

_____ YES, I would like to schedule a complimentary consultation to discuss my wealth management concerns.

Please print

Name _____

Company name _____

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City _____

State _____ ZIP code _____

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Financial Priorities Questionnaire

Questionnaire

Financial Priorities Questionnaire

To help you reach your financial goals, we'd like to understand your feelings about the plans that you have in place for yourself and your family.

Please tell us more about your concerns by completing the following questionnaire. To schedule a complimentary consultation, please complete the last page of this questionnaire.

Confidential profile completed by:

Name _____

Date _____

Thank you

for taking the time to share your concerns!

Financial Priorities Questionnaire

Please indicate your responses to the following concerns by checking the appropriate box.

	Strongly agree	Somewhat agree	Disagree	Not sure
1. I would like to explore saving alternatives for both short and long term needs.				
2. I am concerned about adequately providing for my family upon my death.				
3. I am concerned about my family's financial well-being should I suffer a disability, chronic or critical illness.				
4. I am concerned that my current retirement plan(s) may not be sufficient for a long retirement.				
5. I am concerned about the management of my qualified plans (i.e. IRA, 401(k), 403(b), SEP, company pension plan) upon retirement and would be interested in strategies that would minimize taxes and meet my goals.				
6. I am concerned with the high costs associated with long term care.				
7. I would like to protect my estate for my loved ones and minimize or eliminate the effect of income taxes and probate costs.				
8. I would be interested in including a charitable gift as a part of my estate plan.				