



**Confidential Initial Questionnaire**

Please take a few minutes to complete this form prior to our first meeting. Providing us with some preliminary information about your personal and financial concerns and current situation will help us make the best use of our time together. We want to focus on your questions and determine the best way for us to work together. We appreciate that sharing personal and financial information in advance of our meeting may seem demanding on our part; however, having this information prior to our first meeting saves time and allows us to prepare to meet with you. Thank you for your interest and commitment to your financial future.

Date:

**Client Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **DOB** \_\_\_/\_\_\_/\_\_\_  
**Employer/Profession** \_\_\_\_\_

**Spouse/Partner's Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **DOB** \_\_\_/\_\_\_/\_\_\_  
**Employer/Profession** \_\_\_\_\_

Home Address:

Home #: (\_\_\_\_) \_\_\_\_\_ Client Bus #: (\_\_\_\_) \_\_\_\_\_ Spouse Bus #: (\_\_\_\_) \_\_\_\_\_

Fax #: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Client E-mail: \_\_\_\_\_ Spouse/Partner E-mail: \_\_\_\_\_

Child #1 \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ Dependent: Y/N

Child #2 \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ Dependent: Y/N

Child #3 \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ Dependent: Y/N

1. What are your most important financial concerns? What would you like to accomplish through this engagement?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. How do you envision your lifestyle 5 years from now? \_\_\_\_\_

\_\_\_\_\_

3. Is your outlook generally optimistic or pessimistic concerning the future? \_\_\_\_\_

\_\_\_\_\_

4. What are your most important *non*-financial concerns & objectives right now? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. How much and what type of interaction would you consider the kind of service an ideal financial advisor would provide you?

\_\_\_\_\_  
\_\_\_\_\_



6. What are the keys to making this relationship successful for you? What are your expectations of your financial advisor?

---

---

---

7. During our review *three years from now*, what will need to have happened between now and then for you to feel satisfied with your progress?

---

---

---

8. How do you make important investment decisions?

---

---

---

9. Have you ever worked with a financial advisor before? Yes \_\_\_ No \_\_\_ What was good about that experience? \_\_\_\_\_

---

---

---

Unsatisfactory?

---

---

---

10. Who are your other advisors (Lawyers, Accountants, etc.)? Where are their strengths and weaknesses, in your eyes?

---

---

---

11. Where are your investments now? (Please include statements or listing.)

---

---

---

12. Why do you think you need help (specifics – home purchase, college, retirement)?

---

---

---

---

---

---

---

---

13. Have you ever been involved in litigation? Yes \_\_\_ No \_\_\_ What happened?

---



14. How much is your total current gross income? \_\_\_\_\_ Sources? \_\_\_\_\_

\_\_\_\_\_

15. How much do you currently save (Monthly, Annually) ? \_\_\_\_\_ Where do you put it?

\_\_\_\_\_

16. Do you track expenses? Yes \_\_\_ No \_\_\_ If so, how? If not, is this a concern?

\_\_\_\_\_

17. Your Assets: Please list approximate amount:

Home \$ \_\_\_\_\_

Non-retirement Assets \$ \_\_\_\_\_ (e.g. stocks, bonds, stock options, REITs, Mutual funds, money markets, 529 plans)

Retirement Assets \$ \_\_\_\_\_ (e.g. 401k, IRAs)

Direct Real Estate \$ \_\_\_\_\_ (e.g. Vacation home, rental property)

18. Your Liabilities / Debt Service (Same as #17)

Home Mortgage \$ \_\_\_\_\_

Credit Cards \$ \_\_\_\_\_

Other Debts/Loans \$ \_\_\_\_\_ (e.g. student loan, car loan, business loan)

Direct Real Estate Mortgage \$ \_\_\_\_\_ (e.g. Vacation home, rental property)

Divorce Agreements \$ \_\_\_\_\_

19. Please check "X" if you currently own the following, and list amount of insurance where applicable:

Wills \_\_\_ Trusts \_\_\_ Life Insurance \_\_\_\_\_ Disability Insurance \_\_\_\_\_

Amounts/Types: \_\_\_\_\_

20. What changes do you expect in the future in your finances that you wish to plan for? \_\_\_\_\_

Family obligations: \_\_\_\_\_

Inheritances: \_\_\_\_\_ Other: \_\_\_\_\_

21. What are your goals/concerns regarding passing assets to children or others? \_\_\_\_\_

\_\_\_\_\_

22. Is there anything else we need to talk about? Any "special needs" situations you are responsible for? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_