

FINANCIAL PLANNING QUESTIONNAIRE



Prepared For:

Prepared By:

Matthew W. Davis

DAVIS FINANCIAL MANAGEMENT, INC.

4901 W. 136th Street
Leawood, KS 66224

PHONE (913) 890-7279
FAX (913) 890-7280

E-Mail: matt@davisfinancialmanagement.com

CLIENT & SPOUSE PROFILE

PERSONAL INFORMATION

Client's Name: _____ SSN: _____

Spouse's Name: _____ SSN: _____

Married, how long?: _____

Is Client a U.S. citizen? Y N

Is Spouse a U.S. citizen? Y N

Client's Birthdate: _____

Spouse's Birthdate: _____

Client's Employer: _____

Spouse's Employer: _____

Client's Occupation: _____

Spouse's Occupation: _____

Primary Contact: Client Spouse

Primary Residence Address:

Used for tax purposes

For how long?: _____

City _____ State _____ Zip Code _____

Preferred Mailing Address: _____

	Phone Number	Fax Number
Residence	()	()
Client Business	()	()
Spouse Business	()	()
Cell/Mobile Phone-Client	()	()
Cell Phone-Spouse	()	()
Client e-mail addresses	Home: _____	Work: _____
Spouse e-mail addresses	Home: _____	Work: _____

At what age do you expect to retire? Client _____ Spouse _____

Who does most of the family budgeting and/or money management? Client Spouse _____

FAMILY INFORMATION

Name	Year of Birth	Male or Female	Relationship to Client or Spouse*	Natural Adopted Stepchild	Dependent (on you for financial support)?
		M F		N A S	Y N
		M F		N A S	Y N
		M F		N A S	Y N
		M F		N A S	Y N
		M F		N A S	Y N
		M F		N A S	Y N
		M F		N A S	Y N
		M F		N A S	Y N

* Some examples would be: son, granddaughter, mother-in-law, etc.

Note here if you are currently pregnant, or have plans to have additional children: _____

Note here if there are any significant health problems with any person listed above: _____

YOUR OTHER CURRENT ADVISORS

ADVISORS	NAME	INCLUDE IN DECISION MAKING?	PHONE
Attorney:		Yes No	()
CPA:		Yes No	()
Insurance Agent:		Yes No	()
Financial advisor:		Yes No	()
Year of last financial plan:	How many financial advisors have you had in the past five years: _____		
Are you considering leaving?	Why? _____		

OPTIONAL PERSONAL INFORMATION

Do you provide financial support for any members of your extended family (e.g., parents, aunts, uncles, siblings, etc.)? If so, in what way?

Client: _____

Spouse: _____

Do you anticipate providing support for anyone in the future? If so, how (if with money, how much) and for how long?

Client: _____

Spouse: _____

Do certain charitable organizations enter into your planning? If so, would you tell us a little about your intentions?

Client: _____

Spouse: _____

Do you expect to receive any inheritances? If so, please describe:

	Amount	Type of property (e.g., stocks, real estate, etc.)	Benefactor's age & relation to you	Is this written in the benefactor's will?
Client:	\$ _____	_____	_____	Y N
	\$ _____	_____	_____	Y N
Spouse:	\$ _____	_____	_____	Y N
	\$ _____	_____	_____	Y N

What is the risk of losing your job for any reason: Client: _____ Spouse: _____

Any big promotions coming up at work? Client: Y N Spouse: Y N Details: _____

Planning to return to college someday? Client: Y N Spouse: Y N Details: _____

What are your long term career goals: Client: _____

Spouse: _____

OPTIONAL PERSONAL INFORMATION, CONTINUED

How do you feel about paying taxes?

Client: _____

Spouse: _____

What is preventing or delaying you from doing those things that are the best use of your time and talents?

Client: _____

Spouse: _____

If you could wave a magic wand and create the perfect life for you and your family, what would it look like?

Client: _____

Spouse: _____

Do you or your spouse have any known medical problems? (e.g., high blood pressure, asthma, etc.)?

Client: _____

Spouse: _____

Do you have any lawsuits pending? Are you the plaintiff or defendant, how much money is involved, etc.

Client: _____

Spouse: _____

Do you or your spouse smoke? Client: Yes No Spouse: Yes No

Are you or your spouse a pilot or a student pilot? If so, state the type of license and hours flown per year.

Client: _____

Spouse: _____

Do you or your spouse engage in any "hazardous" activities (scuba or skydiving, etc.)?

Client: _____

Spouse: _____

What are your primary hobbies and interests?

Client: _____

Spouse: _____

Are you or your spouse a member of any Board of Directors or Board of Trustees?

Corporate

Charitable

How is your credit rating: Client: _____

Spouse: _____

INVESTMENTS: GOALS AND RISK TEMPERAMENT

Your Investment and Planning Goals and Objectives	Not Important		Somewhat Important		Very Important		Your Ranking: 1 - 11 (1 = Most important) Please don't use the same number more than once.		
	Client	Spouse	Client	Spouse	Client	Spouse	Client	Spouse	
1) Accumulating wealth for the future	<input type="checkbox"/>	_____	_____						
2) Charitable giving	<input type="checkbox"/>	_____	_____						
3) Children/Grandchildren's education	<input type="checkbox"/>	_____	_____						
4) Controlling expenses or debt	<input type="checkbox"/>	_____	_____						
5) Emergency cash reserves	<input type="checkbox"/>	_____	_____						
6) Major purchases	<input type="checkbox"/>	_____	_____						
7) Preserving wealth for heirs	<input type="checkbox"/>	_____	_____						
8) Protection from death or disability	<input type="checkbox"/>	_____	_____						
9) Reducing income taxes	<input type="checkbox"/>	_____	_____						
10) Retirement/Financial independence	<input type="checkbox"/>	_____	_____						
11) Other: _____	<input type="checkbox"/>	_____	_____						

Please describe the best, and worst, financial investments you've ever made:

Client: Best: _____ Worst: _____

Spouse: Best: _____ Worst: _____

List any investment-related personal preferences and/or constraints that we should take into consideration:
 Examples: *Don't sell any XYZ stock; don't buy any emerging market funds.*

Client: _____

Spouse: _____

Please list **all** expected cash withdrawals from your investments that you will have with us, and their time frames:
 Examples: *\$10,000 next year to buy a boat. \$3,000 a month forever when I retire in two years.*

Client: _____

Spouse: _____

We'd like to know what you think investment risk is so we'll be talking about the same thing in our discussions. Please write a short sentence describing what you think investment risk is:
 Example: *Investment risk to me means the risk of losing any money that I invested.*

Client: _____

Spouse: _____

How much input do you want to make regarding managing your investments:

Client: _____

Spouse: _____

INVESTMENTS, CONTINUED

(1) Using your above-listed definition of risk, indicate the general level of investment risk you are willing to accept. (Note: Risk and return are linked, meaning that one generally cannot get a high rate of investment return without assuming a high level of investment risk.)

- A Low (I want maximum attention to be paid to minimizing what I said in the above statement.)
B Low to Medium (I want a lot of attention paid to minimizing what I said in the above statement.)
C Medium to High (I want moderate attention paid to minimizing what I said in the above statement.)
D High (I want little attention to be paid to minimizing what I said in the above statement.)

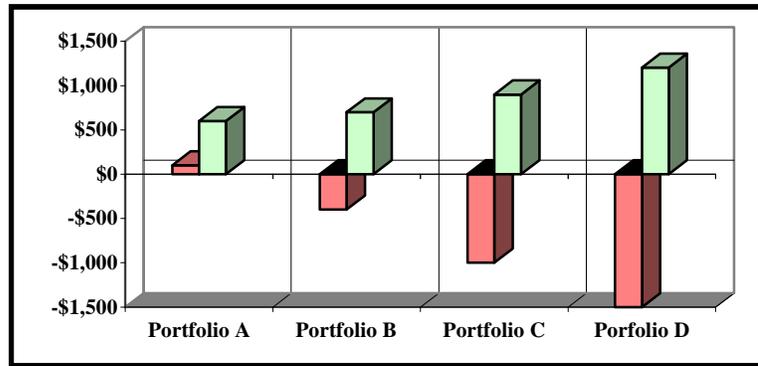
(2) What is the rate of return goal for your total combined investment portfolio? (Note: Having 100% of your assets in a large basket of large stocks (S&P500) has had an average return of about 11% over the last 75 years. Having 100% of your assets in a large basket of small stocks has had an average return of about 13% over the last 75 years. Having more than 70% of your assets invested in stocks is considered to be taking very high risk.)

- A 4.5% to 6.5%
B 6.5% to 8.5%
C 8.5% to 10.5%
D Over 10.5%

(3) Which of the following best describes your investment objectives & temperament? (Check only one box.)

- A Income: Preservation of capital with major emphasis on generating current investment income. Most investment income will be withdrawn and spent. e.g., I want the portfolio to produce income to live off of (either now or in the near future) while minimizing risks of principal loss.
- B Income & Growth: A combination of current income, preservation of capital, and capital appreciation, with the primary consideration being preservation of capital and current income. Some income will be withdrawn. e.g., I want the portfolio to produce income, but also provide enough principal growth so the income will keep pace, or outpace, inflation over a long-time horizon.
- C Growth & Income: A combination of capital appreciation and current income, with the primary consideration being growth of capital. Most income will be reinvested. e.g., I want the portfolio to grow moderately to accumulate wealth for future goals.
- D Growth: Maximum capital appreciation (long-term growth), accepting higher risk and volatility, with little or no income expected or withdrawn. e.g., I want the portfolio to grow substantially to accumulate wealth for future goals.

INVESTMENTS, CONTINUED



(4) The chart above shows the one-year profit/loss on a \$10,000 investment from four different portfolios. Assume you have an equal chance of getting any random positive or negative return within each portfolio's range (do not assume you'll get the average of the minimum and maximum return). Which one portfolio would you choose?

- A Portfolio A (where you'll make anywhere between +\$100 to +\$600, or +1% to +6% over the next year.)
- B Portfolio B (where you'll make anywhere between -\$400 to +\$700, or -4% to +7% over the next year.)
- C Portfolio C (where you'll make anywhere between -\$1,000 to +\$900, or -10% to +9% over the next year.)
- D Portfolio D (where you'll get anywhere between -\$1500 to +\$1200, or -15% to +12% over the next year.)

(5) How do you feel about inflation and its impact on your investments? (Note: The U.S. annual inflation rate has averaged about 3.25% since 1926, but has also been over 10% several years in that period.)

- A I am satisfied with my investments just keeping pace with the rate of inflation, or being slightly above. I am willing to forego returns higher than inflation in order to limit the risk in my investments.
- B I prefer to achieve returns that are slightly to moderately above the rate of inflation (2% to 4% higher). I am willing to assume some risk in my investments in order to achieve such returns.
- C I prefer to achieve returns that are moderately above the rate of inflation (5% to 7% higher). I am willing to assume higher risk in my investments in order to achieve such returns.
- D I prefer that my investments achieve returns much higher than the rate of inflation (>7% higher). I am willing to assume significant risk in order to achieve returns that are much higher than inflation.

(6) How do you feel about short-term (one year or less) fluctuations in the value of your portfolio? (Note: a $\pm 5\%$ fluctuation over one year in a \$10,000 investment would mean its value would fluctuate between \$9,500 and \$10,500 over the year.)

- A I do not want the possibility of substantial fluctuations in the value of my portfolio. I prefer to minimize all fluctuations in the value of my portfolio.
- B I can tolerate small to moderate fluctuations in my portfolio ($\pm 1\%$ to $\pm 5\%$) in order to attempt to outpace inflation over the long term.
- C I can tolerate moderate to high amounts of fluctuations in my portfolio ($\pm 6\%$ to $\pm 10\%$) in order to attempt to achieve returns higher than inflation over the long term.
- D I can tolerate large fluctuations in my portfolio ($\pm >10\%$) in order to increase the potential of achieving returns much higher than inflation over the long term.

INVESTMENTS, CONTINUED

(7) Given the fact that it's normal for the value of investment portfolios to fluctuate year to year, what would you consider to be the maximum acceptable loss to your portfolio over a one-year time frame?

- A Loss of -1% to -5%. (Note: It's normal for even a conservative portfolio to lose money sometimes.)
- B Loss of -6% to -10%.
- C Loss of -11% to -15%.
- D Loss of more than -15%.

(8) How do you see your overall personal and business situation changing in the next few years regarding your family's employment, cash flow, health, legal, taxes, and potential for unforeseen financial expenditures?

- A I am worried that there may be significant changes for the worse on the horizon.
- B Everything seems stable and OK for now, but I'm still worried.
- C Everything seems stable and OK for the foreseeable future, and may improve.
- D Everything seems like it will improve substantially over the foreseeable future.

(9) About what percent of your retirement income (all retirement income, including Social Security and all employer pensions, etc.) do you anticipate coming from your investment portfolio with us?

- A Over 75% of my retirement income will come from my investments with you.
- B 51% to 75% of my retirement income will come from my investments with you.
- C 25% to 50% of my retirement income will come from my investments with you.
- D I/we won't be retiring in the next few years, and/or, less than 25% of my retirement income will come from my investments with you.

(10) How long do you plan to have your money invested before you begin to make withdrawals from it?

- A I expect to start withdrawing money in one year or less (or I'm currently withdrawing income).
- B I expect to start withdrawing money somewhere between one and five years from now.
- C I expect to start withdrawing money somewhere between six and ten years from now.
- D Never, or I expect to start withdrawing money more than ten years from now.

(11) Once you start withdrawing money, over how much time do you anticipate withdrawing it?

- A One year or less.
- B Over a period of from 1 to 5 years.
- C Over a period of from 6 to 10 years.
- D More than 10 years, or over my lifetime.

(12) If you plan on taking any lump-sum withdrawals from your portfolio in the next year, approximately how much would it be? (Note: This is in addition to any regular monthly income distributions.)

- A I plan to take out 25% or more from my portfolio in the next year.
- B I plan to take out between 10% and 25% of my portfolio in the next year.
- C I plan to take out less than 10% of my portfolio in the next year.
- D I have no plans on making any lump-sum distributions in the next year.

INVESTMENTS, CONTINUED

(13) Assume that all of your U.S. stock holdings are invested in one U.S. stock mutual fund (we know this is unrealistic, but please humor us and assume!). The stock market (and your fund) has experienced a near crash, losing 25% of its value in one month. What action would you take assuming this happened last month?

- A Sell the stock fund. I am afraid the market is in a downturn, and I can't afford more decreases in value.
- B Sell half of my investment in the fund. I think that the market may rebound, but I'm not willing to leave all of my investments exposed to further loss.
- C Hold the fund. I understand that my investments may be subject to short-term price swings, and am comfortable "weathering the storm."
- D Buy more of the stock fund to take advantage of its low price. I am comfortable with market fluctuations, and assume that the fund will eventually regain its previous value, or increase in value.

(14) Again, assume that all of your U.S. stock holdings are invested in one U.S. stock mutual fund. The stock market has been gradually declining at an average of 2% per month. This slow decline is also reflected in your stock mutual fund. Your investment has lost 24% of its value from a year ago. You:

- A Sell the fund and realize the 24% loss. I do not believe the fund will regain its value.
- B Sell half of my investment in the fund. I am not willing to leave all of my investment at risk for further loss.
- C Do nothing. I am comfortable waiting for the fund to regain its previous value, or increase in value.
- D Invest more now because the fund is selling for much less than it was 12 months ago. I believe the fund will regain its value, or possibly appreciate higher than its initial value.

(15) Which one of the following investments have you utilized most in the past AND feel most comfortable with investing in the future?

- A Savings accounts, CDs, savings bonds, money market funds, and/or government/municipal bonds.
- B Corporate bonds or stocks, mutual funds holding these assets, and/or rental real estate.
- C International stocks or bonds; or mutual funds that invest mostly in these types of securities.
- D Limited partnerships, commodities like gold, penny stocks, or derivatives such as options or futures.

(16) How much experience do you have with investing your own funds?

- A None (e.g., I have very limited knowledge or expertise.)
- B A little (e.g., I've bought some mutual funds and/or have self-directed my 401(k) funds.)
- C Some (e.g., I keep informed on the subject and have invested money myself here and there.)
- D Extensive (e.g., I watch the markets routinely, and control how my funds are invested.)

(17) What is your estimate of the average annual rate of return for the U.S. stock market over the next 10 years?

- A Between -1% to -5% (loss) and 1% to 5% (gain).
- B Average annual gains of around 5% to 10%.
- C Average annual gains of around 10% to 15%.
- D Average annual gains of more than 15%.

INVESTMENTS, CONTINUED

(18) What's your outlook for U.S. business conditions, economic growth, employment, inflation, and the overall economy over the next few years?

- A I am worried that there may be a slowdown in business, higher inflation, and/or higher unemployment.
- B I think that business conditions and the overall economy will be about the same, but I'm still worried.
- C I think that business conditions and the overall economy will be about the same, and may improve.
- D I think that business conditions and the overall economy will improve substantially.

(19) Imagine you owned what you thought was a conservative investment portfolio. Over the last year, it lost 5% of its value. Over the same period, the stock market as a whole lost 10%.

- A I am shocked and upset that my conservative portfolio could actually lose money.
- B I am surprised and concerned that my conservative portfolio actually lost money.
- C I feel OK that my conservative portfolio lost only 5% when the market was down 10%.
- D I am very happy that my conservative portfolio only lost 5% while the market was down 10%.

(20) Imagine your growth and income investment portfolio (invested 60% in stocks) increased 15% over the last year, while the stock market as a whole went up 25% over the same period.

- A I feel OK because I didn't lose money, and my return was still much higher than bank investments.
- B I feel OK as long as the portfolio doesn't lag the market by so much every year.
- C I am curious and concerned why my portfolio did not keep up with the stock market as a whole.
- D I don't understand why my portfolio did not outperform the stock market as a whole.

(21) You've just received a windfall equal to one-half of your current investment portfolio. How would you invest these proceeds?

- A I would invest in something that offered moderate current income and was very conservative.
- B I would invest in something that offered high current income with a moderate amount of risk.
- C I would invest in something that offered high total return (current income plus capital appreciation) with a moderately high amount of risk.
- D I would invest in something with substantial capital appreciation potential even though it was risky.

(22) Which option in both questions (A) and (B) would make you the most upset? (Please answer both A & B.)

- A Holding cash/money market funds when the market goes up; OR
 Holding stocks when the stock market goes down.
- B Selling a stock and seeing it immediately increase in value; OR
 Buying a stock and having it immediately decrease in value.

(23) Do you realize that the U.S. stock market as a whole has lost over 30% in one year several times in the past, and is likely to lose this much - or more - in one year, sometime in your lifetime?

- A Yes, I realize this is possible.
- B No, I didn't know this, or don't think this is possible.

(24) Do you realize that it's possible for an individual stock to lose 90% of its value over one year, and that even longer term U.S. Treasury bonds can lose more than 15% of their principal value over one year?

- A Yes, I realize this is possible.
- B No, I didn't know this, or don't think this is possible.

INVESTMENTS, CONTINUED

RISK CATEGORY CALCULATOR*

Your answers will select the risk category that best fits your goals and objectives.

Step 1: Circle the answer (and weight) you gave for each question.

Step 2: Multiply the Answer Weight found in Step 1 by the Question Weight, and put the product in the Total Question & Answer Score column.

Step 3: Add all the numbers in the Total Question & Answer Score column and enter the total in the last row.

Step 4: Your Grand Total Score then selects your risk category as shown at the bottom of this page.

Question Number	Answer Weight (circle the number corresponding to the answer you gave)	Question Weight	Total Question & Answer Score (Answer Weight times Question Weight)
1	a = 1 b = 2 c = 3 d = 4	4	
2	a = 1 b = 2 c = 3 d = 4	3	
3	a = 1 b = 2 c = 3 d = 4	3	
4	a = 1 b = 2 c = 3 d = 4	3	
5	a = 1 b = 2 c = 3 d = 4	3	
6	a = 1 b = 2 c = 3 d = 4	3	
7	a = 1 b = 2 c = 3 d = 4	5	
8	a = 1 b = 2 c = 3 d = 4	5	
9	a = 1 b = 2 c = 3 d = 4	2	
10	a = 1 b = 2 c = 3 d = 4	2	
11	a = 1 b = 2 c = 3 d = 4	2	
12	a = 1 b = 2 c = 3 d = 4	2	
13	a = 1 b = 2 c = 3 d = 4	2	
14	a = 1 b = 2 c = 3 d = 4	2	
15	a = 1 b = 2 c = 3 d = 4	1	
16	a = 1 b = 2 c = 3 d = 4	1	
17	a = 1 b = 2 c = 3 d = 4	1	
18	a = 1 b = 2 c = 3 d = 4	1	
19	a = 1 b = 2 c = 3 d = 4	1	
20	a = 1 b = 2 c = 3 d = 4	1	
21	a = 1 b = 2 c = 3 d = 4	1	
			Grand Total Score:

If your Grand Total Score is between 48 to 80, your risk category is considered to be Conservative.

If your Grand Total Score is between 81 to 111, your risk category is considered to be Moderately Conservative.

If your Grand Total Score is between 112 to 140, your risk category is considered to be Moderate.

If your Grand Total Score is between 141 to 167, your risk category is considered to be Moderately Aggressive.

If your Grand Total Score is between 168 to 192, your risk category is considered to be Aggressive.

CREATING YOUR PERSONAL STATEMENT OF EXPECTATIONS

A sample list might look like this:

- Client:** 1) *We need quality investment advice because we don't have time to do it ourselves.*
2) *We want to get a good return on our investments, but we don't want to worry about them.*
3) *We want to be informed about income tax saving opportunities.*
4) *We would like to have financial statements that we can easily understand.*

- Spouse:** 1) *Our accountant needs timely information for our tax returns.*
2) *We want ideas how to help our children and grandchildren financially.*
3) *We are worried about paying too much in federal estate taxes.*
4) *We want to be kept informed about ideas that may be useful to us or to our children.*

CLIENT:

- 1) _____
2) _____
3) _____
4) _____
5) _____

Is there anything you think we should have asked you on these forms, but didn't? _____

SPOUSE:

- 1) _____
2) _____
3) _____
4) _____
5) _____

Is there anything you think we should have asked you on these forms, but didn't? _____

ASSET SUMMARY

Asset Type	Dollar Amount	Liability Type	Dollar Amount
CASH EQUIVALENTS:		REAL ESTATE DEBT:	
Checking & Savings Accounts	\$ _____	1 st Mortgage on	\$ _____
Money Market Accounts	\$ _____	2 nd Mortgage on Residence	\$ _____
CDs (Certificates of Deposit)	\$ _____	Loans on Other Residences	\$ _____
T-Bills	\$ _____	All Rental Mortgages	\$ _____
Whole Life Insurance Cash Values	\$ _____	Subtotal:	\$ _____
(↑ <i>Not death benefit!</i>) Subtotal:	\$ _____	OTHER LIABILITIES:	
SECURITIES (NON-CASH):		All Vehicle Loans	\$ _____
Individual Bonds or Notes	\$ _____	Credit Card Debt (not paid off monthly)	\$ _____
Mutual Funds	\$ _____	All Aircraft & Boat Loans	\$ _____
Fixed Annuities	\$ _____	Investment/Margin Loans	\$ _____
Variable Annuities	\$ _____	Business Loans	\$ _____
Variable Life Cash Values	\$ _____	Life Insurance/401(k)	\$ _____
Individual Stocks	\$ _____	All Other Debt or Loans	\$ _____
Limited partnerships	\$ _____	All Other Debt or Loans	\$ _____
Subtotal:	\$ _____	Total:	\$ _____
OTHER SECURITIES:		TOTAL ASSETS:	\$ _____
IRAs/Keoghs/TSAs/401(k)s	\$ _____	TOTAL LIABILITIES:	\$ _____
Precious Metals	\$ _____	NET WORTH:	\$ _____
ESOP/Employer Stock Options	\$ _____		
Business Interests (Assets)	\$ _____		
Loans Payable to You	\$ _____		
Rental Real Estate	\$ _____		
Raw Land & Other Real Estate	\$ _____		
Subtotal:	\$ _____		
PERSONAL EFFECTS:			
Personal Residence	\$ _____		
Gems, Artwork, Collections	\$ _____		
Autos & Personal Effects	\$ _____		
Total:	\$ _____		

Client Incomes:	
Total Annual Earned Income:	\$ _____
Total Annual Unearned Income:	\$ _____
Spouse Incomes:	
Total Annual Earned Income:	\$ _____
Total Annual Unearned Income:	\$ _____

Tax Rate:

ESTATE PLANNING

	Client	Spouse
Do you have a current will?	Y N	Y N
Do you have trusts of any kind? Please specify: _____	Y N	Y N
Does your will contain a durable power of attorney?	Y N	Y N
Does your will contain a health care power of attorney?	Y N	Y N
When was your will last revised?		
Any life insurance beneficiaries remaining from previous marriages?	Y N	Y N
Do you have guardians named for your children in your will?	Y N	Y N
Estimated charitable contributions you wish to make upon first death	\$	\$
How much money do you wish to leave to your heirs at the first death?	\$	\$
How much money do you wish to leave to your heirs at second death?	\$	\$
Estimated charitable contributions you wish to make upon second death	\$	\$

COLLEGE AND EDUCATIONAL PLANNING

Student's Name and Relationship to You	Age the Student will Enter College	Number of Years of Attending College	Name of College or University (or average public or private school)	Student's Current Grade in School (e.g. K-12)	Annual Current Cost (Tuition + Room & Board)*
					\$
					\$
					\$
					\$
					\$

Below, please list **only** current assets that you have earmarked for meeting the goal of college funding. Please do not list any current asset that you own for any other purpose, such as retirement or general investing.

Asset Type	Name of Student this Asset is Meant for	Current Market Value (nearest \$1,000)	Current Monthly Contribution (nearest \$100)	Annual Inflation Rate of Monthly Contribution	Your Age When These Monthly Contributions Will Begin & End
------------	---	--	--	---	--

CASH EQUIVALENTS:

					Begin	End
Savings Accounts		\$	\$	%		
Money Market Accounts		\$	\$	%		
CDs (Certificates of Deposit)		\$	\$	%		
T-Bills		\$	\$	%		
Whole Life Insurance Cash		\$	\$	%		
(↑ <i>Not the death benefit!</i>)	Subtotal:	<u>\$</u>	<u>\$</u>			

SECURITIES (NON-CASH):

Individual Bonds or Notes		\$	\$	%		
Mutual Funds		\$	\$	%		
Fixed Annuities		\$	\$	%		
Variable Annuities		\$	\$	%		
Variable Life Cash Values		\$	\$	%		
Individual Stocks		\$	\$	%		
Limited partnerships		\$	\$	%		
Other		\$	\$	%		
Other		\$	\$	%		
	Subtotal:	<u>\$</u>	<u>\$</u>			

FINANCIAL INFORMATION

Other Assets

Description	Estimated Taxable Income/Loss	Cost (Tax Basis)	Estimated Value	Annual Growth (\$Amt./Yr. or %/Yr.)	Owner
Personal effects (furniture, automobiles, jewelry, art, collections, etc.)					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Trusts					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Expectancy of inheritance					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Gold, silver and precious stones					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Miscellaneous					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Total	\$ _____	\$ _____	\$ _____		

FINANCIAL INFORMATION, CONTINUED

Real Estate

Description and Location	Date Acquired	Taxable Income	Annual Cash Flow	Cost (Tax Basis)	Estimated Value	Real Estate Debt	Owner
(Home) _____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____
(Vacation Home) _____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____
Total		\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	

FINANCIAL INFORMATION, CONTINUED

Analysis of Expenditures

	<u>MONTHLY</u>	or	<u>ANNUALLY</u>
HOUSING			
House payment	_____		_____
Rent payment	_____		_____
Lease payment (not mortgage)	_____		_____
Property improvements	_____		_____
Home association dues	_____		_____
Household incidentals (supplies)	_____		_____
Household furnishings	_____		_____
Other:_____	_____		_____
FOOD			
Groceries	_____		_____
Dining out	_____		_____
Other:_____	_____		_____
CLOTHING			
Clothing	_____		_____
Dry cleaning	_____		_____
Other:_____	_____		_____
PERSONAL CARE			
(hair styling, etc.)	_____		_____
Other:_____	_____		_____
AUTOMOBILE			
Monthly payment	_____		_____
Operating expenses (gas, oil, etc.)	_____		_____
Maintenance	_____		_____
Lease payment	_____		_____
Other: _____	_____		_____
PROPERTY TAX			
Automobile	_____		_____
House	_____		_____
Boat	_____		_____
Trailer	_____		_____
Other:_____	_____		_____
UTILITIES			
Telephone	_____		_____
Cellular phone	_____		_____
Water	_____		_____
Electric	_____		_____
Gas	_____		_____
Trash Removal	_____		_____
Cable	_____		_____
Other:_____	_____		_____

FINANCIAL INFORMATION, CONTINUED

Analysis of Expenditures (Continued)

	<u>MONTHLY</u>	or	<u>ANNUALLY</u>
ENTERTAINMENT			
Vacations	_____		_____
Newspaper	_____		_____
Movies (theatre, video, plays, etc.)	_____		_____
Club dues (gold, music, etc.)	_____		_____
Other:_____	_____		_____
ALIMONY	_____		_____
CHILD SUPPORT	_____		_____
CHILD CARE			
Day care	_____		_____
Domestic help (babysitter)	_____		_____
Other:_____	_____		_____
GIFTS			
Birthdays	_____		_____
Christmas	_____		_____
Anniversaries	_____		_____
Other:_____	_____		_____
CHARITABLE CONTRIBUTIONS			
(Churches, schools, etc.)	_____		_____
Other:_____	_____		_____
MEDICAL EXPENSES			
Doctor visit	_____		_____
Prescriptions	_____		_____
Dental care	_____		_____
Vision care	_____		_____
Other: _____	_____		_____
INSURANCE			
Health	_____		_____
Automobile	_____		_____
Homeowners	_____		_____
Renters	_____		_____
Life	_____		_____
Umbrella liability	_____		_____
Professional liability	_____		_____

FINANCIAL INFORMATION, CONTINUED

Liabilities

<i>Description</i>	<i>Current Value</i>	<i>Owner</i>	<i>Amount Borrowed</i>	<i>Closing Date</i>	<i>Interest Rate</i>	<i>Loan Type</i>	<i>Loan Term</i>	<i>Monthly Payment</i>
<i>Real Estate Mortgages</i>								
Principal residence	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
Second home	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
<i>Bank Loans and Installment Debt</i>								
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
<i>Credit Cards</i>								
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
<i>Other Liabilities</i>								
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
_____	\$ _____	_____	\$ _____	_____	_____ %	_____	_____	\$ _____
Total Liabilities	\$ _____		\$ _____					\$ _____

FINANCIAL INFORMATION, CONTINUED

Life Insurance

List all life insurance policies in which you or your spouse are the insured or have any ownership rights. Ownership rights include the right to designate the beneficiary, to borrow against the policy, etc. This schedule should include policies held in life insurance trusts, in which case the trustee should be listed as the policy owner on line K.

	Policy No. 1	Policy No. 2	Policy No. 3	Policy No.4	Policy No. 5
A. Insurance Company	_____	_____	_____	_____	_____
B. Type of Policy	_____	_____	_____	_____	_____
C. Policy Date	_____	_____	_____	_____	_____
D. Face Value	_____	_____	_____	_____	_____
E. Additions (PUA)	_____	_____	_____	_____	_____
F. Cash Value	_____	_____	_____	_____	_____
G. Employer-provided (Yes/No)	_____	_____	_____	_____	_____
H. Outstanding Loans	_____	_____	_____	_____	_____
I. Net Insurance Benefit	_____	_____	_____	_____	_____
J. Annual Premium	_____	_____	_____	_____	_____
K. Policy Owner	_____	_____	_____	_____	_____
L. Beneficiary	_____	_____	_____	_____	_____

FINANCIAL INFORMATION, CONTINUED

Disability Insurance

	Policy No.1	Policy No.2	Policy No.3
A. Name of Insured	_____	_____	_____
B. Policy owner	_____	_____	_____
C. Policy number	_____	_____	_____
D. Insurance company	_____	_____	_____
E. Date of issue	_____	_____	_____
F. Employer-provided insurance (Yes/No)	_____	_____	_____
G. Definition of disability-Unable to perform (check one):			
(1) Own occupation	_____	_____	_____
(2) Occupation for which reasonably suited by training and education	_____	_____	_____
(3) Any occupation	_____	_____	_____
(4) Other	_____	_____	_____
H. Annual premium	_____	_____	_____
I. Waiver of premium	_____	_____	_____
J. Waiting period	_____	_____	_____
K. Monthly benefit	_____	_____	_____
L. Duration of benefit	_____	_____	_____
M. Partial disability coverage	_____	_____	_____
N. Residual disability coverage	_____	_____	_____
O. Inflation-adjusted benefits	_____	_____	_____
P. Guaranteed renewable (Yes/No)	_____	_____	_____

FINANCIAL INFORMATION, CONTINUED

Disability Income

	Client	Spouse
Defined Benefit Pension Plan Disability Benefit	_____	_____
Other Pension and Annuity Payments Due	_____	_____
Disability Cash Flow Requirement	_____	_____

Property and Liability Insurance

	Policy No.1	Policy No.2	Policy No.3
Homeowners Insurance			
A. Address of Property	_____	_____	_____
B. Policy number	_____	_____	_____
C. Insurance company	_____	_____	_____
D. Insurance level (indicate if HO-1, HO-2, HO-3, etc.)	_____	_____	_____
E. Co-insurance percent	_____	_____	_____
F. Replacement cost of dwelling	_____	_____	_____
G. Coverage			
(1) Dwelling	_____	_____	_____
(2) Detached structures	_____	_____	_____
(3) Personal property	_____	_____	_____
(4) Loss of use	_____	_____	_____
(5) Personal liability	_____	_____	_____
(6) Medical payments to others	_____	_____	_____

FINANCIAL INFORMATION, CONTINUED

H. Specific floaters for jewelry and other collectibles (describe)

I. Replacement cost coverage for home And personal effects (Yes/No)

J. Amount of deductible

K. Annual premium

	Policy No.1	Policy No.2	Policy No.3
--	-------------	-------------	-------------

Umbrella Liability Insurance

A. Policy number

B. Insurance company

C. Liability limits

D. Requisite auto liability coverage

E. Co-insurance percent

F. Other required liability coverages (describe)

I. Amount of deductible

J. Annual premium

FINANCIAL INFORMATION, CONTINUED

Automobile Insurance	Vehicle No.1	Vehicle No.2	Vehicle No.3
A. Vehicle description	_____	_____	_____
B. Policy number	_____	_____	_____
C. Insurance company	_____	_____	_____
D. Name of insured	_____	_____	_____
E. Additional drivers covered	_____	_____	_____
F. Bodily injury liability limits			
(1) For each accident	_____	_____	_____
(2) For each person injured	_____	_____	_____
G. Property damage liability limit	_____	_____	_____
H. Medical payments limit (each person)	_____	_____	_____
I. No-fault benefits	_____	_____	_____
J. Uninsured motorist coverage	_____	_____	_____
K. Coverage for rental car	_____	_____	_____
L. Amount of deductible	_____	_____	_____
(1) Collision	_____	_____	_____
(2) Comprehensive	_____	_____	_____
M. Annual premium	_____	_____	_____