## Confidential Client Information

## A. Personal Information

Today's Date: $\qquad$ 1

A1. Name: $\qquad$ Date of Birth: $\qquad$ 1 1

Address: $\qquad$ City: $\qquad$ State: $\qquad$
Zip: $\qquad$ Home Phone: $\qquad$ Cell: $\qquad$ E-mail: $\qquad$

A2. Marital Status: $\qquad$ Wedding Anniversary? $\qquad$ Spouse's Name: $\qquad$ Date of Birth: $\qquad$ 11
Children?
$\square$ YES
$\square$
NO

| Child's First Name | Age |  | Child's First Name | Age |
| :---: | :---: | :---: | :---: | :---: |
| 1. | 1 | 2. |  | 1 |
| 3. | 1 | 4. |  | 1 |

Primary's Mother: $\qquad$ Spouse's Mother: $\qquad$
Still Living - Age: $\qquad$ Still Living - Age: $\qquad$
Deceased at Age: $\qquad$ Deceased at Age: $\qquad$
Cause of Death: $\qquad$ Cause of Death: $\qquad$

Primary's Father: $\qquad$ Spouse's Father: $\qquad$

Still Living - Age: $\qquad$ Still Living - Age: $\qquad$
Deceased at Age: $\qquad$ Deceased at Age: $\qquad$
Cause of Death: $\qquad$ Cause of Death: $\qquad$

## B. Retirement Information Questionnaire

B1. Primary Retired? $\qquad$ Year: $\qquad$ Anticipated Retirement Year? $\qquad$
Employer: $\qquad$ Job Title: $\qquad$ \# of Years $\qquad$
Spouse Retired? $\qquad$ Year: $\qquad$ Anticipated Retirement Year? $\qquad$

B2. Do you have a Will? $\qquad$ Last Updated? $\qquad$
Power of Attorney for Health Care Decisions (HPCOA)? $\qquad$
Living Will? $\qquad$ Do you have a Trust? $\qquad$
Do you have An Attorney? $\qquad$ Name: $\qquad$
Do you have a Long Term Care policy? $\qquad$ Carrier: $\qquad$
Does it include Home Health Care? $\qquad$
Are you currently spending any interest income you receive from any investments? $\qquad$
What is your current annual income: \$ $\qquad$ Spouses annual income: \$ $\qquad$
Do either of you receive a pension? $\qquad$
What happens to it when you die? $\qquad$
Are you a Veteran? $\qquad$ Which War?

Are you or your spouse expecting any large sums of money or any future inheritance?$\square$ No

## C. Financial Future Planning

C1. Who is the most important person in your life? $\qquad$
What do you value most in your life? $\qquad$
What do you want to achieve before you leave this world? $\qquad$
Are there any children with special needs or circumstances to plan for? $\qquad$
What are your goals for the distribution of your Assets after you're gone? $\qquad$
What or how do you feel when the value drops on your investments? (1-10) $\qquad$
How do you feel or what do you think about the interest rate the bank is paying you on your savings? $\qquad$

## 

Do you ever think about or worry about living longer than your money might last? $\qquad$
How important is it to you to provide an inheritance to your children? (1-10) $\qquad$

Given a choice, would you want to minimize the interference of government and reduce the amount of your money the government gets when your children inherit the assets you leave behind? $\qquad$

Do you have any special relationship to your broker or banker? $\qquad$
What interest rate would you feel is a fair return? $\qquad$
What is your goal for retirement funds? Income Now or Growth now and Income Later? $\qquad$
At what age do you plan on needing income? $\qquad$

C2. Priority Issues or Concerns I would like addressed: (Check ANY and ALL that may apply)I want to protect my principal, reduce or eliminate some or eliminate some or all of my risk exposure and avoid losses from stock market declines and like the idea of locking in any gains I may receive each year?
$\square$ I do not like having my values go down due to fluctuations in the stock market.I want a better rate of return on my current CD's or my CD's that are due to mature.
$\square$ I need to address the issue of the pension dollars that will be lost at death due to survivorship options chosen when pension was started.
$\square$ I need to increase current income. (Monthly expenses are too close to our monthly income)/I want to reduce or eliminate the risk of running out of money. (I am concerned about the effects of inflation).I would like to look at my options for protecting against Long Term Care costs.Looking for ways to minimize the tax burden on my IRA when it passes to my children/grandchildren.Would consider consolidating and simplifying my investments.Would like to look at ways to increase the inheritance to our children/grandchildren or charity.Would like to find ways to reduce and pay less income tax.Other Issues not listed above that you would like to address?

## $3 \mid$ Confidential Client Information

## D. Financial Information

D1. Current Life Insurance In Force:

| Company | Type | Face Amount | Cash Value | Premium | Insured | Beneficiary |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |

D2. Current Resources:

| Type of Account | Name on Acct. | IRA? | Current Value | Int. Rate Maturity | Issue Date |
| :--- | :--- | :--- | :--- | :--- | :--- |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| 5. |  |  |  |  |  |
| 6. |  |  |  |  |  |
| 7. |  |  |  |  |  |
| 8. |  |  |  |  |  |
| 9. |  |  |  |  |  |
| 10. |  |  |  |  |  |
| 11. |  |  |  |  |  |
| 12. |  |  |  |  |  |

D3. Income/Expense Info:

| Source of Income | Income (Primary) | Income (Spouse) |
| :--- | :--- | :--- |
| Social Security |  |  |
| Pension |  |  |
| IRA (RMD yes no) |  |  |
| Annuity Income |  |  |
| Interest Income (Bank. CD's) |  |  |
| Dividend Income |  |  |
| Rental Income |  |  |
| Employment Income |  |  |
| Other Income: |  |  |
| Total Monthly Household Income $=$ |  |  |
| Total Monthly Household Income $=$ |  |  |
| (Minus) Estimated Monthly Expenses - |  |  |
| (Equals) Est. Discretionary/Excess Income $=$ |  |  |

## E. Personal Finance Preferences Information

E1. Do you feel that your current income is adequate to meet your needs? Yes No
If not approximately how much more monthly income do you feel is needed? $\qquad$
Please circle the most appropriate number that best described how you feel about taking risks with your \$.
$1=$ Conservative (I do not like to have any losses) $\quad 10=$ Aggressive (I'm a gambler/risk taker)
(First name)
12345678910

12345678910
(First name)
E2. General feelings about investing:
Financial Planning Summary / Objectives: Rate from 1 - 10

Protect My Principal from Losses:
Lock in my Gains Annually:
Concern about Outliving My Money:

12345678910
12345678910
12345678910

## 5|Confidential Client Information

Long Term Care Planning:
Increase Current Income:
Concern about effects of Inflation:
Planning for Children:
Charitable Giving:
Reduce Income Taxes:

12345678910
12345678910
12345678910
12345678910
12345678910
12345678910

## F. Conclusion and Follow Through

F1. Are there any other issues that would like us to address? $\qquad$

If I come back with some suggestions or recommendations that would improve your situation, and those recommendations make sense to you and I am able to answer all of your questions to your satisfaction, are you open to doing something else with some of your investments? $\qquad$
$\qquad$
$\qquad$

If I show you (\#1) how to protect your principal from losses; (\#2) Get higher guaranteed interest rates than you are currently earning; and (\#3) provide you with the ability to receive Income for Life, no matter how long you live; What will you do? $\qquad$
$\qquad$

Who else would be involved in the decision to optimize and / or protect your assets? $\qquad$
$\qquad$

Next Appointment: $\qquad$

