

Date of Completion _____



CONFIDENTIAL QUESTIONNAIRE

Client Name (1):	_____	Client Name (2):	_____
Home Address:	_____	Home Address:	_____
City, State, Zip:	_____	City, State, Zip:	_____
Home Phone:	_____	Home Phone:	_____
Work Phone:	_____	Work Phone:	_____
Mobile Phone:	_____	Mobile Phone:	_____
Email Address:	_____	Email Address:	_____
Social Security #:	_____	Social Security #:	_____
Date of Birth: (MM/DD/YYYY)	_____	Date of Birth: (MM/DD/YYYY)	_____

Primary contact during business hours: _____

Family Members (please list children and other dependents.)

Name	Relationship	Date of Birth	Dependent		City and State
_____	_____	_____	Y	N	_____
_____	_____	_____	Y	N	_____
_____	_____	_____	Y	N	_____
_____	_____	_____	Y	N	_____

Client Employer (1)		Client Employer (2)	
Title/Job:	_____	Title/Job:	_____
Number of years with this employer:	_____	Number of years with this employer:	_____
Anticipated employment changes:	_____	Anticipated employment changes:	_____

When do you plan to retire:	_____	When do you plan to retire:	_____
Salary:	_____	Salary:	_____
Self Employment Income:	_____	Self Employment Income:	_____
Bonus/Commissions:	_____	Bonus/Commissions:	_____
Other Earned Income:	_____	Other Earned Income:	_____
TOTAL (Current Yr):	_____	TOTAL (Current Yr):	_____

Who prepares your tax return?

Contact Information:

Self	Y	N	Name	_____
Paid Preparer	Y	N	Address	_____
Accountant	Y	N	Phone	_____
			Fax	_____

Do you have estate planning documents?

Yes	No	Type	Date Prepared	In What State?
_____	_____	Wills	_____	_____
_____	_____	Living Trusts	_____	_____
_____	_____	Power of Attorney	_____	_____
_____	_____	Living Will	_____	_____
_____	_____	Other Documents	_____	_____

How were your current investment assets selected?

Indicate which of the following statements summarize your attitudes of beliefs using a scale of 1 to 3. (1 being MOST TRUE and 3 LEAST TRUE.)

Client 1	Client 2	Question
_____	_____	I would rather work longer than reduce my standard of living in retirement.
_____	_____	I feel that I/we can reduce our current living expenses to save more money for the future if needed.
_____	_____	I am more concerned about protecting my assets than about growth.
_____	_____	I prefer mutual funds over individual stocks and bonds.
_____	_____	I am comfortable with investments that promise slow, long term appreciation and growth.
_____	_____	I don't brood over bad investment decisions I've made.

- _____ I feel comfortable with aggressive growth investments.
- _____ I don't like surprises.
- _____ I am optimistic about my financial future.
- _____ My immediate concern is for income rather than growth opportunities.
- _____ I am a risk taker.
- _____ I make investment decisions comfortably and quickly.
- _____ I like predictability and routine in my daily life.
- _____ I usually pick the tried and true, the slow, safe but sure investments.
- _____ I need to focus my investment efforts on building cash reserves.
- _____ I prefer predictable, steady return on my investments, even if the return is low.

Rate your working relationships with each of the following advisors. (Mark Xs in the boxes that apply.)

	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	Not Applicable
Financial Planner						
Stock Broker						
Real Estate Broker						
Accountant						
Tax Preparer						
Attorney						
Insurance Agent-Life/Health						
Insurance Agent-Property/Auto						

INSURANCE

(Please mark an X if the policy applies to a group or individual.)

	Client 1			Client 2		
	Provider	Group	Individual	Provider	Group	Individual
Health	_____	_____	_____	_____	_____	_____
Disability	_____	_____	_____	_____	_____	_____
Disability	_____	_____	_____	_____	_____	_____
Life	_____	_____	_____	_____	_____	_____
Life	_____	_____	_____	_____	_____	_____
Life	_____	_____	_____	_____	_____	_____
Homeowners	_____	_____	_____	_____	_____	_____

Auto

Auto

**Umbrella
Liability**

**Professional
Liability**

**Long Term
Care**

Yes No

Have you ever been turned down for insurance?

ASSETS

(If you have this information in a format of your own design, please feel free to omit this section. Please attach the necessary documentation.)

Bank Accounts

Bank Name

Type of Account (checking, savings, money market)

Ownership

Average Balance

Attach a copy of your most current brokerage, mutual fund or retirement statements.

Please list below and estimate a value for any other investment assets not appearing on the list above or the statements provided:

PERSONAL PROPERTY

Estimated Value

Primary Residence

Furnishings (liquidation value)

Vehicle

Vehicle

Other

Other

LIABILITIES

Credit Cards	Interest Rate*	Average Monthly Payment	Current Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

* If not paid in full each month

Debts (Residence, Auto, Business, School)	Interest Rate	Payment	Current Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Yes No

Have you received a copy of your credit report recently? _____

Please comment on the advice you seek.

These items may be needed should you engage our services:

- | | |
|------------------------------------|--------------------------------|
| Prior Year Tax Return | Paycheck Stubs |
| Brokerage Account Statements | Mutual Fund Account Statements |
| Trust Account Statements | Employee Benefit Booklet |
| Retirement Plan Account Statements | Legal Documents |
| Loan Documents | Insurance Policies |

If you will be coming to your office for your financial consultation, please bring this completed form with you.

If we will be teleconferencing, please fax a copy to us in advance of our appointment.

Fax: 303.321.1242, Phone: 303.321.5844