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INITIAL CONSULTATION PACKET

PERSONAL INFORMATION

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

GENERAL INFORMATION

To make the first meeting as productive as possible, please answer the following:

1. How did you hear about my firm? (Choose One)

- Newsletter Friend Professional Referral
 Workshop Advertisement Other:

2. Please indicate your age group: (Choose One)

- 18 - 30 31 - 45 46 - 60 61 - 75 76+

3. Who do you currently get financial advice from?

4. What do you hope to accomplish working with me?

5. What is your primary financial concern?

6. If we were to resolve your primary financial concerns, what would it mean to you personally?

7. Below are a list of all the areas of one's financial health and well being.
Please take a moment and check off the areas that are concerns of yours:

EXAMINING CURRENT POSITION:

- (A) Knowing your current net worth
- (B) Tracking current income and expenses (budgeting)
- (C) Planning for emergency needs
- (D) Managing Debt
- (E) Determining the value of a business
- (F) Other:

PLANNING FOR RETIREMENT:

- (O) Planning for adequate retirement income
- (P) Analyzing sources and uses of retirement income
- (Q) Reviewing current investment portfolio and developing strategy
- (R) Other:

ACCUMULATING WEALTH:

- (G) Funding future education expenses
- (H) Saving for a special purpose such as house, car, or vacation
- (I) Developing an appropriate investment strategy
- (J) Other:

MANAGING YOUR RISK:

- (S) Planning adequate income for survivors
- (T) Analyzing current life insurance protection
- (U) Replacing earning power in case of disability / LTC
- (V) Providing for business continuity or liquidation
- (W) Other:

MANAGING INCOME TAXES:

- (K) Projecting potential taxes
- (L) Developing appropriate tax planning strategies
- (M) Coordinating personal & business tax planning
- (N) Other:

PRESERVING YOUR WEALTH:

- (X) Analyzing potential estate settlement costs
- (Y) Exploring techniques to preserve wealth
- (Z) Retaining business and income producing assets
- Other:

8. Which of the above are most important to you at this time? (List in order of importance)

Choose a Letter: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____

9. What type of investments do you feel most comfortable with?

10. What type of investments do you feel least comfortable with?
