Rinehart Wealth Management
Greater Trust

Initial Inquiry and Conference Form

For our first meeting together there are two objectives:

1. *We need to learn about you* – in order to determine how we might best serve you. We want to know about your goals, your values, your concerns, your financial circumstances, and what you want out of an advisory relationship. To do this, we ask that you fill out this form before scheduling a in person meeting.
2. *You need to learn about us* – so you can decide if we are the right financial advisor for you. We want to make sure that you understand what we do, how we work, and what the benefits to you would be by choosing Rinehart Wealth Management as your financial advisor. Please browse our website, to learn more about us. Once this form is returned to our office we will be happy to send you a brochure about us and schedule an initial conference meeting.

Name___________________________________ **Spouse**_______________________________________

Date of Birth___________________________ Date of Birth____________________________

Address____

City__________________________________ ST_________________ Zip____________

Home Telephone________________________ Cell Phone_____________________________

E-Mail Address_________________________ E-Mail Address_________________________

Children & Ages____

1. Briefly explain your primary financial goals:

____
____
____

2. Briefly explain your lifestyle goals:

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____
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3. How do you think Rinehart Wealth Management can help you achieve these goals?

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____
____

4. Do you have any specific financial issues or concerns?

____
____
____

5. Do you feel your cash expenditures are reasonable?

____
____
____

5. Do you own a home? Yes____ No____

Approximate Value ___________________________
Mortgage Balance ___________________________
Length of time at residence ___________________________

6. Do you have any other liabilities? Yes____ No____
(ex: home equity line, car loan, credit card debt)

Approximate Amount _______________________

7. Do you have investable assets?

	Taxable (cash, brokerage accts.)		Tax-deferred (IRA, Roth IRA, 401(k), SEP)	
	Yes____	No____	Yes____	No____
Approximate Value	_______________________		_____________________	

8. Do you have life insurance? Yes ____ No____

Approximate Value (cash value/death benefit) ____

9. Do you have a strong attachment to any particular investments? If so, which ones?
____

10. Do you have a will and legal directives? Yes____ No____ Year Executed __________

11. Are you the beneficiary of a trust? Yes____No____

12. Are you retired? If not, at what age do you plan to retire?
____

13. Are you interested in the option of socially responsible investing? Yes_____ No______

14. How did you hear about Rinehart Wealth Management?
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Please mail, fax or scan and email your form to:

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