



Eagle West Group

Your Eagle West Financial Profile

YOUR FAMILY INFORMATION

Name	Age	Birth date	Cell
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Spouse Name	Age	Birth date	Cell
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Children names and ages:

Street Address	City	State	Zip
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Home Phone	Email
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YOUR EMPLOYMENT INFORMATION:

Occupation	Job Title	Employer
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Work Phone	Years Worked	Income/Salary (income if retired)
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Spouse's occupation	Job Title	Employer
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Work Phone	Years Worked	Income/Salary (income if retired)
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YOU AND YOUR FINANCES

What do you want to get accomplished financially?

What is standing in the way of your financial goals?

What are your long-term goals or dreams that you want to accomplish?

YOUR RETIREMENT PLANNING

Retirement age.

Will you work in retirement?

Are you contributing to an IRA?

Do you have a company retirement or pension plan?

What is your coverage?

Do you have disability coverage?

What is your coverage?

Do you have personal liability coverage?

What is your coverage?

Do you have life insurance?

What is your coverage?

Do you have long-term care insurance?

What is your coverage?

ESTATE PLANNING

Do you currently have:

Will

Uncertain if I have a will.

Trust

Uncertain if I have any trusts.

When was your Will updated?

When was your Trust updated?

Are you the beneficiary of any trusts?

What, if any lifestyle changes are you anticipating (marriage, divorce, retirement, moving, etc.)?



YOUR RISK PROFILE

What is your overall investment experience including stocks, bonds and mutual funds?

What is your investment goal?

- Retirement Saving for major purchase
 More current income Other

Other: _____

What are your major objectives for your investments?

- Keeping ahead of inflation Increasing returns
 Increasing returns Building wealth for heirs
 Other

Other: _____

When do you expect to use the bulk of the money you are accumulating in your investments?

- In 1 to 5 years In 6 to 10 years
 In 6 to 10 years In 11 to 20 years

Over the next several years, do you expect your household annual income to:

- Decrease moderately Grow moderately
 Decrease substantially Grow substantially

All portfolios go through temporary declines, but managing expectations is part of what we do. What point of an investment loss would cause you to change your investment strategy?

- 10% decline 20% decline
 30% decline 40% decline

By what percentage do you expect your portfolio to grow annually over the long term, 10+ years

- 3% - 5% 3% - 5% 6% - 8%
 8% - 10% 12% - 14% 14% - 16% More than 16%

YOUR FAMILY BALANCE SHEET

- | | | | |
|---|----------|--|----------|
| <input type="checkbox"/> CDs | \$ _____ | <input type="checkbox"/> Checking | \$ _____ |
| <input type="checkbox"/> Savings | \$ _____ | <input type="checkbox"/> Real Estate | \$ _____ |
| <input type="checkbox"/> 401(k) (You) | \$ _____ | <input type="checkbox"/> 401(k) (Spouse) | \$ _____ |
| <input type="checkbox"/> Gov't. Bonds | \$ _____ | <input type="checkbox"/> Corporate Bonds | \$ _____ |
| <input type="checkbox"/> IRA (You) | \$ _____ | <input type="checkbox"/> IRA (Spouse) | \$ _____ |
| <input type="checkbox"/> Money Market | \$ _____ | <input type="checkbox"/> Municipal Bonds | \$ _____ |
| <input type="checkbox"/> Mutual Funds | \$ _____ | <input type="checkbox"/> Stocks | \$ _____ |
| <input type="checkbox"/> Profit Sharing | \$ _____ | <input type="checkbox"/> Profit Sharing (Sp) | \$ _____ |