

FACT FIND - GENERAL INFORMATION

Please complete using block capitals and leave blank those sections that do not apply. Thank you.

	Client A	Client B	
Full name (including	Gliefit 71	Cheff B	
Forename(s) and title).			
i orename(s) and title).			
Date of birth			
Bate of birtin			
Country of birth			
Marital status			
Date of marriage (if			
applicable)			
,			
Occupation			
·			
Correspondence address			
Home telephone number			
Work telephone number			
Mobile number			
Confidential e-mail			
FAMILY DETAILS			
Children (if any)	Client A	Client B	
Children's name and date of			
birth			
Grandchildren (if any)	Client A	Client B	
Grandchild's name and age			
	011 . 4	0" . 5	
Parents	Client A	Client B	
Parent's name and date of			
births			
Devente essets and esse			
Parent's assets and any inheritance due			
innentance que			

GENERAL HE	ALTH	Client A		Client B	
Are you in good health?		Please tick the	appropriate box	Please tick the	appropriate box
		Yes	No	Yes	No
If no, please g	ive details				
Please give de disability	etails of any				
APPROXIMAT COMBINED A (Please tick or following)	SSETS				
Up to £100,000	£100,000 to £250,000	£250,000 to £500,000	£500,000 to £750,000	£750,000 to £1,000,000	Over £1,000,000
Are any of these assets located overseas?		Please tick the appropriate box		Please tick the appropriate box	
		Yes	No	Yes	No
Have you ever lived overseas, or do you anticipate doing so in the		Please tick the appropriate box		Please tick the appropriate box	
		Yes	No	Yes	No
future?					