

Today's date: _____

Confidential Client Questionnaire

Personal Information

Individual 1

Full name: _____
Date of birth: _____
Age: _____
Social Security #: _____ (optional)

Individual 2

Full name: _____
Date of Birth: _____
Age: _____
Social Security #: _____ (optional)

Address & Employment:

Individual 1

Address: _____
City, State, Zip: _____
Primary phone: _____
E-mail: _____

Job title: _____
Employer: _____

Salary: _____
Bonuses: _____
Other earned income: _____
Expected career changes? _____

Planned / desired retirement age: _____

Individual 2

Address: _____
City, State, Zip: _____
Primary phone: _____
E-mail: _____

Job title: _____
Employer: _____

Salary: _____
Bonuses: _____
Other earned income: _____
Expected career changes? _____

Planned / desired retirement age: _____

Family Members (children and dependents):

Full name: _____
Date of birth: _____
Age: _____
Relationship to client: _____
Same residence or other? _____

Full name: _____
Date of birth: _____
Age: _____
Relationship to client: _____
Same residence or other? _____

Full name: _____
Date of Birth: _____
Age: _____
Relationship to client: _____
Same residence or other? _____

Full name: _____
Date of Birth: _____
Age: _____
Relationship to client: _____
Same residence or other? _____

Your Financial Goals

Rank the following Financial Objectives by importance, with 1 being the most important, and describe details for your specific goals.

<u>Goal / Objective</u>	<u>Rank</u>	<u>Specific details for your goals</u>
Retirement	_____	_____
College Funding	_____	_____
Buy a House	_____	_____
Accumulate Emergency Savings	_____	_____
Cash Flow Management	_____	_____
Debt Reduction	_____	_____
Start a Business	_____	_____
Career Change	_____	_____
Estate Planning	_____	_____
Financial Security in case of Disability	_____	_____
Financial Security in case of Death	_____	_____
Other: _____	_____	_____
Other: _____	_____	_____
Other: _____	_____	_____

Specific goals, questions, or advice you seek:

Financial Documents Needed to Complete your Plan

Please check this list of documents and deliver a copy of any which apply to you and your financial situation.

- Pay / earnings statements
- Last year's tax return
- Brokerage account statements
- 401k / 403b Plan account statements
- Trust account statements
- Other investment statements
- Mortgage statements
- Loan and credit card statements
- Social Security Benefits statement
- Legal documents (wills, trust, POA, divorce decree)
- Insurance Policies (life, disability, LTC, home, auto, liability)
- Employee benefits booklet or description

For any details that you do not complete on the questionnaire, we will refer back to these financial documents to fill in the missing information.

Estate Planning

Check if you have any of the following:

	<u>Individual 1</u>	<u>Individual 2</u>
Will	_____	_____
Revocable Living Trust	_____	_____
Springing Power of Attorney	_____	_____
General Power of Attorney	_____	_____
Living Will	_____	_____
Health Care Power / Proxy	_____	_____
Irrevocable Life Insurance Trust	_____	_____
Other: _____	_____	_____
Other: _____	_____	_____

Insurance

Please fill in details about the amounts and types of insurance you currently have:

	<u>Individual 1</u>		<u>Individual 2</u>	
Permanent life insurance:	<u>Policy 1</u>	<u>Policy 2</u>	<u>Policy 1</u>	<u>Policy 2</u>
Insured amount	_____	_____	_____	_____
Cash value	_____	_____	_____	_____
Annual premium	_____	_____	_____	_____
Term life insurance:	<u>Policy 1</u>	<u>Policy 2</u>	<u>Policy 1</u>	<u>Policy 2</u>
Insured amount	_____	_____	_____	_____
Term of policy	_____	_____	_____	_____
Annual premium	_____	_____	_____	_____
Disability insurance:				
% Income benefit	_____	_____	_____	_____
Term of coverage	_____	_____	_____	_____
Long Term Care insurance:				
\$ Daily benefit	_____	_____	_____	_____
\$ Lifetime benefit	_____	_____	_____	_____
Homeowner's insurance:				
\$ Property Coverage	_____		_____	
\$ Liability Limit	_____		_____	
Auto insurance:				
\$ Property Liability	_____		_____	
\$ Bodily Liability	_____		_____	
Umbrella liability insurance:	_____		_____	
Other insurance:	_____		_____	

Pensions, Earned Income, & Social Security

	<u>Individual 1</u>		<u>Individual 2</u>	
Defined Pension Benefits:	<u>Pension 1</u>	<u>Pension 2</u>	<u>Pension 1</u>	<u>Pension 2</u>
Estimated annual amount	\$ _____	\$ _____	\$ _____	\$ _____
Starting age	_____	_____	_____	_____
Increase rate before retirement	_____	_____	_____	_____
Increase rate after retirement	_____	_____	_____	_____
Survivor benefit %	_____	_____	_____	_____
Earned Income:	<u>Individual 1</u>	<u>Individual 2</u>		
Current Annual Earnings	\$ _____	\$ _____		
Expected changes?	\$ _____	\$ _____		
Social Security Benefits:	<u>Individual 1</u>	<u>Individual 2</u>		
Estimated annual benefit	\$ _____	\$ _____		
Starting age of benefits	_____	_____		

Special Income and Expenses

List any other sources of income, lump sum expenses, or irregular expenses expected:

Description	Annual Amount	Year / Years
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Education Funding

List your best estimates of expected college costs for children and what percentage, or amount, of college funding you expect to provide:

<u>Child name</u>	<u>Age</u>	<u>Cost per year</u>	<u># Years</u>	<u>Current Funding</u>	<u>\$ or % to Provide</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Personal Assets

Primary residence value: \$ _____	2 nd residence: \$ _____
Personal/household property: \$ _____	Boats, RVs, etc.: \$ _____
Auto: \$ _____	Other personal assets: \$ _____
Auto: \$ _____	Other personal assets: \$ _____

Capital Assets

List capital assets including bank accounts, investment accounts, stocks, bonds, mutual funds, business interests, investment real estate, and other financial assets.

<u>Account type / Description</u>	<u>Asset type</u>	<u>Current value</u>	<u>Annual Additions</u>	<u>Owner</u>
Checking	cash	_____	_____	_____
Savings	interest bearing	_____	_____	_____
Money market	interest bearing	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
CD (____ %, _____ maturity)	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Brokerage account (non IRA)	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
IRA	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
401k	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Business	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Real estate investment	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Other	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Liabilities

<u>Debt type / Description</u>	<u>Interest rate</u>	<u>Current balance</u>	<u>Monthly payment</u>	<u>Maturity/term</u>
Residence mortgage	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Auto loan	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Student loan	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Credit card	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Real estate	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Business loan	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Other loan	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Other notes and information

Household Expense Worksheet

Estimate monthly or annual amounts for each category. When unsure of exact amount round up, or estimate high.

<u>Expense Item / Category</u>	<u>Monthly Amount</u>	or	<u>Annual Amount</u>	<u>Comments / Changes</u>
Rent or lease payment	_____		_____	_____
Food & household incidentals	_____		_____	_____
Utilities, phone, cable	_____		_____	_____
Auto fuel & maintenance	_____		_____	_____
Childcare	_____		_____	_____
Tuition	_____		_____	_____
Alimony & child support	_____		_____	_____
Home & lawn maintenance	_____		_____	_____
Home improvements & furnishings	_____		_____	_____
Medical expenses	_____		_____	_____
Clothing	_____		_____	_____
Personal care & grooming	_____		_____	_____
Entertainment & dining out	_____		_____	_____
Hobbies & recreation	_____		_____	_____
Travel & vacations	_____		_____	_____
Dues, memberships, subscriptions	_____		_____	_____
Gifts	_____		_____	_____
Charitable contributions	_____		_____	_____
Misc., other	_____		_____	_____
Misc., other	_____		_____	_____
Mortgage payment	_____		_____	_____
Property tax	_____		_____	_____
Auto loan payments	_____		_____	_____
Boat & RV payments	_____		_____	_____
Credit card payments	_____		_____	_____
Other loan payments	_____		_____	_____
Other loan payments	_____		_____	_____
Homeowner's insurance	_____		_____	_____
Life insurance premiums	_____		_____	_____
Health insurance premiums	_____		_____	_____
Auto insurance premiums	_____		_____	_____
Other insurance premiums	_____		_____	_____
Other insurance premiums	_____		_____	_____
	_____		_____	_____
	_____		_____	_____
	_____		_____	_____

While tax and legal issues may be discussed in the general course of financial and investment planning, Advisory Alpha does not provide tax or legal services. Please consult with your tax or legal professional prior to making decisions relative to these issues.

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