

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please complete this questionnaire and return it to us in advance of your introductory appointment. We will hold this information in strict confidence.

**GENERAL INFORMATION**

Client #1 - Nationality: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Legal Name: \_\_\_\_\_

Client # 2- Nationality: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Legal Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Preferred Phone # \_\_\_\_\_ Preferred Fax # \_\_\_\_\_

Preferred E-mail Address(es): \_\_\_\_\_

Client #1 Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Client #2 Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

**Children:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Client #1 Parents' age, financial & health status: \_\_\_\_\_

Client #2 Parents' age, financial & health status: \_\_\_\_\_

Do you expect any inheritance(s)? If so, approximately when and how much? \_\_\_\_\_

**GOALS & OBJECTIVES**

What are your top financial concerns? \_\_\_\_\_

What three significant "things" do you want to accomplish during the next ten years? \_\_\_\_\_

What is standing in your way? \_\_\_\_\_

When do you expect to retire? Client #1: \_\_\_\_\_ Client #2: \_\_\_\_\_

What life-goals do you want to accomplish once you achieve financial independence? \_\_\_\_\_

How involved would you like to be in developing and implementing your financial plan? \_\_\_\_\_

**FINANCIAL INFORMATION**

Income:

Client #1 Salary \$ \_\_\_\_\_/year Bonus \$ \_\_\_\_\_  
 (Number of pay periods \_\_\_\_\_/yr.)

Client #2 Salary \$ \_\_\_\_\_/year Bonus \$ \_\_\_\_\_  
 (Number of pay periods \_\_\_\_\_/yr.)

Other Income (including Self-employment, Rental Income, Dividends & Interest, Capital Gains, Social Security, Pension, Annuity, Trust Funds):

Client #1 \$ \_\_\_\_\_/year source \_\_\_\_\_ \$ \_\_\_\_\_/year source \_\_\_\_\_  
 \$ \_\_\_\_\_/year source \_\_\_\_\_ \$ \_\_\_\_\_/year source \_\_\_\_\_

Client #2 \$\_\_\_\_\_/year source\_\_\_\_\_ \$\_\_\_\_\_/year source\_\_\_\_\_

\$\_\_\_\_\_/year source\_\_\_\_\_ \$\_\_\_\_\_/year source\_\_\_\_\_

Contributions to 401(k), 403(b), or other retirement plans:

Client #1: \_\_\_\_\_/yr. Client #2: \_\_\_\_\_/yr.

**NET WORTH:**

Item	Assets	Liabilities
Liquid Assets		
Taxable Investments		
IRA & Retirement Accounts		
Stock Options		
Personal Residence		
Real Estate		
Vehicles		
Personal Property		
Other		

Other asset or liability information: \_\_\_\_\_

What is your approximate net worth (assets – liabilities)? \_\_\_\_\_

Have you previously worked with a financial advisor/planner? \_\_\_\_\_

**Education:**

If your children/grandchildren are minors, do you plan to pay for some or all of their education costs? If so, what percentage? \_\_\_\_\_%

**Estate Planning:**

Do you have an up-to-date estate plan (wills, trusts, powers of attorney, and living wills)? \_\_\_\_\_

If your children are minors, have you nominated a guardian? \_\_\_\_\_

Do you plan to make significant lifetime gifts to your children? \_\_\_\_\_

Do you wish to provide an inheritance to your children? \_\_\_\_\_

Have you included charitable giving in your estate plan? \_\_\_\_\_

Do you carry life/disability/long-term care insurance? If so, please provide details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How did you discover PFPG? (*check all that apply*)

NAPFA     FPA     PFPG website     Friend/Relative     PFPG Client     Professional Advisor

\_\_\_\_\_ Advertisement / Sponsorship (*please indicate which one, eg: Yellow Pages, DownEast Magazine, Portland Magazine, Portland Stage/Merrill Auditorium Program, etc.*)

What else would you like us to know about your personal or financial situation? \_\_\_\_\_

\_\_\_\_\_