

PERSONAL & CONFIDENTIAL INFORMATION

Name: _____ Spouse Name: _____
Birth Date: _____ Spouse Birth Date: _____
Occupation/Specialty: _____ Spouse Occupation: _____
Gross Income: \$ _____ Spouse Gross Income: \$ _____
Bonus: \$ _____ Spouse Bonus: \$ _____
Health Status: _____ Spouse Health Status: _____
Address: _____ Work Phone: _____
_____ Fax: _____
_____ Home Phone: _____
Email: _____ Mobile Phone: _____
Children (Names & DOB): _____

BUSINESS & PRACTICE INFORMATION

Type of Entity (C-Corp, S-Corp, LLC, etc.): _____ You are an (select one): Owner Employee
Number of Owners: _____ Number of Employees: _____
Gross Revenue: \$ _____ Accounts Receivables: \$ _____
Qualified Plan: Yes No Non-Qualified Plan: Yes No

CONTACT INFORMATION

What is the best day/time to reach you for further follow-up? _____
What is your preferred phone number for follow-up? Work Home Mobile Other: _____
What is your assistant/receptionist's name, and what should we say when we call? _____

Do you check email, and, if so, how regularly? _____

NON-REAL ESTATE ASSETS

Asset	Fair Market Value	Type of Funds	Basis	How Asset Is Held (own name, jointly, living trust, etc.)
Pensions, Profit Sharing Plans, IRAs				
Brokerage Accounts, Bank Accounts, CDs				
Business Interests				
Amount of Investment Income Annually				

HOME AND REAL ESTATE HOLDINGS

Property (mark primary)	Fair Market Value	Mortgage Amount	Mortgage Type (30 yr fixed, ARM, etc.)	Interest Rate	Monthly Payment	Property Ownership (Self, Joint, Corporate)

LIFE INSURANCE

Company	Insured / Policy Owner	Policy Type (whole life, 20 yr term, VUL)	Face Amount	Annual Premium	Cash Value	Policy Date

DISABILITY / LONG-TERM CARE INSURANCE

Company	Policy Owner	Policy Type	Annual Premium	Coverage Amount

PRIOR PLANNING

Document	Yes / No	Year Last Updated
Last Will & Testament(s)		
Irrevocable Life Insurance Trust(s)		
Living Trust(s)		
FLP's / LLC's		

CONCERNS

Please rank each concern on a scale of 1 to 10. (10 being "most concerned")

Rank	Concern
	Minimizing income tax liabilities
	Investment advice (allocation, alternatives, etc.)
	Planning for retirement
	Protecting family income against disability / death
	Protecting wealth from potential lawsuits
	Reducing estate taxes

ADDITIONAL ANALYSIS

At what age do you plan on retiring? _____

How much monthly after-tax income will you need during retirement? \$ _____

Are you presently on track for retirement? No, I definitely need to put away more.
 Yes, I am at or ahead of my projected need.
 I have no idea.

Which rate of return would you consider reasonable for long-term investments? 0-5% 6-7% 8-10% 10%+

Which best describes you? I want only common investments / techniques that are used by everyone.
 I would be willing to consider less well-known investments / techniques if they are sound and conservative.
 I am most interested in "leading edge" investments / techniques used by the wealthy, if I qualify for them.

Other concerns or questions: