



Statement of Business

Sentry Group is a business advice center equipped to deliver the most efficient and effective information in the areas of Individual and Corporate Consulting with 90 years of combined experience.

Our comprehensive team approach presents clients complete and unbiased solutions to all financial opportunities. We use a holistic overview to interpret and translate business solutions. You will be presented with a complete Implementation Plan.

We guarantee each client and their families (or employees) access to all resources available within our group. Our unique quarterback approach allows for the decision makers to direct our team in the implementation of the most appropriate solutions.

It is our goal that all clients have the opportunity to keep the lion's share of each dollar they earn.

We believe it is paramount in today's financial forum to protect your current capital as well as your future capital.

Douglas J Cerson
Managing Partner

Timothy R Duquette
Managing Partner

Kristi Meyer
Relationship Manager

Vlad Blagovcanin
Sentry Investment Management

Dan Hoffmann
SG IT & Web Presence

Services

- Integrated Financial Consulting
- Business Structure Design
- Capital Protection
- Income Tax Minimization
- Investment Management
- Estate Preservation



Sentry Group Discovery Package

Sentry Group believes in interpreting and translating solutions aimed at improving the lifestyles of our clients, their families and the surrounding region.

Sentry Group and its associated partners are proud members of the Waterloo Region. As our business grows we continually strive to strengthen and increase our involvement in the community.

Sentry Group believes in giving back to the betterment of our community through a multitude of organizations and service clubs in the area.

Sentry Group Community Service

- Greater Kitchener Waterloo Chamber of Commerce
- Sentry Business Networking
- Confederation Club
- Rotary Club Of Waterloo
- Grand River Conservation Foundation
- KW Oktoberfest Inc.
- Crime Stoppers
- KW Dog Walk
- Springer Spaniel Club of Ontario
- BridgeKeepers
- Kissing Bridge Trailway
- Serbian Community Events





Business Process

Step 1:

- Confidentiality Agreement
- Letter of Intent
- Required documentation disclosure
- Sentry Group Discovery Package

Step 2:

- Commitment meeting
- Discovery Discussion

Step 3:

- Proposal Presentation
- Implementation Plan
- Communication

Step 4:

- Discovery – Things Change

Financial Statements Required for Consultation

For every individual please gather the following:

- A copy of your last income tax return
- A copy of your latest Notice of Assessment showing your RRSP contribution limits
- Recent copies of your investment statements
- Recent copies of your insurance policies
- Recent copies of your mortgage documents
- A recent copy of your employer benefits statement/booklet containing full details of your current pension plan, life, disability and health insurance coverage

If you have a Corporation or Business:

- A Copy of the last corporate income tax returns
- A Copy of the most recent financial statement
- A Copy of the Articles of Incorporation
- Recent copy of all booklets outlining any corporate group benefits/group RSPs/group pensions/investments



Privacy Policy

What Personal Information do we collect?

When you purchase a product or service from us or request to receive future information from us, we may collect some or all of the following information:

- Your name, address and phone number
- Email address and facsimile number
- Your occupation
- Information on the size/operation of your business

In general, Sentry Group provides products/services only to other business operations, and therefore collects only a limited amount of personal information. When an individual uses our service, it is understood that Sentry Group will need to collect all of the information necessary to provide the solutions for the individual.

The Security of your Personal Information is Important to Us

Your personal information is used by us only for the purposes identified below and access to your personal information is limited to those Associates of Sentry Group and our business partners who need to have access to it.

How do we use your Personal Information?

Your personal information may be used by us to provide you with information on our products, services, events, or on promotions we may be offering that could be relevant to you, or to improve our service to you.

Sometimes we have to Share your Personal Information with Others

We do not sell your personal information to third parties. We may share some or all of your information with our suppliers & business partners, who may use the information in the same ways as Sentry Group. We may also disclose your personal information where we are required or permitted by law to do so.

How long do we keep your Personal Information?

We retain personal information as long as necessary to fulfill the purpose. If there are legal requirements to the period of time which we must retain your personal information, we comply with those requirements.

What can you do if you want to limit the use to which we put your Personal Information?

Most of the personal information which we collect is necessary for us to communicate and implement, or to offer you available promotions, and we cannot do this without that personal information. If you do not want us to maintain your personal information or if you do not want us to disclose your personal information in a particular way, please contact our Office and we will be pleased to discuss with you how we can limit collection, use or disclosure of your personal information.

You can Request Access to Your Personal Information

You have a right to access the personal information which we have about you and to request that personal information which you believe to be inaccurate to be corrected. If you wish to access your personal information you should contact our office and we will be pleased to assist you.

Questions or Concerns?

If you have any questions or concerns about this Privacy Policy or about the collection, use and disclosure of your personal information by Sentry Group, please contact our office as set out at the beginning of this document and we will try to address your concerns within 5 business days upon receiving your contact.





Confidentiality Agreement

All financial concepts and strategies presented are the property of Sentry Group and cannot be discussed, shared or distributed to other individuals or companies without written permission of Sentry Group.

Any information provided by the undersigned, to Sentry Group for the purpose of implementation of discussed strategies, will be held in the strictest of confidence.

Signed at _____ this _____ day of _____ in the year _____.

Company: _____
(I have the authority to bind the company)

Signature: _____

Name (please print): _____

Position: _____

SG Managing Partner: _____





Letter of Intent

It is my intention to contract Sentry Group to provide strategies and consulting services, directly or through alternative sources, which will lead to a deduction of my personal or company expenses.

The fee(s) for these services will be negotiated on a per hour basis.

An amount of **\$1500.00** (plus GST) must be paid as a flat fee immediately and due before any strategies have been provided.

This fee will be applied to the consulting fees for the services selected. Any additional fees or costs will be negotiated between Sentry Group and the undersigned.

This fee will be partially refunded (minus expenses incurred) if it is mutually agreed between Sentry Group and the undersigned that the services of Sentry Group are not of any value to my company.

Signed at _____ this _____ day of _____ in the year _____.

Company: _____
(I have the authority to bind the company)

Signature: _____

Name (please print): _____

Position: _____

SG Managing Partner: _____

Please make cheque payable to Sentry Group in the amount of \$1575.00.

GST/HST No. 836888149





Spousal Consent

I authorize the use of the information which I have provided to allow my financial evaluation to be prepared. I recognize that the quality and usefulness of my evaluation will depend on this information being complete and accurate. I request that this evaluation be released to and presented by my investment advisor if applicable. In addition, my financial information will not be disclosed to others without my prior written consent, unless such disclosure is required by law.

Signed at _____ this _____ day of _____ in the year _____.

Client/Spouse: _____

Client/Spouse: _____

Notes: _____





Personal Information

Client 1:

BUSINESS PHONE ()	HOME PHONE ()	FAX NUMBER ()	E-MAIL ADDRESS	CELLULAR NUMBER ()
SURNAME MR. MRS. MS MISS DR.		GIVEN NAMES		SOCIAL INSURANCE NO.
ADDRESS			SMOKER <input type="checkbox"/> YES <input type="checkbox"/> NO	CLIENT CITIZENSHIP
CITY				PLACE OF BIRTH
PROVINCE			POSTAL CODE -	MARITAL STATUS
DATE OF BIRTH (DOB) d d / m m / y y y y	DEPENDENTS 1: (Name, SIN #, DOB) SIN # _ _ _ _ _ _ _ DOB d d / m m / y y y y	DEPENDENTS 2: (Name, SIN #, DOB) SIN # _ _ _ _ _ _ _ DOB d d / m m / y y y y	DEPENDENTS 3: (Name, SIN #, DOB) SIN # _ _ _ _ _ _ _ DOB d d / m m / y y y y	
EMPLOYER'S NAME		EMPLOYER'S ADDRESS		
TYPE OF BUSINESS	POSITION		YEARS EMPLOYED	
NAMES OF PUBLIC COMPANIES WHICH CLIENT IS AN OFFICER OR DIRECTOR <input type="checkbox"/> NONE <input type="checkbox"/> _____		NAMES OF PUBLIC COMPANIES WHICH CLIENT OWNS/CONTROLS 10% OR MORE OF VOTING RIGHTS <input type="checkbox"/> NONE <input type="checkbox"/> _____		
DOES ANYONE OTHER THAN THE PERSONS NAMED HAVE AUTHORITY OVER OR ANY FINANCIAL INTEREST IN THE ACCOUNT? <input type="checkbox"/> YES <input type="checkbox"/> NO				
IF YES, PLEASE STATE NAME: _____				

Client 2:

BUSINESS PHONE ()	HOME PHONE ()	FAX NUMBER ()	E-MAIL ADDRESS	CELLULAR NUMBER ()
SURNAME MR. MRS. MS MISS DR.		GIVEN NAMES		SOCIAL INSURANCE NO.
DATE OF BIRTH d d / m m / y y y y			OTHER DEPENDENTS: (Name, SIN #, DOB) SIN # _ _ _ _ _ _ _ DOB d d / m m / y y y y	CLIENT CITIZENSHIP
EMPLOYER'S NAME				PLACE OF BIRTH
EMPLOYER'S ADDRESS				
TYPE OF BUSINESS	POSITION		YEARS EMPLOYED	
NAMES OF PUBLIC COMPANIES WHICH CLIENT IS AN OFFICER OR DIRECTOR <input type="checkbox"/> NONE <input type="checkbox"/> _____		NAMES OF PUBLIC COMPANIES WHICH CLIENT OWNS/CONTROLS 10% OR MORE OF VOTING RIGHTS <input type="checkbox"/> NONE <input type="checkbox"/> _____		
FOR SENTRY GROUP USE ONLY:	CATEGORY _____ TYPE _____	MANAGER _____ SGV _____		



Standard Incomes
Yearly Gross dollar amounts

YEARLY INCOME	EMPLOYMENT/ SELF EMPLOYED	PENSION – FROM PENSION PLAN	RETIREMENT-RRIF	NET RENTAL INCOME	CPP	OAS	OTHER
YOURS							
SPOUSE							
TRUST							
INHERITENCE							
OTHER							

Lifestyle & Wealth Management Assets

Please use Current Market Value for Asset Values

Lifestyle Assets

Wealth Management Assets

Fixed Assets	Purchased Price	Market Value	J T S F*	Investment Assets: Non-RRSP	Market Value		J T S F*
					Client 1	Client 2	
◆ House				◆ GIC's			
◆ Cottage				◆ Bonds			
◆ Other				◆ Mutual Funds			
Miscellaneous				◆ Stocks			
◆ Rental Property				◆ Other			
◆ Business Interest				Investment Assets/RRSP			
◆ Personal Effects				◆ GIC's			
◆ Car 1				◆ Bonds			
◆ Car 2				◆ Mutual Funds			
◆ Boat				◆ Stocks			
◆ Collectibles				◆ Other			
◆ Other				◆ Spousal RRSP's			
				Deposit Assets			
				◆ Bank 1			
				◆ Bank 2			
				◆ Trust			
				Total Wealth Management Assets:			
		\$			\$		

Total Lifestyle Assets + Total Wealth Management Assets:	\$
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***J**- Joint Tenants With the Right of Survivorship ***T**- Tenants in Common ***S**- Sole Ownership ***F**- Financial Reserve

Liabilities

		DETAILS			Joint	Insured
		1	2		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
HOUSE MORTGAGE						
◆ Name of Financial Institution						Notes
◆ Original Principal						
◆ Original start Date						
◆ Outstanding Principal						
◆ Interest Rate						
◆ Amortization						
◆ Payment Amount- Do not include land taxes						
◆ Payment Frequency						
◆ Annual Prepayments						
◆ Date Renewable						
TOTAL:						
PERSONAL LOAN(S) / CREDIT	PLC	Loan 1	Credit Card 1	Credit Card 2	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
◆ Name of Financial Institution						Notes
◆ Purpose of loan						
◆ Outstanding Principal						
◆ Interest Rate						
◆ Date loan is paid for in full						
◆ Payment Amount						
◆ Payment Frequency						
◆ Annual Prepayments						
TOTAL:		\$		\$		
TOTAL LIABILITIES:		\$				

Tax Related Expenses

TAX RELATED EXPENSES	Your Annual Amount	Spouse Annual Amount
◆ Total RRSP Contributions		
◆ Interest Carrying Charges		
◆ Charitable Donations		
◆ Medical/Dental		
◆ Child Care		
◆ Tuition fees		
◆ Support/Maintenance		
◆ Business Expenses		

Life Insurance Policies

Insurance Company	Type	Ownership	Annual Premium	Min/Max Premium	CSV	Death Benefit
Total	\$		<i>Total CSV</i>		\$	

Wills & Estate Planning

1. Do you have a Will: Yes No
2. Have you completed a Power of Attorney form: Yes No
Please state when your Will & Power of Attorney was prepared or reviewed by a qualified professional: Will: d d / m m / y y y y
POA: d d / m m / y y y y
3. Location where Will and Power of Attorney are safely stored: _____
4. Have you reviewed the custodial arrangements of your assets, investments and life insurance policies as to their title, registration (Joint Tenants With Right of Survivorship or Tenants in Common) as well as beneficiary designations where applicable: Yes No
- 5a. When making considerations to transfer your estate to your children and beneficiaries is it acceptable that taxation may reduce the transfer of wealth by as much as 50%: Yes No
- b. Would you prefer to do what is necessary to offset the consuming effect of taxation: Yes No
6. Please indicate if you have any specific Estate objectives i.e. monetary gifts to beneficiaries and charities: _____

Retirement Objectives

1. Your target retirement date is: Year: _____ Age: _____
2. Spouse target retirement date is: Year: _____ Age: _____
3. Do you have a company pension plan: Yes* No
*If yes, please state your start date into the plan and name of plan: _____
4. Do you have a company pension plan- Spouse: Yes* No
*If yes, please state your start date into the plan and name of plan: _____
5. Do you contribute the maximum amount to your RRSP: Yes No
6. Do you contribute the maximum amount to your RRSP- Spouse: Yes No
7. Do you feel that you are on target with your retirement objectives: Yes No
8. Do you plan on using your RRSP as a down payment on a house: Yes No

