

PROFESSIONAL WEALTH ADVISORY PLANNING QUESTIONNAIRE AND ENGAGEMENT AGREEMENT

Client/Prospect Name(s): _____

RJL Account Number(s): _____

Province of Residence: _____

Advisor Name: _____

Date: _____

PERSONAL INFORMATION

Client

Title Select

First Name _____ Last Name _____

Date of Birth _____ Marital Status _____

Citizenship(s) Canadian U.S. Other _____

If U.S./ other, number of years resident in Canada _____

Occupation _____ Employer / Company _____

Est. Net Worth _____ RJL Account Number _____

Planned Retirement Age _____ Life Expectancy (default is 95) _____

Co-client / Partner

Title _____

First Name _____ Last Name _____

Date of Birth _____ Marital Status _____

Citizenship(s) Canadian U.S. Other _____

If U.S./ other, number of years resident in Canada _____

Occupation _____ Employer / Company _____

Est Net Worth _____ RJL Account Number _____

Planned Retirement Age _____ Life Expectancy (default is 95) _____

FAMILY DETAILS

Do you have a blended family*? Yes No

Is there a domestic agreement in place? (please provide) Yes No

Please indicate and provide details if there are any continuing support obligations from a prior relationship

* Relationship contains one or more children from a prior relationship

Children / Grandchildren

Name	Relationship	Date of Birth	Residency Province/ State Country	Citizenship(s)	Relationship Status
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Incapacity Planning

Do you have any children or other dependents with special needs or disabilities?

Name	Federal Disability Tax Credit	Provincial Disability Support	Is there a plan in place to provide ongoing support upon your demise?
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

PLANNING GOALS

Purpose of your plan

Financial Goals	Cost/Amount (today's dollars)	Time Frame/Year(s)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

What questions would you like the financial plan to answer?

Topic	Details:
Retirement	_____
Estate Planning	_____
Tax planning	_____

Topic**Details:**

Cash flow management

Insurance

Education Planning

Corporate planning

Other/Notes (please specify)

Do you have a comparative scenario you would like included in the plan? For example: remain in the family home or downsize upon retirement, buy the condo in Florida or not to buy, retire at age 62 or 65?

Estate Documents**Client****Co-client / Partner**

Do you have a Will?

 Yes No Yes No

If yes, last updated

Do you have a Power of Attorney?

 Property
 Personal Care Property
 Personal Care

How would you like assets to be distributed upon death?

Legacy Planning

Do you currently or would you like to support any charitable initiatives? Please provide a brief list of organizations you support or feel connected to.

Would you consider charitable giving as a component to your overall financial plan? Yes No

Liabilities

Debt Type <i>(specify if tied to an asset listed above)</i>	Name of Borrower	Sole or Joint	Current Balance	Interest Rate	Payment Amount	Payment Frequency	Amortization Period
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

INSURANCE

Life & Health Insurance

Company / Policy Number	Name of Owner	Insured(s)	Policy Type	Type	Death Benefit	Beneficiary	Premium	CSV
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____

CORPORATION(S) SUMMARY

Private Corporations

Company Name	Name of Shareholder	Ownership %	Share Type	Est. FMV	ACB	Province of Incorporation (or Federal)
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

What is the future objective for the business(es)? (ie. continue indefinitely, wind up upon retirement/death, post mortem planning in place, etc.)

Is there a business succession plan in place? If so, please provide details.

CASH FLOW DETAILS

Current Income Sources *(gross, before-tax)*

	Client	Co-client / Partner
Salary	_____	_____
Self-Employment Income	_____	_____
Bonus	_____	_____
Commissions	_____	_____
Pension Income	_____	_____
CPP / QPP Current or expected income (\$ or %)	_____	_____
Expected age to start CPP	_____	_____
OAS	_____	_____
Rental Income	_____	_____
Rental Expenses excluding mortgage	_____	_____
Foreign Income (pension, social security)	_____	_____
Other Income (please specify)	_____	_____

Company Pensions

Defined Contribution

	Client	Co-client / Partner
Current Value	_____	_____
Your Annual Contributions	_____	_____
Employer's Annual Contributions	_____	_____

Defined Benefit *(please provide statement)*

	Client	Co-client / Partner
Lifetime Monthly Pension	_____	_____
Bridge Benefit	_____	_____
Beginning Age/Date	_____	_____
Indexed	<input type="checkbox"/> CPI <input type="checkbox"/> ____% <input type="checkbox"/> No	<input type="checkbox"/> CPI <input type="checkbox"/> ____% <input type="checkbox"/> No
Survivor Benefit %	_____	_____

Expenses

	Amount
Current Annual Lifestyle Expenses <i>(excluding debt payments and taxes)</i>	_____
Other Expenses (specify) _____	_____
Retirement Spending Goal (today's dollars, after-tax)	_____

OTHER

Other Financial Concerns / Comments:

Professional Contacts

Accountants:

Lawyers:

Executor / Liquidator:

ADDITIONAL DOCUMENTS

Please provide copies of the following applicable documents for our review:

- Most recent income tax return (one year)
- Notice of Assessment (or re-assessment)
- CPP Benefits Statement
- Pay Stub (for a one month period)
- Pension Statement or Booklets
- Stock Option / Restricted Stock Plan details
- Life, disability, critical illness and long term care insurance policies (including employer-provided coverage) and the most recent annual policy statement
- Current investment statements for all non-Raymond James assets (including RRSPs, RRIFs, TFSAs, RESPs, 401(k)s, Roth 401(k)s, IRAs, Roth IRAs, 529, corporately and privately held investments, annuities)
- Statement of all debts (including mortgage, investment loans, lines of credit)
- Current will, power of attorney, and personal directives act (including any codicil)
- Trust documents
- Cohabitation / Domestic agreement or separation agreement
- Other relevant documentation that relates to your financial situation

If you own an incorporated business, please also include the following:

- Articles of incorporation
- Most recent financial statements and tax returns
- Copies of any partnership/shareholders agreements : including shareholders loan agreements, buy sell agreements, unanimous Shareholders agreement
- Corporately-owned life, disability & critical illness insurance policies/statements

Notices and Disclosures

Complaints:

In the event that you have a complaint concerning our team and our services that we cannot resolve, please refer to our Complaints Policy at <https://www.raymondjames.ca/contact-us/client-concerns>

Conflicts of Interest:

Presently, we are unaware of any such conflicts of interest, and will inform you in the future if any conflict of interest may arise.

Engagement Agreement - Related to the Provision of Financial Planning Services Only:

*This Engagement Agreement and Disclosure is prepared to provide you with a better understanding of the financial planning process and our respective responsibilities in that process. **The financial planners in the Retirement & Financial Planning (R&FP) team are all CERTIFIED FINANCIAL PLANNER® (CFP®) professionals, Qualified Associate Financial Planners™ (QAFP™), or Financial Planner (F.PI.) in good standing with FP Canada Standards Council™ or Institut québécois de planification financière (IQPF). For the purposes of this engagement, a CERTIFIED FINANCIAL PLANNER® or F.PI. professional will provide specific financial planning analysis and recommendations.***

Services Provided and Terms:

The financial planning process typically involves defining the client-advisor/planner engagement, gathering information, analyzing and evaluating your situation, producing and implementing solutions and reviewing regularly to ensure that you are on track.

The financial planning process is an ongoing process that requires review and monitoring to ensure that strategies remain consistent with your goals, needs and priorities. It should also be understood that writing and presenting the financial plan is only half the process and without implementation of the recommendations made, the financial plan has little value. The R&FP team will prepare the selected components with the understanding that you and your financial advisor will review the plan, develop an action plan and execute recommendations as necessary.

Core components (included)

- | | | |
|--|--|---|
| <input type="checkbox"/> Retirement | <input type="checkbox"/> Estate Planning | <input type="checkbox"/> Tax planning (as applicable) |
| <input type="checkbox"/> Debt and cash flow management | <input type="checkbox"/> Risk management (Insurance) | |

Secondary components (check all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Pension Evaluation | <input type="checkbox"/> Education Planning (RESP, LLP) | <input type="checkbox"/> Employment severance planning |
| <input type="checkbox"/> Employment benefit evaluation | <input type="checkbox"/> Disability planning (RDSP) | <input type="checkbox"/> Income splitting opportunities |
| <input type="checkbox"/> Preliminary corporate planning | <input type="checkbox"/> Living benefits assessment (LTC, CI) | |
| <input type="checkbox"/> Other/Notes (please specify): | | |

Responsibilities:

The success of developing a financial plan depends on each of us fulfilling our responsibilities to the process.

- Your responsibilities include providing the necessary, complete and accurate information and making your financial advisor aware of any personal or financial changes in the future that may affect the plan.
- Our responsibilities include preparing the financial plan and making recommendations that are consistent with your goals, needs and priorities.

Compensation

We do not charge you directly for any services related to the creation and recommendation of the financial plan. This is a complimentary service provided to our valued Raymond James Ltd. clients. The R&FP team members are compensated with a salary and do not receive commissions or incentive payments through the sale of financial products and/or

securities. If, as a result of our analysis, you choose to implement any of the recommended savings or insurance solutions, your financial advisor will provide full disclosure of all compensation prior to any purchase and subsequent payment.

Assumptions:

In developing a financial plan it will be necessary to make numerous assumptions including, but not limited to, such things as the rate of return of various asset classes, the ultimate course of inflation and future income tax. All assumptions made in developing your financial plan will be both reasonable and realistic and fully disclosed to you as part of the financial plan. The rate of return assumptions used in the building of your plan may be taken from one of a variety of sources including but not limited to: Morningstar Canada, FP Canada, and IQPF.

Review and Monitoring:

The R&FP team may review your financial plan at your request or at the request of your advisor, to ensure the recommendations remain consistent with your goals, needs and priorities. It is acknowledged by you that due to changing personal, financial and economic conditions that it is impossible for us to predict where you will be financially in the future. It is for this reason that any financial forecasts and/or projections provided to you are for illustration purposes only and cannot be guaranteed.

Acknowledgement:

You understand that preparing plans, guidance, and considerations can be a complex time consuming endeavor, requiring accurate information and effective communication to ensure proper advice relating to your goals, needs and priorities.

You further understand that due to the numerous assumptions and complex relationships of the various components making up a financial plan, it is virtually impossible for us to accurately forecast or project your unique financial situation into the future. This limitation includes but is not limited to your retirement plan, insurance needs, and situations relating to possible disabilities or illnesses. Furthermore, forecasting economic variables such as inflation, interest rates, exchange rates, and the rate of return of asset classes as well as your future income tax rates are for illustration purposes only.

Privacy Consent:

Why We Are Requesting This Privacy Consent

When you open or operate an account with Raymond James Ltd. or one of its subsidiaries, you consent to the collection, use, and disclosure of such of your personal information as is required for the operation of that account for the purposes described in your account documentation and our Privacy Policy, and for any other purpose the law permits or requires.

The development and implementation of your comprehensive financial plan (the Financial Plan) will require the collection of additional personal information from both you and your Advisors, as well as from third parties (such as your accountants and lawyers), including the personal information requested in this Personal Financial Questionnaire and Engagement Agreement (the Questionnaire). Additional information will only be collected from third parties if required based on the circumstances and then only with your further specific consent to be provided prior to collection.

Development and implementation of the Financial Plan will also require a broader use and disclosure of your personal information among our financial planning specialists who are employed across the various members of the Raymond James Canada group of companies (the Raymond James Canada Group).

Your Privacy Consent

When you request a Plan and submit the completed Questionnaire, you consent to the Raymond James Canada Group collecting, using, and disclosing your personal information for the purposes of development and implementation of your Financial Plan, the purposes described in our Privacy Policy:

https://www.raymondjames.ca/en_ca/legal/privacy_policy/, and for any other purpose the law permits or requires.

In particular, you consent to the use and disclosure of your personal information within Raymond James Ltd. and among the Raymond James Canada Group for the purposes of developing and implementing your Financial Plan, including but not limited to the following:

- 1. Use and Disclosure Within Raymond James Ltd.** - Your personal information may be shared with and among multiple business areas within Raymond James Ltd., including but not limited to Financial Planning, Legal, Trusts and Estates, Tax Consulting and Tax Preparation;

- 2. Use and Disclosure Within Raymond James Canada Group** - Depending on circumstances, your personal information may also be shared with other members of the Raymond James Canada Group, including but not limited to:
- Raymond James (USA) Ltd. – for the purposes of reviewing and advising on cross-border concerns;
 - Raymond James Trust Companies– for the purposes of reviewing existing trust situations and advising on potential new trust solutions;
 - Raymond James Canada Foundation– for the purposes of reviewing existing donation strategies and assessing and advising on potential new strategies; or
 - Raymond James Financial Planning Ltd. – for the purposes of reviewing existing insurance strategies and assessing and advising on insurance as solutions going forward.

You may refuse consent or withdraw consent

You may refuse or withdraw your consent for Raymond James to use or disclose your personal information. To refuse or withdraw consent, please follow the procedures in the Privacy Policy. Depending on what you refuse or withdraw your consent for, Raymond James may not be able to provide services to you.

You may ask any questions about how the Privacy Policy applies to your personal information, and your options for withdrawing consent and the consequences of doing so, by contacting the Raymond James Privacy Officer at:

Tel: 416 777-6438
Email: privacyofficer@raymondjames.ca
Address: 5300-40 King Street West, Scotia Plaza, P.O. Box 415, Toronto, ON Canada M5H 3Y2

Signed at _____ **on this** _____ **day of** _____, **20**_____

Client: _____ **Co-Client:** _____

Raymond James advisors are not tax or legal advisors and we recommend that clients seek independent advice from a professional advisor on tax-related and legal matters. Securities-related products and services are offered through Raymond James Ltd., member – Canadian Investor Protection Fund. Insurance products and services are offered through Raymond James Financial Planning Ltd., which is not a member – Canadian Investor Protection Fund.