



CLIENT FACT FINDER

CONFIDENTIAL INFORMATION OF:

Client Profile/Update

Date

PERSONAL INFORMATION

CLIENT 1

Name DOB

Phone (*home*) (*work*) (*cell*)

Email (*personal*)

Linked In/Facebook/Twitter

Residency Status (*select one*) US Resident Non-US Resident

Employer Phone

Address City, State Zip

Occupation Industry

Email (*work*) Retirement Date (*or expected*)

CLIENT 2

Name DOB

Phone (*home*) (*work*) (*cell*)

Email (*personal*)

Linked In/Facebook/Twitter

Residency Status (*select one*) US Resident Non-US Resident

Employer Phone

Address City, State Zip

Occupation Industry

Email (*work*) Retirement Date (*or expected*)

Filing Status (*select one*) Single Married (*filing jointly*) Married (*filing separately*)

If Married: Date of Marriage Number of Dependants

Residential Address

City, State Zip

Mailing Address (*if different*)

City, State Zip

CHILDREN

Child 1	<input type="text"/>	DOB	<input type="text"/>
Child 2	<input type="text"/>	DOB	<input type="text"/>
Child 3	<input type="text"/>	DOB	<input type="text"/>
Child 4	<input type="text"/>	DOB	<input type="text"/>

EDUCATIONAL GOALS

Start Date	<input type="text"/>	Number of Years	<input type="text"/>	Place of Education	<input type="text"/>
Start Date	<input type="text"/>	Number of Years	<input type="text"/>	Place of Education	<input type="text"/>
Start Date	<input type="text"/>	Number of Years	<input type="text"/>	Place of Education	<input type="text"/>
Start Date	<input type="text"/>	Number of Years	<input type="text"/>	Place of Education	<input type="text"/>

INCOME SOURCES

Client 1 Salary \$ Bonus \$ (yearly average)

Client 2 Salary \$ Bonus \$ (yearly average)

Client 1 Social Security \$ Start Date

Client 2 Social Security \$ Start Date

Pension Income \$ per year Source

Rental Income \$ per year (net of all expenses)

Deferred Compensation \$ per year

Start Date Stop Date

PERSONAL PROPERTY (homes, rental properties, raw land, artwork, automobiles, etc.)

	Description	Owner(s)	Market Value	Cost Basis	Annual Taxes	Annual Growth %
1.	_____					
2.	_____					
3.	_____					
4.	_____					
5.	_____					

LIABILITIES

	Description	Borrower	Type	Lender	Interest Rate	Balance	Payment	Payoff Date
1.	_____							
2.	_____							
3.	_____							
4.	_____							
5.	_____							
6.	_____							

ACCOUNTS (IRA, Roth IRA, 401k, Profit Sharing, Pension Lump Sum, Brokerage, Bank, CD, Money Mkt)

	Name(s)	Current Value	Cost Basis	Custodian/Bank	Annual Contribution
1.	_____				
2.	_____				
3.	_____				
4.	_____				
5.	_____				
6.	_____				
7.	_____				
8.	_____				

ADDITIONAL INFORMATION

EMPLOYER BENEFITS

Retirement Plan/Employer Match % on %

Profit Sharing \$ (yearly average)

Stock Options (details)

INSURANCE POLICIES (life, long-term disability, long-term care, etc.)

	Type	Owner	Insured	Term	Benefit	Premium/Year
1.	_____					
2.	_____					
3.	_____					
4.	_____					
5.	_____					
6.	_____					

ESTATE PLANNING DOCUMENTS (please indicate the year these were created)

BASIC ESTATE DOCUMENTS

Last Will and Testament yes no Durable POA yes no

Living Will yes no Healthcare POA yes no

OTHER ESTATE DOCUMENTS

Revocable Trust yes no Credit Shelter Trust yes no

Trust Under Will yes no Irrevocable Trust yes no

PROFESSIONALS

Attorney Phone

Estate Attorney Phone

CPA/Accountant Phone

Insurance Agent Phone

PLEASE RATE YOUR PRIMARY FINANCIAL CONCERNS AND/OR OBJECTIVES:

	<i>Very important</i>	<i>somewhat important</i>	<i>not important</i>
Comfortable Retirement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
College Education Costs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Major Purchase	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Estate Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Protecting Wealth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Evaluating Investments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Evaluating Insurance Coverage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Investing A Lump Sum	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Philanthropy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

WHAT IS THE MAIN REASON FOR YOUR VISIT?

