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Confidential Personal & Financial Profile

The Impact of Intelligent Investing.

The Financial Consultants of Manning Wealth Management, Inc. are registered representatives and investment advisor representatives with/and offers securities through Commonwealth Financial Network®, Member FINRA/SIPC, a Registered Investment Adviser. Manning Wealth Management is also a Registered Investment Adviser. Advisory services, fixed insurance products and services offered by Manning Wealth Management are separate and unrelated to Commonwealth.

Confidential Personal Profile

This comprehensive, personal financial planning summary is designed to help you take inventory and assign realistic values to your personal assets and liabilities. It is the essential first step in organizing a sensible financial plan for your future. Once you have completed the following information, please return this packet.

Family Protection

Your Name	Nick Name	Age	Birthdate	Social Security #
Spouse's Name	Nick Name	Age	Birthdate	Social Security #
Residential Address	City	State	Zip Code	
Mailing Address	City	State	Zip Code	
Preferred Phone #	Alternate Phone #	Fax #	E-mail Address	

Referred By: _____
Client Name

Children's Names & Ages:

1.) _____ 3.) _____ 5.) _____
2.) _____ 4.) _____ 6.) _____

Occupation

Your Job Title	Employer (last, if retired)	# of Years	Work Phone#	Retirement Date
Spouse's Job Title	Employer (last, if retired)	# of Years	Work Phone #	Retirement Date

Advisors

Financial Advisor's Name	Firm Name	City/State
Attorney's Name	Firm Name	City/State
Accountant's Name	Firm Name	City/State
Insurance Agent's Name	Firm Name	City/State
Stockbroker's Name	Firm Name	City/State

Do you have a preference or commitment to this advisor?

Yes No

Yes No

Yes No

Yes No

Yes No

Personal Views

1. What are your top priorities in life?

2. What are your biggest fears in life?

3. What is your vision of your future?

Life Values- Choose 5 and rank in order



_____ **Achievement** – to accomplish something important in life

_____ **Adventure** – to experience variety and excitement

_____ **Aesthetics** – to be able to appreciate and enjoy beauty's sake

_____ **Authority** – to be a key decision maker directing priorities

_____ **Autonomy** – to be independent, have freedom

_____ **Friendship** – to have close personal relationships, share with family and friends

_____ **Health** – to be physically, mentally and emotionally well

_____ **Integrity** – to be honest and straightforward, just and fair

_____ **Pleasure** – to experience enjoyment and satisfaction from activities in which I participate

_____ **Recognition** – to be seen as successful, receive acknowledgment for achievement

_____ **Security** – to feel stable and comfortable with few changes or anxieties in my life

_____ **Service** – to contribute to the quality of life for other people

_____ **Spirituality/growth** – to have harmony with the infinite source of life

_____ **Wealth** – to acquire an abundance of money/possessions; to be financially independent

_____ **Wisdom** – to have insight, to be able to pursue new knowledge

_____ **Other** _____

4. What role do you feel a financial planner should play in your financial success?

5. What would you do to change or improve to make your Financial Advisor relationship better?

Personal Goals Statement

Which item would you like help with?

- _____ Increase my standard of living
- _____ Financial security at retirement
- _____ Increase my net worth by _____%
- _____ Reduce my tax burden
- _____ Pay for college education for my children
- _____ Provide for my family in the event of my (or my spouse's) death
- _____ Minimize the cost of probate and estate taxes
- _____ Control the distribution of assets to my heirs
- _____ Plan for long-term or nursing home care
- _____ Buy a house

Other financial goals:

If you could change two things about your current financial situation, what would you change?

- 1.) _____
- 2.) _____

Concerns & Objectives

General

Amount of non real estate debt and interest rates _____

Are you anticipating any major lifestyle changes?
(ie., marriage, divorce, retirement, moving, etc.) Yes No Uncertain

If so, what changes are you expecting? _____

Are you comfortable with your current cash flow? Yes No Uncertain

Do you anticipate any significant changes in your cash flow? Yes No Uncertain

What level of liquid reserves do you feel comfortable with? \$ _____

Do you anticipate any major expenditures in the near future?
If so, what expenditures are you expecting? Yes No Uncertain _____

Are any assets earmarked for a particular personal objective? _____

Do you give regularly to charities? Yes No

If so, to whom and approximately how much each year? _____

Are gifts made in cash, other real property or through a Charitable Remainder Trust? _____

Do you or your spouse have potential support problems with family or non-family members?

If you or your spouse were previously married, describe any resulting obligations
under the divorce decree:

Do you anticipate having more children and if so, when? _____

Are there any special problems or allowances, which should be made with regard to your children,
e.g., handicaps, etc? _____

Are you interested in funding for future college/postgraduate expenses for your children? _____

If yes, complete the following:

<u>Name of Child</u>	<u>Institution Type</u>	<u># of Years</u>	<u>Current Assets</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Retirement Planning



Do you or your spouse anticipate a change in employment in the immediate future? _____

At what age do you expect to retire? _____

At what age would you like to be able to retire? _____

What minimum income will you need (in today's dollars)? _____

If you plan on working after retirement, estimate your expected income: _____

What substantial lump sum expenditures do you anticipate in retirement? _____
(i.e. travel, purchase of a retirement home, etc.)

Do you anticipate cash inflows from sources other than income? i.e. gifts, sale of assets, etc.

Are you contributing to an IRA? Yes No

Are you covered by any company retirement plans? Yes No

Type of company pension plan? _____

Protection



Do you have any potential health problems? Yes No Uncertain

Do you have adequate medical coverage? Yes No Uncertain

Do you have long-term health insurance income? Yes No Uncertain

Do you have adequate disability coverage? Yes No Uncertain

What monthly income would be required in the event of your total disability? _____

Your spouse's total disability? _____

Do you have adequate personal liability coverage? Yes No Uncertain

Amount? _____

Do you have enough life insurance? Yes No Uncertain

Would you want your family to continue at approximately the same income level as they have now in the event of premature death? _____

Do you have an emergency fund (money set aside in savings)? Yes No Uncertain

Estate Planning



Have you or your spouse made any gifts of cash or property?

Yes No Uncertain

Do you have updated/adequate wills?

Yes No Uncertain

Have you established any trusts?

Yes No Uncertain

Are you the beneficiary of any trusts?

Yes No Uncertain

Will you be receiving a significant inheritance?

Yes No Uncertain

Have you adequately considered estate taxes?

Yes No Uncertain

Have you provided adequate estate liquidity for your heirs?

Yes No Uncertain

Is proper titling a concern?

Yes No Uncertain

Are your important documents secure and in one location

Yes No Uncertain

Concerns



Please list any concerns you may have:

Family Assets

Annual Income & Sources

Wages: _____ Pension: _____

Social Security: _____ Investment Income: _____

Other Income: _____

Outstanding Personal Liabilities

Car Note: \$ _____ Credit Cards: \$ _____

Student Loans: \$ _____ Other Miscellaneous Loans: \$ _____

Investments (Non-Retirement)

- | | |
|---|--|
| <input type="checkbox"/> \$ 0 - \$ 99,999 | <input type="checkbox"/> \$500,000 - \$1,000,000 |
| <input type="checkbox"/> \$100,000 - \$ 249,999 | <input type="checkbox"/> \$1,000,000 - \$4,999,999 |
| <input type="checkbox"/> \$250,000 - \$ 499,999 | <input type="checkbox"/> \$5,000,000 + |

Please provide a current statement for all accounts.

Retirement Plan (IRA, 401K)

- | | |
|---|--|
| <input type="checkbox"/> \$ 0 - \$ 99,999 | <input type="checkbox"/> \$500,000 - \$1,000,000 |
| <input type="checkbox"/> \$100,000 - \$ 249,999 | <input type="checkbox"/> \$1,000,000 - \$4,999,999 |
| <input type="checkbox"/> \$250,000 - \$ 499,999 | <input type="checkbox"/> \$5,000,000 + |

Please provide a current statement for all accounts.

Stock Options



Description	Type*	Option Price	Current Value	Expiration Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

*Enter the abbreviation that applies to the type of stock option: ISO-Incentive Stock Option; NQSO-Nonqualified Stock Option

Notes:

Business Assets



Description	Type*	Value	Cost Basis	Gross Revenues	Growth Rate
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

*Enter the abbreviation that applies to the business asset: **S**-Sole Proprietorship, **P**-Partnership, **L**-Limited Liability Company, **C**-C-Corp, **SC**- S-Corp.

Notes:

Real Estate // Section 1: Property Information



Description	Type*	Owner**	Purchase Price	Market Value	Improvements
A. _____	_____	_____	_____	_____	_____
B. _____	_____	_____	_____	_____	_____
C. _____	_____	_____	_____	_____	_____

***Type:** Enter abbreviation for the **property type**:
P-Primary, **S**-Secondary, **R**-Recreational, **I**-Investment, **RNT**-Rental, **O**-Other.

****Owner:** Enter the abbreviation that applies to the real estate:
S-Separate Property, **J**-Joint Tenants, **C**-Tenants-in-Common, **CP**-Community Property, **U**-UTMA Uniform Transfer to Minors Act, **T**-Trust.

Notes:

Real Estate // Section 2: Mortgage information for properties listed above



	Original Amount	Current Balance	Original Date	Monthly Payment	Term Years	Interest Rate	Type*
A. _____	_____	_____	____/____/____	_____	_____	_____	_____
B. _____	_____	_____	____/____/____	_____	_____	_____	_____
C. _____	_____	_____	____/____/____	_____	_____	_____	_____

*** Type:** Enter **A** for Adjustable or **F** for fixed.

Notes:

Life Insurance



Company Name	Insured*	Type**	Owner	Death Benefit	Cash Value	Premium	Mode***	Beneficiary
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____

* Enter **S** for Self, **SP** for Spouse, **D** for Dependent, or **O** for Other.

** **Type:** Enter the abbreviation that applies to the **type of insurance:**
GT-Group Term, **T**-Term, **W**-Whole Life, **U**-Universal, **V**-Variable, **VU**-Variable Universal.

*** Enter an abbreviation for the **premium payment mode:**
A-Annual, **S**-Semi-annual, **Q**-Quarterly, or **M**-Monthly.

Notes:

Company Name	Insured*	Type**	Owner	Death Benefit	Cash Value	Premium	Mode***	Beneficiary
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____

Client Name: _____

Client Name: _____

Client Signature: _____

Client Signature: _____

Date: _____

Date: _____

Advisor Name: _____

OSJ Signature: _____

Advisor Signature: _____

Date: _____

Date: _____

Family Tree



(Please illustrate your family tree below, including parents, children, stepchildren, adopted children, grandchildren of those children, etc. This will assist us with the Estate Planning portion of your overall financial plan).



MANNING
WEALTH MANAGEMENT

REGISTERED INVESTMENT ADVISOR

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MISSION TO DELIVER

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MANNING WEALTH MANAGEMENT PRIVACY PROTECTION STATEMENT

TYPES OF PERSONAL INFORMATION WE COLLECT AND WHY WE COLLECT IT

The primary reason we collect and maintain customer information is to serve you and administer the products and services you request from us. The type of personal information collected by Manning Wealth Management varies according to the products or services you request, and may include:

- Information included on your application and related forms (such as name, address, telephone number, Social Security number, assets, income, medical and health information);
- Information about your transactions (such as insurance premiums and policy numbers);
- Information from third parties (such as agents, CPAs, Attorneys, other Advisors, employers, other insurers or health care providers);
- Information about your relationships with us (such as products or services purchased, account balances and payment history);
- Information from your employer, benefit plan sponsor, or association you may have (such as name, address, Social Security number, age and marital status);
- Information from consumer reporting agencies (such as credit relationships and history);
- Information from other unrelated companies' sources (medical information, demographic information);
- Information from visitors to Manning Wealth Management web site (such as that provided through on-line forms, site visitorship date and on-line information collection devices known as "cookies"); and
- Information from governmental agencies and independent reporting companies in connection with your application for insurance or other products or services.

WHO HAS ACCESS TO YOUR PERSONAL INFORMATION AND WHO DO WE DISCLOSE YOUR PERSONAL INFORMATION TO

We will permit only authorized employees and agents, trained in the proper handling of your personal information, to have access to your information. We will refer to and use the information to issue and service your insurance policy or other products and to process your claims. Except as noted below, we will not disclose information about you without your authorization. We may, with your prior consent and only as permitted by law, provide information to:

- Your agent or broker;
- Insurance Companies, our Broker Dealer – Commonwealth Financial;
- State Insurance Departments or other governmental agencies, as required by law; and
- In response to a valid summons, court order, search warrant or subpoena, or to protect our legal interests.

HOW WE WILL PROTECT THE CONFIDENTIALITY OF THE INFORMATION

In order to protect the confidentiality of your personal information, Manning Wealth Management commits to you as follows:

- We will safeguard and keep confidential, pursuant to company security procedures, any personal information you provide us or that we obtain on your behalf. We maintain physical, electronic and procedural safeguards to maintain the confidentiality of your personal information. We restrict access to your personal information to authorized individuals who need to know that information to provide products or services to you.
- We will limit the use of your personal information to the extent necessary to provide you with superior products and services and to administer our business.
- If we hire outside organizations to provide support services, we will require them to maintain the confidentiality of your personal information to the same extent that we do.

- We will not disclose your personal information to any external party or organization, other than as discussed above, without first notifying you in writing of our plans.

HOW WE TREAT PERSONAL INFORMATION OF FORMER CUSTOMERS

Our Privacy Protection Policy and information security practices described in this notice apply equally to current and former customers. However, we will not provide annual notice of our Privacy Protection Policy to you after you terminate your customer relationship with us. Although state law may govern the length of time that we keep personal information on former customers, information about former customers is eventually removed from our records or destroyed.

THE MANNING WEALTH MANAGEMENT PRIVACY PROTECTION STATEMENT

This Privacy Protection Statement has an effective date of January 1, 2005. We retain the right to change this Statement at any time after providing you with reasonable notice of the change(s). Any change(s) or updates of our official Privacy Protection Statement will become effective immediately upon mailing notice of the changes(s) to you. We can be contacted regarding any questions or concerns with regard to this Statement by:

Writing to:

Manning Wealth Management
401 B Street, Suite 2300
San Diego, CA 92101

or calling:

(619) 237.9977

The Manning Wealth Management Privacy Protection Statement complies with the applicable laws and regulations.

Privacy Statement
5/2010

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