

Dear Client,

Thank you so much for your interest in Financial Voyages, LLC. We are an independent financial services firm committed to providing our clients with comprehensive financial advice and wealth management services to help secure their financial future. We are dedicated to developing lifelong financial relationships with all our clients and offer a unique and distinctive approach based upon the thorough discussions we have with them.

In order to help you prepare for your initial meeting with one of our advisors, we have created the attached checklist for your completion. We believe your time is valuable and providing us with some basic information prior to your appointment will ensure a productive meeting. Please complete each section as accurately as you can, and if possible include your most recent statements from any investment accounts you currently hold. You can fax your completed paperwork to us at (215)701-8706, with the confidence that your information will be securely held.

We look forward to meeting with you and beginning what we hope will be a long and positive relationship.

Thank you,

Financial Voyages, LLC

Name(s): \_\_\_\_\_

***Upon completion, please mail to us at 425 Main Street, Harleysville, PA 19438  
or fax to 215-256-1228 at least ONE WEEK PRIOR to your appointment  
along with pages 1 and 2 of most recent tax return (form 1040). Material transmitted  
by email should have confidential information blocked out or sent via encryption***

## **APPOINTMENT AGENDA CHECKLIST**

***(For prospective clients)***

### **Background Information:**

Home address/phone number/email

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Name, date of birth and marital status of prospective clients and dependents

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Occupation or job title/work address/phone number

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**Goals:** What are your current financial goals (retirement income or time-frame, family, weddings, college funding, new home, home improvements, major purchases, vacations/travel, business plans, career, etc)?

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Have you ever worked with a financial planner? \_\_\_\_\_

Are you currently working with a financial planner? \_\_\_\_\_

What part of the relationship did you value the most?

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What part could have been improved?

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Were they:

☐ commission based      ☐ fee based      ☐ both      ☐ unsure

Were they:

☐ independent      ☐ working for one specific investment/insurance company  
☐ working at a bank      ☐ working at a brokerage firm      ☐ unsure

**Financial information:**

Anticipated annual income? (salary, self-employment, pension, social security, rental income, annual gifting, inheritance, unemployment compensation, disability income, spousal/child support payments, other)

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**Current Accounts**  
**(Attach statements if desired)**

Type of Account	\$ Balance	Annual Additions (\$ or %)
Checking/Savings		
CD's		
Mutual Fund(s)		
Stock(s)		
Stock Options		
Bond(s)		
UTMA/UGMA's		
College 529 Plans		

IRA(s)		
Roth IRA(s)		
Non-Qualified Annuities		
401(k), 403(b), 457(b), SEP, Simple, cash balance pension, TSA, other employer retirement plans		
Qualified Pension Plan A: B:	Estimated Monthly \$ A: B:	Age to Begin Payments A: B:

Other:

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### Real Estate Info:

Primary Home Market Value \$ \_\_\_\_\_  
 Secondary/Recreational Home Market Value \$ \_\_\_\_\_  
 Investment Property Value(s) \$ \_\_\_\_\_

Primary Mortgage Info: Balance \$ \_\_\_\_\_  
 Interest Rate \_\_\_\_\_% Fixed or Variable  
 Original Term of Loan 15 yrs 30 yrs Other: \_\_\_\_\_  
 Monthly Payment (Principle + Interest) \$ \_\_\_\_\_

Second Mortgage Info: Balance \$ \_\_\_\_\_  
 Interest Rate \_\_\_\_\_% Monthly payment \$ \_\_\_\_\_

Home Equity Loan Info: Balance \$ \_\_\_\_\_  
 Interest Rate \_\_\_\_\_% Monthly Payment \$ \_\_\_\_\_

Home Equity Line of Credit Info: Available \$ \_\_\_\_\_ Borrowed \$ \_\_\_\_\_  
 Interest Rate \_\_\_\_\_% Monthly payment \$ \_\_\_\_\_

Additional:

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*This information is based on assumptions provided by you (the client). If any of the assumptions are incorrect, you should notify your financial advisor. The information provided by you should be reviewed periodically and updated when either the information or your circumstances change.*

**Liabilities:**

Credit Card Balance(s)/Rate

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Auto Loan(s) Balance(s)/Rate

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Education Loan Balance(s)/Rate

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Personal Loan(s) Balance/Rate

1. \_\_\_\_\_
2. \_\_\_\_\_

Miscellaneous (please explain):

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Please check any items that you would like to discuss or review during your appointment:

**Debt Management**

Debt Management (budgeting, refinancing)	
Cash Flow (increase/decrease in expense/income/savings)	
Discuss Cash Reserves (savings, CDs, savings bonds)	

**Protection Planning**

Disability Income Insurance	
Life Insurance	
Home & Auto Insurance	
Long Term Care Insurance	

**Accumulation Goal/Investment Planning**

Review Current Goal Funding	
Start Up New Goal Funding	
Review Systematic Investing	
Review Asset Allocation	
Review Risk Tolerance	
Discuss Stocks/Mutual Funds/ETF/REITS	

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### **General Tax Strategies**

Max Pre-tax Contributions	
Interest/Dividend/Capital Gains Taxation	
Deductible/Non-Deductible IRA's	
Tax-Free Investing	
Tax Deferral	
Mortgage Interest	
College Funding Vehicles	
Refer to a Qualified CPA for Tax Advice	

### **Retirement Planning**

Review Retirement Date/Income Goals	
IRA Rollover Options	
Qualified Pension Options	
Social Security Benefits	
Private Pension Vehicles	
Self-Employment Retirement Planning	
Retirement Income Distribution Plan	
Retirement Goal Funding	
Fixed and Variable Annuities	

### **Estate Planning**

Wills	
Power of Attorney	
Custodial Agreements	
Living Wills/Medical Directives	
Beneficiary Designations	
Transfer on Death/Payable on Death	
Revocable/Irrevocable Trusts	
Charitable Giving/Remainder Trusts	
Inheritance/Gifting	
Ownership of Assets	
Life Insurance for Estate Planning	
Advanced Estate Planning	

### **Fee-Based Financial Planning Services**

Update/Create Financial Plan	
Update/Create Retirement Estimate	
Update/Create College Funding Estimate	
Review Outside Investments/Asset Allocation (401k, 403b, etc.)	
Managed, Fee-Based Investment Accounts	

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Miscellaneous Topics for Discussion

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What are your expectations of our meeting?

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**Thank you** for taking the time to complete this form. This form will help us provide quality time reviewing your goals, concerns, plans and investments and less time simply collecting data.

*Financial Voyages, L.L.C, 425 Main Street, Harleysville, PA 19438-2311,  
Phone (215) 256-7845, Fax (215) 701-8706*

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