# Comprehensive Client Discovery

**Table of Contents** 

**Discovery Questions** 





Quick Links	Comprehensive Client Discovery
Discovery Questions	Our process involves discussing your goals, gathering pertinent data, designing solutions, and delivering a cohesive investment advisory or financial plan that you can implement to help you reach your goals. The process begins with understanding you and what you want to achieve.
	Client Name
	Date
	General Questions
	1. How did you get where you are today?
Data/Facts	
	2. What concerns you about your current financial situation?
	3. Tell me about the important people in your life.



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# Comprehensive Client Discovery cont.

Discovery	<b>Questions</b>
DISCOTCI	, questions

4. Tell r	ne about you	r prior plann	ing/advisor	y experienc	ces.		
- \A/I	l		2			2	
o. wna	t goals are im	portant to y	ou? Can yo	u prioritize	tnem for m	ne?	
c Mba	+ financial cha	naca da va	. anticinata	in the next	C months?	12 months	21 months2
o. vvna	t imanciai cha	inges do you	J anticipate	in the next	. o monuns	12 monuns:	? 24 months?





Quick Links	Expenses
Discovery Questions	1. What are your after-tax living expenses on a monthly basis (including mortgage, food, etc.)?
	2. After all bills are paid and monies are saved each month, how much is generally left over on average? What amount of this excess would you consider available to allocate towards your goals? Are there areas of your expenses you may be willing to review / modify to help meet your goals?
Data/Facts	
	3. Cash Reserves, 3 to 6 months of living expenses is generally recommended, what
	level would you feel comfortable with?





Quick Links	Expenses cont.
Discovery Questions	4. Let's review your current expenses and how they may change over time. Would you be willing to track your expenses in a budget worksheet?
	5. What large purchases / investments are anticipated over the foreseeable future (e.g. vacation, home remodeling, second home or rental property, renovations, new car, college funding, boat, wedding, etc.)? Let's review amount and timing for each.
Data/Facts	







	Detiment
Quick Links	Retirement
Discours Occasions	1. What do you ideally want your retirement to look like?
Discovery Questions	
	<ul> <li>a. Would you want the same level of after-tax monthly living expenses you have now? Or would you want more or less? Why? (More travel, gifts, etc.?)</li> </ul>
Data/Facts	<ul> <li>b. What rate of return would you like to assume you could earn on assets in retirement? What level of inflation would you want to assume?</li> </ul>
	·
	2. Who is with you? Where will you live?
	3. What age would you like to retire? Is it important to retire at that time?





Quick Links	Retirement cont.
Discovery Questions	4. Would you continue to work in a part-time or consulting capacity? How much might you earn and for how long?
	5. What concerns do you have about potentially retiring in years?
Data/Facts	6. If we find you are not on track to meet the time frame or lifestyle goal you have outlined, what are you willing to change to get on track?
	7. How important is having guaranteed income to meet some or all of your retirement expenses?
	8. What percentage of your investment accounts do you think is reasonable to take out each year?





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## Protection: Life Insurance

Discovery	Ouestion
Discovery	Questions

Who would	you need or wa	nt to provide fo	r in the event	of a premature	death?
- \\/			I - <b>£</b> - <b>£</b> 1 I		
for your	you want to pro	ovide the same l ent of your deatl	evei or arter-t -2	ax living expen	ses
Tor your	arrilly in the eve	ent or your death	1:		
			2 14/1		2
b. what i	ate of return we	ould you want to	assume? wi	nat level of infla	ition?
c. How lo	ng might the su	urvivor take off f	rom work to b	be with family?	
Vhat amou	ınt would you lik	ke to provide for	your parents	, siblings, charit	ties,
		pouse and child		-	







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# Protection: Life Insurance cont.

Discovery	/ Questions
Discoverv	/ Wuestions

3. Do you feel general living expenses and other expenses for your family would change in the event of premature death?
would change in the event of premature death:
4. Education goals: Would you like to provide funds for children's college education in the event of your premature death? What school or type of school do you have in mind?
5. Mortgage and other debts: Which of these obligations would you like to pay off for your family?
6. What Social Security survivor benefits may your family be entitled to?
7. What other income sources should be assumed for your family, including changes in income for your spouse?





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# For Existing Life Policies:

**Discovery Questions** 

	we would like to understand ownership, premium, term remaining on options, ability to add coverage through employer, portability es.
2. We would like to help assess the po	o obtain in force illustrations for all permanent policies to blicy.
3. What motivated	d you to obtain your existing coverage?





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# Protection: Disability/Long Term Care

Discovery	Questions	ı

	ht they change?		
2. How n	nuch of your liquid capital would you v disability?	want to use to provide income	
- J -			
3 What (	oes vour employer offer as far as gro	oun disability and/or long term	
3. What o	loes your employer offer as far as gro rance? Would you be able to provide	oup disability and/or long term	<u> </u>
3. What o	loes your employer offer as far as gro rance? Would you be able to provide	oup disability and/or long terme the benefit outlines?	1
3. What o	loes your employer offer as far as gro rance? Would you be able to provide	oup disability and/or long term me the benefit outlines?	l
3. What care insu	loes your employer offer as far as gro rance? Would you be able to provide	oup disability and/or long term me the benefit outlines?	l
3. What o	loes your employer offer as far as gro rance? Would you be able to provide	oup disability and/or long terme the benefit outlines?	l
3. What care insu	loes your employer offer as far as gro rance? Would you be able to provide	oup disability and/or long term me the benefit outlines?	1
3. What o	loes your employer offer as far as gro rance? Would you be able to provide	oup disability and/or long terme the benefit outlines?	1
3. What care insu	loes your employer offer as far as gro rance? Would you be able to provide	oup disability and/or long term me the benefit outlines?	ı
3. What o	loes your employer offer as far as gro rance? Would you be able to provide	oup disability and/or long terme the benefit outlines?	n
care insu	rance? Would you be able to provide	e me the benefit outlines?	1
care insu	loes your employer offer as far as gro rance? Would you be able to provide	e me the benefit outlines?	
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care insu	rance? Would you be able to provide	e me the benefit outlines?	







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# Protection: Health Insurance\*

**Discovery Questions** 

1. Tell me what you (and your family) do to take care of your health.
2. Would you be able to provide me details on your current health insurance coverage?
Premiums, co-pays, deductibles, limits, etc.
Tremains, co pays, acadecibies, innies, etc.
3. What care providers do you and your family see outside of network? How much are you
spending out of pocket annually? What medications/treatments do you have to pay for?

\*







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## Protection: Health Insurance cont.

**Discovery Questions** 

. What concerns do you have about health insurance now? In retirement?
. What concerns do you have about health insurance now? In retirement?
. What concerns do you have about health insurance now? In retirement?
. What concerns do you have about health insurance now? In retirement?
. What concerns do you have about health insurance now? In retirement?
. What concerns do you have about health insurance now? In retirement?
. What concerns do you have about health insurance now? In retirement?
. What concerns do you have about health insurance now? In retirement?
. What concerns do you have about health insurance now? In retirement?
. If you are participating in a high-deductible plan, are you contributing to a
lealth Savings Account? If so, please provide a recent statement.
low are you intending to use the HSA funds?





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### **Investments**

D:	
Discovery	/ Questions

1. How might you respond when you experience investment losses? Tell me about your experience in 2008 (or 2000), how did your investments perform and how did you react?
2. How comfortable are you with investments that will periodically decline in value if there is a potential for high returns?
3. Inflation can have a significant negative impact on the purchasing power of your income stream. What are your thoughts on the risk-return trade offs regarding the affect inflation can have on purchasing power?
4. What process have you used in making investment decisions (friend, Morningstar, Advisors, prospectus)?
5. What has been your criteria for selecting investments (1-year returns, 10-year returns, portfolio manager, tax efficiency, general feeling)?







Quick Links	Investments cont.			
Discovery Questions	6. What would you say is your primary investment objective (growth, income, tax savings, liquidity)?			
	7. If some of your investments could be repositioned to be more competitive or more in line with your financial plan, would you be open to changes? Are there any investments in particular you wish to receive feedback on?			
Data/Facts				
	8. Is there any investment(s) in particular you are attached to?			
	9. How important is having an investment portfolio that "beats the market"?			





Quick Links	Investments cont.
Discovery Questions	10. Would you be comfortable in having an investment portfolio focused on meeting your specific goals as opposed to maximizing returns?
	11. What portion of your income and/ or investments would you ideally like to be guaranteed?







Quick Links	Estate/Legacy
Discovery Questions	1. What kind of legacy do you wish to leave? Who is important to you that you might like to assist financially?
	2. What kind of role would you like to play in your children/ grand children's future?
Data/Facts	3. Tell me about your philanthropic intentions.
	4. Have you established an estate plan? When was this last reviewed? Please describe ideally how you would like your assets to pass.





Quick Links	Estate/Legacy cont.
<b>Discovery Questions</b>	5. Who would care for your children if you died? Who would manage your assets?
	6. Do you have any family members who have special needs? Can you describe their situation?
Data/Facts	7. Was a summary of your estate documents provided by your attorney? If so, please provide a copy for review.





**Data/Facts** 

# Estate Continued: For Business or Real Estate Owners/Higher Net Worth Clients

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<ol> <li>Who would get your business if you died? If it is a large part of your estate, what would you leave other children who are not involved in the business?</li> </ol>
2. Would your spouse need to rely on your business income if you died or become disabled?
3. Would your spouse feel comfortable signing a personal guarantee for your business debt if you died or became disabled?





**Data/Facts** 

# Estate Continued - For Business or Real Estate Owners/Higher Net Worth Clients

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D	iscovei	v Questi	ons

	want to pay the estate to you show me which asse		
	feel about ensuring the a Estate Tax; 2. Law Suits		eceive are protecte
	individuals or charities y Tell me about these goa	leave a bequest to	5
- 7			







Quick Links	Business
Discovery Questions	1. What would you like to have happen in the event of your (or another owner's) death,retirement, or disability?
	a. What legal and financial plans are in place to ensure this occurs?
Data/Facts	2. How much debt does your business or real estate ventures have against them?
	3. Do you have personal guarantees in place? Would those continue if you died or became disabled? Please describe those guarantees.
	4. Does your loan document(s) allow for the loan(s) to be called in the event of your death or disability?
	y



**Data/Facts** 

## **Client Information**

### **Discovery Questions**

Some basic information about you:

					Pre	fix: Mr. □	Mrs. □ Ms. □ Dr. □
Name				Dat	te of	birth	U.S. Citizen
					/	/	☐ Yes ☐ No
Street address		City		Sta	te		Zip code
Contact number				Email			
Occupation				Em	ploy	er	
Co-Client				1	Pre	fiv∙ Mr □	Mrs. □ Ms. □ Dr. □
Name				Dat		birth	U.S. Citizen
					/	1	☐ Yes ☐ No
Street address City				Sta	State		Zip code
Contact number				Email			
Occupation				Em	Employer		
Family and Other	r Relevant Inc	divi	duals				
Name	Date of l	oirth	Relationship Typ	e*	Citiz	enship	Include in Plan?
	/	/					☐ Yes ☐ No
Name	Date of l	oirth	Relationship Typ	e*	Citizenship		Include in Plan?
	/	/				·	☐ Yes ☐ No
Name	Date of t	oirth	Relationship Typ	e*	Citiz	enship	Include in Plan?
	/						☐ Yes ☐ No
Name	Date of t	oirth	Relationship Typ	e*	Citiz	enship	Include in Plan?
	/	/	-				☐ Yes ☐ No
Name	Date of t	oirth	Relationship Typ	e*	Citiz	enship	Include in Plan?
	/	/					☐ Yes ☐ No
Name	Date of b	oirth	Relationship Typ	e*	Citiz	enship	Include in Plan?

 $<sup>\</sup>hbox{*Daughter, Son, Mother, Father, Business Partner, etc.}\\$ 





☐ Yes ☐ No

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# **Client Information**

**Discovery Questions** 

### **Professional Advisors**

Attorney	Business Name	Address	Phone
Accountant	Business Name	Address	Phone
Insurance Agent	Business Name	Address	Phone
Other	Business Name	Address	Phone





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Assets

**Discovery Questions** 

**Personal Assets:** Please include any personal assets that you own including residences, automobiles, collections, artwork, jewelry, etc.

Personal Assets	Owner	Value

**Investments:** Please include all non-qualified investments such as bank accounts, brokerage accounts, and investment holdings and indicate the annual contribution you plan to make to each.

Investments	Owner	Value/Cost Basis	Annual Contribution
Checking			
Savings			
CDs			
Brokerage			

**Retirement Assets:** Please include all qualified investments such as IRAs/Roth IRAs, 401(k), 457, and SEP accounts. Indicate your annual contribution to each account and contributions from your employer.

Retirement Assets	Owner/ Beneficiary	Value	Annual Contributions	Employer Contributions





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### Assets cont.

**Discovery Questions** 

**Real Estate Holdings:** Please include all real estate holdings by location and indicate any future plans to sell the holdings.

Real Estate Location	Owner	Current Market Value	Basis	Plan to Sell? When?

**Data/Facts** 

**Business Interests:** Please list all business interests in which you own part or all of the interest. \*See additional questions in the Business Planning section

Business Name	Business Name 1	Business Name 2	Business Name 3
Owner(s)			
Business Type*			
Base Value			
Tax Basis			
Pass Thru (Yes/No)			

 $<sup>{\</sup>bf *Sole\ Proprietorship, Partnership, S-Corp, C-Corp, Limited\ Liability\ Corp, Professional\ Corp}$ 







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### Liabilities

**Discovery Questions** 

We would like to understand details for all mortgages, HELOCs, student loans, credit cards, etc. Original loan amount, term, rate, current balance, breakdown of P&I, insurance, taxes for mortgages, etc.

In general, what are your feelings about debt?			

### **Current Liabilities:**

Liability Name/ Original Balance	Current Balance	Periodic Payment (Break out -P&I, tax, insurance)	Payment Frequecy	Interest Rate	Year of Maturity







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### Income

**Discovery Questions** 

 $Please\ include\ income\ you\ receive\ with\ the\ exception\ of\ income\ related\ to\ business\ interests.$ 

Income	Client	Co-Client	Joint	Any anticipated changes?
Annual salary				
Bonus				
Self Employment				
Dividends/Interest				
Rentals				
Inheritance				

**Social Security Benefits:** Please include your most recent Social Security statement.

Client Normal Monthly \$ Co-Client Normal Monthly Retirement Benefit	·
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Data/Facts

Pensions/Guaranteed Income Annuities: Please include all you are eligible to receive

	Client	Co-Client
Start Age		
Monthly Amount		
Annual Inc. %		
Survivor %		







Quick	Links	

# Expenses

Discourse	O
Discovery	Questions

Monthly expenses: I spend about \$ a mo	onth on everything
---	--------------------

Current Expense	Annual amount	Retirement amount (today's dollars)	End dates?







Education

**Discovery Questions** 

List any education goals or expenses anticipated for yourself, your children, and/or your grandchildren including primary school, private school, trade schools, colleges, and universities.

Student	Description	Year start	# of years	Annual school cost	Funds available now	Monthly savings	Portion to fund
Student	Description	Year start	# of years	Annual school cost	Funds available now	Monthly savings	Portion to fund
Student	Description	Year start	# of years	Annual school cost	Funds available now	Monthly savings	Portion to fund
Student	Description	Year start	# of years	Annual school cost	Funds available now	Monthly savings	Portion to fund





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# Life Insurance

**Discovery Questions** 

Includes group, term, whole life, universal life, variable, or other custom policies.

Policy 1	Policy 2	Policy 3	Policy 4	Policy 5
	Policy 1	Policy 1 Policy 2	Policy 1 Policy 2 Policy 3	Policy 1 Policy 2 Policy 3 Policy 4 Policy 4







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# **Disability Policies**

**Discovery Questions** 

Includes group and Individual policies.

	Policy 1	Policy 2	Policy 3	Policy 4	Policy 5
Disability income					
Insured					
Monthly benefit					
Annual Premium					
Waiting period					
Length of benefit					
Cost of living adjustment (COLA)					





**Data/Facts** 

# Long Term Care Insurance

**Discovery Questions** 

Long Term Care Insurance: includes group and individual policies.

	Policy 1	Policy 2	Policy 3	Policy 4	Policy 5
Long term care					
Insured					
Annual premium					
Daily benefit					
Waiting period					
Length of benefit					
Cost of living adjustment (COLA)					
COLA method*					

<sup>\*</sup>Simple or Compound





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### Estate

### **Discovery Questions**

	Client	Co-Client
Do you have a will?	☐ Yes ☐ No	☐ Yes ☐ No
If yes, when was it updated last?		
Do you have a trust?	☐ Yes ☐ No	☐ Yes ☐ No
If yes, what type of trust?		
What is the goal of the trust?		
Heirs from a previous marriage?	☐ Yes ☐ No	☐ Yes ☐ No
Advanced Directives/Living Will?	☐ Yes ☐ No	☐ Yes ☐ No
If your children are minors, do you have a guardian nomination?	☐ Yes ☐ No	☐ Yes ☐ No







## **Business Cash Flow**

**Discovery Questions** 

	Business 1	Business 2	Business 3
Income			
Expenses			
Distribution			
Distribution Amount			
Distribution (% of income)			





# Related Business Questions

### **Discovery Questions**

	Business 1	Business 2	Business 3
Client active in the business	□ Yes □ No	□ Yes □ No	☐ Yes ☐ No
Spouse active in the business	□ Yes □ No	□ Yes □ No	□ Yes □ No
Number of children involved			
Future Plans	□ Yes □ No	□ Yes □ No	□ Yes □ No
Shareholder, Partnership or OperatingAgreement	□ Yes □ No	□ Yes □ No	□ Yes □ No
Does current agreement permit gifting?	□ Yes □ No	□ Yes □ No	☐ Yes ☐ No
Buy/Sell Agreement among owners	□ Yes □ No	□ Yes □ No	□ Yes □ No
Buy/Sell Agreement funded with life insurance?	□ Yes □ No	□ Yes □ No	□ Yes □ No
Level of coverage if applicable?			





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# **Recap of Client Goals**

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Discovery	/ Questions

Retirement		
Protection		
Investments		
Estate		



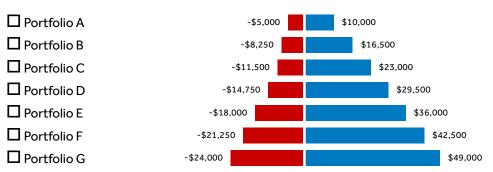




### Risk Tolerance Questionnaire

**Discovery Questions** 

1. The graph above shows the potential range of gains or losses of a \$100,000 investment in each of seven hypothetical portfolios at the end of a 1-year period. The number to the right of each bar shows the best potential gain for that portfolio, while the number to the left of each bar shows the worst potential loss. Given that this is the only information that you have on these seven hypothetical portfolios, which one would you choose to invest in?



- 2. Inflation (rising prices for goods and services) can have a significant effect on your investments by decreasing their potential purchasing power over time. Aggressive investments have historically outpaced inflation over the long run, but have had more instances of short-term losses than more conservative investments. How do you feel about inflation and its potential impact on your investments?
  - ☐ You are satisfied with your investments keeping pace with inflation. Limiting the potential for short-term loss is your main goal, and you are willing to sacrifice the potential for higher returns.
  - You would like your investments to outpace inflation. You are willing to
- assume some potential for short-term loss in order to pursue that goal.
- You prefer that your investments significantly outperform inflation. You are willing to assume a greater potential for short-term loss in order to pursue that goal.
- 3. Suppose that a substantial portion of your investment portfolio is invested in securities. If the stock market were to experience a prolonged down market, losing 50 percent of its value over a 3-year period, what would you do (assuming your securities behaved in a similar fashion)?
  - Sell all the securities in your portfolio. You are afraid that the stock market is in a downturn and you cannot afford the decrease in value.
  - ☐ Sell half of the securities in your portfolio. You think that the market may rebound, but you are not willing to leave all of your investment exposed to further loss.
- ☐ Hold the securities in your portfolio.
  You understand that your investment
  may be subject to short-term price
  swings and are comfortable 'weathering
  the storm'.
- ☐ Buy more securities for your portfolio to take advantage of their low price. You are comfortable with market fluctuations and assume that the securities will potentially regain their previous value or increase in value.







# Risk Tolerance Questionnaire cont.

Discovery Questions	4. Once again, assume you have a substantial portion of your investment portfolio in securities. If the stock market were to gradually decline at an average of 2 percent per month, eventually losing 24% of its value over a year, which of the following would you do?					
	☐ Sell the securities in your portfolio and realize the 24% loss. You wish to avoid the risk of further loss.	☐ Invest more now because securities are selling for approximately 24% less than they were 12 months ago. You believe that				
	<ul> <li>Sell half of the securities in your portfolio.</li> <li>You are not willing to leave all of your investment at risk for further loss.</li> </ul>	the securities will potentially regain their value or possibly appreciate even higher over the long-term.				
	☐ Do nothing. You are comfortable waiting for the securities to regain their previous value or to increase in value.					
	5. Aggressive investments have historically provided higher returns while exhibiting gr short-term price fluctuations and potential for loss. How do you feel about fluctuation the value of your portfolio?					
Data/Facts	You want to minimize the possibility of loss in the value of the portfolio. You understand that you are sacrificing higher	☐ You can tolerate the risk of moderate losses in order to pursue potentially favorable returns.				
	long-term returns by holding investments that reduce the potential for short-term loss and price fluctuation.	You can tolerate the risk of large losses in your portfolio in pursuit of greater potential gains.				
	6. What is the investment time horizon on these	e investable assets?				
	☐ Less than 3 years	☐ 6 – 9 years				
	☐ 3 – 5 years	☐ 10+ years				







## **Document Checklist**

### **Discovery Questions**

			Receiv	ed	Returned		
	Needed	Document	Quantity	Date	Quantity	Date	Initials
Bank & Brokerage Statements		Checking/ Account					
		Savings/CD/ Money Market					
		Brokerage Statements					
		Credit Card Statements					
		IRA/Roth IRA Statements					
		Other					

	Needed	Document	Quantity	Date	Quantity	Date	Initials
Employment Documents		Pay Statement					
		Employee Benefits					
		Group Term Life Insurance					
		Group Disability Insurance					
		Qualified Accounts					
		Pension Plan					
		Stock Option Plan					
		Other					

	Needed	Document	Quantity	Date	Quantity	Date	Initials
Insurance Documents		Life Insurance Statement					
		Auto Insurance					
		Health Insurance					
		Disability Statement					
		Long Term Care					
		Homeowner Insurance					
		Umbrella/ Excess Liability					
		Other					







### Document Checklist cont.

**Discovery Questions** 

	Needed	Document	Quantity	Date	Quantity	Date	Initials
Tax & Legal Documents		Tax Returns					
		Wills					
		Trust Documents					
		Power of Attorney					
		Other					

	Needed	Document	Quantity	Date	Quantity	Date	Initials
Business Documents		Buy-Sell Agreements					
		Succession Planning					
		Other					

**Data/Facts** 

I (We) have provided copies of the documents listed on the Document Checklist to the Financial Adviser listed below for the purpose of preparing a financial plan.

Client Signature	Date
Printed Name	Date
Spouse Signature	Date
Printed Name	Date





Quick Links	Notes
<b>Discovery Questions</b>	
Data/Facts	





Quick Links	Notes cont.
Discovery Questions	
Data/Facts	





Quick Links	Notes cont.
Discovery Questions	
Data/Facts	



#### **Discovery Questions**

Eagle Strategies LLC (Eagle) is an investment adviser registered with the Securities and Exchange Commission and is notice filed with appropriate state securities authorities. Registration with the SEC does not imply a certain level of skill or training. Eagle is an indirect wholly owned subsidiary of New York Life Insurance Company. Eagle is not a broker-dealer or an insurance company and does not offer insurance products or brokerage services

This fact-finder is intended to gather initial information in the financial planning process. Please note that if you decide to engage in any software-base financial planning process, you may need to also complete the applicable questionnaire.

At implementation, if any, a separate application and/or Investor Profile will need to be submitted for any financial or insurance product you ultimately decide to purchase and will result in their own suitability and underwriting analyses. In the event that there is an inconsistency between the information you provided in this material and application/investor Profile, the information in the application/Investor Profile shall govern.

### **Eagle Strategies**

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