**Introduction** Congratulations! You are taking the first step toward developing a strong financial strategy. This questionnaire will help us understand your financial goals, priorities, and circumstances to create a tailored plan for you.

All information provided is **strictly confidential** and will be used solely for financial planning purposes.

**Personal Information**

**You & Your Spouse/Partner’s Details:**

* **Full Name (You):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Full Name (Spouse/Partner):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Date of Birth (You):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Date of Birth (Spouse/Partner):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Marital Status:** [ ] Single [ ] Married [ ] Divorced [ ] Widowed
* **Dependents (Names & Ages):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Primary Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Phone Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Email Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Employment & Income**

* **Occupation (You):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Occupation (Spouse/Partner):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Employer (You):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Employer (Spouse/Partner):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Annual Income (You):** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Annual Income (Spouse/Partner):** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Other Sources of Income:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Financial Goals & Priorities**

1. What are your top three financial goals? (e.g., retirement, home purchase, education planning)
2. What is your investment risk tolerance? [ ] Low [ ] Moderate [ ] High
3. Do you have a financial plan in place? [ ] Yes [ ] No
4. What is your desired retirement age? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Assets & Liabilities**

**Assets:**

* **Cash & Bank Savings:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Investment Accounts (Stocks, Bonds, etc.):** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Retirement Accounts (401k, IRA, etc.):** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Real Estate (Primary Home Value):** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Other Real Estate or Assets:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Liabilities:**

* **Mortgage Balance:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Car Loans:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Student Loans:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Credit Card Debt:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Other Debts:** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Insurance & Estate Planning**

1. Do you have life insurance? [ ] Yes [ ] No
	* If yes, coverage amount: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Do you have health insurance? [ ] Yes [ ] No
3. Do you have disability insurance? [ ] Yes [ ] No
4. Do you have a will or estate plan? [ ] Yes [ ] No

**Retirement Planning**

1. Current Retirement Savings: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Expected Monthly Retirement Expenses: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Do you anticipate receiving Social Security benefits? [ ] Yes [ ] No

**Additional Information**

Is there any other financial information or concerns you would like to discuss?

**Thank you for completing this questionnaire!** Our team will review your information and schedule a consultation to discuss your financial plan.

\*For further assessment, we may require actual financial statements – Again, All information provided is **strictly confidential** and will be used solely for financial planning purposes.