

**Questionnaire**

All information is strictly confidential, and not released to any party.

**Name** \_\_\_\_\_  
**Address** \_\_\_\_\_  
\_\_\_\_\_  
**Phone** \_\_\_\_\_  
**Email** \_\_\_\_\_  
**DOB** \_\_\_\_\_

**Assets**

Checking	_____
Savings	_____
Taxable Investments	_____
Non Taxable Investments (IRA 401k)	_____
Options/other plans	_____
.....	_____
.....	_____
.....	_____
House: Approximate Market Value	_____
<b>Total Assets</b>	<b>_____</b>

**Liabilities**

Short Term Debts (Credit Cards)	_____
Auto/ Medium Term Debts	_____
<b>Mortgage</b>	_____
Other	_____
.....	_____
.....	_____
.....	_____
Total Liabilities	<b>_____</b>

**Protection**

Life Insurance Face Amount	_____ / _____
Disability Monthly Benefit	_____

**Retirement Assets Monthly Estimates**

Social Security	_____
Pension	_____

**Will** Y / N  
If Y date executed \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Income**

Approximate Earned Income Last/ Next year	_____ / _____
Approximate Investment Income Last/ Next year	_____ / _____

**Comments/Special Situations**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_