

Confidential Questionnaire					
Personal/Background Information	Client 1			Client 2	
Name					
Address					
City, State, Zip					
Primary phone					
Mobile phone					
Email address					
Date of birth					
Marital status					
Date married					
Previously married? (if so, from when to when?)					
Primary contact for purposes of this plan			Preferred method (phone, email, etc.)		
Dependents (include names of children and any others who may rely on you for financial support)	Relationship	Date of birth	Currently residing where?	Tax exemption?	Any special needs that might impact your financial plan?
Health & Family History	Client 1			Client 2	
Are you a smoker?					
Is your health currently poor, average or exceptional?					
Have your family members lived short, average or long lives?					
Employment	Client 1			Client 2	
Status (Employed, retired, self-employed, homemaker, or in transition)					
Employer					
Position					
Date started with this employer					
Projected date of retirement or other career change					
Salary					
Bonus/commissions/other employment income					
Self-employment income					
Other income (trust, rental income, alimony, etc.)					
Concerns					
Money	Client 1			Client 2	
Not having a paycheck anymore					
Running out of money					
Suffering investment losses					
Leaving money to others					
Health	Client 1			Client 2	
Cost of health care or long term care					
Current or future health issues					
Dying early (self of significant other)					
Living too long					
Alzheimers or other illness					
Personal and Family	Client 1			Client 2	
Being bored					
Too much time together					
Parents needing care					
Something Else					
Other					

Your Goals	Client 1				Client 2			
Ideal retirement age								
Acceptable retirement age								
Willingness to retire later (very, somewhat, slightly, or not at all)								
Must both retire at same time?								
Financial Goals	Amount	Frequency (e.g. annually, every 5 years, 1 time)	Start date	Ending date	Assumed annual inflation	Priority 10-1 Client #1 (10 highest, 1 lowest)	Priority 10-1 Client #2 (10 highest, 1 lowest)	
Basic living expenses/yr. (ex. health care, mortgage & loan pmts)		Annually						
Health care costs (out-of-pocket, i.e. premiums, copays, deductibles, etc.)		Annually						
Mortgage payments carried into retirement (principal & interest only)								
Other loan payments carried into retirement								
Periodic home maintenance (roof, furnace, hot water heater, etc.)								
Major home improvement(s)								
Car replacements, car #1								
Car replacements, car #2								
College #1								
College #2								
College #3								
Gifts and donations								
New home (cost and approximate date)								
Second home (cost and approximate date)								
Wedding #1								
Wedding #2								
Wedding #3								
Major purchase(s)								
Provide care								
Start busintess								
Other Goal #1								
Other Goal #2								
Your Resources								
Sources of Retirement Income	Whose income is it?	Date income starts	Date income will stop	Gross amount of income/yr.	Inflation assumption (%)	Survivor benefit (if any)		
Social Security #1								
Social Security #2								
Pension #1								
Pension #2								
Pension #3								
Pension #4								
Part-time work #1								
Part-time work #2								
Rental income #1								
Rental income #2								
Other retirement income #1								
Other retirement income #2								
Other retirement income #3								

	Very unstable	Unstable	Somewhat stable	Stable	Very stable	
My current and future sources of income (such as salary, Social Security, pension) are...						
When it comes to investing in stock or bond funds (or individual stocks or bonds), I would describe myself as having...	Very little experience	Some but not much experience	Some experience	A meaningful amount of experience	Lots of experience	
What is the worst one-year drop in the value of an investment that you could tolerate without feeling that you had to sell it...	5%	10%	15%	20%	25%	30%
	35%	40%	45%	50%	55%	60%
What minimum average annual return would you consider acceptable for your investment portfolio over a long period of time, say 10 years or more?	4%	5%	6%	7%	8%	9%
	10%	11%	12%	13%	14%	15%
Documents to bring to initial meeting						
Complete statements for all retirement accounts	(including 401k, 403b, IRA, Roth IRA, health savings, etc.)					
Complete statements for all taxable bank and investment accounts	(including bank, brokerage, mutual fund, stock, etc.)					
Recent Social Security statements	(download from SSA.gov)					
Official benefit estimates for all defined benefit pensions	(including traditional pensions, cash balance plans, etc.)					
Statements for all outstanding loans	(excluding credit cards that are paid off each month)					
Recent pay statements	(for understanding of benefit plans and net cash flow)					
Statements for all insurance policies	(bring policies themselves if you are requesting analysis)					
Estate planning documents	(only if requesting services in this area)					