



Initial Consultation Information

Thank you for your interest in meeting.

Please take a moment to fill out the form below. The following information will help me begin to understand your financial picture and better assist you.

NAME: YOU: _____ SPOUSE: _____

PHONE: YOU: _____ SPOUSE: _____

EMAIL: YOU: _____ SPOUSE: _____

MAILING ADDRESS: _____

DATE OF BIRTH YOU: _____ SPOUSE: _____

IF RETIRED ... DATE RETIRED: YOU: _____ SPOUSE: _____

IF WORKING ... OCCUPATION: YOU: _____ SPOUSE: _____

PLANNED RETIREMENT DATE? YOU: _____ SPOUSE: _____

WHAT IS THE MAIN REASON FOR YOUR INQUIRY? ...

DO YOU HAVE ANY SPECIFIC QUESTIONS OR CONCERNS FOR ME? ...

DO YOU HAVE ANOTHER ADVISOR (NAME)? _____

DO YOU HAVE AN ACCOUNTANT (NAME)? _____

DO YOU HAVE AN ATTORNEY (NAME)? _____

DO YOU HAVE AN INSURANCE AGENT (NAME)? _____





WHAT IS YOUR ESTIMATED ANNUAL INCOME, AND FROM WHAT SOURCES? ...

INCOME: YOU: _____ SPOUSE: _____

SOURCES:

- Employment (W-2/Salary)
- Self-Employment/Independent Contractor (1099)
- Social Security Pension
- Other (briefly describe) Rental Income

WHAT IS YOUR RANGE OF TOTAL INVESTABLE ASSETS? ...

- \$0 - \$100,000 \$100,000 - \$250,000
- \$250,000 - \$500,000 \$500,000 - \$1,000,000
- \$1,000,000 - \$2,500,000 \$2,500,000 or more

HOW MUCH DO YOU CURRENTLY HAVE ALLOCATED TO AN EMERGENCY FUND? ...

WHAT IS YOUR MONTHLY MORTGAGE/RENT PAYMENT? ...

WHAT ARE YOUR MONTHLY MINIMUM DEBT PAYMENTS (Auto/student/personal loans, credit cards, etc)? ...

WHAT IS A GOOD ESTIMATE FOR YOUR MONTHLY EXPENSES (Not including minimum debt payments or mortgage/rent)? ...

WHAT IS THE BALANCE OF ALL YOUR DEBTS? ...





HOW MUCH DO YOU PUT INTO SAVINGS EACH MONTH (Retirement, home/property purchase, college, life insurance, etc)? ...

WHAT IS THE BALANCE OF ALL YOUR ASSETS (House, savings, etc.)? ...

WHAT ELSE SHOULD I KNOW ABOUT YOU, YOUR GOALS, FAMILY, ETC? ...

HOW DID YOU HEAR ABOUT US? ...

- | | | |
|-------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> FRIEND | <input type="checkbox"/> YELP! | <input type="checkbox"/> OTHER PROFESSIONAL |
| <input type="checkbox"/> LINKEDIN | <input type="checkbox"/> GOOGLE | <input type="checkbox"/> XY PLANNING NETWORK |
| <input type="checkbox"/> CFP® BOARD | <input type="checkbox"/> MAGAZINE | <input type="checkbox"/> NAPFA |
| <input type="checkbox"/> PODCAST | <input type="checkbox"/> MAIL | <input type="checkbox"/> TELEVISION |
| <input type="checkbox"/> OTHER: | _____ | |

IF YOU WERE REFERRED TO ME, MAY I ASK WHO BY SO I CAN THANK THEM? ...

Thank you for taking the time to fill me in!

