

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	_____
Total Assets	_____

Liabilities

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

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
