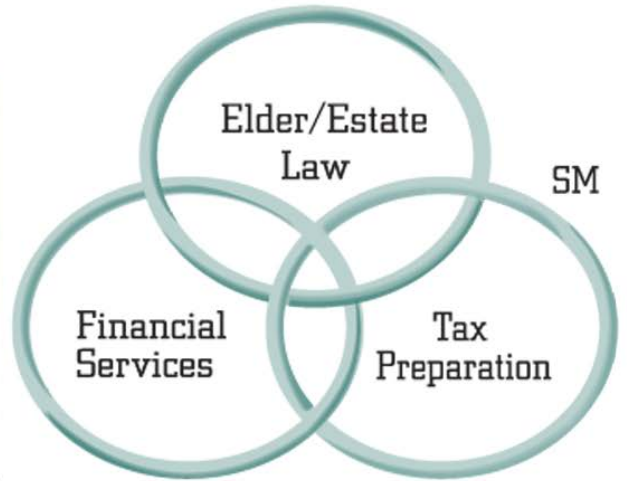




LIBERTY GROUP, LLC



Personal Financial Planning

Confidential Client Financial Profile

Client Name: _____

Date: _____

Thorough Knowledge Empowers Sound Counsel

Document Inventory

We appreciate your interest in Liberty Group, LLC. Please prepare the following documents for your investment, risk management, cash flow, and retirement analysis. We seek a comprehensive picture of your financial situation and life goals as the first step of our financial planning process.

ASSETS

- Investment account statements (brokerage accounts, mutual funds, and annuities)
- Retirement account statements (401(k), 403(b), 457, IRA, and Roth IRA)
- Trust investment account statements
- Pension Plan, Employee Stock Options, Stock Appreciation Rights (SAR's), Restricted Stock Units (RSU's) and other Incentive Plan compensation statements
- Recent savings and checking account statements
- Prepaid college tuition plan, 529 college saving plans, Coverdell Education Savings accounts (ESA), and custodial accounts (UTMA/ UGMA)

LIABILITIES

- Mortgage statements
- Credit Card statements
- Auto Loan statements
- Student Loan statements

INSURANCE POLICIES

- Life Insurance coverage
- Disability Insurance coverage
- Long Term Care Insurance coverage
- Auto and Home Insurance coverage
- Personal Umbrella Liability Policy coverage

INCOME

- Recent pay statements
- Recent tax returns (Federal and State)
- Most recent Social Security statements (From Social Security Administration)
- Pension Benefit statements

ESTATE

- Copies of estate documents (wills, living wills/health care directive, powers-of-attorney for finances and health care, and trusts)

You may complete the remaining pages of this client profile. Alternatively, you may submit the aforementioned documents and Liberty Group, will complete the client profile on your behalf.

Confidential Note.

We hold this information in strict confidence and do not share with any outside parties. All information on page 1 must be obtained as required by Federal Law and the USA Patriot Act. Blue Ocean Global Wealth must obtain, verify, and record information that identifies each person who opens an account



Personal Information

Client 1

Legal Name

Preferred Name

Date of birth Gender (M / F)

Social Security Number

Driver's License Number State

Home Phone Home Fax

Mobile Phone

Email Address

Residential Address

State Zip

Employment

- Retired Employed Business owner
 Stay-at-home parent Not currently employed

Occupation and Title

Employer

Employer Address

State Zip

Business Phone Business Fax

Work Email Address

Preferred Method of Contact:

Client 2

Legal Name

Preferred Name

Date of birth Gender (M / F)

Social Security Number

Driver's License Number State

Home Phone Home Fax

Mobile Phone

Email Address

Residential Address

State Zip

- Retired Employed Business owner
 Stay-at-home parent Not currently employed

Occupation and Title

Employer

Employer Address

State Zip

Business Phone Business Fax

Work Email Address

Preferred Method of Contact:

Children, Grandchildren and Other Dependents

Name	Gender	Date of birth/age	Relationship

Financial Information

Financial Assets

The location and composition of your financial assets are core to the Blue Ocean Global Wealth financial planning process.

Please provide copies of your most recent statements.

Do you have an Investment Policy Statement (IPS)? Yes NO

List all 401(k)s, 403(b)s, 457s, IRAs, Roth IRAs, Checking, Savings and CDs

Name	Value	Account Type	Owner	Beneficiary
<i>i.e. Bank of Omaha</i>	<i>\$10,000</i>	<i>Checking</i>	<i>Charlie</i>	<i>Warren</i>

Real Estate

Fair Market Value	Mortgage Balance	Monthly Payment	Interest %	Propriety Tax
\$ _____	\$ _____	\$ _____	_____	_____
\$ _____	\$ _____	\$ _____	_____	_____
\$ _____	\$ _____	\$ _____	_____	_____

Income

Knowing your current and future income is the foundation for determining the capacity by which you can save, spend, invest, and protect what is important to you.

Please provide a copy of your most recent pay statement(s), annual Social Security statement(s), and pension benefit statement(s). If statements are unavailable, please list below (salary, consulting, alimony/child support, or rental income):

Source	Amount	Client Name
<i>i.e. Salary</i>	<i>See Pay Stub</i>	<i>Karolina</i>



Liabilities

Prioritizing debt management is an integral part of the Blue Ocean Global Wealth financial planning process. Effectively managing liabilities improves cash flow, directly enhancing your ability to save and invest.

Please provide copies of your most recent statements. If statements are unavailable, please list below list Credit Cards, Line of Credits, Student Loans and Auto Loans.

Liability Name	Balance Due	Client (1 or 2)	Interest %	Monthly Payment	Increasing Balance	Steady Balance	Decreasing Balance
i.e. <i>Sallie Mae</i>	\$23,292	1	3.25%	\$242	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Insurance

Protection planning is a critical component of the Blue Ocean Global Wealth financial planning process. Insurance helps prepare our clients for the unexpected. To help understand your protection needs, we will evaluate your current coverage. Please provide a copy of your auto, home owner's or renter's insurance declaration of coverage.

Life Insurance

Insured	Beneficiary	Company	Type	Amount	Premium
i.e. <i>Katherine</i>	<i>William</i>	<i>New York Life</i>	<i>Term</i>	<i>500K</i>	<i>\$600/yr</i>

Disability

Insured	Company	Waiting Period	Benefit Period	Benefit Amount	Premium
i.e. <i>Marcus</i>	<i>Prudential</i>	<i>90 days</i>	<i>Age 65</i>	<i>\$1500/mo</i>	<i>\$58/mo</i>

Long Term Care

Insured	Company	Waiting Period	Benefit Period	Benefit Amount	Home Care	Premium
i.e. <i>Elizabeth</i>	<i>John Hancock</i>	<i>90 days</i>	<i>4 Years</i>	<i>\$4000/yr</i>	<i>100%</i>	<i>\$2100/yr</i>

Employee Benefits

Helping our clients understand and utilize their employee benefits is part of the Blue Ocean Global Wealth financial planning progress. Please provide copies of the following:

- Handbook or summary of employee benefits
- Benefits enrollment confirmation statement
- Summary plan description for retirement plans or other benefits



Expenses

Gaining insight into monthly cash flow provides our clients with clarity and direction. The Blue Ocean Global Wealth financial planning process empowers our clients to take action and helps them achieve their life goals.

Please provide a summary of your monthly expenses. Listed below are some sample items you might want to include. Feel free to prepare your expenses in a way that is most appropriate for your situation.

Current amount		
	Monthly	Annual
Alimony & Child Support Payments		
Auto: Gas / Oil		
Auto: Insurance		
Auto: Repair		
Auto: Parking / Tolls		
Books, Periodicals, & Subscriptions		
Charitable Giving		
Child Expenses: Tuition & School Fees		
Child Expenses: Extracurricular Activities		
Child Expenses: Child Care		
Clothing		
Dining Out		
Entertainment and Recreation		
Gifts to Family & Friends		
Groceries		
Homeowner's Association Fees/Condo Fees		
Homeowner's Insurance/Renter's Insurance		
Home Maintenance & Repair		
House Keeping		
Landscaping/Yard		
Medical Expense: Co-pays & Deductibles		
Medical Expense: Insurance Premium		
Medical Expense: Prescriptions		
Membership dues: Recreation		
Membership dues: Professional Associations		
Miscellaneous		
Personal Care (Hair, Nails, Dry Cleaning)		
Pet Expenses		
Rent/lease Payment (not mortgage)		
Utilities: Cable TV & Internet		
Utilities: Gas & Electric		
Utilities: Telephone & Cell Phone		
Utilities: Water & Sewer		
Utilities: Trash Removal		
Vacation and Personal Travel		
(other)		

Other Professionals

1. Professional Advisor: CPA

Name	Practice Name
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Email Address	Business Phone #
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Street Address	State	Zip Code
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Length of Relationship in years

2. Professional Advisor: Insurance Agent

Name	Practice Name
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Email Address	Business Phone #
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Street Address	State	Zip Code
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Length of Relationship in years

3. Professional Advisor: Estate Planning Attorney

Name	Practice Name
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Email Address	Business Phone #
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Street Address	State	Zip Code
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Length of Relationship in years

4. Professional Advisor: Other

Name	Practice Name
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Email Address	Business Phone #
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Street Address	State	Zip Code
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Length of Relationship in years

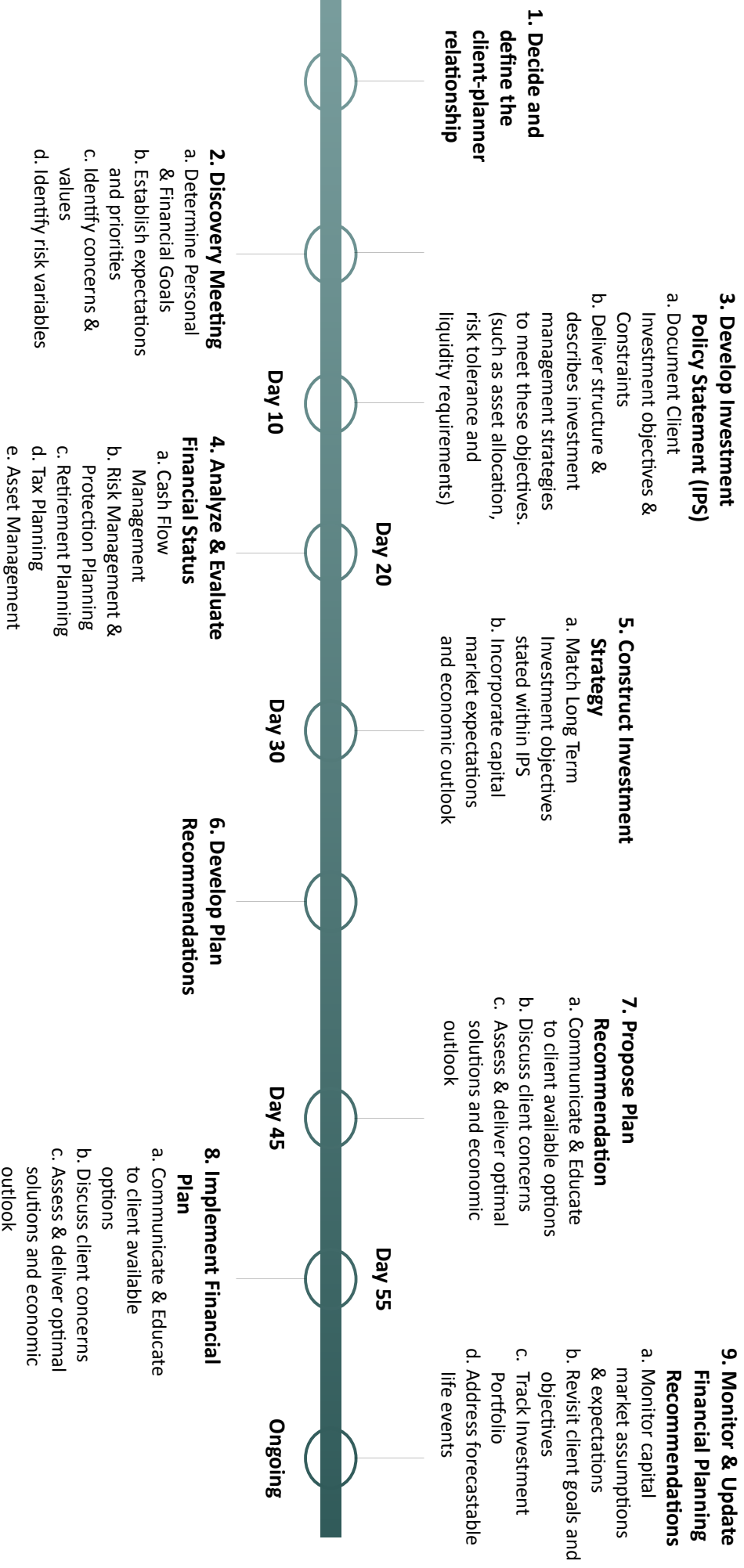


Liberty Group, LLC Client Experience

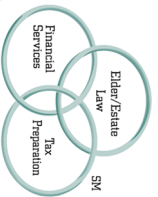
DECIDE

PLAN

EXECUTE



LIBERTY GROUP, LLC



Decide. Plan. Execute.