# *CONFIDENTIAL QUESTIONNAIRE for*

The purpose of this financial questionnaire is to assemble a summary view of your financial situation which we will use to ensure the best use of our time together. It is important to be thorough and list all your information to ensure that any options we discuss are appropriate for your unique situation. **All information is strictly confidential.**

## Personal and Family Information

| | | | |
|---|---|---|---|
| Your Full Name | Date of Birth | Birth Place / Citizenship | Social Security Number |
| e-mail Address | Work e-mail Address | | |
| Driver's License Number | State | Expiration | Issue Date |
| Spouse (Full Name) | Date of Birth | Birth Place / Citizenship | Social Security Number |
| e-mail Address | Work e-mail Address | | |
| Driver's License Number | State | Expiration | Issue Date |
| Child | Date of Birth | Birth Place / Citizenship | Social Security Number |
| Child | Date of Birth | Birth Place / Citizenship | Social Security Number |
| Child | Date of Birth | Birth Place / Citizenship | Social Security Number |
| Primary Residence Street & No. | City | State | Zip |
| Years at Residence / Street & No. (if less than 2 at primary) | City | State | Zip |
| Home Telephone | Emergency Telephone | Name | |
| Mobile Phone | Fax | | |

## Income

### Occupation, Income and Income Tax Rates

| | | | |
|---|---|---|---|
| Yours (Position) | Employer | | Work Phone |
| | Current Base Salary<br>$ | Annual Increase<br>% | Annual Bonus<br>$ |
| Spouse (Position) | Employer | | Work Phone |
| | Current Base Salary<br>$ | Annual Increase<br>% | Annual Bonus<br>$ |
| Current Effective Income Tax Rate<br>% | Retirement Effective Tax Rate<br>% | Expected Inflation Rate<br>% | Approximate Credit Score<br>Y: S: |

## Defined Benefits (Social Security, PERs, Railroad Pension, etc.)

| Benefit Provider | Annual Benefits | COLA | Percent Taxable | Benefit Start Age | Benefit End Age | Owner |
|---|---|---|---|---|---|---|
| | $ | % | % | | | |
| | $ | % | % | | | |
| | $ | % | % | | | |
| | $ | % | % | | | |

## Other Future Income or Assets (inheritance, sale of business, etc.

| Description | Anticipated Value | Event Age / Year | Owner / Payee |
|---|---|---|---|
| | $ | | |
| | $ | | |
| | $ | | |

## Assets

### Real Estate and Mortgages

| Purchase Date | Purchase Price | Current Market Value | Down Payment | Loan Origination Date | Original Loan Amount | Original Loan Term | Annual Interest Rate (%) | Loan Balance Remaining | Monthly Principal & Interest Payment |
|---|---|---|---|---|---|---|---|---|---|
| Primary Residence | $ | $ | $ | | $ | | % | $ | $ |
| 2nd Residence | $ | $ | $ | | $ | | % | $ | $ |
| Other Real Estate | $ | $ | $ | | $ | | % | $ | $ |
| Other Real Estate | $ | $ | $ | | $ | | % | $ | $ |
| Other Real Estate | $ | $ | $ | | $ | | % | $ | $ |

### Qualified Retirement Accounts (IRA, Roth, 401k, SEP, deferred comp, pension balances, etc.)

| Name / Type | Institution | Contributions or Withdrawals (/year) | Employer Match | Account Balance | Annual Return (%) | Owner |
|---|---|---|---|---|---|---|
| | | $ | $ | $ | % | |
| | | $ | $ | $ | % | |
| | | $ | $ | $ | % | |
| | | $ | $ | $ | % | |

| | | | | |
|---|---|---|---|---|
| | $ | $ | $ | % |
| | $ | $ | $ | % |

**Savings and Investment Accounts (cd's, securities, bonds, mutual funds, ETF's, annuities, etc.)**

| Name / Type | Institution | Contributions or Withdrawals (/year) | Account Balance | Cost Basis | Annual Return (%) | Owner |
|---|---|---|---|---|---|---|
| | | $ | $ | $ | % | |
| | | $ | $ | $ | % | |
| | | $ | $ | $ | % | |
| | | $ | $ | $ | % | |
| | | $ | $ | $ | % | |
| | | $ | $ | $ | % | |

**Liabilities**

**Installment Loans (auto, boat, RV, student/parent college, HELOC, etc.)**

| Type of Loan | Purpose | Monthly Payment | Interest Rate (%) | Months Remaining | Unpaid Balance |
|---|---|---|---|---|---|
| | | $ | % | | $ |
| | | $ | % | | $ |
| | | $ | % | | $ |
| | | $ | % | | $ |

**Revolving Credit Lines (credit cards, store charge cards, checking credit lines, etc.)**

| Type of Card / Issuer | Monthly Payment | Monthly New Charges | Interest Rate (%) | Unpaid Balance | Grace Period on New Charges |
|---|---|---|---|---|---|
| | $ | $ | % | $ | |
| | $ | $ | % | $ | |
| | $ | $ | % | $ | |
| | $ | $ | % | $ | |

## Protection

### Life Insurance (term, cash value)

| Company / Policy Type | Purchase Date | Annual Premium | Outstanding Loans | Current Cash Value | Death Benefit | Named Insured | Beneficiary |
|---|---|---|---|---|---|---|---|
| | | $ | $ | $ | $ | | |
| | | $ | $ | $ | $ | | |
| | | $ | $ | $ | $ | | |
| | | $ | $ | $ | $ | | |

### Other Insurance (auto, homeowners, renters, umbrella, health, disability, long term care, etc)

| Company / Policy Type | Purchase Date | Annual Premium | Deductible | Named Insured | Benefit / Coverages |
|---|---|---|---|---|---|
| | | $ | $ | | |
| | | $ | $ | | |
| | | $ | $ | | |
| | | $ | $ | | |
| | | $ | $ | | |
| | | $ | $ | | |
| | | $ | $ | | |

| Wills &/or Living Trust? | Date Last Reviewed: |
|---|---|

## Expenses

### Future Expenses (college, weddings, etc.)

| Description of Future Expense | Expense | Year | Payer |
|---|---|---|---|
| | $ | | |
| | $ | | |
| | $ | | |
| | $ | | |

**Additional Comments:** *(Other factors that could be important to your financial position.)*

Please bring to your first meeting:

- ☐ Paycheck Stubs
- ☐ Statements on all Investments / Securities
- ☐ Bank Statements
- ☐ Tax Return – most recent two years
- ☐ Insurance Policies
  - ☐ Medical ☐ Car ☐ Home Other: ☐
  - ☐ Life ☐ Umbrella ☐ Disability Income ☐ Other:
- ☐ Company Benefit Statement or Summary
- ☐ Company Benefit Booklet
- ☐ Social Security Earnings Statement
- ☐ Wills & Trust Documents

**DOCUMENT RECEIPT:**

*I have received the above checked documents for review and they will be kept confidential in a place of safe keeping.*

Representative Signature: _____ Date Received: _____

Representing: _____