

—Confidential—QUESTIONNAIRE

CONFIDENTIAL QUESTIONNAIRE
Please complete by filling in your information below.

FAMILY INFORMATION						
Name (Spouse 1):			Name (Spouse 2):			
Date of Birth:			Date of E	Birth:		
Social Security Number:			Social Se	ecurity Number:		
Driver's License #:			Driver's License #:			
State: Issue Date: Exp Date:			State:	Issue Date:	Exp Date:	
If possible, please include copies of driver's license	es					
Name (Child 1):			Name (C	hild 2):		
Date of Birth:	Date of B	Birth:				
Social Security Number:			Social Se	ecurity Number:		
Name (Child 3):			Name (C	hild 4):		
Date of Birth:			Date of Birth:			
Social Security Number:			Social Security Number:			
Father's Name & Age:			Father's N	Name & Age:		
Mother's Name & Age:				Name & Age:		
Do they have special needs?	Yes	No	Do they have special needs? Yes			No
Are they in good health?	Yes	No	•	in good health?	Yes	No
Are they financially dependent?	Yes	No	Are they	financially dependent	? Yes	No
Home Address:			Mailing A	Address:		
Home Phone:			Home Ph	none:		
Cell Phone:			Cell Phone:			
E-mail:			E-mail:			
Referred By:			Referred By:			
Additional Information:						

OCCUPATION						
Job Title (Spouse 1):			Job Title (Spouse 2):			
Employer:			Employer:			
Target Retirement Date: Years Employed:			Target Retirement Date:			
			Years Employed:			
Work Address:			Work Address:			
NA/a d. Dl. a.a. a						
Work Phone:	Yes	No.	Work Phone: Are you changing employers? Yes No			
Are you changing employers? Are you a business owner?	Yes	No No	Are you changing employers? Yes N Are you a business owner? Yes N			
INCOME & ANNUAL SAVIN	G S	-				
Salary:			Salary:			
Other Income:			Other Income:			
Annual Savings (Qualified):			Annual Savings (Qualified):			
Annual Savings (Non-Qualified):			Annual Savings (Non-Qualified):			
RETIREMENT INCOME						
Social Security:			Social Security:			
Pension:			Pension:			
Cost of Living Adjustment? Yes No			Cost of Living Adjustment? Yes No			
Other Income:			Other Income:			
RETIREMENT ASSUMPTIONS						
Current Living Expenses:			Are you expecting any large lump sum payments in			
Retirement Living Expenses:			the future? (E.g. Sale of business, Inheritance, etc.)			
Desired Age of Retirement (Spou	ıse 1):		Year:			
Desired Age of Retirement (Spouse 2):			Amount:			
Desired Age of Retirement (Spouse 1): Desired Age of Retirement (Spouse 2):						
estred Age of Kettrement (spot						

REAL ESTATE & PERSC	NAL PROPER	TY			
Primary Residence Value: Mortgage Amount: Mortgage Rate: Mortgage Term: Date of Origination:	\$	Mor Mor Mor Dat	ondary Residence rtgage Amount: rtgage Rate: rtgage Term: e of Origination:	\$ \$	
Automobiles: Household Belongings: Art & Collectibles: Jewelry: Other Valuable	\$ \$ \$ \$	Savi	cking Account: ngs Account: tificate of Deposit: d/Silver Bullion:	\$ \$ \$	
LIFE INSURANCE	_	_	_	_	_
	Owner/Insured:	Beneficiary:	Death Benefit: \$	Cash Value: \$ \$ \$ \$ \$ \$	Premium: \$ \$ \$ \$ \$ \$
Please include copies of a your insurance needs. Is there any additional info insurance needs?			d above so that we	may better und	derstand

ASSETS				
	Investment Firm	n: SPO	USE 1:	SPOUSE 2:
Qualified Plans (401k, 403b, e	tc.)	\$		\$
	-	\$		\$
IRA	_	\$		\$
		\$		\$
Roth IRA		\$		\$
Nour no t		\$		\$
Brokerage (stocks, mutual funds, et	tr.)	\$		\$
Drokerage (stocks, mutual funus, et		\$		\$
Annuities		\$		\$
Amunes		\$		\$
Money Market/Other		\$		\$
Please provide copies of	account statements	s so that we may	review holdings	and performance
Are any of these assets he If so, please provide a co				
Are brokerage or money	market accounts he	eld jointly?		
Is there any additional inf			v regarding your a	ssets?
LIABILITIES				
	Rate:	Term:	SPOUSE 1:	SPOUSE 2:
Personal Loan Debt:			\$	\$
			\$	\$

LIABILITIES				
	Rate:	Term:	SPOUSE 1:	SPOUSE 2:
Personal Loan Debt:			\$	\$
			\$	\$
Credit Card Debt:			\$	\$
			\$	\$
All Other Debt:			\$	\$
			\$	\$
Is there any additional in liabilities?	nformation you	would like us to k	now regarding your	

PRIORITIZE YOUR GOALS SPOUSE 1 - Rank your top 6 goals from 1-6 ☐ Planning for Retirement ☐ Creating Retirement Income ☐ Saving for College ☐ Saving for Major Purchase ☐ Managing a Budget ☐ Maximizing Investments ☐ Minimizing Taxes ☐ Insuring Your Life ☐ Insuring Your Income ☐ Insuring Your Assets ☐ Providing a Legacy ☐ Caring for Parents ☐ Contributing to Charity ☐ Planning for a Business SPOUSE 2 - Rank your top 6 goals from 1-6 ☐ Planning for Retirement ☐ Creating Retirement Income Saving for College ☐ Saving for Major Purchase ☐ Managing a Budget ☐ Maximizing Investments ☐ Insuring Your Life ☐ Minimizing Taxes ☐ Insuring Your Income ☐ Insuring Your Assets ☐ Providing a Legacy ☐ Caring for Parents ☐ Contributing to Charity ☐ Planning for a Business

Are there any additional financial goals you would like us to know about or help you plan for?

RISK TOLERANCE QUESTIONNAIRE

1.	What is your investment expering none a little some	ence with stocks or stock mutual funds? a fair amount a great deal
2.	What is your investment expering none a little some	ence with bonds or bond mutual funds? a fair amount a great deal
3.	What is your primary investment retirement more current income	nt goal? saving for a major purchase other
4.	What do you expect to be your buying a house paying for college capitalizing a new business	next major expenditure? providing for retirement other
5.	How many years until this experience less than 5 years 5 to 10 years	ense is incurred? more than 10 years
6.	What are your major objectives current and future income preserving capital building wealth for heirs	
7.	When do you expect to use the investments? in less than 1 year in 6-10 years	bulk of the money you are accumulating in your in 1-5 years in 11 or more years
8.	Over the next several years, who do? stay about the same grow moderately grow substantially	at do you expect your household annual income decrease moderately decrease substantially
9.		nb back up then sell

on-going needs.	This typically tilts the end paying stocks. Ho	investment portfoli	current income to meet io toward alternatives, this describe your	
choose between on one of the thr	quitting with the \$10 ee scenarios below. Ney and run a 3 ce of winning a 1	,000 in hand or bet Which do you choo 30% chance of win	ning \$36,000	
changing your in 10% decline 15% decline 20% decline 25% decline 50% decline	vestment strategy, ass (portfolio value is \$90 (portfolio value is \$80 (portfolio value is \$80 or greater (portfolio v or greater (portfolio v age do you expect ou 8% - 10% 12% - 14%	suming you start wi 0,000) 5,000) 0,000) value is \$75,000 or value is \$50,000 or or portfolio to grow	less) less) annually over the long	ore
SIGNATURES				
SPOUS	F 1		SPOUSE 2	
Name (Print):		Name (Print):	5. 5 552 2	
Signature:	Date:	Signature:		Date: