



ALPERS
FINANCIAL
PLANNING, INC

Fee-Only, Tax Focused Financial Planning

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PERSONAL FINANCIAL PROFILE

CONFIDENTIAL

All information that you provide is strictly CONFIDENTIAL and will not be disclosed to anyone without your consent. To best determine how your financial planning needs and goals can be successfully served by Alpers Financial Planning, Inc., please complete the form below and upload to our Secure Sharefile Link.



PERSONAL FINANCIAL PROFILE

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How did you discover Alpers Financial Planning, Inc.?

General Information

	Client	Co-Client
Name		
Birthdate		
Home Address		
City, State, Zip		
Preferred Email		
Home Phone		
Cell Phone		
Work Phone		

Please check one: Single Married Divorced Widowed

Income

	Client	Co-Client
Occupation		
Employer		
Annual Salary		
Bonus		
Other Income		

Is income fairly uniform and reliable? Y N



Dependents and Adult Children

Name	Relationship	Birthdate	Resides in <i>City, State</i>

What are your three most important financial goals/concerns?

- _____
- _____
- _____

Value of Assets

Description	Client	Co-Client
Regular Non-Retirement Accounts:		
Cash Accounts (checking & savings)		
CDs		
Mutual Funds, Stocks, Bonds		
Other Investments		
Retirement Accounts:		
Employer Plans (401k, 403b, deferred comp, etc.)		
Traditional IRAs		
Roth IRAs		
Other		
Real Estate:		
Primary Residence & Provide Date Purchased		
Other Real Estate, Rentals, Land		
Other		
Annuities		
529 Plans		
RSU's		



Are you contributing on a regular basis to a work or personal retirement plan such as a 401(k), 403(b), deferred compensation, ROTH or IRA? Y N If so, how much per year for each plan(s)?

Pension Available? Y N
Estimated amount at Retirement

Loans

Description	Current Balance (\$)	Rate (%)	Loan Length (if applicable)
Home Mortgage			
Other Mortgage			
Auto Loan #1			
Auto Loan #2			
Student Loans			
Credit Card #1			
Credit Card #2			
Personal / Family Loans			

Estate Documents

Do you have a will? Y N Year drafted: _____

Do you have a Living Will, Healthcare Power of Attorney, or other advanced directives? Y N



Life Insurance

Person Insured	Amount	Years Remaining (Term Only)	Annual Premium	Insurance Company or Group

Do you have Long-Term Care Insurance? Y N

Other Information

Do you work with a tax professional? Y N

Does your tax professional provide any tax planning or projection services? Y N

How much do you expect to annually earn on your investments?

4 – 6% 6 –8% 10 – 12% 12 – 15% Not Sure

What did you do the last time the stock market went down by 10% or more?

Have you ever been unhappy with the recommendations of a financial advisor, insurance agent, or stock broker? Please explain.

Are there other concerns or items you would like to share with us?
