Fact Finder

Confidential

Personal Information

Please fill out form as completely as possible. Complete disclosure enables us to better make proper recommendations.

Name: ____________________ Date: ____________________

Address: ____________________

Phone (circle preferred): Home: __________ Work: __________ Cell: __________

Job Title: ____________________ Fax: __________

Employer Name: ____________________

Employer Address: ____________________

If RETIRED, please list previous Employer Information

Date of Birth __________ Age: __________ Marital Status: __________

Preferred Email Address: ____________________

Number of Children: __________ Children's Ages: __________

Spouse's Information:

Name: ____________________ Date: ____________________

Phone (circle preferred): Home: __________ Work: __________ Cell: __________

Job Title: ____________________ Fax: __________

Employer Name: ____________________

Employer Address: ____________________

If RETIRED, please list previous Employer Information

Date of Birth __________ Age: __________ Marital Status: __________

Preferred Email Address: ____________________

Retirement Strategies

Check the Appropriate Box

How Concerned are you about:	High	Low
Knowing how much income, in today's dollars, you will need upon retirement?	☐	☐
Knowing how much income your current plan will provide upon retirement?	☐	☐
Having a systematic program for savings and investments?	☐	☐
Accumulating retirement funds without paying current taxes on any growth?	☐	☐
Reducing current taxation on a portion of your retirement income?	☐	☐
Your savings and investments maintaining their buying power?	☐	☐

	Yes	No
Does your employer provide a retirement plan?	☐	☐
Does your spouse's employer provide a retirement plan?	☐	☐
Are you satisfied with your asset diversification?	☐	☐
Have you confirmed your Social Security earnings and benefits in the last 12 months?	☐	☐

At what age would you like to retire? __________ Spouse? __________

In current dollars, what amount will you need monthly? __________ Spouse? __________

Mason & Associates, LLC . 11827 Canon Blvd. Suite 204, Newport News, VA 23606 . 757-223-9898 . FAX: 757-223-9990

Fact Finder

Confidential

Accumulation Strategies

Check the Appropriate Box

How concerned are you about:	High	Low
Providing funds for your children's college education?	☐	☐
Saving for a new or second home?	☐	☐
Saving money for a special vacation?	☐	☐
Saving money for a special project or purchase?	☐	☐
Saving money to buy a business or practice?	☐	☐
	Yes	No
Do you know how much money you will need for your accumulation goals? $	☐	☐

Income Protection Strategies

Check the Appropriate Box

How concerned are you about:	High	Low
Paying off the mortgage and other debts in the event of death or disability?	☐	☐
Providing adequate income for your family in the event of death or disability?	☐	☐
Providing long-term care for yourself, your spouse, or your parents?	☐	☐
	Yes	No
Does your company provide group term life insurance?	☐	☐
Does your company provide survivor's benefits for your spouse?	☐	☐
Does your company provide a disability income program?	☐	☐
Would you like to review your current insurance coverage?	☐	☐
Do you have health care insurance?	☐	☐
Will you be relying on investment assets for anticipated and unanticipated health costs?	☐	☐

Wealth Preservation Strategies*

Check the Appropriate Box

How concerned are you about:	High	Low
Having an up-to-date will	☐	☐
Revocable Living Trust	☐	☐
Financial Power of Attorney	☐	☐
Medical Power of Attorney	☐	☐
Advanced Medical Directive	☐	☐
Medical Releases	☐	☐
Reducing estate taxes your heirs may have to pay	☐	☐
Providing for the efficient transfer of assets to your heirs	☐	☐
Managing an inheritance or potential inheritance?	☐	☐
	Yes	No
Would you consider starting a gifting program to reduce the size of your estate?	☐	☐
Would you consider making charitable gifts?	☐	☐

Other Strategies

Check the Appropriate Box

	Yes	No
Do you have written financial goals?	☐	☐
Have you implemented a plan for achieving your goals?	☐	☐
Do you have a current inventory of your major assets?	☐	☐
Would you like a review of existing financial arrangements?	☐	☐
Is it important for you to have access to a team of financial professionals?	☐	☐
Would you like a comprehensive financial analysis?	☐	☐
If not, is there one or several areas that you would like to focus on?	☐	☐

*Mason & Associates, LLC does not provide legal, accounting, or tax advice. You should consult your own legal, accounting, or tax professional for such advice.

Mason & Associates, LLC . 11827 Canon Blvd. Suite 204, Newport News, VA 23606 . 757-223-9898 . FAX: 757-223-9990

Fact Finder Confidential

Anticipated Changes

Check ALL that are likely to occur in the NEXT 12 MONTHS

- Marriage ☐
- Have a Child ☐
- Graduation ☐
- Divorce ☐
- Care for Dependent Parent(s) ☐
- Obtain a Loan ☐
- Pay off a Loan ☐
- Increase Savings ☐
- Make an Investment ☐
- Receive an Inheritance ☐
- Buy or Sell a Home ☐
- Job Change or Promotion ☐
- Bonus or Salary Increase ☐
- Buy a Business or Practice ☐
- Sell a Business or Practice ☐
- Retire ☐

Financial Overview

Annual Household Income

- $0 - $50,000 ☐
- $50,0001 - $75,000 ☐
- $75,001 - $100,000 ☐
- $100001 - $250,000 ☐
- $250,001 - $500,000 ☐
- $500,001 - or more ☐

Types of Assets or Insurance

- Home ☐
- Second Home ☐
- Investment or Rental Real Estate ☐
- Savings Accounts / CD's ☐
- Money Market Accounts ☐
- Stocks / Bonds ☐
- Mutual Funds ☐
- Other ________ ☐
- Annuities ☐
- Permanent / Variable Life Insurance ☐
- Term Life ☐
- Business / Practice ☐
- Traditional IRA - All Deductible ☐
- Traditional IRA - Non Deductible ☐
- Roth IRA ☐

Investment Experience

Stocks		Years
Bonds		Years
Mutual Funds		Years
Investment Real Estate		Years
Annuities		Years
Other		Years

Total Liabilities

- Under $50,000 ☐
- $50,000 - $100,000 ☐
- $100,000 - $150,000 ☐
- $150,000 - $250,000 ☐
- $250,000 - $500,000 ☐
- Over $500,000 ☐

Net Worth

Cash	$
Stocks	$
Bonds	$
Mutual Funds	$
Investment Real Estate	$
Annuities	$
TSP	$
Total	**$ -**

*Exclude Primary Residence

Personal Residence

Market Value of Home	$	
Current Mortgage Balance	$	
Loan Duration / Years Left		
Interest Rate		
2nd Mortgage or HELOC	$	
Loan Duration / Interest Rate		

Annual Income

Self	$
Spouse	$
Total	$ -