Introductory Meeting

The Strebel Planning Group welcomes you to our office! We appreciate the opportunity to meet with you.



Please take a couple minutes to complete this form.

All information you share will be held in the strictest confidence.

Tod	Today's date:										
Personal Information	Na	Name:			name:	Date of Birth:	Date of Birth:				
	Occupation:			Emp	loyer:	Annual Income					
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	Interests:										
Spouse/Partner Information	Na	Name:			name:	Spouse/Partner	Spouse/Partner DOB:				
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Marital	Status	O Divorced	O Domestic Partnership	O Married	l O Separated	○ Single	O Widowed				

Do you currently work with a Certified Public Account? Have you worked with an accountant in the past? Do you presently prepare your own income tax returns? Do you currently work with a Certified Financial Planner? O Seminar/Event/Networking O Yellow Pages O Yes O No Have you worked with an accountant in the past? O Yes O No Do you presently prepare your own income tax returns? O Yes O No		First/Last Name:	SSN:	DOB:					
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		Do war augrenth work with a Cartified Financial Diagnor?							
	ऴ	Do you currently work with a certified Financial Flamier:	O yes	O NO					
Have you worked with a financial advisor in the past? O Yes O No	ınnin	Have you worked with a financial advisor in the past?	O Yes	O No					
Do you presently do your own financial planning? O Yes O No	Pla	Do you presently do your own financial planning?	O Vac	2 No.					
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Are you a business owner? O Yes O No	SS	Ara you a husiness owner?	O Vas	O No					
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if you answered yes, please answer the "Business Survey" questions on the following page.	В	If you answered Yes, please answer the "Business Survey" questions on the following page.							
The focus of today's meeting is: O Personal O Business O Both	The f	ocus of today's meeting is: O Personal O Business	O Both						
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What specifically do you want to be sure we discuss during this meeting?									