



CONFIDENTIAL PROFILE

This comprehensive, personal financial planning summary is designed to help you take inventory and assign realistic values to your personal assets and liabilities. It is the essential first step in organizing a sensible financial plan for your future. Once you have completed the following information, please return this packet in the enclosed, postage-paid envelope.

FAMILY INFORMATION

Your Name	Nick Name	DOB	Social Security # (Optional)
Spouse's Name	Nick Name	DOB	Social Security # (Optional)
Children's Names & Ages:			
1) _____	3) _____	5) _____	
2) _____	4) _____	6) _____	
Residence Address	City	State	Zip Code
Business Address	City	State	Zip Code
Home Phone	Cell	Fax	E-mail
Referred By _____	Client Name	<input type="checkbox"/> Brochure	<input type="checkbox"/> Web

OCCUPATION

Your Job Title	Employer (last, if retired)	# of Years	Work Phone	Retirement Date
Spouse's Job Title	Employer (last, if retired)	# of Years	Work Phone	Retirement Date

PERSONAL ADVISORS

Financial Advisor's Name: _____	Firm: _____
Do you have a preference or a commitment to this advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Attorney's Name: _____	Firm: _____
Do you have a preference or a commitment to this advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Accountant's Name: _____	Firm: _____
Do you have a preference or a commitment to this advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Insurance Agent's Name: _____	Firm: _____
Do you have a preference or a commitment to this advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Stockbroker's Name: _____	Firm: _____
Do you have a preference or a commitment to this advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	

What is important about money to you?

[illegible]

OBJECTIVES & CONCERNS

General:

Are you anticipating any major lifestyle changes?
(i.e., marriage, divorce, retirement, moving, college, etc.)

☐ Yes ☐ No ☐ Uncertain

If so, what changes are you expecting? _____

Are you comfortable with your current cash flow?

☐ Yes ☐ No ☐ Uncertain

Retirement Planning:

What minimum income will you need at retirement (in today's dollars)? \$ _____

If you plan on working after retirement, estimate your expected income: \$ _____

Are you contributing to an IRA?

☐ Yes ☐ No

Are you covered by any company retirement plans?

☐ Yes ☐ No

Type of company pension or profit sharing plan? _____

Protection:

Do you have adequate disability coverage?

☐ Yes ☐ No ☐ Uncertain

Do you have adequate personal liability coverage?

☐ Yes ☐ No ☐ Uncertain

Amount? \$ _____

Do you have enough life insurance?

☐ Yes ☐ No ☐ Uncertain

Do you have long-term care insurance for
nursing home expenses?

☐ Yes ☐ No ☐ Uncertain

Estate Planning:

Do you have current wills?

☐ Yes ☐ No ☐ Uncertain

Have you established any trusts?

☐ Yes ☐ No ☐ Uncertain

Are you the beneficiary of any trusts?

☐ Yes ☐ No ☐ Uncertain

Have you adequately considered estate taxes?

☐ Yes ☐ No ☐ Uncertain

Have you provided adequate estate liquidity for your heirs?

☐ Yes ☐ No ☐ Uncertain

Concerns:

Please list your current concerns: _____

RISK PROFILE

Please check the appropriate response for each question.

1. What is your investment experience with stocks or stock mutual funds?

- | | |
|-----------------------------------|--|
| <input type="checkbox"/> None | <input type="checkbox"/> A fair amount |
| <input type="checkbox"/> A little | <input type="checkbox"/> A great deal |
| <input type="checkbox"/> Some | |

2. What is your investment experience with bonds or bond mutual funds?

- | | |
|-----------------------------------|--|
| <input type="checkbox"/> None | <input type="checkbox"/> A fair amount |
| <input type="checkbox"/> A little | <input type="checkbox"/> A great deal |
| <input type="checkbox"/> Some | |

3. What is your investment goal?

- | | |
|--|--|
| <input type="checkbox"/> Retirement | <input type="checkbox"/> Saving for major purchase |
| <input type="checkbox"/> More current income | <input type="checkbox"/> Other _____ |

4. How many years do you have until retirement?

- | | |
|--|---|
| <input type="checkbox"/> Already retired | <input type="checkbox"/> 5 to 10 |
| <input type="checkbox"/> Less than 5 years | <input type="checkbox"/> More than 10 years |

5. What do you expect to be your next major expenditure?

- | | |
|---|---|
| <input type="checkbox"/> Buying a house | <input type="checkbox"/> Providing for retirement |
| <input type="checkbox"/> Paying for a college education | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Capitalizing a new business | |

6. How many years until this expense is incurred?

- | | |
|--|---|
| <input type="checkbox"/> Less than 5 years | <input type="checkbox"/> More than 10 years |
| <input type="checkbox"/> 5 to 10 years | |

7. What are your major objectives for your investments?

- | | |
|--|---|
| <input type="checkbox"/> Current and future income | <input type="checkbox"/> Keeping ahead of inflation |
| <input type="checkbox"/> Preserving capital | <input type="checkbox"/> Increasing returns |
| <input type="checkbox"/> Building wealth for heirs | |

8. When do you expect to use the bulk of the money you are accumulating in your investments?

- | |
|---|
| <input type="checkbox"/> At any time now in the coming months. Liquidity is highly important. |
| <input type="checkbox"/> In 1 to 5 years |
| <input type="checkbox"/> In 6 to 10 years |
| <input type="checkbox"/> In 11 to 20 years |

9. Over the next several years, do you expect your household annual income to:
- | | |
|--|---|
| <input type="checkbox"/> Stay about the same | <input type="checkbox"/> Decrease moderately |
| <input type="checkbox"/> Grow moderately | <input type="checkbox"/> Decrease substantially |
| <input type="checkbox"/> Grow substantially | |
10. I am expecting an inheritance of approximately \$_____ in
- | | |
|--|---|
| <input type="checkbox"/> 0 to 5 years | <input type="checkbox"/> 10 to 15 years |
| <input type="checkbox"/> 5 to 10 years | <input type="checkbox"/> More than 15 years |
11. Due to a general market correction, if one of your investments loses 25% of its value a short time after you buy it; what do you do?
- | |
|---|
| <input type="checkbox"/> Sell the investment |
| <input type="checkbox"/> Hold it and wait for it to climb back up then sell |
| <input type="checkbox"/> Hold it |
| <input type="checkbox"/> Buy more at the new lower price |
12. Some people need their investment portfolio to generate current income to meet on-going needs. This typically tilts the investment portfolio toward bonds and dividend paying stocks. How accurately does this describe your objectives?
- | | |
|--|--|
| <input type="checkbox"/> Very accurate | <input type="checkbox"/> Slightly accurate |
| <input type="checkbox"/> Moderately accurate | <input type="checkbox"/> Not accurate at all |
13. You have just reached the \$10,000 plateau on a TV game show. Now you must choose between quitting with the \$10,000 in hand or betting the entire \$10,000 on one of the three scenarios below. Which do you choose?
- | | |
|---|---|
| <input type="checkbox"/> Take the money and run | <input type="checkbox"/> A 20% chance of winning \$75,000 |
| <input type="checkbox"/> A 50% chance of winning \$50,000 | <input type="checkbox"/> A 5% chance of winning \$100,000 |
14. How large of a temporary decline in your portfolio are you willing to accept before changing your investment strategy, assuming you start with \$100,000?
- | |
|---|
| <input type="checkbox"/> 10% decline (portfolio value is \$90,000) |
| <input type="checkbox"/> 15% decline (portfolio value is \$85,000) |
| <input type="checkbox"/> 20% decline (portfolio value is \$80,000) |
| <input type="checkbox"/> 25% decline or greater (portfolio value is \$75,000 or less) |
| <input type="checkbox"/> 50% decline or greater (portfolio value is \$50,000 or less) |
15. By what percentage do you expect your portfolio to grow annually over the long term, 10+ years?
- | | | |
|----------------------------------|------------------------------------|--|
| <input type="checkbox"/> 4% - 6% | <input type="checkbox"/> 8% - 10% | <input type="checkbox"/> 12% - 14% |
| <input type="checkbox"/> 6% - 8% | <input type="checkbox"/> 10% - 12% | <input type="checkbox"/> More than 14% |

Signature

Print

Date

FAMILY BALANCE SHEET

ASSETS	LIABILITIES
<p><u>Investments (Non-Retirement):</u></p> <p>Cash \$ _____</p> <p>Stocks \$ _____</p> <p>Bonds \$ _____</p> <p>Mutual Funds \$ _____</p> <p>Other \$ _____</p> <p><u>Investments (Retirement):</u></p> <p>IRA \$ _____</p> <p>401(k) \$ _____</p> <p>403(b) \$ _____</p> <p>Profit Sharing \$ _____</p> <p>Other \$ _____</p> <p><u>Business:</u> \$ _____</p> <p><u>Real Estate:</u> \$ _____</p> <p><u>Other:</u></p> <p>_____</p> <p>_____</p> <p>_____</p>	<p><u>Short Term:</u></p> <p>Credit Cards, Notes \$ _____</p> <p><u>Long Term:</u></p> <p>Home \$ _____</p> <p>Business \$ _____</p> <p>Additional Property \$ _____</p> <p><u>Other:</u></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

FAMILY INCOME STATEMENT

Annual Income:

Earned Income \$ _____

Investment Income \$ _____

Social Security \$ _____

Other \$ _____

Total \$ _____

Annual Expenses:

Fixed \$ _____

Variable \$ _____

Total \$ _____

PERSONAL GOAL PLANNING

How can we help you? On a scale of 1 to 10 (1 being low and 10 being high) please rate the following:

- _____ Increase my net worth by _____%
- _____ Reduce my tax burden
- _____ Pay education expenses for my children
- _____ Financial security at retirement
- _____ Purchase real estate
- _____ Plan for long-term care
- _____ Provide for my family in the event of my (or my spouse's) death
- _____ Minimize the cost of probate and estate taxes
- _____ Control the distribution of assets to my heirs
- _____ Fund a charitable endeavor

Other goals:

If you could change three things about your current financial situation, what would you change?

- 1) _____
- 2) _____
- 3) _____

Investment Goals	Priority Level				
Return should exceed inflation rate	None	Low	Medium	High	Urgent
Principal should be safe	None	Low	Medium	High	Urgent
Investments should be liquid (immediately accessible)	None	Low	Medium	High	Urgent
Diversification is important	None	Low	Medium	High	Urgent
Professional asset management	None	Low	Medium	High	Urgent
Reduce my taxable income	None	Low	Medium	High	Urgent
Build tax-free income	None	Low	Medium	High	Urgent
Long-term growth	None	Low	Medium	High	
UrgentShort-term profits	None	Low	Medium	High	Urgent

Risk Tolerance	Low				High					
Rate your risk tolerance level on a scale of 1 to 10	1	2	3	4	5	6	7	8	9	10

Thank you for taking the time to complete this profile!