

Financial Data
L.R. Patent Financial Services

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Date: _____

Personal Data

Name: _____ D.O.B ____/____/____ SS#: _____ DL#: _____

Occ./Previous _____ Company _____ Address _____

Retirement Age _____

Spouse: _____ D.O.B ____/____/____ SS#: _____ DL#: _____

Occ./Previous _____ Company _____ Address _____

Retirement Age _____

Mailing Address: _____

Home Address: _____

Email: _____ Cell 1: _____ Cell 2: _____

Email 2: _____

Children:

Name _____ Address _____ DOB _____ SS# _____

Name _____ Address _____ DOB _____ SS# _____

Name _____ Address _____ DOB _____ SS# _____

Name _____ Address _____ DOB _____ SS# _____

Notes: _____

Financial Data (continued)

Household Income: \$ _____

SS Income _____

Pension _____

Other Income _____

SS Income _____

Pension _____

Other Income _____

Monthly Expenses:

Mortgage/Rent: \$ _____

Car Payment: \$ _____

Student Loans: \$ _____

Gas: \$ _____

Food: \$ _____

Phone: \$ _____

Utilities: \$ _____

Other/Misc: \$ _____

Total Expenses: \$ _____

Net Worth (approx.)

Experience

Cash: \$ _____

Stocks/MF: \$ _____ yrs.

Bonds: \$ _____ yrs.

Real Estate*: \$ _____ yrs.

Life Insurance: \$ _____ yrs.

Other: \$ _____ Describe: _____

*Excludes Primary Residence

NET INCOME: \$ _____ /mo.

Estimated State and Federal Tax Bracket: _____ %

Interest Rate:

Total Mortgage Balance: \$ _____ %

Total Student Loan BAL: \$ _____ %

Total Car Loan Balance: \$ _____ %

Total Credit Card Balance: \$ _____ %

Please Circle your answer.

I have a need for income: YES NO \$ _____ /mo.

I have the ability to save: YES NO \$ _____ /mo.

Personal Investment Attitudes

On a scale of 0 to 10 (0=Unimportant, 10=Most important) How important is each of the following specific investment characteristics: (treat each category independently)

Safety of principle/income (0-10): _____

Moderate Growth (0-10): _____

Aggressive Growth (0-10): _____

Speculation (0-10): _____

High Current Income (0-10): _____

Tax Liability Reduction (0-10): _____

Personal Investment Goals

1. Are you planning for any major expenditures? _____

W/in 1year 3-5 years 5-10 years

Will you need distributions from your investments for these expenditures? \$_____

2. Are you planning to provide for your Children's/Grandchildren's higher education?

Yes () No () If yes, what percentage do you plan to provide _____%

3. Are you concerned with having adequate income during retirement? Yes () No ()

4. Are you responsible for the financial welfare of anyone other than your immediate family?

(i.e. alimony, child support or parental support, etc.) Yes () No ()

Which of these **Personal Investment Goals** that you have answered yes to is **MOST** important to you?

Which of these **Personal Investment Goals** that you have answered yes to is **LEAST** important to you?

Hobbies / Interests

Are you involved with (financial or affinitive connection) any Charities/Non-Profits?

X _____ Date: _____

Client Signature

X _____ Date: _____

Registered Representative