



6833 Stalter Drive, Suite 201, Rockford, IL 61108 | 815.420.4404 | www.symmetryfinancialadvisors.com

PERSONAL INFORMATION - CLIENT

Legal Name

I Prefer to be Called

Home Address

Date of Birth

Cell Phone

☐ Preferred

Home Phone

☐ Preferred

Email

Occupation

Employer

Hobbies

PERSONAL INFORMATION - CO-CLIENT

Legal Name

I Prefer to be Called

Home Address

Date of Birth

Cell Phone

☐ Preferred

Home Phone

☐ Preferred

Email

Occupation

Employer

Hobbies

Marital Status: Single Married Divorced Widow(er) Unmarried Partner

Anniversary:

CHILDREN/GRANDCHILDREN

Name & Relationship

Date of Birth

State of Residence

Occupation

SOURCES OF INCOME

Base Salary

Expected Bonus

Social Security (Monthly)

Pension (Monthly)

Base Salary

Expected Bonus

Social Security (Monthly)

Pension (Monthly)



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FINANCIAL PLANNING OBJECTIVES

Please rank from 1-10, 1 being very important

Client's Ranking

Co-Client's Ranking

Adequate, Long Term Care & Disability Insurance

Build Wealth

College Funding Strategy

Leave an Inheritance to My Children

Purchase a Property

Reduce Estate Taxes

Reduce Income Tax

Retire Comfortably

Charitable Gifting to Family

Other (Specify)

What is important to you about money?

Client:

Co-Client:

What keeps you up at night?

Client:

Co-Client:

INVESTMENT EXPERIENCE

Client

Co-Client

Approximately how many years have you been saving/investing?

What do you consider a reasonable rate of return on a long-term investment portfolio?

%

%

If your investment account dropped in value, at what percent would you be concerned?

%

%

Please rank your risk tolerance, 1 being very conservative, and 10 being very aggressive. How involved would you like to be in your investment decisions?

If you are considering changing your current investment advisor, please explain why.

What are you looking for in a financial advisor?

ESTATE PLANNING

Client

Co-Client

Do you have a will?

Do you have a power of attorney?

Do you have health care proxies?

Do you have any trusts? If so, when did you establish it?

Are any inheritances expected? When? How Much?



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RETIREMENT PLANNING		
	Client	Co-Client
At what age do you plan to retire?		
Do you plan on working after retirement?		
How many years will you work?		
Do you have any aspirations to make seasonal location changes? (i.e., winters in Florida?)		
Do you have plans to change your residence in the near future? Please explain.		
Do you have long-term plans of owning a vacation home? Please explain.		
Please obtain and provide a recent Social Security statement by visiting www.ssa.gov		
How do you plan to spend your time in retirement?		
What concerns or fears do you have about retirement?		

ASSETS	Indicate Ownership: C=Client, CO=Co Client, J=Joint, T=Trust		
Bank/Money Market Accounts	Ownership	Current Value	Interest Rate - %
<i>*Please provide recent statements showing account balances and investments.*</i>			
Investment Accounts	Ownership	Current Value	Financial Institution
<i>*Please provide recent statements showing account balances and investments.*</i>			



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RETIREMENT ACCOUNTS - CLIENT

Type: IRA, ROTH IRA, 401(k), 403(b), Pension Plan, Profit Sharing, SEP, SIMPLE IRA, etc.	Financial Institution	Current Value	Annual Contribution %	Employer Contribution %
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Please provide recent statements showing account balances and investments.

RETIREMENT ACCOUNTS - CO-CLIENT

Type: IRA, ROTH IRA, 401(k), 403(b), Pension Plan, Profit Sharing, SEP, SIMPLE IRA, etc.	Financial Institution	Current Value	Annual Contribution %	Employer Contribution %
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Please provide recent statements showing account balances and investments.

REAL ESTATE PROPERTY

	Home	Other #1	Other #2
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Address

Please Describe (vacation home, investment property, etc.)

Owner (Joint, Trust, etc.)

Month/Year Purchased

Purchase Price

Current Market Value

Mortgage Amount

Interest Rate

Monthly Payment (Principal and Interest Only)

Property Taxes (Annual)



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Homeowners Insurance (Annual)

Homeowner's Association/Condo Fees
(Monthly)

HOME EQUITY LOAN/LINE OF CREDIT

Bank Name	Credit Limit	Outstanding Balance	Original Date	Interest Rate	Form of Payment
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PERSONAL PROPERTY (OTHER THAN REAL ESTATE)

	Car #1	Car #2	Furniture/Jewelry	Collectibles	Other (Describe)
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Owner

Estimated Value

LIABILITIES (NOT REAL ESTATE)

List all loans and debts (Auto, School, Credit Cards, etc.)	Amount Due	Monthly Payment	Interest Rate
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BUSINESS OWNER INFORMATION

Name of Business

Estimated Book Value

Percent Ownership



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INSURANCE				
Life Insurance	Policy #1	Policy #2	Policy #3	Policy #4
Company Name & Policy Number				
Death Benefit				
Policy Date				
Cash Value				
Annual Premium				
Policy Type (Whole life, term, universal life, group, etc.)				
Insured				
Owner				
Beneficiary				

Long-Term Care Insurance	Policy #1	Policy #2	Policy #3	Policy #4
Company Name & Policy Number				
Death Benefit				
Policy Date				
Cash Value				
Annual Premium				
Policy Type (Whole life, term, universal life, group, etc.)				
Insured				
Owner				
Beneficiary				

Disability Insurance	Client	Co-Client
Name of Insurance Carrier		
Monthly Benefit		
Annual Premium		
Through Company or Personally Owned?		

LIVING EXPENSES

<i>Transportation</i>	Monthly or Annual	
Gas		
Maintenance		
Registration		
Parking/Tolls		
Public Transportation		

Business

Start-Up Costs		
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Dining Out

Restaurants		
Meal Service		

Entertainment

Recreation		
Hobbies		
Club Dues		
Events		
Subscriptions		

Gifts

Birthdays		
Holidays		
Weddings		

Health & Fitness

Prescriptions		
Gym		
Deductibles		
Hair/Nails		
Massage		
Chiropractor		
Dry Cleaning		

Miscellaneous

Pets/Vets		
Child Support		
Alimony		

Travel

Vacations		
Holiday Travel		

<i>Bills and Utilities</i>	Monthly or Annual	
Property Taxes		
Electric		
Water		
Gas		
Cell Phone		
Cable		
Streaming		
Internet		
Lawn Service		
Cleaning Services		
Association Fees		
Improvements		

Education

Tuition		
Classes/Books		

Fees and Charges

Accountant/Taxes		
Attorney		
Financial Planner		

Groceries

Food/Beverage		
Toiletries		

Kids

Childcare		
Sports/Activities		
School/Education		

Shopping

Clothing		
Home Furnishings		

Uncategorized

Charitable		
Other		
Other		



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YOUR THOUGHTS & QUESTIONS

This page is reserved so you can prepare any questions you have for us.

Securities and advisory services offered through LPL Financial, a registered investment advisor.
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