

Confidential Questionnaire

Please fill in information and bring with you to your scheduled appointment

Name _____

Date _____



PROSPERITY
WEALTH PLANNING

Prosperity Wealth Planning
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www.prosperitywealthplanning.com

Personal Information

Client

Full Legal Name

Birth Date

Birth Place

Street Address

City

State

Zip

Home Phone

Cell Phone

Work Phone

E-Mail

Employer

Occupation

Date of Hire

Annual Income

Bonus Income

Children

Full Legal Name

Birth Date

Marital Status

No of Children

Full Legal Name

Birth Date.

Marital Status.

No of Children

Full Legal Name

Birth Date

Marital Status

No of Children

Full Legal Name

Birth Date

Marital Status

No of Children

Co-Client

Full Legal Name

Birth Date

Birth Place

Street Address (if different)

City

State

Zip

Home Phone

Cell Phone

Work Phone

E-Mail

Employer

Occupation

Date of Hire

Annual Income

Bonus Income

How did you hear about us?

What qualities are you looking for in a financial planning practice?

Assets

Cash Equivalents

Checking and Savings Accounts \$ _____
Money Market Accounts \$ _____
Certificate of Deposit Accounts \$ _____
Life Insurance Cash Value \$ _____

Stocks/Bonds/Mutual Funds (Attach separate statements)

\$ _____
\$ _____
\$ _____
\$ _____

Retirement Funds

IRA Accounts \$ _____
ROTH IRA Accounts \$ _____
401k Accounts \$ _____
Deferred Compensation Plans \$ _____
Other Retirement Plans \$ _____

Real Estate

Primary Residence \$ _____
Secondary Residence \$ _____
Other Real Estate \$ _____

Other Assets

_____ \$ _____
_____ \$ _____

Financial Planning Priorities

What are your three most critical financial issues?

1. _____

2. _____

3. _____

Liabilities

Home Mortgage \$ _____
Second Mortgage \$ _____
Home Equity Line of Credit \$ _____
Auto Loans \$ _____
\$ _____
Other Loans \$ _____
Credit Cards \$ _____
\$ _____
\$ _____
Other Debt \$ _____