

**RAMSEY & ASSOCIATES, INC.**

**PERSONAL QUESTIONNAIRE**

Date: \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

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

Cell Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Email \_\_\_\_\_ Home Email \_\_\_\_\_

Home Fax \_\_\_\_\_ Home Fax \_\_\_\_\_

Work Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Work Email \_\_\_\_\_ Work Email \_\_\_\_\_

Work Fax \_\_\_\_\_ Work Fax \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

Years with Employer \_\_\_\_\_ Years with Employer \_\_\_\_\_

Work Address \_\_\_\_\_ Work Address \_\_\_\_\_

\_\_\_\_\_

Position/Title \_\_\_\_\_ Position/Title \_\_\_\_\_

Which phone # or email address would you prefer we use to contact you? \_\_\_\_\_

**CHILDREN AND DEPENDENTS**

Name	Relationship	Date of Birth	Dependent	
			Yes	No
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Are you currently setting money aside for your children's (or minor dependents) college education? \_\_\_\_\_

If yes, how much per year? \_\_\_\_\_

How much have you saved so far? \_\_\_\_\_

# RAMSEY & ASSOCIATES, INC.

## INCOME SOURCE

Include wages, commissions, business interests, social security, alimony, child support, interest and dividends, pensions, trusts, and gifts

Name	Source of Income	Actual for 2017	Estimated for 2018
_____	_____	=====	=====
_____	_____	=====	=====
_____	_____	=====	=====
_____	_____	=====	=====

Does your income fluctuate on an annual basis (due to commissions, bonuses, etc.)? \_\_\_\_\_

If yes, by what amount? \_\_\_\_\_

Reason: \_\_\_\_\_

Do you expect your annual income to change in the next five years beyond a normal cost of living adjustment? \_\_\_\_\_

If yes, by what amount? \_\_\_\_\_

Reason: \_\_\_\_\_

## PERSONAL USE PROPERTY

Include residence, second home, automobiles, boats, household and personal items, etc.

Description	Owner	Date of Purchase	Purchase Price	Current Market Value
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## LIABILITIES

Include mortgages, credit cards, automobile loans, education loans, personal loans, and lines of credit, etc  
(For mortgage payments, please include principal and interest portion only)

Creditor	Interest Rate	Maturity Date	Monthly Payment	Balance Owed
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



**RAMSEY & ASSOCIATES, INC.**

**PENSION PLANS**

Include employer-sponsored pension plans that will or do provide a monthly pension payment.

<u>Owner</u>	<u>Name of Employer</u>	<u>Years in Retirement Plan</u>	<u>Current Value</u>	<u>Monthly Contribution</u>	<u>Estimated Monthly Benefit &amp; at what age</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**OTHER ASSETS**

Include real estate, business interests, gold and precious metals, closely-held stock, antiques, etc.

<u>Description</u>	<u>Owner</u>	<u>Current Value</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

**RAMSEY & ASSOCIATES, INC.**

**INSURANCE COVERAGE**

**Life Insurance**

Insured	Insurance Company	Beneficiary	Type of Policy	Face amount and Cash Value if any	Annual Premium
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**Disability Insurance**

Insured	Insurance Company	Benefit	Period of time for benefit	Annual Premium
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Health/Medical Insurance**

Insured	Insurance Company	Annual Premium
_____	_____	_____
_____	_____	_____

**Long Term Care Insurance**

Insured	Insurance Company	Type of Policy	Annual Premium
_____	_____	_____	_____
_____	_____	_____	_____

**Homeowners/Renters Insurance**

Insured	Insurance Company	Liability Limits	Type of Policy	Annual Premium
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Automobile Insurance**

Insured	Insurance Company	Liability Limits	Annual Premium
_____	_____	_____	_____
_____	_____	_____	_____

**Casualty and Excess Liability Insurance (Umbrella Policy)**

Insured	Insurance Company	Amount of Coverage	Annual Premium
_____	_____	_____	_____
_____	_____	_____	_____

**RAMSEY & ASSOCIATES, INC.**

**CASH RESERVES**

How much cash would you like available for emergencies and peace of mind? \_\_\_\_\_

**RETIREMENT PLANNING**

At what age do you wish to retire? Name: \_\_\_\_\_ Age: \_\_\_\_\_

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

**ESTATE PLANNING**

Do you have a will? \_\_\_\_\_

If yes, when was it made? \_\_\_\_\_

By an attorney? \_\_\_\_\_

Have you signed a durable power of attorney? \_\_\_\_\_

Do you have a Health Care Directive to Physician document? \_\_\_\_\_

Do you have a Medical Durable Power of Attorney? \_\_\_\_\_

**EXPECTED CHANGES**

Do you anticipate a change in your employment or income status? If yes, describe:

\_\_\_\_\_

Are you planning any major expenditures? If yes, describe:

\_\_\_\_\_

Are there any relatives or friends for whom you may be financially responsible in the future? If yes, describe:

\_\_\_\_\_

Are there any health problems to consider in the planning process? If yes, describe:

\_\_\_\_\_

Do you expect any inheritance? If yes, describe:

\_\_\_\_\_

Are there any other expected changes? If yes, describe:

\_\_\_\_\_

***RAMSEY & ASSOCIATES, INC.***

**Please Remember:** Different types of investments involve varying degrees of risk. Therefore, it should not be assumed that future performance of any specific investment or investment strategy (including the investments and/or investment strategies recommended and/or undertaken by Ramsey & Associates, Inc.) will be profitable. Ramsey & Associates, Inc. shall rely on the accuracy of information that you have provided. **Please remember that it remains your responsibility to advise Ramsey & Associates, Inc., in writing, if there are any changes in the information provided above, including any change in your personal/financial situation for the purpose of reviewing/revising previous recommendations and/or results, or if you would like to impose, add, or to modify any reasonable restrictions to Ramsey & Associates, Inc.'s investment advisory services.**

**Please Note:** The scope of any financial planning and consulting services to be provided depends the request and needs of the client. Ramsey & Associates, Inc. does not serve as an attorney, accountant, or insurance agent. Ramsey & Associates, Inc. does not prepare estate planning documents or tax returns, nor does it sell insurance products.