

**CAPA Financial Services**  
**In Association with Smith Capital Financial Group**  
**28497 CA-74 #107, Lake Elsinore, CA 92530 | 877-489-7087**

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**PERSONAL FINANCIAL EVALUATION QUESTIONNAIRE**

1. Husband's Name \_\_\_\_\_ Other Names \_\_\_\_\_

2. Address \_\_\_\_\_ Email \_\_\_\_\_

3. Phone # (    ) \_\_\_\_\_ S.S. # \_\_\_\_\_

4. Occupation \_\_\_\_\_ Employer \_\_\_\_\_

5. Husband's Name \_\_\_\_\_ Other Names \_\_\_\_\_

6. Address \_\_\_\_\_ Email \_\_\_\_\_

7. Phone # (    ) \_\_\_\_\_ S.S. # \_\_\_\_\_

8. Occupation \_\_\_\_\_ Employer \_\_\_\_\_

9. Do either of you own Real Property? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, specify location, whether or not it is your principal residence. Give full legal description of property (attach an extra sheet of paper if needed or attach a copy of Trust Deed). Has the property been homesteaded? Yes \_\_\_\_\_ NO \_\_\_\_\_ If yes, specify county recorded in, date filed, document number (or attach a copy of homestead).

10. List below the current fair market value of the following items:

A. Household Furniture \$ \_\_\_\_\_

B. Personal Items (Clothing, jewelry, etc.) \$ \_\_\_\_\_

C. Books, Pictures, Collections. Etc. \_\_\_\_\_

D. Automobiles, trailers, other vehicles (SEE BELOW):

E. Principal Residence \$ \_\_\_\_\_

Auto: List year, make, model, license #, and market value:

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

Other Vehicles: List year, make, model license #, and value

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

11. List below any recreational or accessories, license #, market value, etc.

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

12. Do you have any livestock, poultry, farming supplies, etc.? If yes, specify type, location, and market value.

13. Do you have any office equipment, supplies, and furnishings? If so, give same details as above.

14. Do you have any machinery, fixtures, equipment (not already listed) and is it used in business? If yes, give details.

15. Do you have any inventory? If yes give details.

16. Do you have any tools of the trade? If yes, specify type, location, market value, etc.

17. Do you have any mobile homes, motor homes, travel trailers etc.? If yes, specify details as given in auto section.

18. Do you have any stocks and/or bonds? If yes, give details.

19. Type of income coming in:

	SOURCE	FREQUENCY	AMOUNT
a.	_____	_____	_____
a.	_____	_____	_____

c. \_\_\_\_\_ \$ \_\_\_\_\_  
 d. \_\_\_\_\_ \$ \_\_\_\_\_  
 e. \_\_\_\_\_ \$ \_\_\_\_\_

20. Do you have any annuities, royalties? If yes, give details:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

21. Do you expect to inherit anything of value within the next six (6) months? If yes, give details:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

22. Have you transferred any of your property, real or personal, to any creditor(s) within the last four (4) months? If yes, specify type, to whom, date of transfer, and disposition of property (if known).

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

23. List below any other types of property you have which has not previously been covered. This will include any types of lawsuits which you have pending against someone else, not against you. Specify type of suit, whom it is against, amount expected to receive, and date you expect to receive settlement.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

24. List below all addresses where you have lived in the last six (6) years. **Husband and Wife Together.**

From (Date)	To (Date)	Residence Address
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If Husband and Wife have not lived together for the last (6) six years, list below the other addresses. **HUSBAND**

From (Date)	To (Date)	Residence Address
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**WIFE**

From (Date)	To (Date)	Residence Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

25. Husband's Occupation \_\_\_\_\_  
Employer's Name \_\_\_\_\_ Date Started \_\_\_\_\_  
Address \_\_\_\_\_  
Phone ( ) \_\_\_\_\_

26. Wife's Occupation \_\_\_\_\_  
Employer's Name \_\_\_\_\_ Date Started \_\_\_\_\_  
Address \_\_\_\_\_  
Phone ( ) \_\_\_\_\_

27. Has Husband or Wife been self-employed in the last six (6) years? If so, specify type of business, locations(s), date started, and if applicable, date stopped.  
\_\_\_\_\_  
\_\_\_\_\_

**28. DEPENDENTS**

NAME	AGE	RELATIONSHIP	PAY SUPPORT	RECEIVE SUPPORT
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

29. List gross income, from employment only, in the past 2 years.  
20 \_\_\_\_\_ Husband \$ \_\_\_\_\_ / 20 \_\_\_\_\_ Wife \$ \_\_\_\_\_  
20 \_\_\_\_\_ Husband \$ \_\_\_\_\_ / 20 \_\_\_\_\_ Wife \$ \_\_\_\_\_

30. What type, of income has either of you received in the last two (2) years, other than from employment? For example: AFDC, Social Security, Disability, Retirement, Unemployment, and Workman's Compensation.

<u>Type</u>	<u>To Whom</u>	<u>Date Started</u>	<u>Date Stopped</u>	<u>Amount/freq.</u>
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____
c.	_____	_____	_____	_____
d.	_____	_____	_____	_____
e.	_____	_____	_____	_____

31. Have you received any tax refunds within the last 1 year? If yes, give date amount, and specify Federal or State.

32. Do you expect to receive a tax refund this year? If yes, specify date (approximate), amount, and specify Federal or State.

33. List below all bank, savings and loan, credit union, etc. accounts you have had within the last two (2) years.

<u>Bank Name</u>	<u>Location</u>	<u>Type</u>	<u>Acct. #</u>	<u>Balance</u>	<u>Date</u>	<u>Closed/Open</u>
a.	_____	_____	_____	_____	_____	_____
b.	_____	_____	_____	_____	_____	_____
c.	_____	_____	_____	_____	_____	_____
d.	_____	_____	_____	_____	_____	_____

34. Have you had any safe deposit boxes within the last (2) years? If Yes:

<u>Bank Name</u>	<u>Location</u>	<u>Box #</u>	<u>Opened</u>	<u>Closed</u>	<u>Authorized</u>
a.	_____	_____	_____	_____	_____
b.	_____	_____	_____	_____	_____
c.	_____	_____	_____	_____	_____

35. Have you kept any books/records of your monetary affairs in the last two (2) years? If yes, give details.

\_\_\_\_\_

\_\_\_\_\_

36. Who has possession of these books/records? (Name and Address)

\_\_\_\_\_

\_\_\_\_\_

37. Are they available? If no, explain why not.

\_\_\_\_\_

\_\_\_\_\_

38. Do you hold any property in trust for anyone? If yes, give details.

\_\_\_\_\_

\_\_\_\_\_

39. Have you ever filed Bankruptcy before? If yes, specify county filed in, date, case number, judge's name, trustee's name, type of Chapter, and if discharged or dismissed and the date of verdict.

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40. Is anyone else handling your money for you now? If yes, give details.

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41. Are there any lawsuits pending at this time (other than those you have pending against anyone else)? If yes, give name of Plaintiff, name/location of court, case #, amount being sued for.

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42. Have any lawsuits been terminated within the last year? (This will include any lawsuit against you or that you had against someone else). Specify Plaintiff(s), Defendant(s) name, name/location of court, case #, and date judgment was entered, amount judgment was awarded for.

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43. Have you either made any large (other than one normal regular monthly payment) payments to a creditor or paid an account off in full within the last year? If yes, give details including creditor's name, address, date and amount of payoff or large payment.

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## Personal financial evaluation income and expense statement

### Current Monthly Income

Petitioner's net monthly income \$ \_\_\_\_\_  
Spouse's Net Monthly Income \$ \_\_\_\_\_  
**Total: \$** \_\_\_\_\_

### Current Monthly Liabilities

Rent, Mortgage Prop. Taxes, Park Rent, Etc..... \$ \_\_\_\_\_  
Utilities: Water \_\_\_\_\_ Gas \_\_\_\_\_ Electric \_\_\_\_\_ Phone \_\_\_\_\_ ..... \$ \_\_\_\_\_  
Food and Household Supplies..... \$ \_\_\_\_\_  
Clothing..... \$ \_\_\_\_\_  
Laundry and Cleaning..... \$ \_\_\_\_\_  
Newspapers, Books and School Supplies..... \$ \_\_\_\_\_  
Medical and Dental..... \$ \_\_\_\_\_  
Auto Insurance..... \$ \_\_\_\_\_  
Other Insurance..... \$ \_\_\_\_\_  
Transportation Expense..... \$ \_\_\_\_\_  
Child Care..... \$ \_\_\_\_\_  
Entertainment..... \$ \_\_\_\_\_  
Alimony and Child Support..... \$ \_\_\_\_\_  
Union Dues and Taxes..... \$ \_\_\_\_\_  
Other..... \$ \_\_\_\_\_  
**Total: \$** \_\_\_\_\_

I/we, the petitioner(s) named in the foregoing petition, do hereby declare under penalty of perjury that the statements executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
At \_\_\_\_\_, California.

X \_\_\_\_\_

X \_\_\_\_\_

## Secured Creditors

16. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
17. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
18. Name			Address
State	Zip Code	Amount	Account No if available)
What is debt for?			When did you incur it?
19. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
20. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
21. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
22. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
23. Name			Address
State	Zip Code	State	Zip Code
What is debt for?			When did you incur it?



## Unsecured Creditors

16. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
17. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
18. Name			Address
State	Zip Code	Amount	Account No if available)
What is debt for?			When did you incur it?
19. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
20. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
21. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
22. Name			Address
State	Zip Code	Amount	Account No (if available)
What is debt for?			When did you incur it?
23. Name			Address
State	Zip Code	State	Zip Code
What is debt for?			When did you incur it?