

Financial Independence

a registered investment adviser
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FINANCIAL PLANNING INFORMATION

Please fill in this form and return it prior to your appointment, to avoid the need to reschedule. It is fine to write "unknown" and to round amounts. Attach your latest portfolio statements and a business card.

CLIENT NAME _____ TODAY'S DATE: _____

JOB TITLE _____ DATE OF BIRTH _____ AGE _____

SPOUSE NAME _____

JOB TITLE _____ DATE OF BIRTH _____ AGE _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE (____) _____ WORK PHONE (____) _____ E-MAIL _____

Do you have a current will? Y ___ N ___ Living Trust? Y ___ N ___ Parents still living? _____

Children & ages _____

AMOUNTS IN BANKS, SAVINGS & LOANS AND CREDIT UNIONS (NON-IRA)

(Examples: checking, savings, money market and certificates of deposit.)

Circle any amounts you do not expect to need during the next five years.

NAME OF INSTITUTION	TYPE OF ACCOUNT	MATURITY DATE	INTEREST RATE	APPROXIMATE BALANCE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

IRA ACCOUNTS AND OTHER RETIREMENT OR 529 COLLEGE SAVINGS ACCOUNTS

(Please attach all of your latest account statements)

INDIVIDUAL OWNER & LOCATION (BANK; BROKER; EMPLOYER)	TYPE OF ACCOUNT (401(K), ROTH, TRAD IRA; TSA; 403(B), 529, ETC.)	APPROXIMATE CURRENT MARKET VALUE IN DOLLARS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

STOCKS, BONDS AND OPTIONS IN TAXABLE ACCOUNTS

(Please attach all of your latest account statements, including option summaries, if applicable)

LOCATION (BANK; BROKER; EMPLOYER; HOME)	NAME and NUMBER OF SHARES YOU OWN/ARE VESTED IN	APPROXIMATE CURRENT MARKET VALUE IN DOLLARS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

MUTUAL FUNDS OR ETFS IN TAXABLE ACCOUNTS

(Please attach all of your latest account statements)

LOCATION (BANK; BROKER; MUTUAL FUND)	NAME AND NUMBER OF SHARES YOU OWN	APPROXIMATE CURRENT MARKET VALUE IN DOLLARS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PROMISSORY NOTES AND TRUST DEEDS

(Where someone owes or is paying you on a note)

DEBTOR'S NAME AND RELATIONSHIP	INTEREST RATE AND MATURITY DATE	MONTHLY PAYMENT YOU RECEIVE	APPROXIMATE BALANCE REMAINING
_____	_____	_____	_____

RESIDENCE AND OTHER REAL ESTATE OWNED

(use another sheet if more space is needed)

PROPERTY ADDRESS	ORIGINAL COST	APPROXIMATE CURRENT VALUE	TOTAL DEBT (use 1 line for each loan if there are multiple)	NET CASH FLOW BEFORE DEPREC'N (if rental property)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

For each loan, please indicate (if known) the start and end date, as well as the interest rate, and whether it is fixed or variable. If it has a balloon payment, indicate when it comes due and how much it will be. Please note your monthly payment too.

First Mortgage for Property 1 above: _____

Second Mortgage for Property 1 above (if any): _____

First Mortgage for Property 2 above: _____

Second Mortgage for Property 2 above (if any): _____

LIMITED OR GENERAL PARTNERSHIPS

NAME OF PARTNERSHIP	ORIGINAL COST	APPROXIMATE CURRENT VALUE	TYPE OF INVESTMENT	YEAR YOU PURCHASED
_____	_____	_____	_____	_____

LIFE INSURANCE

(Note: term policies do not have cash value or loans)

INSURANCE COMPANY (if via work, add a *)	NAME OF INSURED	APPROXIMATE DEATH BENEFIT	TYPE (TERM; WHOLE UNIVERSAL; ETC.)	AMOUNT OF ANY LOAN (-) OR CASH VALUE (+)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Do you have long term care insurance? Yes: _____ No: _____

ANNUITIES

COMPANY	ANNUITANT/ OWNER	APPROXIMATE CURRENT VALUE	INTEREST RATE FOR FIXED POLICIES	DATE YOU PURCHASED
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

IMPORTANT QUESTIONS ABOUT YOUR FUTURE

What is your annual retirement income goal (AFTER TAXES)? \$ _____

How much do you contribute per year to your retirement? Is there a company match? Yes ___ No ___

401(k): \$ _____ IRA: \$ _____ Other Tax-Deferred: \$ _____

How much are you saving in taxable accounts per year? \$ _____

What is your planned retirement date? _____ If retired, date retired: _____

Annual pension you will receive: _____ Your spouse's pension: _____

Is each pension fixed or does it adjust for inflation? _____ If so, how much?: _____

If you will be paying for college, how much do you save for it per year? _____

HOUSEHOLD CASH FLOW

(List all sources of annual income including salary, pension, rental, etc.)

Your annual earnings: \$ _____ Source(s): _____

Your spouse's annual earnings: \$ _____ Source(s): _____

Annual Social Security you will get or now receive: \$ _____ Spouse: _____

Other annual earnings/income: \$ _____ Source: _____

\$ _____ Source: _____

What are your approximate aggregate AFTER TAX annual expenses? \$ _____

Your tax bracket: _____ Outstanding non-mortgage debt: _____

**WHAT ARE YOUR PRIMARY FINANCIAL CONCERNS? (List in order of importance).
HOW WOULD YOU IMPROVE YOUR FINANCIAL SITUATION IF YOU COULD?**

The Financial Consultants of Financial Independence are registered representatives with and offer securities through LPL Financial Member FINRA/SIPC

THANK YOU FOR TAKING THE TIME TO FILL OUT THIS INFORMATION. PLEASE RETURN THIS QUESTIONNAIRE TO US PRIOR TO YOUR APPOINTMENT, ALONG WITH A COPY OF YOUR STATEMENTS.