

# Your Financial Snapshot



## Personal Information

Primary Client: _____	Secondary Client: _____
Date of Birth: _____	Date of Birth: _____
Email: _____	Email: _____
Cell Phone: _____	Cell Phone: _____
Home Phone: _____	Home Phone: _____
Address: _____	
Dependents (name, age): _____	
Anniversary Date (if married): _____	Military Service or Veteran? Yes / No
Employer: _____	Employer: _____
Job Title: _____	Job Title: _____
Annual Income: _____	Annual Income: _____
Owner of a closely held business? _____	Worked with a financial advisor before? _____

## Financial Situation

Your investable assets: \_\_\_\_\_ Your estate (all assets): \_\_\_\_\_

Please indicate any topics you would like to discuss:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Retirement Planning   | <input type="checkbox"/> Caring for parents | <input type="checkbox"/> Saving for college         |
| <input type="checkbox"/> Investment Management | <input type="checkbox"/> Proving a legacy   | <input type="checkbox"/> Saving for major purchases |
| <input type="checkbox"/> Charitable giving     | <input type="checkbox"/> Business ownership | <input type="checkbox"/> Insurance coverage         |
| <input type="checkbox"/> Other: _____          |   |   |

Please indicate any special circumstances you are facing:

- |  |  |                                      |
|--|--|--------------------------------------|
| <input type="checkbox"/> Divorce / Alimony | <input type="checkbox"/> Death of a spouse | <input type="checkbox"/> Inheritance |
| <input type="checkbox"/> Other: _____      |  |                                      |

Please indicate if you anticipate any of the following life transitions in the next 1-5 years:

- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Marriage         | <input type="checkbox"/> Career change | <input type="checkbox"/> Retirement   |
| <input type="checkbox"/> Birth of a child | <input type="checkbox"/> Empty nest    | <input type="checkbox"/> Other: _____ |

What do you hope to achieve by working with us? \_\_\_\_\_  
\_\_\_\_\_

**Invest. Live. Give.**

[www.waterrockfinancial.com](http://www.waterrockfinancial.com)

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