



Your North Atlanta Money Concepts
Financial Planning Center



www.peakleveladvisors.com

HELPING YOU MAXIMIZE YOUR POTENTIAL

www.moneyconcepts.com

FINANCIAL DISCOVERY CLIENT PERSONAL INFORMATION QUESTIONNAIRE



Personalized Financial Planning Solutions to Guide Your Financial Journey

North Atlanta Money Concepts Financial Planning Centre
Kevin Turner, Financial Advisor, President of Peak Level Advisors

2985 Gordy Pkwy.
Marietta, GA 30066
Phone: 770-804-0428
Fax: 770-828-0108

Email: kturner@moneyconcepts.com

Website: www.moneyconcepts.com/kturner

Branch Office: 145 River Terrace Ct., Roswell, GA 30076



*All securities through Money Concepts Capital Corp., member FINRA/SIPC. Peak Level Advisors is an independent firm and is not affiliated with Money Concepts.
11440 Jog Road, Palm Beach Gardens, FL 33418 Phone: 561-472-2000 Fax: 561-472-2094*

PERSONAL & EMPLOYMENT INFORMATION

Client Name	Spouse Name
Address	
Home Phone	Wedding Anniversary (if applicable)
Cell Phone	Cell Phone
E-Mail	E-mail (if different)
Social Security Number	Social Security Number
Date of Birth	Date of Birth
Hobbies	Hobbies

Business Name and Position
Address
Phone / Fax / E-Mail

Spouse's Business Name and Position
Address
Phone / Fax / E-Mail

Please list any dependents and their relationship (include address, phone #, date of birth, and Social Security #)

*** All information is personal and confidential ***

OBJECTIVES & PRIORITIES

The basic purpose of Financial Planning is to help an individual or family to achieve their personal financial goals and objectives, within the reasonable constraints of their earning capacity and current financial position. One of the most important steps in this process is the initial identification of specific financial priorities. The financial priorities of most people can generally be classified into several broad categories: Current Financial Situation/Planning Needs, Protection Planning, Wealth Accumulation, Managing Income Taxes, Planning for Retirement, and Wealth Preservation.

Please take a moment to first identify the objectives in each major category that are of importance to you at this time. You may check off several items in a given category or none at all, based on what is most important to you. Once you have checked off the individual objectives, please place a **Priority Value** in the blank next to the top 3 major categories that you want to address right now (1-Highest and 3-Lowest).

Value Category Objectives

- ___ **Current Financial Situation/Planning Needs**
- ___ Knowing your current Net Worth
 - ___ Tracking your current Income & Expenses
 - ___ Projecting your future Net Worth & Cash Flow
 - ___ Preparing for Emergency with Cash Reserves
 - ___ Getting/keeping Financial Affairs organized
 - ___ Developing a Professional Financial Plan to help me reach my Life's Goals

- ___ **Protection Planning**
- ___ Provide a lump sum for dependents in the event of Death and/or Disability
 - ___ Replace earning power and pay off debts in the event of Death and/or Disability
 - ___ Analyze my Insurance needs and costs vs. benefit
 - ___ Addressing Health Care concerns
 - ___ Provide for potential Long Term Care costs
 - ___ Planning for Business Continuation

- ___ **Wealth Accumulation**
- ___ Getting out of or Managing Debt
 - ___ Establishing a saving plan to Accumulate Wealth or provide funding for a Future need
 - ___ Buying a Primary Home or Other Real Estate
 - ___ Accumulating funds for Educational Expenses
 - ___ Increasing Current Income from Investments
 - ___ Professional advice in selecting Investments
 - ___ Professional management of my Investment Portfolio

Value Category Objectives

- ___ **Managing Income Taxes**
- ___ Better manage and finding ways to Reduce Federal/State Income Taxes
 - ___ Projecting future Federal/State Income Taxes
 - ___ Reduce Taxes and Increase Income on Highly Appreciated Assets
 - ___ Seeing how your Business affects Personal Income Taxes

- ___ **Planning for Retirement**
- ___ Ensuring adequate retirement income between Government Benefits, Employee Benefits, and Personal Savings/Investments
 - ___ Managing Pension/Other Retirement Sources
 - ___ Protecting ability to meet Retirement Goals by assuring a minimum level of Monthly Income
 - ___ Projecting the impact of an earlier or later retirement age
 - ___ Planning for Emergency Needs in Retirement (e.g. Medical Care, Nursing Home Care)
 - ___ Using your Business Assets for Retirement

- ___ **Wealth Preservation**
- ___ Developing an Estate Plan to meet my needs
 - ___ Have a Financial Professional review my Estate Plan
 - ___ Manage excessive Estate Settlement costs and Inheritance Taxes
 - ___ Using Estate Planning Vehicles to Continue or transfer ownership of Personal Assets or Business Assets

*** All information is personal and confidential ***

FINANCIAL ATTITUDES & COMFORT LEVELS

These financial attitudes are influenced by past experiences as well as your natural personality. Understanding these attitudes and how you have arrived at them can help you approach your financial future in a way that allows you to make decisions that will be in line with your objectives rather than being primarily based on emotions that may not be productive.

Please mark in the sections below how you view 11 aspects of managing your money in terms of your attitude and how comfortable you feel in each of those areas.

<u>Attitude</u>		<u>Comfort Level</u>
Spending		
	M	
	F	
Debt		
	M	
	F	
Accumulating		
	M	
	F	
Cash Reserves		
	M	
	F	
Giving		
	M	
	F	
Tax Withholding		
	M	
	F	
Insurance		
	M	
	F	
The Stock Market		
	M	
	F	
Retirement		
	M	
	F	
Family Support		
	M	
	F	
Legacy		
	M	
	F	

*** All information is personal and confidential ***

MONTHLY CASH FLOW

Expenses	Monthly
HOUSING EXPENSE	\$
Mortgage #1/Rent	
Mortgage #2	
Utilities (Gas, Electric, Water, Etc.)	
Home Services (Phone, Cable, Internet, Etc.)	
Insurance	
Property Taxes	
CHILD CARE	\$
TRANSPORTATION EXPENSE	\$
Loans/Lease	
Fuel	
Insurance	
Service	
FOOD AND BEVERAGES	\$
CLOTHING	\$
FURNISHINGS	\$
PERSONAL CARE AND CASH	\$
HEALTH CARE EXPENSES	\$
Medical (Deductibles/Co-Pays, Etc.)	
Dental (Deductibles/Co-Pays, Etc.)	
Drugs	
Insurance	
EDUCATION/SELF-IMPROVEMENT	\$
PERSONAL DEBT PAYMENT	\$
ENTERTAINMENT	\$
FRIEND/FAMILY GIFTS	\$
VACATIONS AND HOLIDAYS	\$
CHURCH & CHARITABLE CONTRIBUTIONS	\$
OTHER	\$
TOTAL EXPENSES	\$
ADDITIONAL MONTHLY SAVINGS & INVESTMENT	\$

Gross Income*	\$
Salary (Client)	
Salary (Spouse)	
Self-Employment (Client)	
Self-Employment (Spouse)	
Interest & Dividends	
Pensions	
Child Support/Alimony	
Social Security	
Rental Property	
Other	
TOTAL INCOME	\$

Insurance Policies & Employer Benefits:

Policy Type/Benefit	Benefit Amt.	Premium

Payroll Tax Withholding*:

	Client (per _____)	Spouse (per _____)
Federal Tax		
State/Local Tax		
Soc. Security		
Medicare		
Benefits/Deductions		

NOTES:

* If you are providing tax returns and pay stubs, you may leave the Income Section blank.

*** All information is personal and confidential ***

PERSONAL BALANCE SHEET

Cash:

Checking Account	\$ _____
Savings Account	\$ _____
Certificate of Deposits (CD's)	\$ _____
Money Market Funds	\$ _____
Life Insurance Cash Value	\$ _____

Securities:

Stocks	\$ _____
Bonds	\$ _____
Mut. Funds	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
Annuities	\$ _____
Other: _____	\$ _____

Other Property:

Automobile #1	\$ _____
Automobile #2	\$ _____
Household Furnishings	\$ _____
Art & Collectibles	\$ _____
Clothing & Furs	\$ _____
Jewelry	\$ _____
Other Possessions	\$ _____

Real Estate:

Home	\$ _____
Other Properties	\$ _____

Retirement Plans:

401k, Profit Sharing	\$ _____
IRA	\$ _____
Roth IRA	\$ _____
Pension	\$ _____
Keogh, SEP, SIMPLE	\$ _____
TSA	\$ _____
Other: _____	\$ _____

Other Assets:

Equity in Business	\$ _____
Direct Participation Programs	\$ _____

TOTAL ASSETS:	\$ _____
----------------------	-----------------

Balance on Mortgage/Loans:

Home	\$ _____
Home Equity	\$ _____
Other Properties	\$ _____
Automobiles	\$ _____
Education	\$ _____
Other Debts	\$ _____
Life Insurance Loan	\$ _____

Credit Card Balances:

_____	\$ _____
_____	\$ _____
_____	\$ _____

Taxes (If in arrears):

Federal	\$ _____
State	\$ _____
Taxes on Investments	\$ _____
Other	\$ _____

Other Liabilities (If in arrears):

Alimony	\$ _____
Child Support	\$ _____
Other	\$ _____

TOTAL LIABILITIES:	\$ _____
---------------------------	-----------------

NOTES:

INVESTMENT RISK PROFILE

The following questions will assess your investment risk profile. Unless a specific investment objective is noted, consider the questions in reference to your long-term investment objectives. Please check the appropriate response for each question and sign at the end of the profile for documentation purposes. Try not to be influenced by your spouse's response (if applicable).

Time Horizon

1. What is your current age?

M F

- Less than 45
 45 to 55
 56 to 65

M F

- 66 to 75
 Older than 75

2. When do you expect to begin withdrawing money from your investment account?

M F

- Less than 1 year
 1 to 2 years
 3 to 4 years

M F

- 5 to 7 years
 8 to 10 years
 11 years or more

3. Once you begin withdrawing money from your investment account, how long do you expect the withdrawals to last?

M F

- I plan to take a lump sum distribution
 1 to 4 years
 5 to 7 years

M F

- 8 to 10 years
 11 years or more

Long-Term Goals and Expectations - Your views of how an investment should perform over the long term.

4. What is your goal for your long-term investments?

M F

- To grow aggressively
 To grow significantly
 To grow moderately

M F

- To grow with caution
 To avoid losing money

5. Assuming normal market conditions, what would you expect from this investment over time?

M F

- To generally keep pace with the stock market
 To slightly trail the stock market, but make a good profit
 To trail the stock market, but make a moderate profit
 To have some stability, but make modest profits
 To have a high degree of stability, but make small profits

6. Suppose the stock market performs unusually poorly over the next decade. What would you expect from your investments?

M F

- To lose money
 To make very little or nothing
 To eke out a little gain

M F

- To make a modest gain
 To be little affected by what happens in the stock market

*** All information is personal and confidential ***

INVESTMENT RISK PROFILE (CONT.)

Short-Term Risk Attitudes - Your attitude toward short-term volatility.

7. Which of these statements would best describe your attitudes about the next three years performance of this investment?

- | | |
|---|---|
| M F
<input type="checkbox"/> <input type="checkbox"/> I don't mind if I lose money
<input type="checkbox"/> <input type="checkbox"/> I can tolerate a loss
<input type="checkbox"/> <input type="checkbox"/> I can tolerate a small loss | M F
<input type="checkbox"/> <input type="checkbox"/> I'd have a hard time tolerating any losses
<input type="checkbox"/> <input type="checkbox"/> I need to see at least a little return |
|---|---|

8. Which of these statements would best describe your attitudes about the next three months performance of this investment?

- M F
- Who cares? One calendar quarter means nothing
 - I wouldn't worry about losses in that time frame
 - If I suffered a loss of greater than 10%, I'd get concerned
 - I can only tolerate small short-term losses
 - I'd have a hard time stomaching any losses

Overall Risk Tolerance - Your willingness to accept uncertainties in your investment's performance.

9. Which of the following portfolios is most consistent with your investment philosophy?

- M F
- Portfolio 1** will most likely exceed long-term inflation by a significant margin and has a high degree of risk.
 - Portfolio 2** will most likely exceed long-term inflation by a moderate margin and has a high to moderate degree of risk.
 - Portfolio 3** will most likely exceed long-term inflation by a small margin and has a moderate degree of risk.
 - Portfolio 4** will most likely match long-term inflation and has a low degree of risk.

10. Portfolios with the highest average returns also tend to have the highest chance of short-term losses. The table below provides the average dollar return of four hypothetical investments of \$100,000 and the possibility of losing money (ending value of less than \$100,000) over a one-year holding period.

<u><i>Probabilities After 1 Year</i></u>		
	<i>Possible Avg. Value End of 1 Year</i>	<i>Chance of Losing Money at the End of 1Year</i>
M F		
<input type="checkbox"/> <input type="checkbox"/> Portfolio A	\$105,000	17%
<input type="checkbox"/> <input type="checkbox"/> Portfolio B	\$107,000	23%
<input type="checkbox"/> <input type="checkbox"/> Portfolio C	\$108,000	29%
<input type="checkbox"/> <input type="checkbox"/> Portfolio D	\$109,000	31%

INVESTMENT RISK PROFILE (CONT.)

11. Investing involves a trade-off between risk and return. Realizing that historically investments with high long-term average returns tend to have greater fluctuation and more frequent short-term losses than conservative investments, which of the following would be your investment goal?

M F

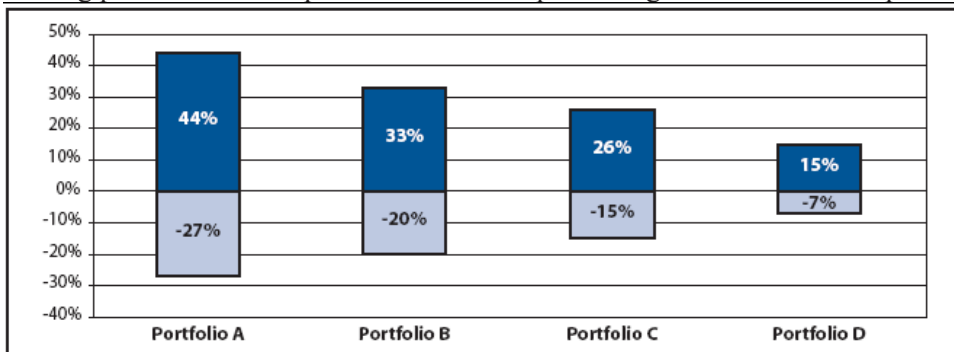
- Protect the account value.** In order to minimize the chance for loss, I am willing to accept the lower long-term returns provided by conservative investments.
- Minimize risk** while achieving slightly higher returns than conservative investments.
- Balance** moderate levels of risk with moderate levels of returns.
- Maximize long-term investment returns.** I am willing to accept large and sometimes dramatic fluctuations in the value of my investments.

12. Knowing that there have been short and long-term market downturns, followed by recoveries, if you owned a well-diversified portfolio that fell by 20% over a short period in a down market, how would you react assuming you still have 10 years until needing withdrawals?

M F

- I would **not** change my portfolio.
- I would **wait at least one year** before changing to options that are more conservative.
- I would **wait at least three months** before changing to more conservative options.
- I would **immediately** change to options that are more conservative.

13. The following graph shows the hypothetical results of four sample portfolios over a one-year holding period. The best potential and worst potential gains and losses are presented.



Which of these portfolios would you prefer to hold?

M F

- Portfolio A
- Portfolio B

M F

- Portfolio C
- Portfolio D

14. I am comfortable with investments that may frequently experience large declines in value if there is a potential for higher returns.

M F

- Agree
- Disagree

M F

- Strongly disagree

Signature _____

Signature _____

Date _____

*** All information is personal and confidential ***