

# *Confidential Financial Questionnaire*

*Client:* \_\_\_\_\_



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# *Confidential Financial Questionnaire*

## *Overview*

The first step in creating a meaningful financial plan is to have a thorough understanding of the client's current situation, their needs and objectives. The attached *confidential* financial questionnaire will give me the information I need to understand you as individuals, your dreams and aspirations, as well as the details of your particular assets. The more information that I have, the better position that we may be in together to create a meaningful financial plan.

## *Instructions*

1. This confidential questionnaire is your first step in organizing your resources in order to focus on a financial plan. Please fill in the information requested, being as complete in your answers as possible. Only I, my authorized professional staff and those who assist me, while maintaining confidentiality, will have access to this information.
2. A review of your financial situation requires that the clearest picture of your past and present financial decisions be presented. These decisions can be reflected in a number of documents (see Checklist of Needed Documents).
3. Please answer the Financial Priorities checklist attached.
4. I will be able to assist you in organizing your resources when you provide these documents along with this completed questionnaire. You can be sure that your documents will be maintained in a confidential manner during the review period. All of your documents will be returned promptly to you in the same condition that they were received.
5. We stand ready to assist you in gathering information requested. Please call if any items need clarification or if you have any questions.

Your assistance in the above matter is most appreciated. I am looking forward to being of service to you.

## *Checklist of Needed Documents*

<u>Needed</u>	<u>Obtained</u>	<u>Financial</u>
<input type="checkbox"/>	<input type="checkbox"/>	Recent statements available for financial assets (savings, checking, credit union, CD, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Recent statements available for all investments (mutual funds, annuities, IRA, 401K etc.)
<input type="checkbox"/>	<input type="checkbox"/>	A prospectus for each existing investment you own, where applicable.
<input type="checkbox"/>	<input type="checkbox"/>	Manner of title holding of any stock (how ownership appears on the certificates), current value of each stock, and cost basis.
<input type="checkbox"/>	<input type="checkbox"/>	Paycheck stub(s) for you and your spouse showing deductions from gross income.
<input type="checkbox"/>	<input type="checkbox"/>	Personal Income Tax Returns: Last 2 years (federal and state)
<input type="checkbox"/>	<input type="checkbox"/>	Life/Health/Disability/Long Term Care Insurance Policies
<input type="checkbox"/>	<input type="checkbox"/>	Annuity Policies
<input type="checkbox"/>	<input type="checkbox"/>	Employee Benefit Plan Descriptions (Pension, Profit Sharing, Group Insurance, etc.)
 <b><u>Estate</u></b>		
<input type="checkbox"/>	<input type="checkbox"/>	Present Wills
<input type="checkbox"/>	<input type="checkbox"/>	Trust Documents – created by you or others for your (or your family’s) benefit.
<input type="checkbox"/>	<input type="checkbox"/>	Pre or Post-Nuptial Agreements and Divorce Decrees/Property Settlements
<input type="checkbox"/>	<input type="checkbox"/>	Deeds to Real Estate
<input type="checkbox"/>	<input type="checkbox"/>	Gift Tax Returns
 <b><u>Business</u></b>		
<input type="checkbox"/>	<input type="checkbox"/>	Business Tax Returns: Last 2 years (include P&L and balance sheets)
<input type="checkbox"/>	<input type="checkbox"/>	Any Partnership Agreements
<input type="checkbox"/>	<input type="checkbox"/>	Business Buy-Sell Agreements and Employment Contracts
<input type="checkbox"/>	<input type="checkbox"/>	Any available financial statements (assets and liabilities).
 <b><u>Miscellaneous</u></b>		
<input type="checkbox"/>	<input type="checkbox"/>	Any other documents you feel will be helpful.
<input type="checkbox"/>	<input type="checkbox"/>	Other documents to bring: _____
		_____
		_____

## *Financial Priorities*

**For:** \_\_\_\_\_

*Please number, in order of priority, the six areas that you feel are most important to you at this time, "1" being the most important.*

\_\_\_\_\_ Accumulate sufficient assets to provide a comfortable retirement income.

\_\_\_\_\_ Protect assets and their accumulation from the effects of inflation.

\_\_\_\_\_ Provide educational funds for my children/grandchildren.

\_\_\_\_\_ Provide support for a dependent other than a child.

\_\_\_\_\_ Minimize my personal income taxes.

\_\_\_\_\_ Develop an appropriate investment strategy.

\_\_\_\_\_ Arrange my portfolio to reduce the risk of loss.

\_\_\_\_\_ Provide an adequate standard of living in the event of death.

\_\_\_\_\_ Establish proper wills and trusts for non-tax purposes.

\_\_\_\_\_ Reduce or avoid taxes on my estate.

\_\_\_\_\_ Reduce insurance costs while being sure that coverage is appropriate.

\_\_\_\_\_ Organize my important papers, documents and financial affairs.

\_\_\_\_\_ Use the tax advantages of charitable giving.

\_\_\_\_\_ Provide an adequate standard of living in the event of disability.

\_\_\_\_\_ Manage my affairs well during retirement.

\_\_\_\_\_ Protect assets in the event of long-term care (nursing home, etc.).

\_\_\_\_\_ Preserving estate for the benefit of children/grandchildren.

\_\_\_\_\_

\_\_\_\_\_

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## Confidential Financial Questionnaire

**Personal:**

Your Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
 Spouse Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Marital Status: \_\_\_\_\_ # of Children \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Parents: Father Age: \_\_\_\_\_ Mother Age: \_\_\_\_\_ Occupation: \_\_\_\_\_ Health: \_\_\_\_\_ Estate: \_\_\_\_\_  
 Spouse's Parents: Father Age: \_\_\_\_\_ Mother Age: \_\_\_\_\_ Occupation: \_\_\_\_\_ Health: \_\_\_\_\_ Estate: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Spouse Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

Income Last Year: Base: \$ \_\_\_\_\_ Bonus: \$ \_\_\_\_\_ Soc. Sec.: \$ \_\_\_\_\_ Pension: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_  
 Spouse Income: Base: \$ \_\_\_\_\_ Bonus: \$ \_\_\_\_\_ Soc. Sec.: \$ \_\_\_\_\_ Pension: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

**Assets/Liabilities:** Value Cost **Mortgage Data:**

Residence: \$ \_\_\_\_\_ \$ \_\_\_\_\_ Date: \_\_\_\_\_ Balance: \$ \_\_\_\_\_ Rate: \_\_\_\_\_ % Term: \_\_\_\_\_ yrs  
 2nd Residence: \$ \_\_\_\_\_ \$ \_\_\_\_\_ Date: \_\_\_\_\_ Balance: \$ \_\_\_\_\_ Rate: \_\_\_\_\_ % Term: \_\_\_\_\_ yrs

Other Real Estate:  
 \$ \_\_\_\_\_ \$ \_\_\_\_\_ Date: \_\_\_\_\_ Balance: \$ \_\_\_\_\_ Rate: \_\_\_\_\_ % Term: \_\_\_\_\_ yrs  
 \$ \_\_\_\_\_ \$ \_\_\_\_\_ Date: \_\_\_\_\_ Balance: \$ \_\_\_\_\_ Rate: \_\_\_\_\_ % Term: \_\_\_\_\_ yrs

Total Personal Debt: Autos: \$ \_\_\_\_\_ Credit Cards: \$ \_\_\_\_\_ Loans: \$ \_\_\_\_\_

**Life Insurance** (Can skip this section if statements or policies are provided.)

<u>Insured</u>	<u>Owner</u>	<u>Company</u>	<u>Type</u>	<u>Face Amnt</u>	<u>Premium</u>	<u>Cash Value</u>	<u>Beneficiary</u>

**Disability Insurance/Long-Term Care Insurance**

You: Monthly Amount: \$ \_\_\_\_\_ Duration: \_\_\_\_\_ Personal or Employer? \_\_\_\_\_  
 Spouse: Monthly Amount: \$ \_\_\_\_\_ Duration: \_\_\_\_\_ Personal or Employer? \_\_\_\_\_



***Financial Attitude Questions for:*** \_\_\_\_\_

Who and what do you care about and why? \_\_\_\_\_

What is the most important thing to you in this world? \_\_\_\_\_

What is your most important financial goal? \_\_\_\_\_

What is your biggest financial fear? \_\_\_\_\_

What keeps you up at night? \_\_\_\_\_

What is your best source of financial comfort? \_\_\_\_\_

What is the one thing you value most in a financial adviser? \_\_\_\_\_

What is important to you about money? \_\_\_\_\_

How do you feel about providing for your children/grandchildren's education? \_\_\_\_\_

What effect would inheriting a substantial amount of money have on your children/grandchildren? \_\_\_\_\_

What do you want your life insurance to do for you/your family? \_\_\_\_\_

In your estimation, what is the greatest financial risk you face for the rest of your life? \_\_\_\_\_

Are your current financial plans exposing you to or defending you from that risk? How? \_\_\_\_\_

Do you expect any significant changes to your income/asset situation in the next 5 years? If so, explain. \_\_\_\_\_

On a scale of 1-10 would you consider yourself a (1) aggressive or (10) conservative investor? \_\_\_\_\_

Assuming you owned \$100,000 of a particular stock, which scenario would bother you more?  
\_\_\_\_ You sold the stock - and it went up 50%      \_\_\_\_ You kept the stock - and it dropped 50%

On a scale of 1-10 how important is it to you to preserve your estate for the benefit of your children/grandchildren with (1) being unimportant and (10) being very important? \_\_\_\_\_

What percentage of your estate would you like to leave to: (Should total 100%)  
Family: \_\_\_\_\_ Charity: \_\_\_\_\_ Government: \_\_\_\_\_

## *Retirement Goals*

Your Name \_\_\_\_\_

Spouse Name \_\_\_\_\_

### **Questions**

Age you would like to retire: \_\_\_\_\_

Age your spouse would like to retire: \_\_\_\_\_

Do you anticipate working part-time after retirement? \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, how much would you expect to make in today's dollars, i.e., do not adjust for inflation?  
\$ \_\_\_\_\_ How long would you expect to work part-time? \_\_\_\_\_

Does spouse anticipate working part-time after retirement? \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, how much would spouse expect to make in today's dollars, i.e., do not adjust for inflation?  
\$ \_\_\_\_\_ How long would spouse expect to work part-time? \_\_\_\_\_

Would you/spouse be willing to work part-time, in same or different job, if it meant you could meet your retirement age goal or would you prefer to postpone your retirement so you could retire completely?

\_\_\_\_\_  
\_\_\_\_\_

Please describe briefly how you would like to spend your retirement years. What activities would you participate in?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In today's dollars, if you plan to travel, what would your annual travel budget be? \$ \_\_\_\_\_





# MONTHLY EXPENSE SCHEDULE

<b><u>FIXED EXPENSES</u></b>		<u>Amount</u>	<u>Notes</u>	
Housing	Mortgage, Rent			
	Property, Liability Insurance			
	Real Estate Tax			
	Housing Supplies, Maintenance			
	Lawn Care			
Utilities	Gas, Oil			
	Electric			
	Water, Sewer			
	Telephone			
Transportation	Auto Payments			
	Gasoline			
	Insurance			
	Repairs, Maintenance			
Debt Repayment				
Health	Health Insurance Premiums			
	Health Expenses			
	Dental Expenses			
	Life Insurance			
Dependents	School Education			
	Child Day Care, Adult Day Care			
Specified	Food, Groceries, Personal			
	Clothing, Cleaning			
	Income Taxes			
	Social Security			
Other				
<b>Total Monthly Fixed Expenses</b>				
<b><u>VARIABLE EXPENSES</u></b>				
Recreation	Cable			
	Entertainment			
	Hobbies			
Gifts, Contributions	Gifts (Christmas, birthdays, etc.)			
	Donations			
Savings	Saving 1			
	Saving 2			
Investments	TSA/401k, etc.			
	TSA/401k, etc.			
Specified	Education Fund			
	Vacation, Travel			
	Household Furnishing			
<b>Total Monthly Variable Expenses</b>				
<b>Total Monthly Expenses</b>				
<b>Net Cash Flow</b>				