



# Cole Financial Planning

## Confidential Questionnaire

Note: print extra form page(s) when necessary to enter additional information.

Date: \_\_\_/\_\_\_/\_\_\_

	Client #1 Data	Client #2 Data (spouse)
Name		
Home Address		
Home Address		
City, State, Zip		
Home Phone		
Work Phone		
Cell Phone		
Home Fax		
Work Fax		
Email Address		
Date of Birth		
Employer		
Title/Job		
Years With Employer		
Year You Plan to Retire		
<b>Primary contact person during business hours:</b>		
<b>Best way to contact you during business hours:</b> (circle one)    Home Phone    Work Phone    Cell Phone    Email		
Describe any major changes that you anticipate in the next 12 months (e.g. employment changes, expecting baby, retirement, etc.)		
<b>Get the following numbers from the "Income" section of your most recent 1040</b>		
	Client #1	Client #2
Wages & Salaries (Line 7)	\$	\$
Interest (Line 8a)	\$	\$
Dividends (Line 9a)	\$	\$
Business Income (Lines 12, 17, 18)	\$	\$
Pensions (Lines 16b, 20b)	\$	\$
Alimony & Other (Lines 11, 21)	\$	\$
<b>Total</b>	\$	\$



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Family Members (list children and other dependents)				
Name	Relationship	Date of Birth	Dependent	Resides in City, State
			Y / N	
			Y / N	
			Y / N	
			Y / N	
			Y / N	
			Y / N	

Tax Preparation by: <input type="checkbox"/> Self <input type="checkbox"/> Other    (check one, fill out below if "Other")				
Preparer Name				
Address				
City, State, Zip				
Phone			Fax	

Estate Planning Documents				
	Client #1		Client #2	
	Year Drafted	State Drafted	Year Drafted	State Drafted
Will				
Living Trust				
Power of Attorney				
Living Will				
Other Documents				

How were your current investment assets selected?



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Financial Opinions/Preferences										
Of the following statements, indicate your preferences using a scale of 1 – 5 (check one)										
Client #1					Client #2					1 = Most True; 5 = Least True
1	2	3	4	5	1	2	3	4	5	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I would rather work longer than reduce my standard of living in retirement.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I feel that I/we can reduce our current living expenses to save more for the future if needed.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I am more concerned about protecting my assets than about growth.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I prefer the ease of mutual funds over individual securities.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I am comfortable with investments that promise slow, long term appreciation and growth.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I don't brood over bad investment decisions I've made.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I feel comfortable with aggressive growth investments.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I don't like surprises.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I am optimistic about my financial future.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	My immediate concern is for income rather than growth opportunities.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I am a risk taker.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I make investment decisions comfortably and quickly.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I like predictability and routine in my daily life.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I usually pick the tried and true, the slow, safe but sure investments.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I need to focus my investment efforts on building cash reserves.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I prefer predictable, steady return on my investments, even if the return is low.

Advisor Relationships (where applicable, rate your working relationships with each of the following advisors)							
1 = Very Dissatisfied; 5 = Very Satisfied (check one)							
Advisor	1	2	3	4	5	Not Applicable	Comments
Financial Planner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Broker #1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Broker #2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Accountant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tax Preparer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Attorney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Insurance Agent – Auto	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Insurance Agent – Home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Insurance Agent – Life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Insurance Agent - Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



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Insurance Coverage						
	Client #1			Client #2		
Type Coverage	Brief Description	Group Policy	Individual	Brief Description	Group Policy	Individual
Health		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Disability #1		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Disability #2		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Life #1		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Life #2		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Life #3		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Homeowners		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Auto #1		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Auto #2		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Umbrella Liability		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Professional Liability		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Long Term Care		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Ever been turned down for insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No		

Pension Plans					
Description	Client #1	Client #2	Begin At Age	COLA	Monthly Benefit
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	\$
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	\$

Have you received a copy of your credit report in the past 12 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Note: if you have a printout of your assets and/or liabilities in another format, feel free to attach a copy instead of entering them on this form.

Assets – Bank Accounts					
Institution	Check -ing	Sav-ings	Money Market	Who Owns Acct?	Average Balance
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$

Assets – Certificates of Deposit (attach a copy of the most current statements)		
Institution	Who Owns CDs?	Average Balance
		\$
		\$
		\$
		\$

Assets – Real Estate and Personal Property		
Description	Who Owns Property?	Estimated Value
Primary Residence		\$
Furnishings (liquidation value)		\$
Vehicle #1:		\$
Vehicle #2:		\$
Vehicle #3:		\$
Other:		\$
Other:		\$

Assets – Other (Retirement accounts, brokerage accounts, businesses, etc. Bring a copy of the most current brokerage, mutual fund and retirement statements to the Initial Meeting.)			
Institution	Description	Who Owns Asset?	Estimated Value
			\$
			\$
			\$
			\$
			\$
			\$
			\$



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Liabilities – Credit Cards				
Credit Card Company	Card Name	Interest Rate	Avg. Monthly Payment	Current Balance
		%	\$	\$
		%	\$	\$
		%	\$	\$
		%	\$	\$
		%	\$	\$

Liabilities – Other Debts (Residence, autos, business, school, etc.)				
Description	Term of Loan (in years)	Interest Rate	Avg. Monthly Payment	Current Balance
		%	\$	\$
		%	\$	\$
		%	\$	\$
		%	\$	\$
		%	\$	\$

Please comment on the advice that you seek.

Please send a completed copy of this form to us so that we receive it at least two business days before the Initial Meeting.	
<b>Email</b>	Email scanned copy to <a href="mailto:contact@colefinaancialplanning.com">contact@colefinaancialplanning.com</a>
<b>Fax</b>	Fax it to (206) 350-3808
<b>Mail</b>	Mail it to Cole Financial Planning 6239 Letson Farms Drive Bessemer, AL 35022

The items below, as well as others, may be needed should you engage our services.	
<ol style="list-style-type: none"> <li>1. Prior year tax return</li> <li>2. Brokerage account statements</li> <li>3. Trust account statements</li> <li>4. Retirement plan account statements</li> <li>5. Loan documents</li> </ol>	<ol style="list-style-type: none"> <li>6. Paycheck stubs</li> <li>7. Mutual Fund account statements</li> <li>8. Employee Benefits booklet</li> <li>9. Legal documents</li> <li>10. Insurance policies</li> </ol>