

Please E-Mail Complete Form to:
dsamples@amplifyadvisors.com



Financial Snapshot

Appt : (co use only)

Full Name:	_____	Spouse's Name:	_____
Age:	_____	Age:	_____
Place of Work:	_____	Place of Work:	_____
Type of Work:	_____	Type of Work:	_____
Annual Gross Income:	_____	Annual Gross Income:	_____
Net Monthly Income:	_____	Net Monthly Income:	_____

Address:	_____	City, State, Zip:	_____
Day Time Phone:	_____	Alternative Phone:	_____
E-Mail:	_____		

How many dependants living at home? _____
Ages? _____

Do you rent or own your home?	_____	Monthly Pmt?	_____
What is the approximate value of your home?	_____		
What is the total debt on your home?	_____		
Any auto loans?	_____	How many?	_____
		Total auto debt?	_____

Do you have a working monthly budget?	_____		
Did you receive a tax refund last year?	_____	If so, How much?	_____
Do you currently contribute to retirement?	_____		
Do you have cash value or term life insurance?	_____		
Do you save on a regular basis?	_____		

Approximate total of all other debt. *Student/personal loans, credit cards, etc.* _____

Specific issues would you like to discuss during your 20 minute consultation:

