VINTAGE FINANCIAL SERVICES, LLC

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Financial Data Questionnaire

General Information

Date:

	Client 1	Client 2
Name		
Date of Birth		
Email		
Phone	Cell ☐	Cell ☐
Employer		
Title		
Social Security Number		
What is the most important issue in your financial life?		

Children

Name	DOB	Current Grade	Desired College	Current Education Funds	Current Annual Savings
				$	$
				$	$
				$	$
				$	$

Personal Assets

	Client 1	Client 2	Joint
Savings/Money Market	$	$	$
Home	$	$	$
Second Home	$	$	$
Investment Real Estate	$	$	$

Income & Expenses

	Client 1	Client 2
Gross Wages	$	$
Self Employment Income	$	$
Rental/Business Income	$	$
Social Security Income	$	$
401k/IRA Annual Contribution	$	$
Roth IRA Annual Contribution	$	$
Annual Gifts Made	$	$
Other Long-Term Savings	$	$

Pension

	Client 1	Client 2
Annual Pension Benefit	$	$
Age Pension Begins		
Pension COLA?	Yes ☐ No ☐	Yes ☐ No ☐

Liabilities

	Balance	Payment	Years Left	Interest Rate
Mortgage	$	$		%
Second Home	$	$		%
Home Equity Line of Credit	$	$		%
Car Loan	$	$		%
Other Debt	$	$		%

Life Insurance

	Type*	Insured	Annual Premium	Death Benefit	Beneficiary
Policy 1			$	$	
Policy 2			$	$	
Policy 3			$	$	
Policy 4			$	$	

*Term/Whole Life/Universal

Estate Planning

Do you have a will and/or trust set up? Yes ☐ No ☐ If yes, please provide those documents.

Do you have anyone who may need your financial support? Yes ☐ No ☐ If yes, please explain:

Do you anticipate receiving an inheritance? Yes ☐ Estimated Amount? No ☐

Do you expect to make any significant charitable gifts? Yes ☐ No ☐ If yes, please explain:

When planning, we use a target life expectancy of 90 years. Based on your health and family history do you anticipate your life expectancy to be:

	Much Lower	Somewhat Lower	On Target	Somewhat Higher	Much Higher
Client 1	☐	☐	☐	☐	☐
Client 2	☐	☐	☐	☐	☐

Additional Questions

Does your employer provide retiree health benefits? Yes ☐ No ☐ (please explain):

Who does your taxes currently?

Who should be our primary contact during business hours?

How did you hear about us? Referral ☐ VFS Website ☐ Other
Google ☐ NAFPA ☐

Please attach the following documents:

- ☐ **Your most recent tax return (1040, Schedules A-E)**
- ☐ **Account statements**
- ☐ **Insurance policies or declarations pages**
- ☐ **401(k) or work plan investment options**
- ☐ **Social Security Statements (www.SSA.gov)**
- ☐ **A current financial plan (if you have one)**