



Proposal Questionnaire

Company Information

Legal Business Name: _____

Address: _____ City: _____ State: _____

Zip Code: _____ Phone Number: _____

Main Plan Contact: _____ Fiscal Year End: _____

Email Address: _____

C-Corp S-Corp Partnership Sole-Prop LLC taxed as a _____ LLP taxed as a _____

If you are involved in multiple business entities, please describe: _____

Are any of your family members involved in your business (or businesses)? If so, please describe: _____

Business CPA: _____ Payroll done by: _____

Referred by: _____ Business banking at: _____

Historical Information:

Do you currently sponsor a retirement plan? Yes No (if yes, what type? _____)

Did you previously have a retirement plan? Yes No (if yes, what happened to it? _____)

Are there assets that you may want to transfer into a new plan? Yes No (if yes, how much? _____)

Retirement Goals

Tax Savings Retirement Savings Employee Retention Employee Benefit

Name of Person Completing Questionnaire: _____ **Date:** _____