PERSONAL FINANCIAL PROFILE Confidential

PAX PARTNERS

RAYMOND JAMES®

- ⇒ The first step in achieving your investment goals is to define where you are now.
- ⇒ The Personal Financial Profile will survey your current assets, liabilities and consider your goals and objectives. This will enable us to design a Financial

Client Name (s):
Address:
Cell Phone #:
Business Phone #:
Home Phone #:
Email (s):
Preferred Method of Contact:

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Raymond James & Associates, Inc. Member NYSE/SIPC

Certified Financial Planner Board of Standards Inc. owns the certification marks CFP®, CERTIFIED FINANCIAL PLANNER™, CFP® (with plaque design) and CFP® (with flame design) in the U.S., which it awards to individuals who successfully complete CFP Board's initial and ongoing certification requirements

I: PERSONAL DATA			RAYMOND JAMES®
Client Name:			
Date of Birth:	SSN:		
Employer:	Position:		
Spouse Name:			
Date of Birth:	SSS:		
Employer:	Position:		
Child's Name:	Date of Birth:	SSN:	
Child's Name:	Date of Birth:	SSN:	
Child's Name:	Date of Birth:	SSN:	
II: BALANCE SHEET INFORM	MATION (Be as descriptive	as possible)	
A: ASSETS Current Savings (Bank Account	` <u>-</u>	• /	
- '	•	Title (Jeint/Single)	
Description	Valuation	Title (Joint/Single)	
Current Securities (Bonds, Stock		., etc.)	
Property (Real Estate, Raw Lan	d, etc.)		
Description	Valuation	Title (Joint/Single))
Description	Valuation	Title (Joint/Single	e)
		, ,	
	<u> </u>		

rsonal Retireme		1	I	
Description	Valuati	on V	ested Interest	Title
		l	l	
oloyer Sponsor	ed (401(k)s, Pensio	ons, Profit S	Sharing, Stock Plans– ES	<u>OP</u>
Description	Valuation	1	Vested Interest	Title
	LIABILITIES		L	
rt Term (Less t	<u>han 5 years: Hom</u>	e Equity Lo	oan, Car Loan, Credit Ca	rds, etc.)
	han 5 years: Hom Balance	e Equity Lo	<u> </u>	Title
		T .	e Monthly	·
		T .	e Monthly	·
		T .	e Monthly	·
escription		Rate	Monthly Payment	·
escription ng Term (More	Balance	Rate	Monthly Payment Monthly Payment Monthly	·
escription ng Term (More	Balance than 5 years: Mor	Rate	Monthly Payment	Title
Description	Balance than 5 years: Mor	Rate	Monthly Payment Monthly Payment Monthly	Title
ng Term (More	Balance than 5 years: Mor	Rate	Monthly Payment Monthly Payment Monthly	Title

		PAX PARTNERS
III: INCOME STATEMENT A: EARNINGS		RAYMOND JAMES
Client	Spouse	
Salary		
Bonus_		
Dividends		
Taxable Interest		
Non-Taxable Interest_		
Rent, Trust Income		
TOTAL INCOME		
B: EXPENSES (Annual) Fixed (Mortgage, Car Payment, Utilities, Insurance, etc.) Description	Amount	
Variable (Vacations, Food, Clothing, Entertainment etc.) Description	Amount	

IV: INSURANCE

A: LIFE COVERAGE

RAYMON	D JAMES
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<u>Name</u>	<u>Type</u> (Whole/Term)	<u>Premium</u>	<u>Cash Value</u>	Death Benefit	<u>Beneficiary</u>

B: DISA	BILITY COVER	AGE			
<u>Name</u>	Elimination Period	<u>Premium</u>	Monthly Benefit	<u>Duration</u>	<u>Carrier</u>

PAX PARTNERS

MES[®]

V: NOTES: Please list names and	l contact information:	RAYMOND J
CPA Name:		
Phone#	Email:	
Attorney Name:		
Phone#	Email:	
Frusted Contact Name:		
Address:		
Phone#	Email:	
	planning priorities, goals & obje	ectives, immediate and long
	_	

Document Checklist

 Completed Profile
 Most Recent Tax Return
 Investment Account Statements (401(k)'s, IRA's, Brokerage)
 Most Recent Pay Stub(s)
 Estate Planning Docs (Wills, Trusts, Insurance)
Any Other Information Pertinent to this Analysis