



MCNARY FINANCIAL PLANNING

Fee-only comprehensive financial planning
Because no one wants to work forever™

Preliminary Personal Financial Planning Profile

Please fill out the next three pages and gather the documents listed on the last page. We request that you deliver the documents to our offices no less than one week prior to your Initial Consultation so we may have time to review and prepare.

The information you provide is strictly confidential and will not be disclosed to anyone without your consent.

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Preliminary Personal Financial Planning Profile

General Information

Today's date: _____

Client's name: _____ Co-Client's name: _____

Birth Date: _____ Birth Date: _____

Address: _____

Phone Numbers: _____ (Home) _____ (Work)

Preferred E-Mail Address: _____

How did you hear about us? _____

Please check one: Single Married Divorced Widowed Other

Children:

Name

Birthdate

Name	Birthdate
_____	_____
_____	_____
_____	_____

Client

Co-Client

Please check: Employed Self-Employed Retired

Employed Self-Employed Retired

Occupation: _____

Financial Planning Priorities and Goals

What are your three most important financial concerns or goals?

1.

2.

3.

Asset Information *Please estimate the value of the following:*

Checking, Savings/CD, Money Market Funds \$ _____

Retirement Accounts (IRA's, 401(k)'s 403(b)'s, etc.) \$ _____

Your Home \$ _____ Other Real Estate \$ _____

Stocks, Bonds \$ _____ Mutual Funds \$ _____

Other Assets \$ _____

Liability Information *Please estimate the value of the following:*

Primary Mortgage \$ _____ Other Mortgages \$ _____

Installment Loans \$ _____ Credit Cards \$ _____

Other Liabilities \$ _____

Annual Earned Income

Salary(ies) \$ _____ Commission \$ _____

Bonus \$ _____ Other Income \$ _____

Is income fairly uniform and reliable? Yes No

Explanation (if needed):

Contributions

Are you contributing on a regular basis to a retirement plan such as 401(k), 403(b) or deferred compensation, or to an IRA? Yes No

Life Insurance

How much life insurance do you have?

Client \$ _____ Co-Client \$ _____

Wills

Do you have a will(s)? _____ Date Signed: _____

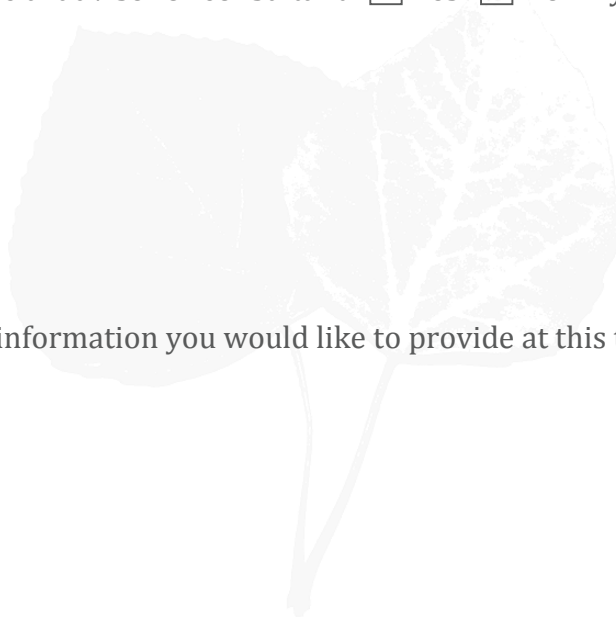
Other Information

How much do you expect to earn on your investments?

6-8% ____ 8-10% ____ 10-12% ____ 12-15% ____ 15% + ____

What did you do the last time the stock market went down by 5% or more?

Have you ever been unhappy with the recommendations of a stockbroker, insurance agent and/or financial adviser or consultant? Yes No If yes, please explain:



Is there any other information you would like to provide at this time?

Please bring the following documents to your free initial consultation or provide them a week in advance if possible.

- Tax returns for last three years
- Most recent brokerage/mutual fund statement(s)
- Most recent retirement plan statement(s)
- Most recent IRA statement(s)

Signed: _____

Date: _____

Thank you!