

# Personal and Family Information

Please complete the following information and return to Summit Financial Strategies, Inc.  
*Remember: All information will be held in the strictest confidence.*

Legal name (spouse 1) \_\_\_\_\_

Legal name (spouse 2) \_\_\_\_\_

Home street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

**Spouse 1**

**Spouse 2**

Please address me as... \_\_\_\_\_

\_\_\_\_\_

Email address\* \_\_\_\_\_

\_\_\_\_\_

Cell phone (\_\_\_\_) \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_

U.S. citizen? Yes No

Yes No

Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Social security number \_\_\_\_ - \_\_\_\_ - \_\_\_\_

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

Occupation/title \_\_\_\_\_

\_\_\_\_\_

Employer name \_\_\_\_\_

\_\_\_\_\_

Are you the officer or director of a public company? Yes No  
If yes, explain \_\_\_\_\_

Yes No  
If yes, explain \_\_\_\_\_

Are you subject to blackout periods for purposes of trading your employer's stock? Yes No  
If yes, explain \_\_\_\_\_

Yes No  
If yes, explain \_\_\_\_\_

Date employed \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Street address (work) \_\_\_\_\_

\_\_\_\_\_

City, state, zip \_\_\_\_\_

\_\_\_\_\_

Work phone (\_\_\_\_) \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_

Work fax (\_\_\_\_) \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_

\* By providing Summit with your email address you are authorizing electronic delivery of our privacy policy, annual ADV notice, and other regulatory communications.

PERSONAL AND FAMILY INFORMATION

Driver's license

State \_\_\_\_\_ No. \_\_\_\_\_

State \_\_\_\_\_ No. \_\_\_\_\_

Issued \_\_\_\_\_ Expires \_\_\_\_\_

Issued \_\_\_\_\_ Expires \_\_\_\_\_

Best time to be reached Send

correspondence to:

*Select One*

Home Address

Other: \_\_\_\_\_

Email (Spouse 1)

Email (Spouse 2)

**Children**

**Child 1**

**Child 2**

Child's name

\_\_\_\_\_

\_\_\_\_\_

Birthdate

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Social security number

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Spouse

\_\_\_\_\_

\_\_\_\_\_

Occupation

\_\_\_\_\_

\_\_\_\_\_

Their children's names

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home address

\_\_\_\_\_

\_\_\_\_\_

Special concerns/notes

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Child 3**

**Child 4**

Child's name

\_\_\_\_\_

\_\_\_\_\_

Birthdate

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Social security number

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Spouse

\_\_\_\_\_

\_\_\_\_\_

Occupation

\_\_\_\_\_

\_\_\_\_\_

Their children's names

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home address

\_\_\_\_\_

\_\_\_\_\_

Special concerns/notes

\_\_\_\_\_

\_\_\_\_\_

PERSONAL AND FAMILY INFORMATION

Living parents and other dependents

	Spouse 1   Father	Spouse 1   Mother
Name	_____	_____ Maiden name _____
Birthdate	____ / ____ / ____	____ / ____ / ____
Occupation	_____	_____
Current spouse	_____	_____
Address	_____ _____	_____ _____
Special concerns/notes	_____ _____ _____	_____ _____ _____

	Spouse 2   Father	Spouse 2   Mother
Name	_____	_____ Maiden name _____
Birthdate	____ / ____ / ____	____ / ____ / ____
Occupation	_____	_____
Current spouse	_____	_____
Address	_____ _____	_____ _____
Special concerns/notes	_____ _____ _____	_____ _____ _____

PERSONAL AND FAMILY INFORMATION

**Advisors**

Personal attorney                      Name \_\_\_\_\_                      Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/state/zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_                      Fax (\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_

Business attorney                      Name \_\_\_\_\_                      Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/state/zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_                      Fax (\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_

Accountant                                      Name \_\_\_\_\_                      Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/state/zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_                      Fax (\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_

Banker    Name \_\_\_\_\_                      Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/state/zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_                      Fax (\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_

Safe deposit boxes                      Bank Name \_\_\_\_\_                      Box Number \_\_\_\_\_  
Address \_\_\_\_\_  
Box in the name of \_\_\_\_\_  
Name \_\_\_\_\_                      Company \_\_\_\_\_

Investment/broker                      Address \_\_\_\_\_  
City/state/zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_                      Fax (\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_

PERSONAL AND FAMILY INFORMATION

Advisors continued

Life insurance agent

Name \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_

City/state/zip \_\_\_\_\_

Phone (     ) \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Property/casualty insurance agent

Name \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_

City/state/zip \_\_\_\_\_

Phone (     ) \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Current marriage

Date married

\_\_\_\_\_  
\_\_\_\_\_ /     / \_\_\_\_\_

Previous marriages

Parties of marriage

\_\_\_\_\_

Date married

\_\_\_\_\_ /     / \_\_\_\_\_ Date Dissolved \_\_\_\_\_ /     / \_\_\_\_\_

Current issues/  
responsibilities

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parties of marriage

\_\_\_\_\_

Date married

\_\_\_\_\_ /     / \_\_\_\_\_ Date Dissolved \_\_\_\_\_ /     / \_\_\_\_\_

Current issues/  
responsibilities

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Which of the following best describes your investment objective(s)?

- Preservation of capital and focus on current income
- A balance between capital appreciation and current income
- Capital appreciation with little or no need for current income

Further Explanation/Description:

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Investment Restrictions/Other Important Information (if none, indicate None):

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Unless you indicate to the contrary in the spaces provided above, we will assume that there are no restrictions on our services, other than to manage the account in accordance with your investment objectives, which will be based upon the information provided above and your individual risk parameters.

**Intended Purpose:** This Questionnaire has been created by Summit with the assumption that the client will choose to implement planning recommendations and investment management services in conjunction with Summit. Although the client is under no obligation to further engage Summit for implementation services, in the event that the client chooses not to do so, Summit takes no responsibility for any implementation errors, lapses, or deficiencies.

The responses set forth on this Personal and Family Information questionnaire and a separate FinaMetrica Risk Profile are intended to elicit information from you to assist in identifying your investment needs/objectives and risk parameters, which will form the basis of your Investment Policy Statement to be prepared by Summit and presented to you for review and adoption. Your Investment Policy Statement will confirm your investment objectives and any corresponding investment-related restrictions, upon which Summit will rely in managing your accounts until you advise Summit, in writing, to the contrary.

Past performance may not be indicative of future results. Different types of investments involve varying degrees of risk. Therefore, you should not assume that future performance of any specific investment or investment strategy (including the investments and/or investment strategies recommended and/or undertaken by Summit) will be profitable. It remains your responsibility to advise Summit, in writing, if there are any changes in the information provided above, including any change in your personal or financial situation, or if you would like to impose, add, or to modify any reasonable restrictions to Summit investment advisory services.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**SUMMIT FINANCIAL STRATEGIES**

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