

## Financial Health Progress Sheet

Date: \_\_\_\_\_

What is your monthly Income: \$ \_\_\_\_\_

Additional Income: \$ \_\_\_\_\_

Checking Acct:  No  Yes Amount: \$ \_\_\_\_\_

Savings Acct:  No  Yes Amount: \$ \_\_\_\_\_

How much do you spend each month? \$ \_\_\_\_\_

How much do you save each month? \$ \_\_\_\_\_

Do you have a current savings plan?  Yes  No

Are you meeting your saving goals?  Yes  No

How do you save:  Savings Acct  Container  Parent/Spouse  Investment  Other

Do you have any Banking Issues?  Yes  No

If yes, what are they: \_\_\_\_\_

Do you know your credit score?  Yes  No

What is your Credit Score? \_\_\_\_\_

Do you check your credit score annually or more?  Yes  No

Pull Credit reports:  Experian  Equifax  Transunion

How many good standing accounts do you have on your credit report? \_\_\_\_\_

How many bad account are on your credit report? \_\_\_\_\_ Have you ever

disputed items on your credit report? \_\_\_\_\_ Are any currently being disputed?  Yes  No

Do you have Car Insurance:  Yes  No Health Insurance:  Yes  No Life Insurance:  Yes  No

Do you have enough to pay for your child(ren)'s education?  Yes  No If yes, how: \_\_\_\_\_

Are you paying for your children's education or are they? \_\_\_\_\_

Are you currently saving for retirement?  Yes  No How? \_\_\_\_\_

Once you retire, how much will you need monthly and annually to survive? \_\_\_\_\_

If you encounter a financial crisis, how will you increase your income? \_\_\_\_\_

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