

**DOCUMENTS REQUIRED**

1. Copies of existing wills.
2. Copies of any trust agreements in effect.
3. Copies of federal tax returns for the last three years.
4. Annual reports, tax returns, and other agreements regarding ownership in closely held corporations, partnerships, joint ventures, or other businesses.
5. Life insurance policies or summary of policies owned.
6. Copies of divorce settlements, separation agreements, etc.
7. Federal estate tax returns, if you or your spouse has been the beneficiary of any estates.
8. Federal gift tax returns.
9. Most recent report of vested interest in pension and/or profit-sharing plans, including IRAs.
10. Outlines of other information regarding other corporate benefits, such as hospitalization, disability insurance, etc.
11. Listing of assets with an estimate as to fair market values, as well as a listing of liabilities (may be presented informally or use forms supplied).
12. Estimate of monthly/annual budget information (use forms provided).
13. Other:

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Please bring these documents with you to your next appointment.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Time

## PERSONAL PROFILE

### GENERAL INFORMATION:

Date \_\_\_\_\_

Client's full name \_\_\_\_\_

Client's place of birth \_\_\_\_\_ Birth date \_\_\_\_\_

Citizenship \_\_\_\_\_

Spouse's name \_\_\_\_\_

Spouse's place of birth \_\_\_\_\_ Birth date \_\_\_\_\_

Citizenship \_\_\_\_\_

Place and year married \_\_\_\_\_

Present permanent address :

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

Home phone : \_\_\_\_\_ E-mail address: \_\_\_\_\_

Have you ever lived in a community property state?

Yes Date and place \_\_\_\_\_

No

Client or spouse previously married?  Yes  No

Client's father

Deceased?

Yes Date and cause of death \_\_\_\_\_

No

Age \_\_\_\_\_

Client's mother

Deceased?

Yes Date and cause of death \_\_\_\_\_

No

Age \_\_\_\_\_

Spouse's father

Deceased?

Yes Date and cause of death \_\_\_\_\_

No

Age \_\_\_\_\_

Spouse's mother

Deceased?

Yes Date and cause of death \_\_\_\_\_

No

Age \_\_\_\_\_

Any family health problems?

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

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Location of assets outside of estate: \_\_\_\_\_  
\_\_\_\_\_

**DEPENDENTS AND BENEFICIARIES:**

Children (please indicate if there are any grandchildren by placing an asterisk (\*) before the name of the parent):

Name	Address	Birth Date	Marital Status
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other dependents and beneficiaries:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do any beneficiaries require special attention? (Please explain.)  
\_\_\_\_\_  
\_\_\_\_\_

Estimated cost of children's education:  
\_\_\_\_\_  
\_\_\_\_\_

**GIFTS:**

Have you made gifts in excess of \$3,000 per year (prior to 1982) or \$10,000 per year (after 1981) for each donee?  
If so, please list or attach copies of gift tax returns.

Donor	Donee Name	Date of Gift	Property Given/Value	Return Filed?
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**TRUSTS AND MISCELLANEOUS:**

Please place an X in the appropriate column if you ever

Client    Spouse

- |  |       |       |
|--|-------|-------|
| 1. Created a Trust   | _____ | _____ |
| 2. Opened a joint savings or checking account                                  | _____ | _____ |
| 3. Opened a savings or checking account in trust for another                   | _____ | _____ |
| 4. Purchased property in joint ownership with unequal contribution toward cost | _____ | _____ |

Also, please furnish documents, such as trust agreements, trust returns, etc. for any X above.

**Safe Deposit Box:**

Location: \_\_\_\_\_

Contents: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Key Located \_\_\_\_\_

**PROFESSIONAL ADVISORS:**

Please list your advisor's name, firm, and address:

Attorney \_\_\_\_\_

Accountant \_\_\_\_\_

Banker \_\_\_\_\_

Insurance \_\_\_\_\_

Broker \_\_\_\_\_

**CURRENT EMPLOYMENT:**

	Company	Position	Year of Employment	Employer's phone #
Client	_____	_____	_____	_____
Spouse	_____	_____	_____	_____

**Please also give a brief description of client's and spouse's work experience.**

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

**EXPECTANCIES:**

Please list any possible receipts from inheritances or other sources:

Source	Description	Estimated value

## STATEMENT OF NET WORTH

What You Own	Ownership				Annual % Growth
	CLIENT	SPOUSE	JOINT	TOTAL	
<b>1. LIQUID ASSETS:</b>					
Cash (Checking, Savings Accounts)					
Treasury Bills					
Savings Certificates					
Money Market Funds					
Cash Value of Life Insurance					
<b>TOTAL Liquid Assets</b>					
<b>2. INVESTMENT ASSETS:</b>					
Notes Receivable					
Marketable Securities: Stocks					
Marketable Securities: Bonds					
Real Estate (Investments)					
Tax Incentive Investments					
Other Investment Assets (describe)					
a. _____					
b. _____					
c. _____					
d. _____					
Retirement Funds					
<b>TOTAL Investment Assets</b>					

## STATEMENT OF NET WORTH

What You Own	Ownership				Annual % Growth
	CLIENT	SPOUSE	JOINT	TOTAL	
<b>3. PERSONAL ASSETS:</b>					
Residence					
Vacation Home					
Household Furnishings					
Art and Antiques					
Vehicles					
Boats					
Other Personal Assets					
<b>TOTAL Personal Assets</b>					
<b>TOTAL ASSETS</b>					
<b>TOTAL Investment Assets</b>					

## STATEMENT OF NET WORTH

What You Own	Ownership				Annual % Growth
	CLIENT	SPOUSE	JOINT	TOTAL	
<b>4. SHORT-TERM OBLIGATIONS:</b>					
Consumer Credit Obligations					
Borrowings on Life Insurance					
Installment Loans					
Accrued Income Taxes					
Other Investment Assets (describe)					
a. _____					
b. _____					
c. _____					
d. _____					
<b>TOTAL Short-Term Obligations:</b>					
Loans: Investment Assets					
Loans: Personal Assets					
Mortgage on Personal Residences					
<b>TOTAL Long-Term Obligations</b>					
<b>TOTAL LIABILITIES</b>					
 <b>NET WORTH</b>					





## BUDGET INFORMATION

Item	Monthly Budget	Yearly Budget	Annual % Growth
<b>1. EMPLOYMENT INCOME:</b>			
Salary			
<b>TOTAL Employment Income</b>			
<b>2. OTHER INCOME:</b>			
Dividends and Interest			
Rent Income			
Pension Income			
Other Income			
<b>TOTAL Other Income</b>			
<b>3. INCOME TAXES:</b>			
Income Taxes			
Social Security			
IRA Deductions			
401(k) Deductions			
Other Deductions			
<b>TOTAL Income Taxes</b>			
<b>4. COMMITTED EXPENDITURES:</b>			
Housing (Mortgage/Rent)			
Utilities and Telephone			
Real Estate Taxes			
Debt Repayment			
Property and Liability Insurance			
<b>TOTAL Committed Expenditures</b>			

## BUDGET INFORMATION

Item	Monthly Budget	Yearly Budget	Annual % Growth
<b>5. SOMEWHAT DISCRETIONARY:</b>			
Food, Groceries, Etc.			
Clothing and Cleaning			
Transportation			
Medical/Dental Expenses			
Housing Supplies/ Maintenance			
Life Insurance			
Current School Expenses			
Asset Replacement			
Other Expenses			
<b>TOTAL Somewhat Discretionary</b>			
<b>6. VERY DISCRETIONARY</b>			
Vacations, Travel, etc.			
Recreational/ Entertainment			
Contributions, Gifts			
Household Furnishings			
<b>Education Fund</b>			
Savings			
Investments			
<b>TOTAL Very Discretionary</b>			
<b>Total Expenses</b>			
<b>Available for Savings/ Investment</b>			

## GOALS AND OBJECTIVES

Few people think of writing down their goals and objectives. Yet goals are one of the most powerful motivating forces known to man. In his book *A Strategy for Daily Living* (New York: Free Press, 1973), Dr. Ari Kiev of Cornell Medical Center states, "With goals people can overcome confusion and conflict over incompatible values, contradictory desires, and frustrated relationships with friends and relatives, all of which often result from the absence of rational life strategies."

"Observing the lives of people who have mastered adversity, I have repeatedly noted that they have established goals and, irrespective of obstacles, sought with all of their effort to achieve them. From the moment they fixed an objective in their mind and decided to concentrate all their energies on a specific goal, they begin to surmount the most difficult odds."

The purpose of this worksheet is to assist you in outlining the goals for your life. While it concentrates on financial goals, you'll also want to compartmentalize your life and your goals into such topics as business and professional goals, family relationship goals, retirement and spiritual goals.

Where would you like to be in terms of financial security within the next five years?

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List your major financial obligations, dividing them into the present and the future.

Present

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Future

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State in general terms how you would like to provide for your spouse, children, and beneficiaries in the event of your death.

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Do you have a donative intent toward any charities?

Yes For whom would you consider a lifetime gift or testamentary gift?

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No

Reasons for decisions above:

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At what age would you like to retire from your present employment? \_\_\_\_\_

Have you considered a second career?  Yes What would it be? \_\_\_\_\_

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Do you have to do any outside preparation for this second career? Note preparations.

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No

In terms of today's dollars, what do you consider an adequate retirement income?

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Have you planned to structure your investment program in such a way as to meet these income requirements?

Yes  No

As far as overall retirement is concerned, have you considered the following items?

- The impact of inflation
- Your income need
- Sources of income
- Utilization of time
- Insurance coverage
- Residency
- Changes in attitude and possible stresses of retirement

All of the subjects are critical and should be explored thoroughly before considering retirement.

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\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
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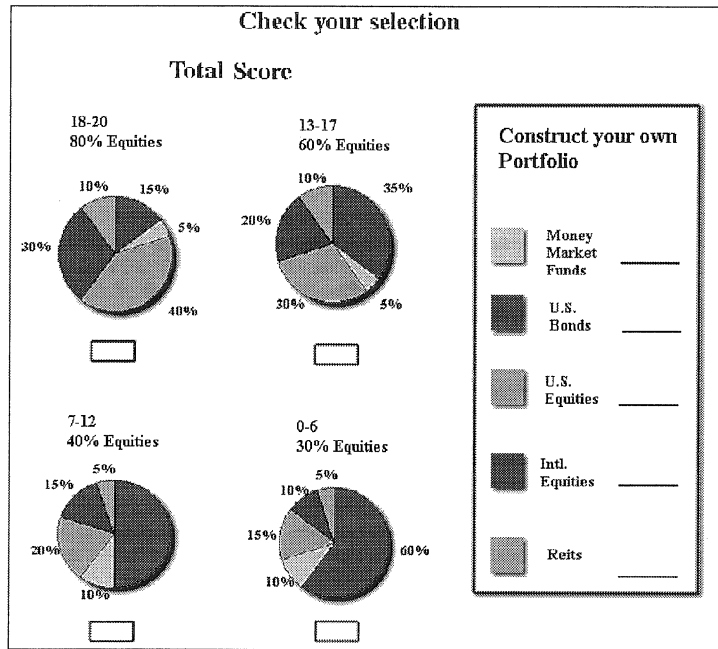
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## PORTFOLIO ALLOCATION SCORING SYSTEM FOR INVESTMENT FUNDS

Use this allocation system if you have not yet retired.

If you have retired, skip to the Portfolio Allocation Scoring System for Retirement Funds.

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree	
Getting my money to grow faster than the inflation rate is one of my most important investment objectives.	5	4	3	2	1	_____
I will need to supplement retirement income by withdrawals from investments of an annual sum of not more than 4% of Principal.	5	4	3	2	1	_____
I am willing to tolerate some sharp downswings in my investments in order to seek a potentially higher return than would normally be expected from more stable investments.	5	4	3	2	1	_____
I am willing to risk a short-term loss on my investments in return for a potentially higher long-run rate of return.	5	4	3	2	1	_____
Current Age (deduct from raw score)						
60-65 :	3					_____
65-70 :		4				_____
70 or more :			5			_____
Net score (cannot be less than zero):						_____



Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## PORTFOLIO ALLOCATION SCORING SYSTEM FOR INVESTMENT FUNDS

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Current Age

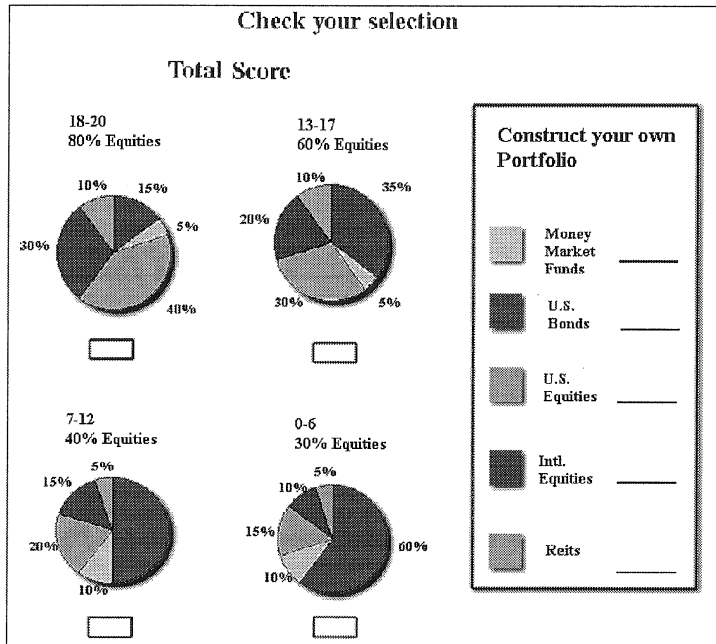
(deduct from raw score)

60-65 : 3

65-70 : 4

70 or more : 5

Net score (cannot be less than zero): \_\_\_\_\_



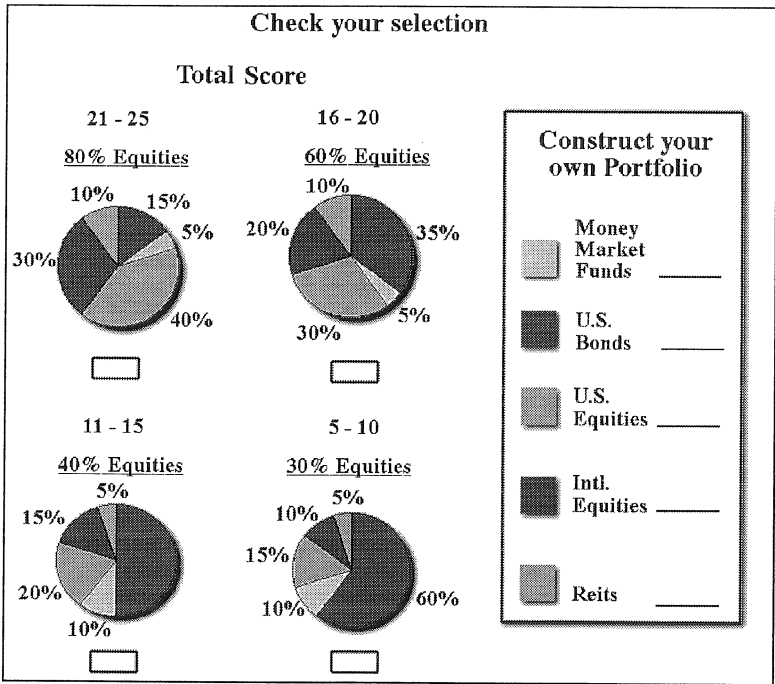
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PORTFOLIO ALLOCATION SCORING SYSTEM  
FOR EMPLOYMENT RETIREMENT FUNDS**  
Use this allocation system if you have already retired

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree	
Getting my money to grow faster than the inflation rate is one of my most important investment objectives.	5	4	3	2	1	_____
I will need to supplement retirement income by withdrawals from investments of an annual sum of not more than 4% of Principal.	5	4	3	2	1	_____
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**Years to Retirement Adjustment  
(add to raw score)**

- 20+ years: 5
- 15-19 years: 4
- 10-14 years: 3
- 5-9 years: 2
- 0-4 years: 1
- Total score: \_\_\_\_\_



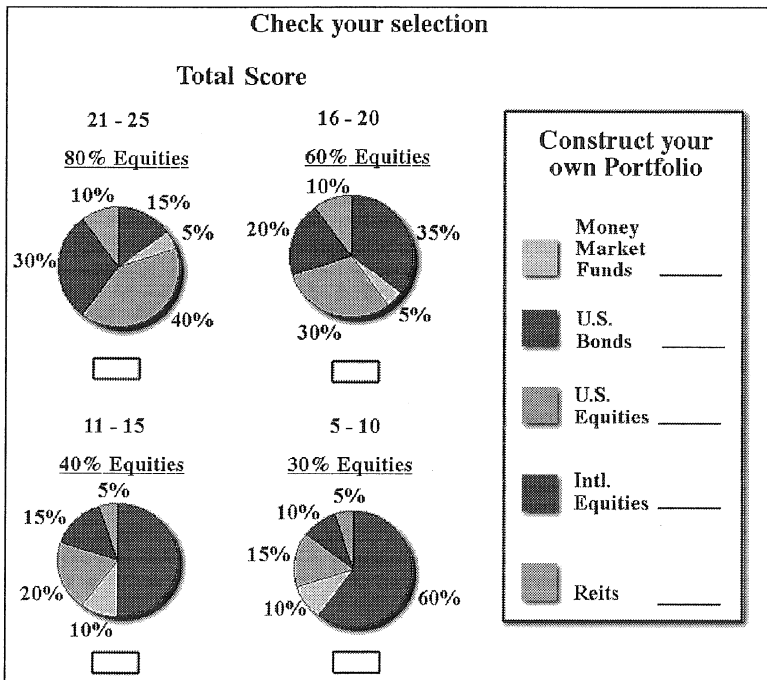
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PORTFOLIO ALLOCATION SCORING SYSTEM  
FOR EMPLOYMENT RETIREMENT FUNDS  
Use this allocation system if you have already retired**

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree	
Getting my money to grow faster than the inflation rate is one of my most important investment objectives.	5	4	3	2	1	_____
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Signature: \_\_\_\_\_ Date: \_\_\_\_\_