**CLIENT INFO SHEET**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Client 1:** |  | **Age:** |  | **Client 2:** |  | **Age:** |  |

**CLIENT BACKGROUND INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Mailing Address:** |  | | |
| **Legal Address (if different):** |  | | |
|  |  |  |  |
|  | **Client 1** |  | **Client 2** |
| **Home Phone:** |  |  |  |
| **Cell Phone:** |  |  |  |
| **Email:** |  |  |  |
| **Date of Birth:** |  |  |  |
| **Place of Birth:** |  |  |  |
| **Mother’s Maiden Name:** |  |  |  |
| **SSN/TIN:** |  |  |  |
| **Driver’s License #:** |  |  |  |
| **Driver’s License Issued Date:** |  |  |  |
| **Driver’s License Expiration:** |  |  |  |
| **Wedding Anniversary:** |  |  |  |

**EMPLOYMENT INFORMATION**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Client 1** | |  | | **Client 2** | |
| **Employment Status:** | Employed  Retired | |  | | Employed  Retired | |
| **If employed…** | | | | | | |
| **Current Employer:** | |  | |  | |  | |
| **Current Job Title:** | |  | |  | |  | |
| **# of Years in Job:** | |  | |  | |  | |
| **Desired Retirement Age:** | |  | |  | |  | |

**CITIZENSHIP INFORMATION**

**Client 1**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **US Citizen:** | YES | NO | If No, Country of Birth: | |  | |
| **Non-Citizens:** | Permanent US Resident | | | Non-Permanent US Resident | | Non-Resident of US | |

**Client 2**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **US Citizen:** | YES | NO | If No, Country of Birth: | |  | |
| **Non-Citizens:** | Permanent US Resident | | | Non-Permanent US Resident | | Non-Resident of US | |

**PROFESSIONAL CONTACT INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Attorney** |  | **Accountant** |
| **Name:** |  |  |  |
| **Business:** |  |  |  |
| **Phone Number:** |  |  |  |

**AFFILIATIONS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | I am… |  | I am not… | …affiliated with, or work for, a stock exchange or a member firm of an exchange or the FINRA. |
|  | I am… |  | I am not… | …a director, 10% shareholder, policymaking executive officer of a publicly traded company. |

**INVESTMENT EXPERIENCE & PERSPECTIVE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **How long (in years) have you owned any of the following?** | | | | |
| Stocks: |  | | REITs: |  |
| Bonds: |  | | Indexed/Variable Annuities: |  |
| Mutual Funds: |  | | Fixed Annuities: |  |
| ETFs: |  | | Alternative/Off-Market: |  |
| Others (please provide details): | |  | | |

**Client 1**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **What is your preferred approach to investment risk?** | Conservative | | Moderately  Conservative | Moderately  Aggressive | Aggressive |
| **Additional Comments:** | |  | | | |

**Client 2**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **What is your preferred approach to investment risk?** | Conservative | | Moderately  Conservative | Moderately  Aggressive | Aggressive |
| **Additional Comments:** | |  | | | |

**Rank the following according to your level of concern:**

**(1 = No Concern, 10= Extremely Concerned)**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| **Outliving our Money** |  |  |  |  |  |  |  |  |  |  |
| **Maintaining Income During Retirement** |  |  |  |  |  |  |  |  |  |  |
| **Reducing Current Income Taxes** |  |  |  |  |  |  |  |  |  |  |
| **Safety of Principal** |  |  |  |  |  |  |  |  |  |  |
| **Estate Planning** |  |  |  |  |  |  |  |  |  |  |
| **Long-Term Care** |  |  |  |  |  |  |  |  |  |  |

**OTHER QUESTIONS & CONSIDERATIONS**

|  |  |  |
| --- | --- | --- |
| **Do anticipate any changes to your living expenses?** | YES  NO |  |
| If yes, please explain: | | |
|  | | |
| **Do have an emergency fund for unexpected events?** | YES  NO |  |
| If yes, please provide details: | | |
|  | | |

**ADDITIONAL INFORMATION**

|  |
| --- |
| Is there any additional information about yourself, your current financial status or goals that is pertinent to the management of your portfolio? Please list investment objectives. |
|  |

**CURRENT FINANCIAL SUMMARY**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| (Monthly) | **Client 1** | | |  | **Client 2** | | |
| **Current Salary:** |  | | |  |  | | |
| **Social Security:** |  | | |  |  | | |
| **Pension:** |  | | |  |  | | |
| If so, does Pension continue upon death? | YES  NO | If yes, what %? |  |  | YES  NO | If yes, what %? |  |
| Until when? |  | Until when? |  |
| **RMDs:** |  | | |  |  | | |
| **Rental Income:** |  | | |  |  | | |
| **Disability Income:** |  | | |  |  | | |
| **Investment Dividends:** |  | | |  |  | | |
| **Other (please specify):** |  | | |  |  | | |
| **TOTAL:** |  | | |  |  | | |
|  |  | | |  |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| **Estimated Monthly Expenses:** |  |  |  |

**Current Tax Bracket: 10%**  12% 22%  24%  32%  35%   **37%**  ***\*2022***

**REAL ESTATE SUMMARY**

|  |  |
| --- | --- |
| **Estimated Value of Primary Residence:** |  |
| Remaining Mortgage (if any): |  |

Current Equity (1): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **Property Type**  (2nd Home, Rental, Other) | **Estimated Value** | **Remaining Mortgage** | **Current Equity** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  | **TOTAL (2):** |  |

**RETIREMENT/INVESTMENT ACCOUNT INFORMATION SUMMARY**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of Account**  (IRA, Roth IRA, 401k, NQ, Trust, etc.) | **Name of Company**  (Where is Account Held?) | **Owner**  (Individual Name or Both) | **Approximate Value** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |
|  |  | **TOTAL (3):** |  |

**BANK ACCOUNTS, CREDIT UNIONS & CD ACCOUNT INFORMATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Personal or Business** | **Type of Account**  (Checking, Saving, CD) | **Name of Institution**  (Where is Account Held?) | **Owner**  (Individual Name or Both) | **Current Balance** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  | **TOTAL (4):** |  |

**OTHER ASSETS/POLICIES**

|  |  |
| --- | --- |
| **Description (i.e., Jewelry, Art, Boats, Planes, etc.)** | **Estimated Value** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **TOTAL (5):** |  |

**TOTAL VALUE OF INVESTABLE ASSETS (Add items 2 - 5) \_\_\_\_\_\_\_\_\_\_\_\_**

**INSURANCE ACCOUNT INFORMATION SUMMARY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of Insurance**  (Term Life, Whole Life, other) | **Name of Company**  (Where is Account Held?) | **Insured Person(s)** | **Annual Premium** | **Face Value** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  | **TOTAL (6):** |  |

**DEBTS (OTHER THAN MORTGAGE)**

|  |  |
| --- | --- |
| **Description (i.e., Loans, Credit Cards, etc.)** | **Current Balance** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **TOTAL (7):** |  |

**TOTAL ESTATE VALUE \_\_\_\_\_\_\_\_\_\_\_\_**

**(Investable asset total + Item 6) - 7**

**WILLS & TRUST**

|  |  |  |
| --- | --- | --- |
| **Type**  (Will, R Trust, IR Trust, other) | **Name** | **Any Questions or Concerns?** |
|  |  |  |
|  |  |  |
|  |  |  |

**PRIMARY BENEFICIARY INFORMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** |  | **Relationship** |  | **% Allocation** |  |
| **Address** |  | | | | |
| **Date of Birth** |  | **Place of Birth** |  | **Social Security #** |  |
| **Email Address** |  | **Phone Number** |  |  |  |
|  |  |  |  |  |  |
| **Name** |  | **Relationship** |  | **% Allocation** |  |
| **Address** |  | | | | |
| **Date of Birth** |  | **Place of Birth** |  | **Social Security #** |  |
| **Email Address** |  | **Phone Number** |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** |  | **Relationship** |  | **% Allocation** |  |
| **Address** |  | | | | |
| **Date of Birth** |  | **Place of Birth** |  | **Social Security #** |  |
| **Email Address** |  | **Phone Number** |  |  |  |
|  |  |  |  |  |  |
| **Name** |  | **Relationship** |  | **% Allocation** |  |
| **Address** |  | | | | |
| **Date of Birth** |  | **Place of Birth** |  | **Social Security #** |  |
| **Email Address** |  | **Phone Number** |  |  |  |

**CONTINGENT BENEFICIARY INFORMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** |  | **Relationship** |  | **% Allocation** |  |
| **Address** |  | | | | |
| **Date of Birth** |  | **Place of Birth** |  | **Social Security #** |  |
| **Email Address** |  | **Phone Number** |  |  |  |
|  |  |  |  |  |  |
| **Name** |  | **Relationship** |  | **% Allocation** |  |
| **Address** |  | | | | |
| **Date of Birth** |  | **Place of Birth** |  | **Social Security #** |  |
| **Email Address** |  | **Phone Number** |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** |  | **Relationship** |  | **% Allocation** |  |
| **Address** |  | | | | |
| **Date of Birth** |  | **Place of Birth** |  | **Social Security #** |  |
| **Email Address** |  | **Phone Number** |  |  |  |
|  |  |  |  |  |  |
| **Name** |  | **Relationship** |  | **% Allocation** |  |
| **Address** |  | | | | |
| **Date of Birth** |  | **Place of Birth** |  | **Social Security #** |  |
| **Email Address** |  | **Phone Number** |  |  |  |

****

**SIGNATURES**

|  |  |  |  |
| --- | --- | --- | --- |
| I attest, to the best of my knowledge, that this information is correct and up-to-date by initialing each page and signing below: | | | |
| Client 1 Signature: |  | Date: |  |
| Client 2 Signature: |  | Date: |  |

|  |
| --- |
|  |
|  |