

**Intracoastal Family Office
at**



Consumption Assessment

Intracoastal Family Office at Capital Guardian LLC

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Gather your personal and financial data

This first step involves estimating anticipated expenses and taking inventory of potential sources of income. You'll also want to collect information about your family situation, identify your investing approach, and rate your tolerance for risk – all of which can help shape your income plan.

PERSONAL INFORMATION

Name: _____

Male

Female

Date of Birth: _____

Retirement Age: _____

Include a partner or spouse in your plan? Yes No

Spouse/Partner's Name: _____

Male

Female

Date of Birth: _____

Retirement Age: _____

Identify existing and potential sources of income and assets

List the income sources you will use to fund your retirement, as well as any assets and accounts you may have that could be converted into income.

INCOME	DESCRIPTION OF SOURCES OF INCOME (including time frames)	MONTHLY INCOME	
		YOU	SPOUSE/PARTNER
Annual Income		\$	\$
Social Security		\$	\$
Pension Plans		\$	\$
Annuity Income		\$	\$
Rental Income		\$	\$
Other		\$	\$
Total Monthly Income		\$	\$

ASSETS

Where Assets

Stocks

Bonds

Short-Term

Invested

are Held	Securities	Assets
Employer-Sponsored Retirement Savings Plans	\$	\$
Traditional IRAs, Rollover IRAs, Roth IRAs	\$	\$
Taxable Mutual Funds, Individual Securities	\$	\$
Tax-Deferred Annuities	\$	\$
Savings Accounts, Checking Accounts, CDs	\$	\$
Other	\$	\$
TOTAL INVESTED ASSETS	\$	\$

Add'l Assets/Financial Events	Description of Sources of Income	Amount
Real Estate		\$ \$
Inheritance		\$ \$
Stock Options		\$ \$
Other		\$ \$
Total Retirement Savings, Investment, Other Assets		\$ \$

Personal and Family Expenses		
Category	Current	Alt 1 Retirement
Alimony		
Bank Charges		
Books/Magazine		
Business Expense		
Care for Parent/Other		
Cash-Miscellaneous		
Cell Phone		
Charitable Donations		
Child Activities		
Child Allowance/Expense		
Child Care		
Child Support		
Child Tutor		
Clothing-Client		
Clothing-Spouse		
Clothing-Children		
Club Dues		
Credit Card Debt Payment		
Dining		
Education		
Entertainment		
Gifts		
Groceries		
Healthcare-Dental		
Healthcare- Medical		
Healthcare- Prescription		
Healthcare- Vision		
Hobbies		
Household Items		
Laundry/Dry Cleaning		
Personal Care		
Personal Loan Payment		
Pet Care		
Public Transportation		
Recreation		
Self Improvement		
Student Loan Payment		
Vacation/Travel		
Other		

Home Expenses		
Category	Current	Alt 1 Retirement
First Mortgage		
Second Mortgage		
Equity Line		
Real Estate Tax		
Rent		
Homeowner's Insurance		
Association Fees		
Electricity		
Gas/Oil		
Trash Pickup		
Water/Sewer		
Cable/Satellite TV		
Internet		
Telephone (land line)		
Lawn Care		
Maintenance- Major Repair		
Furniture		
Household Help		
Other		

Care Giving Expenses		
Category	Current	Alt 1 Retirement
Aid(s)		
Nursing (Private Duty)		
Home Care		
Nursing Home Care		
Rehabilitative Therapy		
Social Needs Care		
Social Needs Equipment		
Travel and Related Expenses		
Specialized Transportation		
Other		



Personal Insurance Expenses		
Category	Current	Alt 1 Retirement
Disability for Client		
Disability for Spouse		
Life for Client		
Life for Spouse		
LTC for Client		
LTC for Spouse		
Medical for Client		
Medical for Spouse		
Umbrella Liability		
Other		

Vehicle Expenses		
Category	Current	Alt 1 Retirement
Loan Payment		
Lease Payment		
Insurance		
Personal Property Tax		
Fuel		
Repairs/Maintenance		
Parking/Tolls		
Docking/Storage		
Other		

Taxes		
Category	Current	Alt 1 Retirement
Client FICA		
Client Medicare		
Spouse FICA		
Spouse Medicare		
Federal Income		
State Income		
Local Income		
Other		

Vehicle Expenses		
Category	Current	Alt 1 Retirement
Loan Payment		
Lease Payment		
Insurance		
Personal Property Tax		
Fuel		
Repairs/Maintenance		
Parking/Tolls		
Docking/Storage		
Other		