

FINANCIAL PLANNING QUESTIONNAIRE



RADER & RADER

CERTIFIED PUBLIC ACCOUNTANTS
AND FINANCIAL ADVISORS

Serving Central Indiana Since 1964

CLIENT: _____

CO-CLIENT: _____

DATE: _____

Retirement Age & Living Expense

At what age would you like to retire?

Client	Co-Client

How willing are you to retire later?

Not at all

Slightly

Somewhat

Very

How would you react if your retirement did not turn out the way you picture?

Delay Retirement

Reduce Expenses

Take More Risk

In today's dollars, what would you like to plan for in monthly living expenses?

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How much are you currently spending on an annual basis? (after-tax)

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Monthly estimate of income from social security

Client	Co-Client

Monthly estimate of any pension at retirement

Client	Co-Client

Although the age of 90 is often used for a person's life expectancy in retirement planning, personal circumstances and family history can have an impact. What age(s) would you like for us to use in planning to ensure you don't outlive your savings?

Client	Co-Client

Net Worth (please estimate the current value of the following)

Personal & Other Assets (Business, Real Estate, etc)

Investment Type	Current Value	Notes
Checking	\$	
Savings	\$	
CD's or Money Market Accounts	\$	
Home	\$	
2nd/Vacation Home	\$	
Rental/Investment Property	\$	
Business	\$	
Vehicles	\$	
Personal Property	\$	

Current Balance of Investments NOT through Rader Financial

Account Type	Client	Co-Client
IRA	\$	\$
Roth	\$	\$
Company Plan (401k, 403b, etc)	\$	\$
Taxable / Brokerage	\$	\$
529 Savings Plan	\$	\$
HSA	\$	\$
Other	\$	\$

How much are you contributing toward your retirement each year?

Account Type	Client	Co-Client
IRA	\$	\$
Roth	\$	\$
Company Plan (401k, 403b, etc)	\$	\$
Other Account	\$	\$
Employer Match	\$	\$

Loans

Type	Balance	Payment and Interest rate (%)	
Home Mortgage	\$	\$	%
Home Equity	\$	\$	%
Auto	\$	\$	%
Other:	\$	\$	%

What are your annual Property Taxes _____ and Homeowner's Insurance _____ if paid separately.

Life, Disability & Long Term Care Insurance

	Client		Co-Client		Notes
	Yes	No	Yes	No	
Group/Term Life Insurance					
Death Benefit	\$		\$		
Disability Insurance					
Long-Term Care Insurance					
Cash Value Life Insurance	\$		\$		

Education Goals: College Savings

Student Name	Year Starting College	Savings Goal	Annual Contributions
		\$	\$
		\$	\$
		\$	\$
		\$	\$