

EXTENSIVE PERSONAL QUESTIONNAIRE



We currently have a vast majority of this information, but we want to keep our information current. As many of you know, AQuest Wealth Strategies enjoys doing things for our clients on a personal level and this information will be kept strictly confidential.

Please complete and return the following questionnaire.

To send your response via e-mail: Please copy and paste this questionnaire into a new e-mail, complete it, and send it to Jason@aquestwealth.com.

To send your response by mail:

**AQuest Wealth Strategies
44028 Mound Road Suite 4
Sterling Heights MI 48314**

Client Name(s):

(1) _____ (2) _____

(The following info will be used to cross-check our database for any discrepancies)

DOB: _____ DOB: _____

SSN: _____ SSN: _____

E-mail address: _____ E-mail address: _____

How do you prefer to be contacted:

(1)	<input type="checkbox"/>	Home phone	(2)	<input type="checkbox"/>	Home Phone
	<input type="checkbox"/>	Work phone		<input type="checkbox"/>	Work Phone
	<input type="checkbox"/>	Cell phone		<input type="checkbox"/>	Cell phone
	<input type="checkbox"/>	E-mail		<input type="checkbox"/>	E-mail

Personal/Family Information

Wedding Anniversary Date (mm/dd/yy): _____

Future Wedding Date (if engaged) (mm/dd/yy): _____

Shirt Size (S, M, L, XL, etc.):

(1) _____ (2) _____

Children's Information: (please add additional children if needed)

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

E-mail Address: _____

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

E-mail Address: _____

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

E-mail Address: _____

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

E-mail Address: _____

Employment Information (if retired, see below):

(1) Employer: _____

Position: _____

Address: _____

Phone #: _____

(2) Employer: _____

Position: _____

Address: _____

Phone #: _____

If retired, where did you work previously?

- (1) Employer: _____ (2) Employer: _____
Position: _____ Position: _____

Personal Preferences

What type of car(s) do you own?

- (1) Make _____ (2) Make _____
Model _____ Model _____

Which type of wine do you prefer?

- (1) ___ Red (2) ___ Red
___ White ___ White
___ No preference ___ No preference
___ Don't drink wine ___ Don't drink wine

When visiting our office, which do you prefer to drink?

- (1) ___ Water (2) ___ Water
___ Coffee ___ Coffee
___ Iced Tea ___ Iced Tea
___ Hot Tea ___ Hot Tea
___ Soda ___ Soda
If soda, what is your favorite? If soda, what is your favorite?

Other: _____ Other: _____

Which type of coffee do you prefer?

- (1) ___ Regular (2) ___ Regular
___ Decaffeinated ___ Decaffeinated
___ No Preference ___ No Preference
___ Don't drink coffee ___ Don't drink coffee

Which type of chocolate do you prefer?

- (1) ___ Milk Chocolate (2) ___ Milk Chocolate
___ Dark Chocolate ___ Dark Chocolate

No Preference
 Don't care for chocolate

No Preference
 Don't care for chocolate

Which would you prefer to receive?

(1) Plant
 Flowers
If flowers, what is your
favorite? _____
 No Preference

(2) Plant
 Flowers
If flowers, what is your
favorite? _____
 No Preference

What newspaper do you prefer to read?

(1) {Insert Name of Local Paper}
 USA Today
 Wall Street Journal
 Other: _____

(2) {Insert Name of Local Paper}
 USA Today
 Wall Street Journal
 Other: _____

What is your favorite type of movie?

(1) _____

(2) _____

What is your favorite TV show?

(1) _____

(2) _____

What is your favorite snack?

(1) _____

(2) _____

What is your favorite type of music?

(1) _____

(2) _____

Do you play golf?

(1) _____ (2) _____

Do you play tennis?

(1) _____ (2) _____

Do you enjoy the theater?

(1) _____ (2) _____

Do you belong to a gym? Which one?

(1) _____ (2) _____

Do you enjoy visiting museums?

(1) _____ (2) _____

Hobbies (other than those listed above):

(1) _____ (2) _____

What is your favorite hometown attraction?

(1) _____ (2) _____

What is your favorite restaurant?

(1) _____ (2) _____

Who is your favorite author?

(1) _____ (2) _____

What kind of pets do you have? What are their names?

(1) _____ (2) _____

Do you have season tickets for any sports?

School(s)/Professional team(s)/Sport(s): _____

In what groups and/or organizations do you participate?

(1) _____ (2) _____

New/Changes/Additions to Other Advisors

Attorney (Name/Address/Phone #):

(1) _____ (2) _____

CPA (Name/Address/Phone #):

(1) _____

(2) _____

