DATE: ______/_______/_______

Aligning
YOUR WEALTH *with*
YOUR VALUES

The privacy and confidentiality of your personal information is very important to us. We adhere to all privacy and confidentiality requirements for all entities whose products or services we offer.

PERSONAL & CONFIDENTIAL INFORMATION

You	**Spouse/Partner**
Name: ______________________________	Name: ______________________________
Birth Date: ___________________________	Birth Date: ___________________________
Birth Place: __________________________	Birth Place: __________________________
Health Status: _________________________	Health Status: _________________________
Cell Phone: ___________________________	Cell Phone: ___________________________
Email: ______________________________	Email: ______________________________

Address: ____

Children (Name & birth date) ____

What role would you like a financial advisor to play in your life?

What prompted you to seek advice from an advisor?

What is your vision for retirement (age, lifestyle, activities)?

Do you have any anxieties or specific concerns about your overall current financial situation?

What specific questions would you like to have answered in our first conversation?

What are your most important financial goals? (Rate 1-5)

___ Retirement ___ Family Security ___ Wealth Accumulation ___ Education Planning

___ Debt Reduction ___ Estate Planning ___ Investment Strategy ___ Special Purchase (e.g. 2^{nd} Home)

___ Other ____________________

Do you expect to pay a fee for advice if you engage an advisor? ☐ Yes ☐ No

Do you have an attorney? ☐ Yes ☐ No **Do you have an accountant?** ☐ Yes ☐ No

Please list your existing advisors (if any) below:

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Employment & Income

You

Occupation: ________________________________

Employer: _______________________________

Base salary: $____________________________

Bonus: $__________________________________

Equity Compensation: $______________________

How Long: ______________________________

Spouse/Partner

Occupation: ________________________________

Employer: _______________________________

Base salary: $____________________________

Bonus: $__________________________________

Equity Compensation: $______________________

How Long: ______________________________

Other sources of income (annual amounts)

Rental Income $________________

Investment Income $________________

Pension Income $_______________

Social Security $_______________

Annuity $_______________

NON-QUALIFIED ASSETS (e.g., brokerage accounts, savings, checking, CDs, stock holdings, restricted stock and options)

Type / Institution Name	Current Value	Owner

RETIREMENT ASSETS (e.g., 401K, IRA, Roth IRA, Annuities, Deferred Compensation)

Type / Institution Name	Current Value	Current Annual Contribution	Employer Match	Owner

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REAL ESTATE & PERSONAL PROPERTY

Name	Current Value	Mortgage Balance	Mortgage Term	Interest Rate	Monthly Payment	Date of Mortgage	Original Mortgage Amount

OTHER LIABILITIES / LOANS (e.g., auto, student loans, credit cards)

Loan	Institution	Balance	Interest Rate	Term	Monthly Payment	Owner

LIFE INSURANCE

Company	Insured	Policy Type	Face Amount	Annual Premium	Cash Value	Policy Date

DISABILITY / LONG-TERM CARE INSURANCE

Company	Insured	Policy Type	Coverage Amount	Annual Premium

ESTATE PLANNING

Will(s)? ○YES / ○NO Year drafted: ____________ Powers of Attorney / Health Care Directives: ○YES / ○NO

Trust(s)? ○YES / ○NO Year drafted: ____________ Purpose: ____

NOTES: