

# WINTERS & KING, INC.

## Client Information

### Tell Us About Yourself

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

**Full Legal Name:** \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Work Phone: \_\_\_\_\_

County of Residence: \_\_\_\_\_ Email: \_\_\_\_\_

Length of Residence: \_\_\_\_\_ Date of Birth (mm/dd/yy): \_\_\_\_\_ SSN: \_\_\_\_\_

What Other Names Have You Used? \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Length of employment \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Job description \_\_\_\_\_

**Spouses Full Legal Name:** \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Work Phone: \_\_\_\_\_

County of Residence: \_\_\_\_\_ Email: \_\_\_\_\_

Length of Residence: \_\_\_\_\_ Date of Birth (mm/dd/yy): \_\_\_\_\_ SSN: \_\_\_\_\_

What Other Names Have You Used? \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Length of employment \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Job description \_\_\_\_\_

Do you have any dependants living with you? How many? \_\_\_\_\_

Do you owe any debt to Tulsa National Bank, Peoples State Bank, or Dr. M. Emami? Yes No.

### How did you hear of our firm?

Radio: KXOJ-100.9 / KNYD-Oasis Network / KYAL-Sports Animal

Phone Books: SBC-AT&T Yellow Pages-Tulsa / SBC Yellow Pages-Okmulgee Region

Windstream Broken Arrow / SBC-AT&T Yellow Pages-McAlester

SBC-AT&T Yellow Pages Southeastern Oklahoma Area

Okmulgee / Henryetta Area Telephone Directory

Referral of: \_\_\_\_\_ Other: \_\_\_\_\_

# WINTERS & KING, INC.

## Financial Check-Up Analysis

### Income Information Sheet

---

---

**TELL US ABOUT YOUR INCOME AND DEDUCTIONS:**

How many times per month are you paid (1, 2, 4)? \_\_\_\_\_

What is the Gross wage *per* pay check (before taxes)? \_\_\_\_\_

Payroll Deductions per pay period:

Payroll Taxes	Debtor	Spouse
FICA	_____	_____
FED	_____	_____
Medicare	_____	_____
Oklahoma	_____	_____
Total Taxes	_____	_____
Medical Insurance	.....	_____
Credit Union	.....	_____
Retirement/401K	.....	_____
Life Insurance		_____
Other	.....	_____
Net Pay Check per Pay Period	.....	_____

**TELL US ABOUT ANY OTHER INCOME:**

Monthly income from a Pension Fund? ..... \_\_\_\_\_

Monthly income from Social Security? ..... \_\_\_\_\_

Monthly income from SSI? ..... \_\_\_\_\_

Monthly income from Alimony? ..... \_\_\_\_\_

Monthly income from Child Support? ..... \_\_\_\_\_

Other Monthly income from \_\_\_\_\_ ..... \_\_\_\_\_

**WINTERS & KING, INC.**  
Financial Check-Up Analysis  
**Monthly Living Expense Information Sheet**

---

**TELL US ABOUT YOUR MONTHLY FAMILY LIVING EXPENSES:**

How much is your Rent or Mortgage per Month? ..... \_\_\_\_\_

Are real estate taxes included?      YES      NO

Is property insurance included?      YES      NO

What are your Average Monthly Utility Bills?

Electricity and heating fuel ..... \_\_\_\_\_

Water and sewer ..... \_\_\_\_\_

Telephone ..... \_\_\_\_\_

Cable ..... \_\_\_\_\_

Other ..... \_\_\_\_\_

How much do you spend monthly on home maintenance (Repairs and upkeep)? ..... \_\_\_\_\_

How much do you spend for food each month? ..... \_\_\_\_\_

How much do you spend for clothing each month? ..... \_\_\_\_\_

What is your monthly laundry and dry-cleaning bill? ..... \_\_\_\_\_

What is the average monthly medical and dental expenses? ..... \_\_\_\_\_

What is the average monthly transportation expense (do not include car payments)? ..... \_\_\_\_\_

Monthly average for recreation, clubs, entertainment, newspapers, magazines, etc.? ..... \_\_\_\_\_

Monthly charitable contributions? ..... \_\_\_\_\_

Insurance per month (not deducted from wages or included in mortgage payments)?

Homeowner's or renter's ..... \_\_\_\_\_

Life ..... \_\_\_\_\_

Health ..... \_\_\_\_\_

Auto ..... \_\_\_\_\_

Other ..... \_\_\_\_\_

Taxes average per month (not deducted from wages or included in mortgage payments) ..... \_\_\_\_\_

Installment payments

Auto: ..... \_\_\_\_\_

Other: ..... \_\_\_\_\_

Other: ..... \_\_\_\_\_

Monthly Alimony, maintenance, and support paid to others: ..... \_\_\_\_\_

Monthly Payments for support of additional dependents no living in your home: ..... \_\_\_\_\_

Regular expenses for operation of business, profession or farm per month: ..... \_\_\_\_\_

Other: (school, daycare, etc.) ..... \_\_\_\_\_

HOME MORTGAGES: If you have one or more home mortgage or land payments, list them here. If you own your house or land outright, list its value below. If you rent, mark "N/A" in the "Creditor" column below.

Creditor	Balance Owed	Monthly Payment	Amount Behind

How much do you think the house(s) would sell for today? \_\_\_\_\_

VEHICLES: If you own any cars, trucks, tractors, motorcycles, RV=s, boats, jet skis, etc., list them here, even if you own them outright.

Vehicle: Year/Make/Model	Balance Owed	Interest	Monthly Payment	Amount Behind

OTHER "SECURED" DEBTS: If you have a loan for the purchase of appliances, furniture, electronics, etc., list them here.

Creditor	Balance Owed	Monthly Payment	Amount Behind

PRIORITY DEBTS: If you owe federal, state or property taxes, or if you are past due on your child or spousal support, list them below.

Creditor	Balance Owed	Monthly Payment	Amount Behind	Tax Year(s)

ALL OTHER DEBTS: List all of your other debts here, including student loans, credit cards, medical debts, etc. Use the back of this page if you need more room. If any of these debts have a co-signer (other than spouse) place an asterisk (\*) next to them.

Creditor	Type of Debt	Balance	Monthly Payment

# WINTERS & KING, INC.

## Financial Check-Up Analysis

### Personal Property Questionnaire

PLEASE ANSWER THE FOLLOWING QUESTIONS ABOUT EVERYTHING YOU OWN:

CIRCLE ONE

1. How long have you lived in Oklahoma? \_\_\_\_\_
2. How long have you lived in your current county? \_\_\_\_\_
3. Have you ever been divorced? YES NO  
How Many Times \_\_\_\_\_  
When? \_\_\_\_\_
4. Are you responsible for paying child support or spousal support? YES NO  
If so, are you current on your payments? \_\_\_\_\_ If no, how much are you behind? \_\_\_\_\_
5. Do you own any minerals or royalties? YES NO
6. Do you own any land with anyone else other than your spouse? YES NO
7. Have you ever filed a bankruptcy before? YES NO  
If yes date filed \_\_\_\_\_. Place filed \_\_\_\_\_
8. Have any of your creditors filed a lawsuit against you? YES NO
9. Do any of your creditors have a judgment against you? YES NO
10. Are any of your creditors garnishing your wages or bank accounts? YES NO
11. Do you own a motor vehicle? YES NO  
How many? \_\_\_\_\_  
When did you purchase it? \_\_\_\_\_  
Did you borrow money to purchase it? YES NO
12. Do you own a camper, utility trailer or mobile home? YES NO
13. Do you have a motorcycle or 4-wheeler? YES NO
14. Do you have a boat or airplane? YES NO
15. Are there any liens on the title of your vehicles, trailer, mobile home, motorcycle,  
boat or airplane? YES NO
16. Do you own any animals or livestock other than cats & dogs? YES NO

- |   |     |    |
|---|-----|----|
| 17. Do you have any crops?  | YES | NO |
| 18. Do you have any farm equipment?   | YES | NO |
| 19. Have you now or in the past owned or operated any kind of business?                   | YES | NO |
| 20. Do you have any inventory?  | YES | NO |
| 21. Do you own any office equipment?  | YES | NO |
| 22. Do you have any tools or machinery?   | YES | NO |
| 23. Do you use the tools or machinery in your job or profession?                          | YES | NO |
| 24. In the next six (6) months, do you anticipate inheriting any property or money?       | YES | NO |
| 25. Do you have a pending personal injury or worker compensation law suit?                | YES | NO |
| 26. Do you have any coin, stamp, card or other collection?                                | YES | NO |
| 27. Do you need to file a lawsuit against anyone?   | YES | NO |
| 28. Do you own anything that we have not asked you about?                                 | YES | NO |
| 29. Do you have unexpired leases or uncompleted contracts?                                | YES | NO |
| 30. Do you have any co-debtors or co-signers?   | YES | NO |
| 31. Have you co-signed a debt for anyone else?  | YES | NO |
| 32. Have you filed all required State & Federal Tax Returns?                              | YES | NO |
| 33. Have you paid off any creditor in the last three months?                              | YES | NO |
| 34. During the last year have you made any payments to family members?                    | YES | NO |
| 35. Have you returned any property or had any property repossessed in the last year?      | YES | NO |
| 36. Have you given any property away during the last year?                                | YES | NO |
| 37. Have you lost any property from fire, theft, flood, or gambling during the last year? | YES | NO |
| 38. Have you transferred any property to anyone for any reason during the last year?      | YES | NO |
| 39. Have you given or pledged any property to anyone for security during the last year?   | YES | NO |
| 40. Have you closed a bank account during the last year?                                  | YES | NO |

41. Do you have a safe deposit box? YES NO
42. Does anybody owe you any money? YES NO
43. Do you have any property in your possession that belongs to someone else? YES NO
44. Have you moved in the last two years? YES NO

Date \_\_\_\_\_

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Signature