

PERSONAL AND FINANCIAL INFORMATION

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**ROSSWEALTH
ADVISORS**

Advising for an Abundant Retirement

Confidential Information

Today's Date: _____

Name: _____ Birth Date: _____
Phone Home: _____ Cell: _____
Email: _____
Employer (or former): _____ Expected Retirement Date: _____

Spouse Name: _____ Birth Date: _____
Phone Home: _____ Cell: _____
Email: _____
Employer (or former): _____ Expected Retirement Date: _____

Address: _____ City: _____ Zip code: _____
Wedding Anniversary Date: _____

Veteran You Spouse Branch: _____ Years Served: _____
Hobbies/Interests: _____
Pets: (type/names) _____

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/Stockbroker: _____ Accountant: _____
How would you rate your advisor? 1 (lowest) to 10 _____ Attorney: _____
How often do you have a review of your plan? _____
I pay my advisor annually: \$ _____ or _____ %.
What do you want from your advisor? _____

Legal Documents

	You		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?	Yes	No	Yes	No
Are your powers of attorneys electronically filed?	Yes	No	Yes	No
Do you have a Living or Revocable Trust?	Yes	No	Yes	No
Dated: _____				
Have you pre-arranged your funeral?	Yes	No	Yes	No

Tax Return

Provide Recent Tax Return

Insurance

Your Life Insurance Totals:

Death Benefit \$ _____ Cash Value \$ _____ Mom _____ Dad _____

Spouse Life Insurance Totals:

Death Benefit \$ _____ Cash Value \$ _____ Mom _____ Dad _____

Do you have Long Term Care Insurance? Yes No

Real Estate

Personal Residence Information:

Purchase price: \$ _____ Purchase year: _____

Estimated value today: \$ _____

Outstanding Mortgage: \$ _____ Term remaining _____

Interest Rate: _____%

_____ Fixed Term (30 year, 15 year, etc.) _____ ARM (5 year, 7 year, 10 year, etc.) _____ Interest only

Do you have other property? Yes No Rental Property? Yes No

Investment Accounts

Please provide full **statement** copies of all investment related accounts.

Non-IRA Accounts:

Financial Institution Account Value

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Retirement Accounts: IRA, 401k, 403b, 457, etc.

Financial Institution Account Value

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

What have been your least favorite investments? _____

Client Questionnaire

What do you think a reasonable rate of return is? You _____ % Spouse _____ %

What percentage or dollar amount of your money would you be OK with losing?

You _____ % or \$ _____ Spouse _____ % or \$ _____

How much short-term, immediate cash do you want available? You \$ _____ Spouse \$ _____

Please rank the following items from 1-3 based on what is most important to you: (1 = most important)

Protection from Loss: _____ Return: _____ Liquidity: _____

What do you want your retirement assets to accomplish? What are the goals for your assets?

You: _____

Spouse: _____

What is the main concern with your assets and retirement nest egg?

You: _____

Spouse: _____

There are four things you can do with your nest egg. Which two are most important to you and your spouse?

- Spend it
- Pass it along on to family through inheritance or gifting
- Purchase financial products with risk of loss to principal
- Purchase financial products, including insurance products, without the risk of loss to principal

Debt Related

Please list any outstanding debts besides mortgages listed on page 2.

Type of debt	Amount Owed	Interest Rate	Current Payment	Payoff Date
_____	\$ _____	_____ %	\$ _____	_____
_____	\$ _____	_____ %	\$ _____	_____
_____	\$ _____	_____ %	\$ _____	_____

Bank or Credit Union: _____

Income & Expenses

Monthly Income

	You	Spouse
Current Wages/Salary	\$ _____	\$ _____
Social Security Statements	\$ _____	\$ _____
Savings per month	\$ _____	\$ _____
Pension (Details of Pension)	\$ _____	\$ _____
Investment Income	\$ _____	\$ _____
Total Income	\$ _____	\$ _____

Monthly Expenses

Approximate Monthly Expenses \$ _____ (or see detailed worksheet provided)

Do you expect a significant change, up or down, in your cash flow in the near future? Yes No

Explain: _____

Your Current Concerns

	Concerned	Not Concerned
Keeping my investments safe from losses	_____	_____
Making sure that my assets provide income for my/our lifetime	_____	_____
Knowing my cash flow plan for retirement	_____	_____
Knowing the Cost/Fees/Risk in current portfolio	_____	_____
Reducing Income and Estate Taxes	_____	_____
Knowing all my options with Social Security	_____	_____
Protecting myself from possible long term care expenses	_____	_____
Leaving a legacy to my family and/or charities	_____	_____
Getting my legal affairs in order	_____	_____

Please share any additional information about money, taxes, insurance, health or past financial experiences that you would like to discuss: _____

Investment Advisory Services offered through Ross Wealth Advisors, LLC, a registered investment advisor in the State of Ohio. Insurance products and services are offered through Ross Wealth Advisors, LLC.