RETIREPATH

FINANCIAL QUESTIONNAIRE

Date: _____

CONTACT INFORMATION

First Name: _____ Last Name: _____

Nick Name: _____ Date of Birth: _____

Retired? _____

Employer: _____ Job Title: _____

Cell Phone: _____ Email: _____

Home Phone: _____ Address: _____

Martial Status: _____

Spouse Name: _____ Spouse Nickname: _____

Spouse Date of Birth: _____ Spouse Phone: _____

Spouse Email: _____ Retired? _____

Spouse working at\Retired From: _____

Spouse Current\Former Occupation: _____

Were you referred to us? _____ If so, by whom? _____

FAMILY

Child Name	Date of Birth	Number of Grandchildren	Grandchildren's Ages

Who are your trustees and/or executor: _____

Do any of your children or grandchildren have special needs? _____

Are any of your children or grandchildren listed as joint owners? _____

LEGAL AND ADDITIONAL ITEMS

Which of the following documents do you have?

LEGAL AND ADDITIONAL ITEMS	ANSWER	DATE LAST UPDATED
Will		
Power of Attorney (POA) Assets		
Power of Attorney (POA) Health		
Living Will		
Living Trust		
Umbrella Policy		
Long - Term Care Insurance		
Life Insurance		Death Benefit: Cash Value:

CASH FLOW

Comprehensive Income Disclosure
Annual income before tax from each source:

INCOME SOURCE	APPLICANT	SPOUSE
Social Security		
Survivor Options		
Pension		
Wages		
Other Income		
Retirement Plan Contributions		
TOTAL		

How much are your monthly expenses? _____

Is your monthly recurring income sufficient and comfortable? _____

Do you take additional withdrawals from your portfolio to supplement your monthly recurring income? _____

Do you have a tax strategy with your portfolio withdrawals? _____

Do you foresee any large purchases within the next 3 years? _____

Do you contribute annually to charity? _____

ASSETS

Accounts

The accounts you currently hold. Note the approximate value and bring in the latest statement:

ACCOUNT TYPE	NAME	AMOUNT

Properties

TYPE	NAME	VALUE	BALANCE OWED AMOUNT	MONTHLY PAYMENT AMOUNT	PAY OFF DATE

Total Approximate Net Worth? _____

LIFE EVENTS

In the near future, I expect to: _____

If you are not already retired, when do you want to retire? _____

What is your after-tax retirement income goal? _____

How did you aquire your wealth? _____

Who else do you rely on for financial advice and decisions? _____

If something were to happen to you tomorrow, who do you want taken care of? _____

What are your top 3 concerns? _____

Please prioritze your financial objectives by numbering the following 1 through 9, with 1 being the most important:

Income Now	**Guarantees Provided**	**Pass to beneficiaries**
Preserve Principal	Income Later	Create a Tax Strategy
Growth Potential	Reduce Risk	

Please pick the top two for your retirement "nest egg" money. _____

Risk tolerance? _____

How would you describe your investment knowledge? _____