

Financial Bridges

Client Check-Up Questionnaire

Date

To give you the best counsel we can, Financial Bridges is committed to staying up to date on your family, finances, goals, concerns, philosophy, and priorities. While most of these details are gathered during your initial plan, we know that life changes often shift our priorities and a few of these areas may be worth revisiting. So we've designed this questionnaire to take no more than five or ten minutes of your time. Once it's completed, we will have customized data to facilitate a more productive meeting with you! Thanks in advance.

Client 1 Name

First

Last

Primary Email

Age

Occupation

Client 2 Name

First

Last

Primary Email

Age

Occupation

Address

Address line 1

Address line 2

City

State

Zip Code

Preferred Phone

Phone Type

Work, Mobile, Home

Income

Net Worth

Liquid Assets

Objectives

Risk Tolerance

Investment Experience

Relationships

	No Change	Change or Activity Anticipated	Change or Activity has Occurred
Your Marital Status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marital Status of Children (or Grandchildren)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Birth or Adoption of Child (or Grandchild)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Death of Spouse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Death of Child (or Grandchild)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Illness or Disability of You or a Family Member	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Details on changes from Relationships section, along with whether they affect you or your spouse

Health

	No Change	Change or Activity Anticipated	Change or Activity has Occurred
Yourself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your Spouse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child or Dependent	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Details on changes from Health section, along with whether they affect you or your spouse

Economic Changes

	No Change	Change or Activity Anticipated	Change or Activity has Occurred
Asset Values	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Income Level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Savings Level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lifestyle Expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Cash Flow Needs or Goals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Actual Indebtedness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Net Worth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Contingent Indebtedness (i.e., co-signing or guarantees)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Details on changes from Economic Changes section, along with whether they affect you or your spouse

Occupation/Employment

	No Change	Change or Activity Anticipated	Change or Activity has Occurred
Yourself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your Spouse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Family Member	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Details on changes from Employment section, along with whether they affect you or your spouse

Personal Matters

	No Change	Change or Activity Anticipated	Change or Activity has Occurred
Inheritance Received	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gifts Made or Received	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Borrowing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lending	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Purchases or Sales	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Investments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Residence Change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mortgage Increase or Decrease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Property Ownership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leases	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Actual Lawsuits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Threatened Lawsuits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Details on changes from Personal Matters section, along with whether they affect you or your spouse

Insurance Coverage

	No Change	Change or Activity Anticipated	Change or Activity has Occurred
Life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medical	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long-Term Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Property (Home/Auto/Other)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Liability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Details on changes from Insurance section, along with whether they affect you or your spouse

Estate

	No Change	Change or Activity Anticipated	Change or Activity has Occurred
Will Change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trust Change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Beneficiary Designation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Charitable Plans	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Death of Executor or Trustee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family Attitudes or Issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Details on changes from Estate section, along with whether they affect you or your spouse

Have any changes in your goals, objectives, or priorities occurred since our last planning update? Please indicate either "no changes" or briefly describe.

Have any changes in the time period for which you are investing, or your attitude toward portfolio volatility, or your overall risk tolerance, or your attitude towards the current economy occurred since our last planning update? Please indicate either "no change" or briefly describe.

Are there any other changes or concerns about which you would like to talk with us?