

Thank you for your interest in allowing us to assist you in your financial goals. Please complete the following checklist so that we can better address your financial concerns prior to our initial consultation.

Personal Information

First Name _____

Spouse Name _____

Last Name _____

Last Name _____

Nickname _____

Nickname _____

Date of Birth ____ / ____ / ____

Date of Birth ____ / ____ / ____

Phone(____) _____

Phone(____) _____

Email _____

Email _____

Dependents/Children

Name _____

Age _____

Name _____

Age _____

Name _____

Age _____

Financial Goals

What financial concerns cause you to seek financial planning assistance?

When do you want to retire? _____

What are your major financial goals? _____

Do you have any special circumstances which worry you? _____

Estate Planning - Do you have any of the following:

A current will? _____ When was it signed? _____

Durable Power of Attorney: _____ Medical Power of Attorney: _____

Living Will/Medical Directive: _____

Trust? If so what kind(s)? _____

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Fax: 210.344.4362

San Antonio, TX 78232

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You may fax this form to (210) 344-4362 or email to advisor@teamoliver.com

Risk Management

Do you have blanket ("umbrella") liability insurance? _____
Do you have disability insurance? _____ Through work? _____
Do you have life insurance? _____ How much? _____
What kind(s)? _____
Do you have long-term care insurance? _____

Financial Status

Annual Household Income

_____ \$75,000 and under _____ \$75,000 - \$100,000 _____ \$100,000 - 250,000
_____ \$250,000 - \$500,000 _____ \$500,000 - \$1,000,000 _____ \$1,000,000 and up

Approximate Net Worth (*net worth = total assets (not including home and automobile) less total debts)
\$ _____

Have you filed for Social Security? _____ If so, at what age(s)? _____

Are you eligible for any pensions? _____

If so, how much and when are you eligible? _____

Asset & Debt Information

Asset Type (Combined)	Current Value	Asset Type (Combined)	Current Value
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Debts	Current Value	Loan Amount	Interest Rate	Payment
_____	\$ _____	\$ _____	% _____	\$ _____
_____	\$ _____	\$ _____	% _____	\$ _____
_____	\$ _____	\$ _____	% _____	\$ _____
_____	\$ _____	\$ _____	% _____	\$ _____
_____	\$ _____	\$ _____	% _____	\$ _____
_____	\$ _____	\$ _____	% _____	\$ _____

Were you referred by someone? _____

If not, how did you hear about us? _____

Today's Date _____ / _____ / _____

Additional information that may be needed. It is recommended to bring this information if readily available:

- Copy of prior year tax return
- Bank statements and/or financial portfolio
- Insurance policies
- Social Security and/or pension statements
- Copy of valid driver's license
- Estate planning documents
(will, trusts, etc, if applicable)