

FAMILY FIDUCIARY SERVICES, INC.

CLIENT FINANCIAL PROFILE

Client Names: _____

Date: _____

Date: _____

email address:

NOT FDIC INSURED - MAY GO DOWN IN VALUE - NO FINANCIAL INSTITUTION GUARANTEE
NOT A DEPOSIT - NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY

900 Cummings Center, Suite 212U, Beverly, MA 01915
(978) 922-0050 -- davidgrey@familyfiduciary.net

Personal Information

First Client's Name	DOB	Social Security #	Drivers Lic #
---------------------	-----	-------------------	---------------

Home Address	City	State	Home Phone #
--------------	------	-------	--------------

First Client's Employer: Full / Part	Occupation	Years
--------------------------------------	------------	-------

Work Address	Work Phone #
--------------	--------------

Second Client's Employer: Full/Part	Occupation	Years
-------------------------------------	------------	-------

Work Address	Work Phone #
--------------	--------------

Children/Dependents

Name	DOB
Name	DOB
Name	DOB

Retirement Goals

	Comments
Age _____	
Mo. Income Needed _____ (Present/Future)	
SS Mo. Income _____	
Other Mo. Income _____	
Total Mo. Income _____	
DEFICIT MONTHLY _____	

Do you/spouse have a will? Yes No

Do you/spouse expect an inheritance/settlement? Yes No Comments _____

Is there any other information we should know before proceeding? _____

Assets

Bank Accounts

Bank _____

Checking Balance \$ _____

Money Market or Savings Balance \$ _____

Bank _____ CD \$ _____

Rate _____ %

Mat. Date _____

Brokerage Accounts

Broker Name

Total Value (Attach most recent statement to form)

\$ _____

\$ _____

\$ _____

Investments: List all stocks held outside a brokerage account.

# of Shares	Company Name	Owner	Cost Basis	Date Acquired

Pensions

Owners _____

Description _____

Approximate Benefit _____

Survivor Option: Yes No Beneficiary

Assets (continued)

Personal Residence

\$ _____	\$ _____	\$ _____	\$ _____
Value of Residence	1st Mortgage Balance	Second Mortgage Balance	Rent/Mortgage Payment
\$ _____	\$ _____	\$ _____	\$ _____
Value of Residence	1st Mortgage Balance	Second Mortgage Balance	Rent/Mortgage Payment
_____	_____	\$ _____	
Term of Mortgage	Years Remaining	Equity	

Additional Property

_____	\$ _____
Property Type (i.e., 2nd Home, vehicles, boat)	Value
_____	\$ _____
Property Type (i.e., 2nd Home, vehicles, boat)	Value
_____	\$ _____
Property Type (i.e., 2nd Home, vehicles, boat)	Value

Total Estate Value (in thousands)

Net Worth

<input type="checkbox"/> \$0-\$500	<input type="checkbox"/> \$500-\$1,000	<input type="checkbox"/> \$1,000-\$2,000
<input type="checkbox"/> \$2,000-\$5,000	<input type="checkbox"/> Over \$5,000	

Income / Expenses

\$ _____	_____	_____
Annual Household Income	Tax Bracket	Other Tax Considerations

What Type of Investor Are You?

Please read the following statements. Rank yourself on a scale from 1 to 5 as to whether you agree or disagree with the statement. Circle your choice.

- 1 = strongly disagree
- 2 = disagree
- 3 = neutral
- 4 = agree
- 5 = strongly agree

1 To obtain above-average returns on my investments, I am willing to accept above average risk of investment losses. 1 2 3 4 5

2 Staying ahead of inflation is more important to me than maintaining stable principal values. 1 2 3 4 5

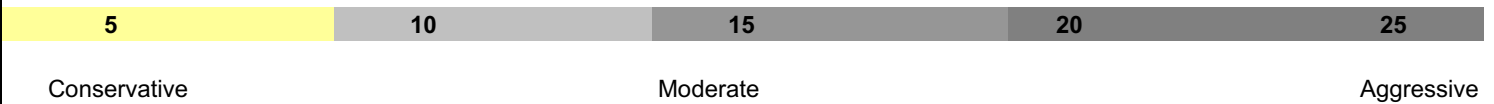
3 If an investment loses money over the course of a year, I can easily resist the temptation to sell it. 1 2 3 4 5

4 I do not plan on withdrawing my retirement money for major expenses before I retire. 1 2 3 4 5

5 I consider myself knowledgeable about economic issues and personal investing. 1 2 3 4 5

6 Total points of Questions 1 through 5. Total: _____

INVESTOR PROFILE



7 I agree that the total points listed in Question 6 accurately indicates my Investor Profile. Yes No
 If no, _____ is the number that accurately indicates my Investor Profile.

Additional Information

Attorney Information:

Accountant Information:

Client Signature

Date

Print Client Name

Date

Client Signature

Date

Print Client Name

Date