



**CONFIDENTIAL / PRIVATE**

Please complete all fields and fax back to **0866 33 23 21** (Anton's personal inbox)

PERSONAL DETAILS	PRINCIPAL	SPOUSE
TITLE:		
FULL NAME AND SURNAME:		
MAIDEN NAME:		
ID NUMBER:		
INCOME TAX NO:		
SMOKER:	YES/NO	YES/NO
LANGUAGE:		
QUALIFICATION:		
OCCUPATION:		
GROSS INCOME P.A / PM:		
BASIC SALARY:		
NETT TAKE HOME PAY PM		
FRINGE BENEFITS:		
EMPLOYED / SELF EMPLOYED:		
SINGLE / MARRIED / DIVORCED:		
MARITAL TYPE:	COM OF PROPERTY / ANC / ACCRUAL	COM OF PROPERTY / ANC / ACCRUAL
DATE OF MARRIAGE:		

CONTACT DETAILS	PRINCIPAL	SPOUSE
WORK NUMBER:		
HOME NUMBER:		
FAX NUMBER:		
CELL NUMBER:		
WORK EMAIL ADDRESS:		
HOME EMAIL ADDRESS:		
PHYSICAL ADDRESS:		
POSTAL ADDRESS:		

CHILDREN FULL NAMES	GENDER	ID NUMBER

PARENTS FULL NAMES	GENDER	ID NUMBER	CONTACT NO

MEDICAL AID PROVISION	PRINCIPAL	SPOUSE
MEDICAL AID:		
SCHEME NAME / TYPE:		
MEDICAL CONDITION:		
MEDICATION:		

**DO YOU HAVE AN AUDITOR / TAX ADVISOR? YES / NO**

NAME OF AUDITOR AND FIRM:.....

CONTACT DETAILS:.....

# MY RISK NEEDS UPON: **DEATH SCENARIO TODAY**

## CAPITAL:

DEBT TO SETTLE	PRINCIPAL'S DEATH	SPOUSE'S DEATH
PRIMARY RESIDENCE	R	R
OTHER PROPERTIES	R	R
TRUSTS	R	R
VEHICLES	R	R
BUSINESS	R	R
OTHER	R	R
<b>FUNERAL ASSOCIATED COSTS</b>		
AVERAGE ON R 25 000	R	R
<b>ESTATE</b>		
SUGGESTION OF MIN R400 000	R	R
<b>TOTAL DEBT AMOUNTS TO:</b>	<b>R</b>	<b>R</b>

## INCOME:

IN ADDITION TO SETTLE DEBT OF THE ABOVE MENTIONED, I WOULD LIKE TO ENSURE THAT AN INCOME CAN BE PAID TO SUPPORT MY FAMILY FINANCIALLY:

INCOME TO MY FAMILY	PRINCIPAL TO FAMILY	SPOUSE TO FAMILY
AMOUNT PM BEFORE TAX		
TO PAY FOR HOW MANY YEARS		
GROW THE INCOME WITH CPI (INFLATION)	YES / NO	YES / NO

## EMPLOYEE BENEFITS:

### DEATH:

MY WORK CURRENTLY PROVIDES ME WITH R..... GROUP LIFE COVER.

### DISABILITY BENEFITS:

MY WORK CURRENTLY PROVIDES ME WITH R ..... DISABILITY CAPITAL COVER

OR THEY WILL PAY A DISABILITY INCOME OF R..... (USUALLY 75% OF GROSS)

MY WAITING PERIOD FOR DISABILITY INCOME IS ..... MONTHS. (USUALLY 3 - 6 MONTHS)

CONFIRM HERE THAT YOU WILL OR WILL NOT RECEIVE AN INCOME FROM WORK DURING THE ABOVE WAITING PERIOD. YES / NO

### RETIREMENT BENEFITS:

DO YOU BELONG TO A PENSION / OR / PROVIDENT FUND? YES / NO IF YES, WHAT IS THE FUND VALUE TODAY? R.....

EMPLOYER CONTRIBUTION TO ABOVE IS R.....PM OR a .....% OF WHAT? .....

EMPLOYEE CONTRIBUTION TO ABOVE IS R.....PM OR a .....% OF WHAT? .....

### WILL / TESTAMENT

DO YOU HAVE A WILL? YES / NO

IS YOUR WILL UP TO DATE? YES / NO

IF NOT, WOULD YOU LIKE US TO ASSIST YOU IN DRAFTING UP OF A WILL AT **NO COST** THROUGH THE MEADOW GROUP TRUSTEES?

YES / NO

COMMENTS: .....

# INVESTMENTS / MONEY MATTERS

## RETIREMENT NEEDS YES / NO

### NOTE:

WE ASSUME YOU HAVE NO DEBT AND THAT YOU COMBINE ALL TYPES OF "SAVINGS" AMOUNTS TO BE "LIQUIDATED" TO PAY AN INCOME

HOW MUCH INCOME BEFORE TAX IN TODAY'S VALUE, WOULD YOU LIKE TO RETIRE WITH?

R..... RETIREMENT FOCUSED FOR AGE 55 / 60 / 65 OR .....

EXTRA OTHER INCOME EARNED TODAY (EG RENTAL INCOME) ..... R.....

## EDUCATION SAVINGS YES/ NO

HOW MANY YEARS LEFT BEFORE YOU NEED THESE SAVINGS TO BE AVAILABLE / PAYOUT? .....YEARS (YOUR TERM OF INVESTMENT)

WHAT IS THE CURRENT SCHOOLING OR UNIVERSITY FEES? R.....

## EMERGENCY CASH FUND YES / NO

DO YOU HAVE A CASH FUND YES / NO

WHERE DO YOU CURRENTLY STORE YOUR CASH FOR EMERGENCIES OR DEPOSIT BUILD UP AND WHAT IS THE AMOUNT +/- TODAY?

.....AMOUNT IS CURRENTLY +/- R .....

WHAT IS YOUR CURRENT INTEREST ON YOUR MONEY IN ABOVE MENTIONED ACCOUNT OR METHOD? .....

HOW QUICKLY CAN YOU HAVE ACCESS TO THE ABOVE CASH? .....

## OTHER SAVINGS OPTIONS NOT MENTIONED THAT YOU MAKE USE OF AND WHY? YES / NO

## SERVICE FROM YOUR FINANCIAL PLANNER / BROKER

WHAT LEVEL OF SERVICE DO YOU NEED FROM YOUR ADVISOR? .....

A MEETING ONCE **OR** TWICE A YEAR

I would like to schedule an appointment with Anton du Preez Yes / No

## MY FINANCIAL/ LIFESTYLE NEEDS / WISHES AND CONCERNS ARE:

General Revision of my portfolio

Investment Options / Advice

Pension / Provident fund transfer

I want to pay less Tax

Medical aid options

Benefits for my company/employee

Retirement Planning

Education planning

Investment improvements for my Parents

Other.....

CLIENT/S SIGNATURE/S: \_\_\_\_\_ DATE: \_\_\_\_\_

The above information was supplied by me for attention Anton du Preez

BROKER TO SIGN HERE: \_\_\_\_\_ DATE: \_\_\_\_\_

OR

SHOULD YOU **NOT WANT TO PROVIDE YOUR FINANCIAL PLANNER OF THE MEADOW GROUP WITH THE ABOVE INFORMATION THEN PLEASE SIGN IT OFF DOWN BELOW HERE :**

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_