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| <ul style="list-style-type: none"> <li>✓ Fill in this form as completely and legibly as possible and bring it with you.</li> <li>✓ If you are unsure of how to answer a specific question, leave it blank.</li> </ul> | <ul style="list-style-type: none"> <li>✓ Use estimated values as necessary.</li> <li>✓ Bring copies of account statements.</li> <li>✓ Bring a copy of last year's tax return.</li> </ul> |
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**PERSONAL INFORMATION**

	Client	Spouse/Other
Full Name		
Nickname		
Marital Status	S <input type="checkbox"/> / M <input type="checkbox"/> / D <input type="checkbox"/> / W <input type="checkbox"/>	S <input type="checkbox"/> / M <input type="checkbox"/> / D <input type="checkbox"/> / W <input type="checkbox"/>
Age		
Cell Phone #		
Home Phone #		
Work Phone #		
Email Address		
Address	<b>Primary Residence</b>	<b>Mailing Address</b> <small>(if different than Primary)</small>
Street Address		
Apt or Unit #		
City/State/Zip		

**ESTATE PLANNING**

Do you have a current Will/Attorney?	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Do you have a Trust/Attorney?	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Date your Trust was last reviewed	
Are you concerned about possible Nursing Home Expenses?	Yes <input type="checkbox"/> / No <input type="checkbox"/>
How many children do you have?	
How many grandchildren?	

**EMPLOYMENT**

	Client	Spouse/Other
Status	Empl <input type="checkbox"/> / Self Empl <input type="checkbox"/> / Not Empl <input type="checkbox"/> / Retired <input type="checkbox"/>	Empl <input type="checkbox"/> / Self Empl <input type="checkbox"/> / Not Empl <input type="checkbox"/> / Retired <input type="checkbox"/>
When Do You Want to Retire?		
Employer <small>(Current or Past)</small>		
Date of Employment		
Position		

**AMOUNTS IN BANKS, SAVINGS AND LOANS, AND CREDIT UNIONS (NON-IRA)**

(i.e. Checking, Savings, Money Market, CDs)

	Account Holder/ Name of Institution	Type of Account <small>(Checking, Savings, MMkt, CD)</small>	Interest % Rate	Maturity Date	Approximate \$ Balance
1					
2					
3					
4					

## UNIVERSITY RETIREMENT PLANS

(Please bring your most recent statements)

	Account Holder/Name of Custodian/Plan (ASRS, TIAA, Fidelity, Other)	Type of Account (401a, 403b, 457, ASRS, Other)	\$ Bi-Monthly Contributions	Approximate \$ Value
1				
2				
3				
4				
5				
6				

## IRA ACCOUNTS AND OTHER RETIREMENT ACCOUNTS

(Please bring your most recent statements)

	Account Holder/Name of Custodian/Plan (Brokerage Firm, Mutual Fund Co, Employer, Other)	Type of Account (401k, IRA, Roth, Annuity, Other)	\$ Monthly Contributions	Approximate \$ Value
1				
2				
3				
4				

## NON-RETIREMENT BROKERAGE ACCOUNTS, MUTUAL FUNDS, STOCKS, BONDS, ANNUITIES, 529 PLANS, OTHER

(Please bring your most recent statements)

	Account Holder/Name of Investment Company	Type of Account (Individual, Trust, Joint, Comm Prop, Other)	\$ Monthly Contributions	Approximate \$ Value
1				
2				
3				
4				

## RESIDENCE AND OTHER REAL ESTATE OWNED

(Attach another sheet if more space is needed)

	Property Owner/Type of Property (Residence, 2 <sup>nd</sup> Home, Investment)	Approximate \$ Value	Debt
1			
2			

## LIFE INSURANCE

(Please bring policies and most recent statements)

	Insurance Company	Name of Insured	Type of Insurance (Whole Life, UL, Term)	Death Benefit	Cash \$ Value	Loan \$ Amount
1						
2						

## HOUSEHOLD INCOME

(Please bring your most recent pay stubs)

Monthly Income \$	Client	Spouse/Other
Salary/Take Home Pay		
Social Security		
Pension		
Other Income		
Other Income		

## HOUSEHOLD EXPENSES

	Monthly Expenses \$
Current Expenses	
Anticipated Retirement Expenses	

## PERSONAL AND GROWTH OBJECTIVES

- What are your primary financial concerns (in order of importance)?
- How would you improve your financial situation if you could? Why?
- What are you accumulating wealth for?
- What dreams or aspirations did you have when you were younger, that you would like to take advantage of today?
- Are there any investments you are opposed to for any reason?
- What is your main investment objective?
- At what age would you like to begin drawing on your investments?
- What investments have you made in the past that pleased you, and why?
- What investments have not pleased you, and why?
- How did you feel during the downturn of 2008-2009, and what did you do?
- Are you expecting a significant inheritance?

## RISK TOLERANCE QUESTIONNAIRE

<b>1. Your age is an important factor in your ability to take on investment risk. Your age is:</b>		
<input type="checkbox"/>	a. 65 or over	1 point
<input type="checkbox"/>	b. 56-64	2 points
<input type="checkbox"/>	c. 46-55	3 points
<input type="checkbox"/>	d. 36-45	4 points
<input type="checkbox"/>	e. 35 or under	5 points
<b>2. Once withdrawals begin from your accounts, how long should they last?</b>		
<input type="checkbox"/>	a. 1-2 years	1 point
<input type="checkbox"/>	b. 2-3 years	2 points
<input type="checkbox"/>	c. 4-7 years	3 points
<input type="checkbox"/>	d. 7-10 years	4 points
<input type="checkbox"/>	e. 10+ years	5 points
<b>3. How do you feel about risk?</b>		
<input type="checkbox"/>	a. I am conservative, not comfortable taking on risk that might result in losses of more than 3% over any 1-year period.	1 point
<input type="checkbox"/>	b. I am moderate-conservative, not comfortable taking on risk that might result in losses of more than 5% over any 1-year period.	2 points
<input type="checkbox"/>	c. I am moderate, not comfortable taking on risk that might result in losses of more than 10% over any 1-year period.	3 points
<input type="checkbox"/>	d. I am moderate-aggressive, willing to take on risk that might result in losses of up to 15% over any 1-year period.	4 points
<input type="checkbox"/>	e. I am aggressive. I understand that stocks can be volatile and that on very rare occasions stocks can lose 20% or more of their value over a 1-year period.	5 points
<b>4. What is your return objective?</b>		
<input type="checkbox"/>	a. I am willing to accept lower long-term returns in order to preserve capital.	1 point
<input type="checkbox"/>	b. When stocks are performing well, I want some participation, but I am also concerned with short-term risk.	2 points
<input type="checkbox"/>	c. I am looking for good long-term returns and only mildly concerned with short-term risk.	3 points
<input type="checkbox"/>	d. I am looking for high returns and I am not too concerned with short-term risk.	4 points
<input type="checkbox"/>	e. I am looking for maximum returns and I am not concerned with short-term risk.	5 points

**Total Score:** \_\_\_\_\_

Analysis	
4-9 Points	<b>Conservative:</b> Investors tolerate a little risk but are averse to downside market fluctuations. Investors in this category will not fully participate in upward market movement.
10-15 Points	<b>Equity-Tilted Balanced:</b> Investors are willing to forgo a portion of current income in order to provide for potential future growth. This category typically uses the largest number of asset classes to reduce risk and increase profits.
16-20 Points	<b>Growth:</b> Investors want to outperform the market and are exposed to more risk than an equity-tilted balanced investor. Investors in this category use portfolios that have potential for higher returns, but also for greater risk.

*This form collects data for informational purposes only and does not supersede any data or information reported on official Cambridge forms. This information is provided by you (the client). If any of the information is incorrect, you should notify your financial advisor. The information provided by you should be reviewed periodically and updated when either the information or your circumstances change.*

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