☐ No

13. Do you have an enduring power of attorney?

- ☐ Yes ☐ No

14. Do you have a testamentary trust and an Advance Health Directive in place?

- ☐ Yes, both a testamentary trust and Advanced Health. ☐ Yes, a testamentary trust directive.
☐ Yes, an advanced health directive. ☐ Neither
☐ Unsure

15. Do you know how your estate would be distributed if you died?

- ☐ Yes ☐ No ☐ Unsure

16. Have you nominated an executor for your will (with their agreement)?

- ☐ Yes ☐ No ☐ Unsure

17. Do the nominated beneficiaries of your super fund reflect your wishes?

- ☐ Yes ☐ No ☐ Unsure



Superannuation

18. How many super fund accounts do you currently have? (per client)

- ☐ 0 ☐ 1 ☐ 2 ☐ 3 or more

19. Do you manage your superannuation as an investment?

- ☐ Yes ☐ No ☐ Unsure

Retirement / Planning Future

20. What age do you plan to retire?

Retirement Age Client 1: _____

Retirement Age Client 2: _____

21. Could you continue your current lifestyle if your partner died tomorrow? (maintaining loan repayments and other expenses)

☐ Yes, we have it all organised. ☐ No, I don't know how I'd cope. ☐ Not Sure

22. What if your partner become unemployed? Would you be able to cope financially?

☐ Yes, I/we have it all organised. ☐ No, I don't know how I'd cope. ☐ Not Sure

23. How much do you think you will need each year in retirement (most need 60% of their pre-retirement income)

☐ Less than \$30,000 ☐ \$30,001 - \$45,000
☐ \$45,001 - \$60,000 ☐ More than \$60,000

24. Assuming 20 years in retirement, are you saving enough to live the lifestyle you deserve?

☐ Yes, we have it all organised. ☐ No, I don't know how I'd cope. ☐ Not Sure

25. Would it help to have a financial roadmap to follow?

☐ Yes ☐ No

Are you prepared for the unexpected?

26. Would your current insurances (including those within super) be enough to pay off debts and keep your family secure?

☐ Yes ☐ No ☐ Not Sure

27. Are you aware some types of insurance can be paid for cost-effectively as part of a super fund?

☐ Yes ☐ No ☐ Not Sure

Fact.

With regards to mortgage foreclosures:
For every home lost through fire, 4 are
lost through death and 48 are lost
through disablement.

Source: *mfc*



Are you prepared for the unexpected?

Please complete the table below. If you require an explanation of the terms used in this table, please ask one of our financial experts.

| Cover Type | Sum Insured | Comments / notes |
|------------------------------|-----------------------|--|
| Client 1 | | |
| Life | \$ | |
| Total & Permanent Disability | \$ | |
| Critical Illness | \$ | |
| Income Protection | \$ Monthly benefit | Waiting Period: <input type="text"/> Benefit Period: <input type="text"/> |
| Business Expenses | \$ | |
| Others | \$ | |
| Client 2 | | |
| Life | \$ | |
| Total & Permanent Disability | \$ | |
| Critical Illness | \$ | |
| Income Protection | \$ Monthly benefit | Waiting Period: <input type="text"/> Benefit Period: <input type="text"/> |
| Business Expenses | \$ | |
| Others | \$ | |

Other Comments

If there is any other information you would like to provide please do so below:

Congratulations, you have taken the first steps to realising your financial potential. Please note that the report produced as a result of this assessment is a snapshot and by no means a process that will result in the supply of personal financial advice.

Signatures

I/We approve for my/our information to be used by Modoras Financial Performance Group to produce a Personal Financial Health Check Report. I understand that the collection and use of my personal information is subject to the Modoras privacy policy.

Client Name: _____

Client Signature: _____

Date: _____ / _____ / _____

Client Name: _____

Client Signature: _____

Date: _____ / _____ / _____





MODORAS

Financial Performance Group

Phone 1300 888 803

Email info@modoras.com

Level 3, 50-56 Sanders Street

PO Box 6530 Upper Mount Gravatt Q 4122

www.modoras.com

PRIVACY POLICY: You are in receipt of this publication because you are a client of Modoras Pty Ltd, or you or someone you know may have requested you to be included on the publication's distribution list. If you no longer wish to receive this publication please let us know via mail to PO Box 6530 Upper Mt Gravatt Queensland 4122, or via telephone to (07) 3219 2555, or alternatively via email to info@modoras.com.

