

Introductory Questionnaire

Basic Information	Today's Date:
Client #1 Name:	Client #2 Name:
Birth Date:	Birth Date:
Address:	
Phone Number:	E-mail Address:
Preferred Method of Contact: Phone E-mail	Date of Marriage (if applicable):
Any history of divorce, bankruptcy, or lawsuits?	No Is either of you a non-US citizen? Yes No
If yes, please explain:	
Client #1 Employment Information Employer:	Client #2 Employment Information Employer:
Position:	Position:
Start Date:	Start Date:
Base Salary: \$	Base Salary: \$
Bonus/Additional Income: \$	Bonus/Additional Income: \$
Do you anticipate a significant change in your situation? Yes	No Do you anticipate a significant change in your situation? Yes No
If yes, please explain:	If yes, please explain:
Financial Information ASSETS Cash/CDs (non-retirement): \$	DEBTS Primary Home (total): \$
Investments (non-retirement): \$	Other Real Estate (total): \$
Retirement Accounts (total): \$	Auto: \$
Primary Home Value: \$	Student: \$
Other Real Estate: \$	Credit Cards (not paid monthly): \$
Other: \$	Other: \$
Dependents Name: Age:	Name: Age:
Name: Age:	Name: Age:
Financial Goals or Concerns What financial goals or concerns would you like to address? Home Purchase Education Savings Retirement Planning Debt Management	
Cash Flow/Budgeting Estate Planning	Investment Management Other
Additional Notes/Concerns:	
How did you hear about us?	