

**GO AHEAD**

*Relax*

*You Have all your financial plans in order.*



**DON'T YOU?**

# SEIDEL Wealth Strategies

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*I* have found relationships with constructive input from both parties correlate into successful partnerships. The ability to openly and effectively communicate with one another is essential. This questionnaire will serve as the foundation from which we will begin our journey together. Keep in mind, life changes constantly and many goals may need to be modified accordingly. This process allows for such changes and in some cases will help you address life-style decisions.

The end result of this questionnaire is the confidence it will provide you and your family that your financial plans are in order. Whether it is planning for retirement and deciding how, when, and where to generate monthly income, or planning to pass your estate to your children, grandchildren and/or charity in the most cost effective manner, the concerns and potential issues that confront most families will be identified and addressed.

The information provided in this questionnaire and the supporting documents (i.e., tax returns, investment statements, etc.) will be handled with the highest degree of confidentiality.

I look forward to building a long-term relationship with you *and* your family.

Rich Seidel

Seidel Wealth Strategies

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**RAYMOND JAMES®**

# Family/Personal Information

Name: \_\_\_\_\_  
          First                    M.                    Last                    Date of Birth                    Social Security #

Spouse/Partner: \_\_\_\_\_  
                          First                    M.                    Last                    Date of Birth                    Social Security #

Address: \_\_\_\_\_  
          Street                    St ate                    Zip                    Telephone                    Email Address

Employer : \_\_\_\_\_  
  Company                    Position                    Telephone

Spouse/Partner Employer: \_\_\_\_\_  
  Company                    Position

Child's Name: \_\_\_\_\_  
  Date of Birth                    Social Security #

Child's Name: \_\_\_\_\_  
  Date of Birth                    Social Security #

Child's Name: \_\_\_\_\_  
  Date of Birth                    Social Security #

Child's Name: \_\_\_\_\_  
  Date of Birth                    Social Security #

## Trusted Contact

Insurance Agent: \_\_\_\_\_  
  Name

Attorney: \_\_\_\_\_  
  Address

Accountant: \_\_\_\_\_  
  Phone

\_\_\_\_\_  
Email

What is your preferred method of contact? Email \_\_\_\_\_ Phone \_\_\_\_\_ Other \_\_\_\_\_

# Priorities

Husband

Wife

What age would you like to retire? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If currently retired, date retired? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**The following objectives are most important to me in order by number (number by priority 1 through 5, with 1 being your highest priority):**

Accumulating wealth to fund my retirement \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Provide income for my current lifestyle \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Accumulating wealth for children/grandchildren's education \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Protect assets from nursing home costs/estate taxes \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Preservation of current capital \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Employer Name and Address

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Years Employed there

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State/Zip Code

**Tax Bracket**     0-24%     25% +

**Primary Source of Wealth** \_\_\_\_\_

(Raymond James and its advisors do not offer tax or legal advice. You should discuss any tax or legal matters with the appropriate professional.)

# Income/Expenses/Liabilities

## Income

## Husband

## Wife

Gross Salary, Commissions, Bonuses

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Self-Employment Earnings (provide tax  
return copy)

\_\_\_\_\_

\_\_\_\_\_

Estimated Pension Income (provide copies)

\_\_\_\_\_

\_\_\_\_\_

Estimated Social Security (provide copies)

\_\_\_\_\_

\_\_\_\_\_

Real Estate/Rental Income

\_\_\_\_\_

\_\_\_\_\_

Other Income

\_\_\_\_\_

\_\_\_\_\_

**Total annual income:**

\_\_\_\_\_

\_\_\_\_\_

## Expenses

Total estimated annual expenses: \$ \_\_\_\_\_

## Liabilities

Pay Off Date

Balance

Interest Rate (%)

1. Mortgage

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Home Equity Loan

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Home Equity Line of Credit

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Auto Loan

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Credit Card

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Other Loans

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Assets

	<u>Purchase Price</u> <u>/Cost Basis</u>	<u>Estimated</u> <u>Market Value</u>	<u>Joint</u>	<u>Husband</u>	<u>Wife</u>
Personal Residence	_____	_____	_____	_____	_____
Vacation Home	_____	_____	_____	_____	_____
Other Real Estate	_____	_____	_____	_____	_____
Auto 1	_____	_____	_____	_____	_____
Auto 2	_____	_____	_____	_____	_____
Personal Property	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____

## Retirement Accounts (IRAs, 401k, Annuities, 403b, etc.) (please bring copies of statements)

<u>Location</u> (Bank Brokerage Firm, Employer)	<u>Type</u> (IRA, 401k, Annuity, etc.)	<u>Ownership</u> (husband/wife)	<u>Balance</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

## Non-Retirement Accounts (Bank, savings/checking, CDs, Mutual Fund, etc.)

<u>Location</u> (Bank, Brokerage firm, Mutual fund)	<u>Type</u> (Savings, CD, etc.)	<u>Ownership</u> (Husband, Wife, Joint)	<u>Maturity</u> <u>Date</u>	<u>Interest</u> <u>Rate</u>	<u>Balance</u>
1. _____	_____	_____	_____	_____	\$ _____
2. _____	_____	_____	_____	_____	\$ _____
3. _____	_____	_____	_____	_____	\$ _____
4. _____	_____	_____	_____	_____	\$ _____
5. _____	_____	_____	_____	_____	\$ _____

# Insurance/Estate Planning

## Life Insurance (please provide copies)

Company	Owner	Insured	Type <small>(term, whole life, etc.)</small>	Annual Premium	Death Benefit	Cash Value
1. _____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____

### Husband

### Wife

**Do you own long-term care insurance?**

\_\_\_\_\_

**Do you own disability insurance?**

\_\_\_\_\_

**Do you have a current will?**

\_\_\_\_\_

**Do you have a current Living Trust?**

\_\_\_\_\_

**Are your parents living?**

\_\_\_\_\_

**Do you have a durable power of attorney?**

\_\_\_\_\_

**Do you anticipate an inheritance?**

\_\_\_\_\_

**Is this inheritance insured/protected?**

\_\_\_\_\_

**How important is passing your estate to your family/charity?**

- \_\_\_\_ 1. Although mindful of others, I/we wish to spend down our estate during our lifetime.
- \_\_\_\_ 2. I/We would like to protect our estate and implement strategies to maximize the amount passed to my/our family/charity.

# *Mission Statement*

*We believe in earning people's trust and confidence upon which long-term relationships are built.*

*We believe people do business with people—not company names.*

*We believe the purpose of listening to customers is to better understand them—not to give them a quick reply.*

*We believe most customers are given away due to lack of service, rather than taken away because of price.*

*We believe a person's word and handshake are more binding than any legal contract.*

*We believe in confidentiality.*

*We believe success is dependent upon hard work, integrity, competency and the ability to never compromise the principles that guide ones way of life.*

*These beliefs serve as the foundation of our mission:*

*To work hard in building personal relationships, understand our customer's needs and provide a level of service that enhances the life and legacy of our customers.*

