## PERSONAL AND FINANCIAL INFORMATION

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| Confidential Information     |                           | Today's Date: | Today's Date: |  |  |
|------------------------------|---------------------------|---------------|---------------|--|--|
| Name:                        |                           | Birth         | n Date:       |  |  |
| Phone Home:                  |                           |               |               |  |  |
|                              |                           |               |               |  |  |
| Email:Employer (or former):  |                           |               | nt Date:      |  |  |
| Spouse Name:                 |                           | Birth         | n Date:       |  |  |
| Phone Home:                  |                           |               |               |  |  |
| Email:                       |                           |               |               |  |  |
| Employer (or former):        |                           |               | nt Date:      |  |  |
| Address:                     |                           | City:         | Zip code:     |  |  |
| Wedding Anniversary Date:    | Wedding Anniversary Date: |               |               |  |  |
| Veteran You ☐ Spouse ☐       | Branch:                   | Years Se      | rved:         |  |  |
| Hobbies/Interests:           |                           |               |               |  |  |
|                              |                           |               |               |  |  |
|                              |                           |               |               |  |  |
| Children:                    |                           |               |               |  |  |
| Name:                        | DOB :                     | Name:         | DOB:          |  |  |
| Name:                        | DOB :                     | Name:         | DOB:          |  |  |
| Name:                        | DOB :                     | Name:         | DOB:          |  |  |
| Grandchildren:               |                           |               |               |  |  |
| Name:                        | DOB :                     | Name:         | DOB:          |  |  |
| Name:                        | DOB :                     | Name:         | DOB:          |  |  |
| Advisor(s)                   |                           |               |               |  |  |
| Financial Advisor/Stockbroke | er:                       | Accountant:_  |               |  |  |
| How would you rate your ad   | visor? 1 (lowest) to 1    |               |               |  |  |
| How often do you have a rev  |                           |               |               |  |  |
| pay my advisor annually: \$_ |                           |               |               |  |  |
|                              |                           |               |               |  |  |
| ·                            |                           |               | <del></del>   |  |  |

| Yo   |                      | ou  |     | Spouse        |  |
|--|----------------------|---|-----|---------------|--|
| Do you have a will?  | Yes                  | No  | Yes | No            |  |
| Dated:   |                      |   |     |               |  |
| Does it include a Durable Power of Attorney?   | Yes                  | No  | Yes | No            |  |
| Do you have a Medical Power of Attorney?   | Yes                  | No  | Yes | No            |  |
| Has it been amended to comply with HIPAA?  |                      | No  | Yes | No            |  |
| Are your powers of attorneys electronically filed?   |                      | No  | Yes | No            |  |
| Do you have a Living or Revocable Trust?   |                      | No  | Yes | No            |  |
| Dated:   |                      |   |     |               |  |
| Have you pre-arranged your funeral?  | Yes                  | No  | Yes | No            |  |
|  |                      |   |     |               |  |
| Insurance  |                      |   |     |               |  |
| Your Life Insurance Totals:  |                      |   |     |               |  |
| Death Benefit \$ Cash Value \$   |                      |   |     |               |  |
| Spouse Life Insurance Totals:  |                      | <del>_</del>                                    |     |               |  |
| Death Benefit \$ Cash Value \$   |                      |   |     |               |  |
| Cash value 3   |                      | <del></del>                                     |     |               |  |
| Do you have Long Term Care Insurance? Yes ☐ No ☐   |                      |   |     |               |  |
| Other  |                      |   |     |               |  |
| Do you have an Umbrella Liability Policy? Yes ☐ No ☐ If so, what is the coverage limit? \$1,000,000 ☐ \$2,000 ☐ Do you have Medicare supplement (65)? Yes ☐ No ☐ | •                    |   |     |               |  |
|  |                      |   |     |               |  |
| Real Estate  |                      |   |     |               |  |
| Personal Residence Information:  |                      |   |     |               |  |
| Purchase price: \$   |                      | Purchase year:                                  |     |               |  |
| Estimated value today: \$  |                      |   |     |               |  |
| Outstanding Mortgage: \$   |                      |   |     |               |  |
| Interest Rate: %   |                      |   |     |               |  |
| Fixed Term (30 year, 15 year, etc.)ARM   | (5 vear              | . 7 vear. 10 vear lete                          | c.) | Interest only |  |
|  | (5 ) 5 6 1 1         | , : , : : , : : , : : ; : : : ; : : : ; : : : : | ,   |               |  |
| <b>Do you have other property?</b> Yes □ No □ Rental   | Propert <sup>,</sup> | y? Yes □ No □                                   | ]   |               |  |

**Legal Documents** 

## **Investment Accounts**

| Non-IRA Accounts  | S:   |  | Retirement  | : Accounts: IR  | RA, 401k, 403b, 457, etc |
|---|--|--|---|-----------------|--------------------------|
| Financial Institution   | on Account   | t Value  | Financial In  | stitution       | Account Value            |
|   |  |  |   |                 |                          |
|   |  |  |   |                 |                          |
|   |  |  |   |                 |                          |
| What have been v  |  | nvestments?  |   |                 |                          |
| vviiat ilave beeli y  | our least ravorite in  |  |   |                 |                          |
| Client Questionna   | ire  |  |   |                 |                          |
| What do you thinl   | k a reasonable rate  | of return is? You  |   | % Spouse        | %                        |
| What percentage   | or dollar amount of  | your money would   | d you be OK wi  | th losing?      |                          |
| You   | % or \$  | Spo  | ouse  | % or \$         |                          |
|   |  |  |   |                 | Spouse \$                |
|   |  | 1-3 based on what  |   |                 |                          |
| i icase railik tile io  | HOWING ILCINS HOIH   |  |   |                 | L – IIIOSt IIIIDOLtaliti |
|   | _  |  | •   |                 | i – most important)      |
| Protection  | from Loss:   | _ Return:  | Liquidity:  |                 | . ,                      |
| Protection<br>What do you wan   | from Loss:<br>t your retirement as   | Return:ssets to accomplish   | Liquidity:<br>n? What are the   | goals for you   | ur assets?               |
| Protection<br>What do you wan<br>You:   | from Loss:t your retirement as   | Return:ssets to accomplish   | Liquidity:<br>n? What are the   | e goals for you | ur assets?               |
| Protection<br>What do you wan<br>You:<br>Spouse:  | from Loss:t your retirement as   | Return:ssets to accomplish   | Liquidity:<br>n? What are the   | e goals for you | ur assets?               |
| Protection<br>What do you wan<br>You:<br>Spouse:<br>What is the main  | from Loss:t your retirement as   | Return:ssets to accomplish   | Liquidity: i? What are the ent nest egg?  | goals for you   | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You:   | from Loss:t your retirement as   | Return:ssets to accomplish   | Liquidity: i? What are the ent nest egg?  | goals for you   | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You: Spouse:   | from Loss:t your retirement as   | Return:ssets to accomplish   | Liquidity: i? What are the ent nest egg?  | e goals for you | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You: Spouse: There are four thi  | from Loss:t your retirement as concern with your a   | Return:ssets to accomplish   | Liquidity: i? What are the ent nest egg?  | e goals for you | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You: Spouse: There are four thi  | from Loss:t your retirement as concern with your a ngs you can do with   | Return:ssets to accomplishessets and retirement  | Liquidity: n? What are the ent nest egg?  | e goals for you | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You: Spouse: There are four thi  □ Spend i □ Pass it   | from Loss:t your retirement as concern with your a ngs you can do with along on to family the  | Return:ssets to accomplishessets and retirement assets and retirement when your nest egg. When through inheritance   | Liquidity: in? What are the ent nest egg?  hich two are mo  | e goals for you | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You: Spouse: There are four thi  | from Loss: t your retirement as concern with your a ngs you can do with t along on to family to  | Return:ssets to accomplish assets and retirement your nest egg. When through inheritance as with risk of loss to   | Liquidity: i? What are the ent nest egg?  iich two are mo   | e goals for you | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You: Spouse: There are four thi  | from Loss: t your retirement as concern with your a ngs you can do with t along on to family to  | Return:ssets to accomplish assets and retirement your nest egg. When through inheritance as with risk of loss to   | Liquidity: i? What are the ent nest egg?  iich two are mo   | e goals for you | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You: Spouse: There are four thi  | from Loss: t your retirement as concern with your a ngs you can do with t along on to family to  | Return:ssets to accomplish assets and retirement your nest egg. When through inheritance as with risk of loss to   | Liquidity: i? What are the ent nest egg?  iich two are mo   | e goals for you | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You: Spouse: There are four thi Pass it Purcha Purcha  | from Loss: t your retirement as concern with your a ngs you can do with t along on to family to  | Return:ssets to accomplishessets and retirement your nest egg. When through inheritance is with risk of loss to see, including insurar   | Liquidity: in the liquidity: int nest egg?  inch two are more or gifting o principal ince products, w   | e goals for you | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You: Spouse: There are four thi Pass it Purcha Purcha Purcha Debt Related ease list any outsta | from Loss: t your retirement as concern with your a ngs you can do with t along on to family the se financial product se financial product                                 | Return:ssets to accomplishessets and retirement your nest egg. When through inheritance is with risk of loss to see, including insurar   | Liquidity:  Note: The second of the sec | e goals for you | ur assets?               |
| Protection What do you wan You: Spouse: What is the main You: Spouse: There are four thi Pass it Purcha Purcha Purcha Debt Related ease list any outsta | from Loss: t your retirement as concern with your a ngs you can do with t along on to family the se financial product se financial product                                 | Return:ssets to accomplishessets to accomplishessets and retirement and retirement and retirement and retirements with risk of loss to see the seed of the s | Liquidity:  Provide the service of gifting the products, we conclude the products, we conclude the products on page 2.  Current conclusions on page 2.  | e goals for you | to you and your spouse   |
| Protection What do you wan You: Spouse: What is the main You: Spouse: There are four thi Pass it Purcha Purcha  | from Loss: t your retirement as concern with your a mgs you can do with t along on to family the se financial product se financial product anding debts beside Amount Owed | Return:ssets to accomplish assets and retirement a your nest egg. When through inheritance as with risk of loss to s, including insurar assets mortgages listed and accomplished as mortgages listed.  | Liquidity:  Provide the second of the s | e goals for you | to you and your spouse   |

Bank or Credit Union:

| income & Expenses                    |                             |                         |                          |
|--------------------------------------|-----------------------------|-------------------------|--------------------------|
| Monthly Income                       | You                         | Spouse                  |                          |
| Wages/Salary                         | \$                          | \$                      |                          |
| Social Security Statements           | \$                          | \$                      |                          |
| Savings per month                    | \$                          | \$                      |                          |
| Pension (Details of Pension)         | \$                          | \$                      |                          |
| Investment Income                    | \$                          | \$                      |                          |
| Rental Income                        | \$                          | \$                      |                          |
| Total Income                         | \$                          | \$                      |                          |
| Monthly Expenses                     |                             |                         |                          |
| Approximate Monthly Expenses         | \$                          | (or detailed workshee   | t provided)              |
| Do you expect a significant change   | , up or down, in your cash  | flow in the near future | e? Yes□ No□              |
| Explain:                             |                             |                         |                          |
|                                      |                             |                         |                          |
| Your Current Concerns                |                             |                         |                          |
|                                      |                             | Concerned               | Not Concerned            |
| Keeping my investments safe from lo  | osses                       |                         |                          |
| Making sure that my assets provide   | income for my/our lifetime  | e                       |                          |
| Knowing my cash flow plan for retire | ement                       |                         |                          |
| Knowing the Cost/Fees/Risk in curre  | nt portfolio                |                         |                          |
| Reducing Income and Estate Taxes     |                             |                         |                          |
| Knowing all my options with Social S | ecurity                     |                         |                          |
| Protecting myself from possible long | term care expenses          |                         |                          |
| eaving a legacy to my family and/o   | r charities                 |                         |                          |
| Getting my legal affairs in order    |                             |                         |                          |
|                                      |                             |                         |                          |
|                                      |                             |                         |                          |
| Please share any additional informat | tion about money, taxes, ir | nsurance, health or pas | st financial experiences |
| hat you would like to discuss:       |                             | ·                       |                          |
|                                      |                             |                         |                          |
|                                      |                             |                         |                          |
|                                      |                             |                         |                          |

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