Lighthouse FINANCIAL PLANNING

A Fee-Only Firm— Lighting your path to a brighter financial future...

INITIAL INTERVIEW QUESTIONNAIRE

Date: ____________________

Name: ____

Age: ______ DOB: _______________ Citizenship: US or Other_________________________

Employer: ____ Profession:_____________________________

Bus. # _______________ Fax # ________________

E-mail: ____☐ Personal ☐ Work

Preferred method of communication: ☐ Home Phone ☐ Cell Phone ☐ E-mail ☐Other _____________________

Spouse/Partner: ____

Age: ______ DOB: _______________ Citizenship: US or Other_________________________

Employer: ____ Profession:_____________________________

Bus. # _______________ Fax # ________________

E-mail: ____☐ Personal ☐ Work

Preferred method of communication: ☐ Home Phone ☐ Cell Phone ☐ E-mail ☐Other _____________________

Marital Status: ___________________ Date Marital Status Changed: ___________________

Home Address: ____

Mailing Address: ____

Home #: _____________________ Other: ____________________________ Other:________________________

Children:

1.____ DOB: __________________________________

2.____ DOB: __________________________________

3.____ DOB: __________________________________

4.____ DOB: __________________________________

How did you hear about Lighthouse Financial Planning? ____

A Registered investment advisory firm

101 Parkshore Drive, Suite 100, Folsom, CA 95630
Phone (800) 565-7656 or (916) 932-7200
Fax: (916) 932-7201
www.LighthouseFinancialPlanning.com

1. What would you like to accomplish through this engagement?

2. What prompted you to look for a financial planner at this time?

3. What are your most important financial concerns?

4. What is most important about money to you?

5. What are some things that concern you about your future financial picture?

6. How do you envision your lifestyle 5 years from now?

7. Is your outlook generally optimistic or pessimistic concerning the future?

8. What are the most important *non*-financial concerns & objectives right now? (Please rank them.)

A Registered investment advisory firm

101 Parkshore Drive, Suite 100, Folsom, CA 95630
Phone (800) 565-7656 or (916) 932-7200
Fax: (916) 932-7201
www.LighthouseFinancialPlanning.com

8a. How confident are you about your financial future? Circle one

Very confident ☐ Somewhat confident ☐ Neutral ☐ Not very confident ☐ Don't know ☐

9. What does "financial independence" mean to you? How would you direct your life if there were nothing to impede your choices?

10. Do you have or would you like to pursue a particular avocation(s) and/or hobby(s) that you especially enjoy doing? Please describe?

11. What would you consider the kind of service an ideal financial adviser would provide you? What is most important characteristic to you in a financial planner?

12. What are the keys to making this relationship successful for you? What are your expectations of us as your financial advisor?

13. During our review three years from now, what will need to have happened now and then for you to feel satisfied with your progress?

14. How would you like to make important financial decisions?

15. How do you make important investment decisions?

16. What is your most memorable investment experience?

16a.	Disagree Strongly				Agree Strongly
	1	2	3	4	5
I depend on advice from experts when making financial decisions	○	○	○	○	○
I prefer **not** to make financial decisions on my own, without getting advice	○	○	○	○	○
I prefer **not** to implement investment decisions myself	○	○	○	○	○
I prefer to have someone else implement my investment decisions	○	○	○	○	○
I trust someone else to manage my finances	○	○	○	○	○

17. What things frustrate you about financial planning and investments?

18. Have you ever worked with a financial advisor before? Yes ☐ No ☐
What was good about the experience?

19. What was unsatisfactory about the experience?

20. Who are your other advisors? For example: family member, friend, accountant, tax professional, attorney. (Names are optional.)

A Registered investment advisory firm

101 Parkshore Drive, Suite 100, Folsom, CA 95630
Phone (800) 565-7656 or (916) 932-7200
Fax: (916) 932-7201
www.LighthouseFinancialPlanning.com

21. What changes do you expect in the future in your finances that you wish to plan for?
Retirement: ☐ Family obligations: ☐ Inheritances: ☐ Education: ☐
Other: ____

22. Do you have goals/concerns regarding passing assets to children or others?
____
____
____
____

23. Have you ever been involved in litigation? Yes ☐ No ☐ What happened?
____
____
____
____

24. Do you have someone who prepares your taxes or do you do it yourself? Self ☐ Other ☐
If you do have someone prepare your taxes, what is their name?______________________________

25. Do you have a will and/or Trust? Yes ☐ No ☐ When was it last reviewed? _____________
If Yes, who prepared the documents? ____

26. Do you have life insurance? Yes ☐ No ☐
If so, how much (each person)?____________________ ____________________
Who is your Agent?____

27. How much is your current income? ____
Sources ____
____

28. How much do you currently save? ____
Where do you put it? ____

29. Do you track expenses? Yes ☐ No ☐ If not, is this a concern?
____
____
____
____

A Registered investment advisory firm

101 Parkshore Drive, Suite 100, Folsom, CA 95630
Phone (800) 565-7656 or (916) 932-7200
Fax: (916) 932-7201
www.LighthouseFinancialPlanning.com

30. Where are your investments now? (If schedules are attached, please state so.)

Item	Amount/Value	Additions/ Withdrawals	Comments

31. Your assets: (If schedules are attached, please state so.)

Item	Value	Comments

32. Your Liabilities/Debt Service

Item	Balance	Rate	Payment	Comments

33. Is there anything else we need to talk about? Any "special needs" situations you are responsible for?

____

A Registered investment advisory firm

101 Parkshore Drive, Suite 100, Folsom, CA 95630
Phone (800) 565-7656 or (916) 932-7200
Fax: (916) 932-7201
www.LighthouseFinancialPlanning.com