



# SPARROW

WEALTH MANAGEMENT

INVESTED IN RELATIONSHIPS

Phone/Fax: 877.330.9191

www.sparrowwealth.com

## SHORT CONFIDENTIAL QUESTIONNAIRE

Name: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Address : \_\_\_\_\_

City, State & Zip : \_\_\_\_\_ Home Phone # : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Cell Phone # : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Spouse's Cell Phone # : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Spouse E-mail Address: \_\_\_\_\_

Birth Date : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Spouse's Birth Date : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

SS# (optional) : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Spouse's SS# (optional) : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Employer : \_\_\_\_\_ Spouse's Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_ Spouse's Occupation: \_\_\_\_\_

Gross Income: \$ \_\_\_\_\_ Spouse's Gross Income: \$ \_\_\_\_\_

Expected Retirement Age: \_\_\_\_\_ Spouse's Expected Retirement Age: \_\_\_\_\_

Marital status: \_\_\_\_\_ Marriage Date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Children's Names & Ages: \_\_\_\_\_

**Asset Values:** Total of Cash/Savings: \$ \_\_\_\_\_ Total of Taxable Investments: \$ \_\_\_\_\_

Total of IRAs & SEP IRAs: \$ \_\_\_\_\_ Total of 401k & 403b Plans: \$ \_\_\_\_\_

Total of All Other Retirement Plans: \$ \_\_\_\_\_ Primary Home: \$ \_\_\_\_\_

Other Real Estate: \$ \_\_\_\_\_ Business Value: \$ \_\_\_\_\_ Personal Assets: \$ \_\_\_\_\_

Face Value of Life Insurance (on who?): \$ \_\_\_\_\_

**Debt Values:** Mortgage on Primary Home: \$ \_\_\_\_\_ All Other Debt: \$ \_\_\_\_\_

Total Annual Living Expenses (including taxes): \$ \_\_\_\_\_

Estate Planning (**circle** completed items): Wills Durable Powers of Attorney Health Care Directives

NOTES: \_\_\_\_\_

Please answer all items the best that you can. All information will be kept confidential. Please read our Privacy Policy.