

Financial Management Review™ Questionnaire

Your Name _____ Home Address _____ Home Phone _____ Employer _____ Occupation _____ Work Phone _____ Spouse Name _____ Employer _____ Occupation _____ Work Phone _____	U.S. Citizen Yes__ No__ Home E-mail _____ How Long _____ Work E-mail _____ Birth Date _____ U.S. Citizen Yes__ No__ How Long _____ Work E-mail _____ Birth Date _____
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Current Financial Management Status

(Please circle your answers)

CASH FLOW MANAGEMENT

Do you have a spending plan or budget?	Yes	No	Don't Know
Do you monitor your expenses?	Yes	No	Don't Know
Is your cash flow positive?	Yes	No	Don't Know
Are you saving enough for future funding requirements?	Yes	No	Don't Know

MORTGAGE and OTHER DEBT MANAGEMENT

Do you own your home?	Yes	No	Don't Know
Do you plan on moving?	Yes	No	Don't Know
Do you plan on buying another home?	Yes	No	Don't Know
Do you need or plan to refinance your home mortgage?	Yes	No	Don't Know
Have you had a mortgage or refinancing analysis done?	Yes	No	Don't Know
Do you have a home equity line of credit?	Yes	No	Don't Know
Do you have multiple credit cards?	Yes	No	Don't Know
Do you pay off credit balances monthly?	Yes	No	Don't Know

TAX PLANNING

Are you satisfied with the amount of taxes you pay?	Yes	No	Don't Know
Are you using all the legal tax loopholes to reduce your taxes?	Yes	No	Don't Know
Do you know the difference between tax preparation and tax planning?	Yes	No	Don't Know
Do you prepare your own tax returns?	Yes	No	Don't Know

INVESTMENT PLANNING

Do you feel you need better financial organization?	Yes	No	Don't Know
Has your current portfolio been reviewed by an independent advisor?	Yes	No	Don't Know
Do you have sufficient cash flow to meet your monthly expenses?	Yes	No	Don't Know
Do you feel that better budget planning would be helpful?	Yes	No	Don't Know
Does your portfolio protect you from financial disaster?	Yes	No	Don't Know
Is your portfolio safe from a stock and bond market crash?	Yes	No	Don't Know
Do you have adequate investment asset diversification?	Yes	No	Don't Know
Does your portfolio protect you from inflation?	Yes	No	Don't Know
Does your portfolio match your risk and tolerance?	Yes	No	Don't Know
Do you plan on making additional investments in the future?	Yes	No	Don't Know

RISK MANAGEMENT/INSURANCE

Do you feel you are paying too much for your insurance coverage?	Yes	No	Don't Know
Do you have the right kind and amount of insurance coverage?	Yes	No	Don't Know
Has all current insurance had an objective, independent review?	Yes	No	Don't Know

EMPLOYMENT BENEFITS

Are you taking full advantage of all of your company benefits?	Yes	No	Don't Know
Have you done proper planning with your company stock options?	Yes	No	Don't Know
Do you expect an increase in income?	Yes	No	Don't Know
Do you plan on changing jobs?	Yes	No	Don't Know
Do you know whether your company retirement plans are adequate?	Yes	No	Don't Know

BUSINESS OWNERSHIP PLANNING

Are you using all of the tax loopholes available for your business?	Yes	No	Don't Know
Is your business tax planning coordinated with your personal planning?	Yes	No	Don't Know
Will you be acquiring a business in the future?	Yes	No	Don't Know
Will you be selling your business in the future?	Yes	No	Don't Know
Do you know your business value?	Yes	No	Don't Know
Have you done business succession planning?	Yes	No	Don't Know

EDUCATIONAL PLANNING

Do you have children?	Yes	No	Don't Know
Do you plan on having more children?	Yes	No	Don't Know
Do you have sufficient funds for your children's education?	Yes	No	Don't Know
Is the education money held in the proper name?	Yes	No	Don't Know
Are there any grandchildren you want to help educate?	Yes	No	Don't Know
Have you gifted any money for their education?	Yes	No	Don't Know

RETIREMENT PLANNING

Are you already retired?	Yes	No	Don't Know
If not, do you plan on retiring soon?	Yes	No	Don't Know
Do you know at what age you would like to retire?	Yes	No	Don't Know
Do you anticipate a rollover of company savings?	Yes	No	Don't Know
Do you anticipate a pension distribution?	Yes	No	Don't Know
Do you already have enough money for a secure retirement?	Yes	No	Don't Know
Will you have enough money for a secure retirement?	Yes	No	Don't Know

ESTATE PLANNING

Do you have wills?	Yes	No	Don't Know
Do you have powers of attorney for financial and health care?	Yes	No	Don't Know
Do you have living wills?	Yes	No	Don't Know
Do you have trusts?	Yes	No	Don't Know
Have your estate documents been reviewed recently?	Yes	No	Don't Know
Are your beneficiary designations correct and current?	Yes	No	Don't Know
Are you the beneficiary of any trusts or wills?	Yes	No	Don't Know

COMPREHENSIVE FINANCIAL PLANNING

Do you know what a financial planning professional does?	Yes	No	Don't Know
Do you have a coordinated, integrated financial plan?	Yes	No	Don't Know
Do you spend careful time on planning your finances?	Yes	No	Don't Know
Have you set specific financial goals?	Yes	No	Don't Know
Are you concerned about your financial future?	Yes	No	Don't Know

What are your three most important financial management concerns, goals, or objectives?

1.

2.

3.