



**CONFIDENTIAL FINANCIAL**

**QUESTIONNAIRE**

for

Name:       Date:

Registered Representative, Securities offered through Cambridge Investment Research, Inc., a Broker/Dealer, Member FINRA/SIPC.

Investment Advisor Representative, Cambridge Investment Research Advisors, Inc., a Registered Investment Advisor.

Cambridge and Northbeam Financial, Inc. are not affiliated.

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| **I. FAMILY PROFILE** |  |  |  |  |
| Name      |  |  | Spouse      |  |  |
| Address      |  | City      |  | State      | Zip      |
| Home Phone      | Cell PhoneClient:       | Spouse:       | Email AddressClient:       |  | Spouse:       |
| Child      |  | DOB      | Child      |  | DOB      |
| Child      |  | DOB      | Child      |  | DOB      |

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| **II. MEDICAL** |  |  |  |  |
| **CLIENT INFORMATION** |  |  | **SPOUSE INFORMATION** |  |
| DOB      | Age      | Sex[ ]  Male [ ]  Female | DOB      | Age      | Sex[ ]  Male [ ]  Female |
| Rating      |  | Smoker[ ] Yes / [ ] No | Rating      |  | Smoker[ ] Yes / [ ] No |

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| **III. INCOME** |  |  |  |  |
| **CLIENT INFORMATION** | **SPOUSE INFORMATION** |
| Employer      | Position      | Employer      | Position      |
| Salary (Gross)$       | Bonus$       | Salary (Gross)$       | Bonus$       |
| Other Income$       | Source      | Other Income$       | Source      |
| Estimated Retirement Age      | Years Employed      | Estimated Retirement Age      | Years Employed      |
| Combined Monthly Income Gross: $       Net: $       | Estimated Monthly Expenses$       |  | Discretionary Cash$       |
| Current Tax Bracket       % |  | Expected Retirement Tax Bracket       % | Gross Retirement Income Goal$       | Expected Inflation Rate       % |

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| **IV. PROPERTY AND MORTGAGE** |  |  |  |  |
|  | PurchasePrice | Year of Purchase | OriginalTerm | Payment,P & I | Taxes, Insur, HOA | Interest Rate | RemainingBalance | Fair MarketValue |
| Primary Residence | $       |       |       | $       | $       |       % | $       | $       |
| 2nd Home | $       |       |       | $       | $       |       % | $       | $       |
| Other Property | $       |       |       | $       | $       |       % | $       | $       |

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| **V. QUALIFIED ACCOUNTS (401 (k), IRA, SEP, etc.)** |  |  |  |
| Owner | Institution | Type | CurrentBalance | AnnualContribution | EmployerMatch | Average Return | Repositionable? |
|       |       |       | $       | $       |       % |       % | [ ] Yes / [ ]  No |
|       |       |       | $       | $       |       % |       % | [ ] Yes / [ ]  No |
|       |       |       | $       | $       |       % |       % | [ ] Yes / [ ]  No |
|       |       |       | $       | $       |       % |       % | [ ] Yes / [ ]  No |
|       |       |       | $       | $       |       % |       % | [ ] Yes / [ ]  No |
|       |       |       | $       | $       |       % |       % | [ ] Yes / [ ]  No |

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| **VI. LIFE INSURANCE** |  |  |  |
| Name Insured | Company | Type | Face Amount | Year ofPurchase | AnnualContribution | Current CashValue | OutstandingLoans |
|       |  |       |  |       | $       |       | $       | $       | $       |
|       |  |       |  |       | $       |       | $       | $       | $       |
|       |  |       |  |       | $       |       | $       | $       | $       |
|       |  |       |  |       | $       |       | $       | $       | $       |

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| **VII. DEFINED BENEFITS (Social Security, Corporate Benefit Plans, Pension, etc.)** |  |
| Owner | Benefit Provider | BenefitStart Age | BenefitEnd Age | Survivor Benefit | Annual Benefit | COLA | PercentTaxable |
|       |  |       |  |       |       |       % | $       |       % |       % |
|       |  |       |  |       |       |       % | $       |       % |       % |
|       |  |       |  |       |       |       % | $       |       % |       % |
|       |  |       |  |       |       |       % | $       |       % |       % |

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| **VIII. CURRENT ASSETS (CD’s, Annuities, Mutual Funds, Money Markets, Stocks, Bonds, Listed Securities, etc.)** |
| Owner | Type | Amount | Cost Basis | Annual Contribution | Average Return | Repositionable? |
|       |  |       |  | $       | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       | $       |  |       % | [ ] Yes / [ ]  No |

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| **IX. CURRENT LIABILITIES (Auto, Personal Loans, College Loans, Credit Card Debt, etc.)** |
| Owner | Liability | Balance | Monthly Payment | Interest | Payoff and Reposition |
|       |  |       |  | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       |  |       % | [ ] Yes / [ ]  No |
|       |  |       |  | $       | $       |  |       % | [ ] Yes / [ ]  No |

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| **X. FUTURE EXPENSES IN THE NEXT 1-5 YEARS (New Car, Wedding, Home, Remodeling, etc.)** |
| Individual |  | Description Event |  |  | Anticipated Cost/Value | Expected Event Age |
|       |  |       |  |  | $       |  |       |
|       |  |       |  |  | $       |  |       |
|       |  |       |  |  | $       |  |       |

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| **XI. ADDITIONAL COMMENTS** |

What are the most important financial goals that you would like to accomplish? Please prioritize.

1.)

2.)

3.)

4.)

If you were going to change anything in your financial situation, what would it be?

If we were meeting here three years from today, what has to have happened for you to feel happy with your progress?

We have been able to grow substantially through the power of referrals. If we fulfill your expectations, what method of communication may we talk to you about obtaining referrals that is most comfortable for you? (Leave blank if you are not comfortable with discussing referrals.)

Will there be any other advisors involved in the decision making process?

*This information is being provided by you,      . If any of the information is incorrect, you should notify your financial advisor. The information provided by you should be reviewed periodically and updated when either the information or your circumstances change. This is not considered an official statement of your account(s). In this regard, please refer to the confirmation notices and client statements received from the individual product sponsor(s) and custodians.*