



Dempsey
Investment
Management, LLC

Client Financial Questionnaire

This statement of investment goals and objectives embodies the fiduciary responsibilities generally placed upon investment the advisor and is the foundation upon which all investment decisions are to be made. The purpose of this statement is to clarify the agreed-upon position between you (the client) and Dempsey Investment Management, LLC regarding management of your account(s). This statement is developed in accordance with the Prudent Man Rule.

Personal Information

	Client 1	Client 2
Name		
Date of Birth		
Home Phone		
Cell/Work Phone		
Address		
Email		

Children	Age	Living at Home?

Education and Fund Expenses

Children	Age	College Cost Per Year	# of Years Attending	Current College Fund (\$ balance, type of fund)

Other funds such as scholarships, gifts, etc. _____

Risk Profile

I plan to start withdrawing money from my investments for living expenses in:

- Less than 3 years 3-5 years 6-10 years 11+ years

My knowledge of investments is:

- None Limited Good Extensive

When deciding how to invest my money, I am:

- Most concerned about the possibility of my investment losing value
 Equally concerned about the possibility of my investment losing or gaining value
 Most concerned about the possibility of my investment gaining value

Select the investments you currently own or have owned in the past: (select all that apply)

- Money market funds/CDs Bonds/bond mutual funds
 Stocks/stock mutual funds International stocks/mutual funds

Consider the annual returns of the five hypothetical investment plans below. Based on the range of possible outcomes shown, choose the plan that would be most acceptable to you or best suit your investment philosophy.

One Year Return			
Investment Plan	Average Annualized	Best Case Scenario	Worst Case Scenario
<input type="checkbox"/> Plan A	4%	16%	-6%
<input type="checkbox"/> Plan B	6%	25%	-12%
<input type="checkbox"/> Plan C	8%	33%	-18%
<input type="checkbox"/> Plan D	10%	40%	-24%
<input type="checkbox"/> Plan E	12%	50%	-30%

The clients' primary long-term investment goal is:

- Increase Net Worth Retirement Retirement Income
 Other _____

Tell me about your worst investment experience:

Employment

	Client 1	Client 2
Company		
Self Employed? (Y or N)		
Yearly Salary		
Yearly Bonuses		
401k/403b Annual Contribution \$		
Company Matching %		
Qualify for Pension? (Y or N)		

Estate Planning

Do you have any of the following (select all that apply)?

- Will Durable Power of Attorney (Health Care) Living Trust
 Revocable Trust Living Will Power of Attorney (Financial)

Do you work with an estate planning attorney? Yes No

Have you recently reviewed your beneficiary designations in your retirement accounts?

- Yes No

Insurance

You may need to review your insurance policies for this information.

Whole/Universal/Permanent Life Insurance					
Company	Face Amount	Annual Premium	Cash Value	Policy Holder	Beneficiary

Term Life Insurance					
Company	Face Amount	Annual Premium	Expiration Date	Policy Holder	Beneficiary

Disability Insurance		
Company	Income Replacement %	Policy Holder

Long Term Care		
Company	Annual Premium	Policy Holder

Do you have health issues that would prevent you from getting coverage? Yes No

Home Insurance			
Company	Annual Premium	Coverage Amount	Deductible

Do you have umbrella insurance? Yes No

If yes, what is the annual premium? _____ How much coverage? _____

Auto Insurance			
Company	Annual Premium	Coverage Amount	Deductible

Have you compared your home or auto policies lately? Yes No

Retirement Income

Client 1 - Pensions		
	Pension 1	Pension 2
Employer		
Anticipated Annual Income		
Starting Age		
Annual Increase %		
Survivor Benefit %		

Client 1 planned retirement age: _____

Client 2 - Pensions		
	Pension 1	Pension 2
Employer		
Anticipated Annual Income		
Starting Age		
Annual Increase %		
Survivor Benefit %		

Client 2 planned retirement age: _____

Social Security		
	Client 1	Client 2
Age to Start Collecting		
Current Benefit (if collecting)		
Anticipated Benefit: Age 62		
Anticipated Benefit: Age 66		
Anticipated Benefit: Age 70		

Has Social Security provided benefit estimates to you? Yes No

Are you expecting any additional income or expenses from annuities, businesses, inheritances, or property/legal settlements? Please explain:

Expenses

Estimate annual figures for expenses related to shelter, food, clothing, transportation, insurance, loans, etc. Do not include taxes. If desired, the following worksheet may be used for more accurate projections.

Current Total Expenses: _____ Projected Expenses During Retirement: _____

Expense Worksheet		
	Current Expenses	Retirement Expenses
Mortgage Payment		
Rent or Lease Payment		
Home Insurance Premiums		
Food		
Gas, Electric, Heat, Water		
Cell and Home Phone		
Internet and Cable/TV		
Property Improvements/Landscaping		
Property Taxes		
Home Equity Loans		

Home Furnishings		
Home Repair		
Clothing and Personal Items		
Domestic Help/Babysitting		
Child Care		
Alimony/Child Support		
Dining Out		
Entertainment and Vacations		
Club Dues		
Gifts (Birthdays/Weddings, etc.)		
Charitable Contributions		
Hobbies		
Summer School/Camps		
Private School (Years Left: ____)		
College (Years Left: ____)		
Pets		
Books/Papers/Subscriptions		
Auto Loans		
Auto Insurance		
Auto Maintenance and Operation		
Boat/RV Payment		
Other Loan Payments		
Credit Card Payments		
Medical Insurance Premiums		
Prescription Drugs		
Other Medical Expenses		
Life Insurance Premiums		
Long Term Care or Disability Premiums		
Other Insurance		
Retirement Plan Savings		
Other Expenses		
Other Savings		

Do you pay PMI on your mortgage? Yes No

Concerns

What are your biggest financial concerns?

Are there other thoughts or concerns that you would like to address?

Please also attach a recent 1099. (First 3 pages are sufficient.)

Date_____

Client 1 Signature_____

Client 2 Signature_____

Advisor Signature_____