

— Introductory —  
**QUESTIONNAIRE**



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# INTRODUCTORY QUESTIONNAIRE

Please complete by filling in your information below.

## FAMILY INFORMATION

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

How many children do you have? \_\_\_\_\_

Parents: \_\_\_\_\_

Do they have special needs?      Yes      No

Are they in good health?      Yes      No

Are they financially dependent?      Yes      No

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Age(s) of children: \_\_\_\_\_

Spouse Parents: \_\_\_\_\_

Do they have special needs?      Yes      No

Are they in good health?      Yes      No

Are they financially dependent?      Yes      No

## INCOME & ANNUAL SAVINGS

Salary: \_\_\_\_\_

Other Income: \_\_\_\_\_

Savings (Qualified): \_\_\_\_\_

Savings (Non-Qualified): \_\_\_\_\_

Spouse Salary: \_\_\_\_\_

Spouse Other Income: \_\_\_\_\_

Savings (Qualified): \_\_\_\_\_

Savings (Non-Qualified): \_\_\_\_\_

## ASSETS

	JOINT:	CLIENT:	SPOUSE:
Real Estate/Property	\$ _____	\$ _____	\$ _____
Retirement Investments (IRA, 401(k) etc.)	\$ _____	\$ _____	\$ _____
Personal Investments	\$ _____	\$ _____	\$ _____
Other Investments	\$ _____	\$ _____	\$ _____
Business Interests	\$ _____	\$ _____	\$ _____

## SHORT TERM (36 mo.) CASH NEEDS

Weddings: \$ \_\_\_\_\_

Purchase of Property: \$ \_\_\_\_\_

Education: \$ \_\_\_\_\_

Misc.: \$ \_\_\_\_\_

## LIABILITIES

	JOINT:	CLIENT:	SPOUSE:
Total Mortgage Debt:	\$ _____	\$ _____	\$ _____
Total Credit Card Debt:	\$ _____	\$ _____	\$ _____
All Other Debt:	\$ _____	\$ _____	\$ _____

**LIFE INSURANCE**

**ON CLIENT LIFE:**

Death Benefit \$ \_\_\_\_\_

**ON SPOUSE LIFE:**

Death Benefit \$ \_\_\_\_\_

**PRIORITIZE YOUR GOALS**

**CLIENT** - Rank your top 6 goals from 1-6

- Planning for Retirement
- Saving for College
- Managing a Budget
- Minimizing Taxes
- Insuring Your Income
- Providing a Legacy
- Contributing to Charity

- Creating Retirement Income
- Saving for Major Purchase
- Maximizing Investments
- Insuring Your Life
- Insuring Your Assets
- Caring for Parents
- Planning for a Business

**SPOUSE** - Rank your top 6 goals from 1-6

- Planning for Retirement
- Saving for College
- Managing a Budget
- Minimizing Taxes
- Insuring Your Income
- Providing a Legacy
- Contributing to Charity

- Creating Retirement Income
- Saving for Major Purchase
- Maximizing Investments
- Insuring Your Life
- Insuring Your Assets
- Caring for Parents
- Planning for a Business

**RETIREMENT ASSUMPTIONS**

Current Living Expenses: \_\_\_\_\_

Retirement Living Expenses: \_\_\_\_\_

Desired age of Retirement (Client): \_\_\_\_\_

Desired age of Retirement (Spouse): \_\_\_\_\_

**MISC. ASSUMPTIONS**

Are you expecting any large lump sum payment in the future? (E.g. Sale of business, Inheritance, etc.)

Year: \_\_\_\_\_

Amount: \_\_\_\_\_

**ADDITIONAL REMARKS**

Is there any information you would like us to know which was not covered in this questionnaire?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

