Confidential Financial Planning Questionnaire

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Prepared for: Valued Client

Prepared by: Marketing Financial
Advanced Case Design
2960 E. Battlefield
Springfield, MO 65804
800-677-1087
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January 01, 2008
PERSONAL DATA

1. Full name: ____________________________________________________________

2. Home address and phone: ____________________________________________
   __________________________________________________________

3. How long at this address? ____________________________________________

4. Other addresses for past ten years: __________________________________
   __________________________________________________________
   __________________________________________________________

5. What state or place do you claim as domicile? __________________________

6. Shall we use your home or business address for mailing purposes? ________
   ________________________________

7. Date of birth: _______________________________________________________

8. Do you have a birth certificate? ________________________________
   ________________________________

9. Are you married? _______ Yes _______ No
   When? ______________ Where? ________________________________
   (a) Full birth name of spouse: ________________________________
   (b) Date of spouse’s birth: ________________________________
   (c) Place: ________________________________
   (d) Does your spouse have a separate income? ____________________
       Source: ________________________________
       Should this income be considered in your personal investment plans? ______

   (e) If your spouse is not currently employed, does he/she have a profession
       or occupation to which he or she could turn to make a comfortable living, if
       necessary? ________________________________
       Describe the nature of the profession: ________________________________
       When did your spouse last work? ________________________________
       Does he or she plan to go back to work? ________________________________

   (f) Does your spouse have a Will? ________________________________
10. Have you or your spouse been married before? _____ Yes _____ No
   If so, give names, dates, and places: ________________________________________

   Children by former marriage? _____________________________________________

   Former spouse dead or alive? ______________________________________________
   Former spouse remarried? __________________________________________________

11. Do you wish for your spouse to participate in decisions involving financial
    commitments or rearrangements? ____________________________________________

12. Children? _____ Yes _____ No

   Name | Date of Birth | Place
   ---------------------------------------------
   | | |
   | | |

   (a) Are there any adopted children? __________________________________________

   (b) Is it possible that there will be additional children? _______________________

   (c) Whom would you nominate as guardian for the children other than your spouse?
       ________________________________________________________________

   (d) Child’s Name | Spouse’s Name | Occupation | Income | Names and Ages of Grandchildren
       ---------------------------------------------
   | | | | | |
   | | | | | |

   (e) For each child who is not married, indicate the child’s present occupation
       and income: ___________________________________________________________

13. (a) Are you making definite provisions to send your children to college? _______
    How? __________________________________________
    What college? _______________________________________
    Estimated annual costs: $ ______________________

   (b) If it is found practical to establish a special trust fund for your children’s
       education, would you want your spouse to have complete control of this
       money, including the right of dissipation? _______________________________
14. Do you have any other special plans for the future of your children (or grandchildren) which should be considered at this time? Explain:  

15. Outside of your immediate family (spouse and children), are there any other persons who are wholly or partially dependent on you for support?        
Name:  
Relationship:  
Dependent for income tax purposes?  
Date of birth:  Nature and amount of dependency:  

16. Additional family data:  

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Dependent on You?</th>
<th>If Deceased, Cause of Death</th>
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<tbody>
<tr>
<td>Client’s Father</td>
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<td>Client’s Mother</td>
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<td>Spouse’s Father</td>
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<td>Sister-in-law</td>
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<td>Sister-in-law</td>
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NOTES:  


17. Who is your employer? 

18. Business address and phone: 

19. What is the nature of your business? 

20. Occupation and duties: 

21. How long engaged in this capacity? 

22. Previous occupations during the last five years? 

23. What is your Social Security number? 

What is your spouse’s Social Security number? 

Have you been covered under Social Security for the maximum, continuously since January 1, 1951, or age 22, whichever is later? 

If not, indicate dates (or years) excluded, if known: 

24. Have you ever served in the Armed Forces? 

Branch of service: __________ Any service connected disability? __________ 

Are you receiving monthly compensation or retired pay? _____ Amount? $ ______ 

25. Do you have a safety deposit box? ______ Where? __________ 

Number: __________ How titled? __________ 

Purpose: __________ 

26. Excluding life insurance premiums, income taxes, savings and investments, about how much do you need every month for actual running expenses of your family and home? $ __________ 

27. (a) Barring accident and disease, about what do you estimate will be your average annual income from all sources for the next five to ten years? $ ______ 

(b) What has been your average annual income during the past five years? $ ______ 

(c) What is your total net income currently? $ __________
28. (a) For each person a day will come when, by choice or otherwise, he or she must close their office door forever. When that day comes, you must be financially able to greet it. Assuming you have a choice, at what age would you like to be financially able to slow down if you should desire, or to retire from active practice of your business or profession? 

(b) Each of us has an obligation today to the "old white-haired person" that we will be one day. Our obligation can be met only by our resourcefulness and thrift during our productive years. In this respect, about how much do you want as a guaranteed pension to enable you to play golf, travel, raise flowers, or do whatever you may desire at that time? $ __________________

29. (a) What is the status of your health? __________________________________________

(b) What is the status of your spouse’s health? ______________________________________

(c) Are your children all in good health? ____________________________________________

(d) Have you or any member of your family ever been declined, postponed or rated for life insurance? If so, indicate name of family member, companies, and dates: ____________________________

(e) Have you ever received or claimed indemnity benefits of a pension for any injury or sickness? Company: ____________________________ Date: ________________
   Nature of illness: _______________________________________________________________

(f) If you become disabled and are unable to work, how much guaranteed income will you need? $ ____________________________

(g) Have you or your family been examined by or submitted a nonmedical application to any life insurance company in the past ninety days? _____________

30. (a) What is your principal banking connection? ____________________________
   Address: ____________________________________________________________________________
   Personal contact: ______________________________________________________________________

(b) What brokerage firms have you been using? ____________________________
   Address: ____________________________________________________________________________
INSURANCE AND BENEFITS

32. What is the total insurance in force on your life, including group? $  

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<tr>
<th>Face Amount</th>
<th>Company</th>
<th>Owner</th>
<th>Beneficiary</th>
<th>Plan</th>
<th>Year Bought</th>
<th>Cash Value as of (date)</th>
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Spouse’s insurance coverage and benefits

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<th>Face Amount</th>
<th>Company</th>
<th>Owner</th>
<th>Beneficiary</th>
<th>Plan</th>
<th>Year Bought</th>
<th>Cash Value as of (date)</th>
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33. Do you own cash value insurance on others? _____ Yes _____ No

Insured: ________________________________
Company: ____________________________ Policy Number: ________________
Present cash value: __________________________
Who pays premium? __________________________
Purpose? __________________________
Owner: __________________________

34. Do you own any annuities? _____ Yes _____ No

If yes, what is the current value? __________________________
35. (a) Is the property and liability insurance on all of your assets titled in the same name or names as the owner of each asset? _____________ Is your full equity insured in each case? _____________

(b) Do you have long-term care insurance? ___ What company? __________
Deductible amount? ___________ Elimination period? ___________
Benefit period? _____________

36. Are your spouse’s feelings about the value of insurance similar to yours?
   ______ Yes ________ No
   If not, how would you characterize his/her feelings, compared to yours? ________

37. Vested interests: _____ Yes _____ No (e.g., pension, profit-sharing, deferred compensation, IRA or Keogh, inheritance not yet received)
Owner: ___________________________________________________________________
Description: ___________________________________________________________________
Present value: $ ___________________________________________________________________
Comments: ___________________________________________________________________

38. Does your company provide you or your family with any employment benefits, such as pension or profit-sharing plan, stock option arrangement, deferred, compensation or insurance plan? _____________

   If so, name and address or person to contact for details: ________________________________

NOTES: ____________________________________________________________________________
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ESTATE PLANNING INFORMATION

39. Have you made a Will? _______ When was it executed? ____________________
    Are the witnesses local? _______ Are the witnesses still alive? ________________
    Any children born since the Will was drawn? _____ Did you earmark specific
    assets for payment of taxes, debts, and expenses of administration? ________________
    Where is the Will kept now? ___________________________________

40. Have you made any unintentional gifts such as the purchase of property in joint
    names? ______________ If so, did you file a gift tax return? ________________

41. Is your personal life insurance trusteed? ___________________________________

42. Are you creator and beneficiary of any trusts? _____ Yes _____ No
    Who is beneficiary: ___________________________________________
    Who established the trust? _____________________________________
    Date trust terminates: _________________________________________
    Does beneficiary have power of appointment? _________________
    Present trust income: $ ______________________________
    Present value of trust: $ ______________________________
    Comments: _______________________________________________

43. Have you utilized trusts to (a) increase your current spendable income? _______
    (b) reduce estate taxes? _________ (c) reduce inheritance taxes? _______
    (d) reduce probate costs? _________ (e) for other reasons? ___________

44. Have you given anyone a power of attorney? _____________________________
    Date executed: ___________________ Date revoked: ___________________

45. Have you executed any documents which affect your privilege of transferring
    property (e.g., irrevocable trusts, stock agreements, etc.)? _______________

46. Do you or any members of your family anticipate any inheritance or gifts? _______
    Sources and amounts: _______________________________________________
47. (a) In relation to your Will, do you have any special wishes or objectives? _____
(b) Do you have any favorite charities, persons, or institutions to whom you would like to leave a bequest? _____ Name: ____________________________
   Item or amount: ____________________________
(c) Do you want to make special provisions for any dependent persons? _____
   Explain: ____________________________

48. When you die, your executor will need cash to take care of funeral and medical expenses, pay current bills, and take care of your family and their immediate needs until your Will is probated. Do you at all times maintain a cash fund specifically earmarked for these purposes? ____________________________
   How much is it? $_________

49. Proper use of the marital deduction will reduce your estate tax liability. However, this involved giving your spouse control over your estate when you die. Which is more important to you: (a) retaining complete control and paying a higher tax or (b) giving your spouse some control and possibly paying a lower tax?

50. Some people give away money in order to reduce taxes. Still others make gifts in order to help loved ones or charity. Have you formed any opinion as to the possible personal benefits to be derived from such a program? ____________________________

NOTES: ______________________________________
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INVESTMENTS

51. How do you presently invest your savings (cash or near cash investments)?

___________________________________________________________________________

Is this part of a planned investment strategy? _____________________________
If so, what is the purpose of this plan? _________________________________

___________________________________________________________________________

What is the nature and value of this savings? _____________________________

___________________________________________________________________________

52. Checking accounts and numbers:  
(a) In your name
___________________________________________________________________________

(b) In joint names with spouse
___________________________________________________________________________

(c) In spouse’s name
___________________________________________________________________________

53. Savings accounts:
(a) In your name
___________________________________________________________________________

(b) In joint names with spouse
___________________________________________________________________________

(c) In spouse’s name
___________________________________________________________________________

54. Cash on hand:
___________________________________________________________________________
55. U.S. Bonds:
   (a) In your name

   

   (b) In joint names with spouse

   

56. Securities, including mutual funds:

<table>
<thead>
<tr>
<th>Description</th>
<th>Objective</th>
<th>No. of Shares</th>
<th>Titled*</th>
<th>Cost</th>
<th>Market Value</th>
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   * For the purposes of estate analysis, it is important to know how property is titled, that is, is it owned individually or jointly? Name(s) of owner(s)?

57. Natural Resources (Gas, Oil, Coal, etc.):

   _____ Yes _____ No

   Titled: ____________________________

   Type: ____________________________

   Location and name of company: ____________________________

   Present market value: $ __________

58. Copyrights, Patents and Royalties:

   _____ Yes _____ No

   Titled: ____________________________

   Description: ____________________________

   Value: $ _______ Income: $ _______

   Comments: ____________________________
59. Mortgages Owned: _____ Yes _____ No
Titled: 
Location: 
Present balance: $_________ Resale value: $_________
Payments: $_________
Comments: 

60. Notes Receivable: _____ Yes _____ No
Titled: 
Maker: 
Present value: $_________ Terms: 
Comments: 

61. Livestock: _____ Yes _____ No
Titled: 
Describe: 

62. Leasehold Interests: _____ Yes _____ No
Titled: 
Describe: 

63. Real Estate (other than your primary and secondary residences): _____ Yes _____ No
Titled: 
Address: 
Commercial-residential-unimproved: 
Present market value: $_________
Mortgage balance: $_________ Equity: $_________
64. Residence: _______ Yes _____ No
   Titled: 
   Address: 
   Present value: $_____  Mortgage: $_____  Equity: $_____  Do you consider your present residence a permanent home for your family? _____ Comments: 

65. Summer/Winter Home: _______ Yes _____ No
   Titled: 
   Address: 
   Present value: $_____  Mortgage: $_____  Equity: $_____  Comments: 

66. Automobiles:
   For Car A:
   Titled: 
   Who drives?: 
   Year: _______ Make: _____________ Value $_____ 
   For Car B:
   Titled: 
   Who drives?: 
   Year: _______ Make: _____________ Value $_____ 

67. Boat: _______ Yes _____ No
   Titled: 
   Description: 
   Value: $ 

68. Airplane: _______ Yes _____ No
   Titled: 
   Description: 
   Value: $_____  Have you ever flown as a pilot or crew member? _____ When: Comments: 

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69. Household and Personal Effects: (including rugs, draperies, furniture, antiques, sports equipment, clothing, jewelry, furs, paintings, hobby equipment, etc.)

Titled: ____________________________

Present depreciated replacement value: $ ____________________________

Comments: ____________________________

70. Do you have any outstanding liabilities? _____ Yes _____ No

(a) Bank loan: $ __________ at ____________________________

(b) Margin account: $ __________ Company: ____________________________

(c) Insurance loan: $ __________ Company: ____________________________

(d) Personal note: $ __________ to ____________________________

Terms: ____________________________

71. From an investment plan point of view, what is your opinion of the current economic outlook? ____________________________

(a) Was the present arrangement of your assets designed with this opinion in mind? _____ Yes _____ No

(b) Has your opinion of the economic outlook changed during the past five years? _____ Yes _____ No

If so, was a corresponding change made in your investment program? _____ Yes _____ No

(c) On a scale of 1 to 10 (10=highest priority), how satisfied are you with the results you have achieved from your investment program during the past five years? ____________________________

(d) On a scale of 1 to 10, what are your major investment objectives?

1) Safety of principal? __________ (2) Current income? __________


(e) Based upon your opinion of the current economic outlook, about how much money do you feel you should maintain in cash or its equivalent? $ __________

(f) Have you formed any opinion on the merits of professional management of security investments? ____________________________
BUSINESS INTERESTS

If the business is a sole proprietorship, a partnership or a corporation, answer question 72, 73 or 74 as appropriate. Then complete question 75 to the end.

72. Proprietorship
   (a) Name and kind of business: ____________________________________________
       Book value: $___________ Market value: $___________
       Would there be a purchaser at the latter price? _________________________
       Have you calculated the tax liability created by your business? __________
   (b) Who are your key people? ____________________________________________
       Ages of key people: ____________________________________________
       Good health? _________________________________________________
   (c) In the event of your death, do you want your family to inherit your business
       or would you prefer that the business be sold? _________________________
       If you want the family to inherit the business: Do they possess the talent for
       effective management? ____________________________________________
       If you want the business sold: Have you given consideration to the problem of
       finding a prospective purchaser: ________ Who? _______________________
       If there is no purchaser, can you nominate the logical person to buy your
       business? ________ Who? _________________________________________
   (d) Are you aware that your personal assets are subject to the claims of business
       creditors? ________ Comments: ______________________________________

73. Partnership
   (a) Name and kind of business: ____________________________________________
       Name of Partners          Age        Ownership
       __________________________________________________________________
       __________________________________________________________________
       __________________________________________________________________
       __________________________________________________________________
       __________________________________________________________________
       __________________________________________________________________
       __________________________________________________________________
       Your interest:________________________________________________________
       Book value: $___________ Market value: $___________
       Do you feel there would be a purchaser at the latter price? _______________
       Are all the partners in good health? _________________________________
(b) In the event of your death, do you want your family to inherit your interest in the partnership or would you prefer that your interest be sold? 

If you want the family to inherit the business: Has your partner agreed in writing to go into business with your spouse when you die? 

If not, are you aware that the business must be liquidated? 

If the business is to be sold, do you have a buy-sell agreement in writing? 

Sales price: $________ How is it funded? 

74. Closely Held Corporation

(a) Name and kind of business: 

<table>
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<tr>
<th>Name of Stockholders</th>
<th>Age</th>
<th>Ownership</th>
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Your interest: 

Book value: $________ Market value: $________

Would there be a purchaser at the latter price? 

(b) Is there more than one class of stock? 

If so, give percent of ownership of each stockholder: 

(c) Are there nonstockholder key persons? 

Are all the stockholders in good health? 

(d) In the event of your death, do you want family to inherit your stock in the corporation or would you prefer that the stock be sold? 

If you want the family to inherit your stock: Has any member of your family been groomed to replace you? 

If yes, who? 

If not, do they possess the talent for effective management? 

If not, whom would you nominate to run the business for them? 

Is it likely that the corporation will pay a regular dividend for the benefit of your heirs? 

If you want your stock sold: Do you have a buy-sell agreement which guarantees a market for your stock and which assures the surviving stockholders that no outsider can buy into the firm except with their approval? 

Sales price: $________ How is it funded? 

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(e) Are you aware that the Internal Revenue Service may establish its own valuation of your stock for tax purposes? 

(f) Are you aware of Section 303 of the Internal Revenue Code which provides special tax relief for stockholders such as in closely held corporations? 

(g) Are there any transfer restrictions on your stock? Explain: 

(h) Are you aware of the possible income tax pitfalls in corporation stock redemption plans? Comments: 

75. (a) Are the executives or key members of your firm insured for the benefit of the firm? Details: 

76. Which of the following employee benefit plans is the business: 

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<th>Already Using</th>
<th>Interested In</th>
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<td>Group Life Insurance</td>
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<td>Group Health Insurance</td>
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<td>Group Disability Income</td>
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<td>Salary Continuation</td>
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<td>Deferred Compensation</td>
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<td>Selective Bonus (IRC Section 162)</td>
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<td>Post-retirement Death Benefit</td>
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<td>Individual Retirement Accounts</td>
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<td>Premium Only Plan/Flexible Spending Account/ Cafeteria Plan</td>
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<td>Pensions</td>
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<td>Salary Savings/Payroll Deduction</td>
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<td>Supplemental Executive Retirement Plans (SERPs)</td>
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<td>Simplified Employee Pensions (SEPs)</td>
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<td>Business Overhead Expense Insurance</td>
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Which do you feel is most important to you now? 

What are two areas you think I can assist with? 

How much can you and the business spend each month to handle these needs? 

What are your objectives for this business providing security for you and your family? 

77. We would like to remind you that our analysis and planning may involve certain legal interpretations and recommendations. In this respect, we can neither give legal advice nor prepare the legal documents which may be necessary to implement your plan. Instead, we must rely upon an attorney of your choice, who will be compensated by you. We also can neither give you accounting advice nor prepare accounting/tax documents. Instead, we rely upon your accountant.

(a) Name of attorney: 
   Address: 
   Telephone: 

(b) Name of accountant: 
   Address: 
   Telephone: 

78. Can you think of anything we have overlooked which should be considered in our planning? 

79. We have attempted to bring to light all of the information surrounding your financial affairs, together with your innermost thoughts and objectives, in an effort to guide us in the intelligent arrangement of your financial plan. Although it may be somewhat repetitious, tell us in summary form the things you want most to accomplish for your family and your business. (List in order of relative importance.)

   Family: 
   Business:

Upon receipt of this data, we will commence work on your plan. Once again, we want to remind you that this information will be held in the strictest confidence. We are certain you will be pleased with the work we will do for you.

NOTES: 

____________________________________________

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