



## Planning Fact Finder

Client name: \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

DOB \_\_\_\_\_ Age \_\_\_\_\_ Spouse's Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

Employment Status: Self \_\_\_\_\_ Spouse \_\_\_\_\_

Children	Sex	Date of Birth

Extended Family	Yours: Name/Age/Health	Spouse: Name/Age/Health
Mother		
Father		
Sisters		
Brothers		
Other		

Health	Notes
How is your health?	
How often do you see a physician and why?	
What types of physicians other than your primary care doctor have you seen and why?	
Do you smoke or use tobacco?	

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**Family Priorities: Ratings**

(Client fills our separate form)

Rating (1-7)

Notes/Discuss Ratings

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Funding children's/grandchildren's education \_\_\_\_\_

Funding comfortable retirement \_\_\_\_\_

Providing for family after death \_\_\_\_\_

Providing for you and your family in event of a disability \_\_\_\_\_

Providing for long-term care needs \_\_\_\_\_

Properly addressing your estate planning needs \_\_\_\_\_

Evaluating your investment portfolio \_\_\_\_\_

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**Family Priorities: Rankings**

(Client fills our separate form)

From list above, rank top three in order of importance and why

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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

How well do you believe you have saved for retirement? Positives and negatives?

How are you saving today?

Looking back at financial decisions in the past:

- What have been your best one or two decisions?
- What decisions would you change?

At what age would you and your spouse like to be in a position to not work?

Based on your current situation, will you be able to meet those goals?

How would you describe your appetite for risk and discuss why? (*rate on 1-7 scale, 1=very low, 7=very high*)?

How important is safety and security at this point in your life?

How important is liquidity, for example in case of emergencies?

Are you comfortable with your current liquidity situation?

Have you ever sought/taken advice from an advisor and how well did that work?

Tell me about a financial decision you've made in the past that:

- You would consider a high risk? How well did it turn out?
- You would consider a low risk? How well did it turn out?

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Thinking of those close to you—friends or family—who would you consider a wise saver/investor and what have they done that you believe was smart?

How important is having a steady stream of income throughout your retirement?

Knowing what you know now, what would you have done differently to prepare for retirement?

Overall, how do you feel about your future from a financial perspective?

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**Assets/Investments** (Do you have?)

Type/Amount/Cost/Notes

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Checking Account

Savings Account

CD

Money Market

Long Term Care Insurance

Disability Insurance

IRA

401k / 403b

529 Plan

Life Insurance

Annuities

Other

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## Funeral Planning

Notes

Will you be buried or cremated?

How will your funeral be paid for?

If life insurance what is value of policy? Type  
(term or permanent)

What other expenses will need to be settled?

Is your family aware of your wishes?

What arrangements have been made?

How well do you believe have you planned?

What areas would you like to address today?

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## Closing Questions/Comments

There may be some areas where we can help you further. Would you be willing to schedule a time for us to meet TIME and DATE so I can present you some options?

Let's set the appointment for \_\_\_\_\_. I look forward to meeting with you.



**Family Priorities Ratings and Ranking**  
 (To be filled out by client as part of Redbird planning process)

Client name: \_\_\_\_\_ Date \_\_\_\_\_

**Family Priorities: Ratings**

(1 = very low priority, 7 = very high priority)

Funding children's/grandchildren's education	1	2	3	4	5	6	7
Funding comfortable retirement	1	2	3	4	5	6	7
Providing for family after death	1	2	3	4	5	6	7
Providing for you and your family in event of a disability	1	2	3	4	5	6	7
Providing for long-term care needs	1	2	3	4	5	6	7
Properly addressing your estate planning needs	1	2	3	4	5	6	7
Evaluating your investment portfolio	1	2	3	4	5	6	7

**Family Priorities: Rankings**

(Rank top three in order of importance from list above)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_