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EPISODE
174

Dan Carlin

Show Notes at: <http://www.aesnation.com/174>



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Best of success,



John Bowen
Co-founder, AES Nation

John Bowen: Wow. I have a remarkable entrepreneur that every one of you wants to hear today. As entrepreneurs, we're all about really creating value in the marketplace. We want to create tremendous value in our enlightened self-interest because by doing that we get to do well and take care of the people we love and the causes that we care about. There's one ingredient every single one of us as entrepreneurs need, and that's energy. The power of full engagement so that we can make this difference. To have that energy we have to have our health.

Today, this remarkable entrepreneur, he is pioneering concierge telemedicine. It's after decades of experience in really demanding healthcare environments. Sometimes it feels like almost as much as what we have as entrepreneurs, but he was a US Navy chief medical officer. He was a physician in a refugee camp. He's trained in surgery and emergency medicine. What he is he's a fellow entrepreneur just like us, but helping us have the energy, the ability to have powerful full engagement to make the difference with your clients and all those future clients. I'm John Bowen, and we are at AES nation, all about accelerating entrepreneurial success. Stay tuned, you want to meet Dan Carlin.

I am so excited to have you here on AES nation to share you with the rest of the world. You are out there making a difference. Full disclosure, I'm one of your clients as well and my wife. I see really a confidence level that it's making a difference in our ability to be in full engagement. Thank you on both parts.

Dan Carlin: Oh, you're welcome John.

John: Let's dive in, Daniel. We're going to talk about concierge telemedicine. One of the thing that's going on as entrepreneurs, and this is so important, is we've got to have full energy. The reality is when we have good health, we've got all these dreams and all these aspirations of what we can do. When we don't have good health, we just have one dream, and it's to get healthy. We need all the help with all the changes going on in healthcare here in the states and around the world.

There's such opportunity on a longevity front that we can be performing as entrepreneurs for an awful long time if we really enjoy what we're doing. We've got to stay healthy. Dan, you're pioneering this. What I'd like to do this before we dive into what is concierge medicine, how is it going to help us to fully engage, what I'd love to hear from you is how you got involved in this. This is not what most, probably when you went to medical school, you didn't think of signing up for this I'm thinking.

Dan: Boy, is that true. It would be an understatement, John, to say I had an unusual path as a young doctor. I got a U.S. Navy scholarship for med school. The Navy has this habit of after your internship. One year in training, they send you out to the fleet. In my case they sent me

to USS Mississippi, a guided missile nuclear cruiser. For 2 years, I took care of 600 guys. Our primary role was to find unidentified lock on Russian submarines. This was the height of the Cold War. Boy, I look back on it now and say, I was so lucky. Most doctors, you pretty much proceed from med school to internship to residency to fellowship, it's a very prescribed path.

In my case, the path just stopped one day and then the next day I was on the deck of a big gray warship. I lived on that ship for 2 years. It was an extraordinary experience. It gave me a lot of time to think about what I was doing with my life as a doctor. Ultimately I guess I expressed a little bit of personal choice or freedom. I decided to take a sabbatical year. I was a refugee camp physician in Afghanistan during the war with the Russians in the late 80s. In fact, Charlie Wilson's missiles came in the summer I lived on the border there. They had an obvious impact, you can imagine.

These were formative experiences. I'm out in the middle of nowhere and I'm doing the best I can to keep people alive. People were still dying of my ignorance, meaning I was a generally trained physician. From time to time I needed a much higher level of expertise. Where I lived, you couldn't exactly call for it. There were no phone lines out in the Khyber Pass. This stuck in the back of my mind. I eventually came home to the US. I went to Columbia and did emergency medicine, because frankly that's where I felt I fit in that point in life. I was at that for about 5 years, and then I got it into my head start a medical practice for ships and faraway places.

That was the company that became World Clinic. It was just a very interesting journey. With no business experience at all, I wrote a business plan. In fact, I wrote 17 drafts of this business plan in 1998. I got it funded, we opened the doors, we hit our first sales milestone. The tech crash happened in April of 2000 and we were left for dead. By July we were left for dead. That's when my education really started.

John: One of the things that is so important is most of us get into business because we're good technicians. We're good at something. I came in as a financial advisor. You came in as a physician. Then in some cases as we have success and we're doing this and we want to scale up, we're the accidental CEO. Sometimes the best thing that can happen is we can start during one of this crisis. It's ugly, it creates all kinds of stories. It really allows us to build a great foundation and to get clarity, because we have no choice. We have limited resources. We have no access to capital hardly at all. Now we're going ahead, how can we move ahead.

One of the things, Dan, that I'm so impressed with what you've accomplished at World Clinic and with CEO founder and pioneering this concierge telemedicine. As the whole healthcare, has switched here in the states with Obamacare, I'm going to be States specific, I know. I apologize for those people listening outside of the US. All the areas are having healthcare

challenges. Having access to high-quality healthcare for entrepreneurs for successful business owners. This is something that's scary. You're pioneering one of the solutions. Let's describe a little bit what concierge medicine is.

Dan: Sure. In my case, to your point, John, it's all about access. When I originally envisioned World Clinic I thought the healthcare systems of the United States would understand immediately how valuable telemedicine or connective care was going to be, that there would be a whole new layer of care to prevent illness, to provide quick access. There was a terrible truth which is they couldn't have cared less. Hospitals and healthcare systems are driven by third-party reimbursement codes and insurance companies. They're not terribly interested in preventing disasters because the billing and revenue model is built around treating disasters.

I flipped that model on its head and said, "That's not good medicine, guys." Look at all the other industries, banking, retail sales, even buying a car. They've all adopted connecting technologies to create easier process. That was my vision. Here's what it looks like nowadays. I run a virtual global emergency room. We put an app on all our member's phones. It ensures that they're going to speak to an emergency physician in about 35 seconds. The physician on duty has all their medical records in front of them. Most of our patients have a small emergency prescription medical kit.

The idea was if you've got the doctor and you've got this little kit with life-saving medicines and conventional antibiotics, you can immediately treat the issue, slow down if it's a crisis. Then once you've really got it defined and maybe you've developed delivered some early treatment, then you can escalate it if you need be. There was for me a big challenge of consolidating all the medical resources in the world into a database. Not just the ones who said they were good but the ones who were credentialed. This became World Clinic.

Like I said, we have no market among conventional citizens. The high net worth crowd, the affluent folks, global travellers, road warriors, corporate road warriors, they understood instantly what I was offering which was a medical solution to this highly mobile person whose life and time were extraordinarily valuable. Not just to themselves but to their families and to these huge empires, corporations that they were running. They were the early adopters.

John: I'm so glad you're blazing this trail because when I look at this, I'm making it a little bit personal. I had a great general practitioner who was an internist cardiologist at Stanford. A very successful individual. He ended up about the same age I am. I'm 61. He went ahead and said, "You know, John, I'm tired of dealing with all this stuff. Just continue teaching." He was a managing partner, one of the major clinics there in Silicon Valley. I would go to him for my executive physical. It was like, whoa, what do I do? Just sorting through the doctors, both my wife and I have had the privilege of being relatively good health, no major issues.

Then all of a sudden, we need new doctors. Finding them and then building those relationships, bringing areas together, my wife's a little older than I am. She's just qualified for Medicare. Suddenly there's some doctors that don't want to take that and getting access. Again, one of the things that I really appreciate about this is how you're integrated. It's not a standalone, it's integrated in the healthcare, the whole delivery model. You've got to deal with the challenges of what it is today. Maybe you can explain, because I want to come back to how you've helped me. I'm not trying to sell World Clinic or anything like that. What I want to do is I want people to be aware of the alternatives, particularly business owners who are running really hard, we have limited time, we're very profitable, and we have options, and these options are significant.

Dan: Right, sure. For most people, the clear majority of us have a doctor assigned through our insurance plan. That can be hit or miss. Then there's a subset of citizens who have the means to enroll in a concierge physician practice. That could be a great solution if you're not moving around a lot and your life is pretty much 9 to 5 and your lifestyle will accommodate conventional business hours. For the folks who take care of, they are almost 2 standard deviations away from what we would consider normalcy in terms of lifestyle. They're 24 hour a day people, they're almost in constant motion. In some cases, they're extremely time pressured.

What they really want is someone to say how serious is this problem, okay, if it's not serious can you facilitate the journey. That's where you and I have been obviously. Our system has become so complex and so obstinate and so difficult to navigate. If you asked me what is 50% of our value, I'd say, sure, it's a physician and a care team that's going to deliver medicine. Now as healthcare has gotten more complex, it's our ability to navigate the system, which for the record as an emergency physician you're always navigating the system. You're always trying to figure out the call schedules and who knows who and trying to make things happen fast.

We had a built-in skill set. Now we're building the informatics base behind it. I know your insurance, I know who takes your insurance, and I match that up against, who is the best physician for breast cancer? Who is the best reconstructive surgeon for post radiation mastectomy or prostate cancer or heart disease? It's a lot of matching up what you've got in terms of insurance, what you want in terms of quality of the doctors. Then finally making the connection happen in a timely fashion. It's a hell of a lot of work. It's getting easier.

John: You make it look easy though, Dan, our conversations. In fact, let me go back to our example, a personal one. I ended up going with a local concierge group. I had a great general practitioner that's a specialist and what we were looking for. What was interesting is my wife had some knee challenges recently. He made a recommendation to an orthopedic surgeon considered a very good one in the area. She met and prescribed some invasive surgery,

minor. A little scary, as all surgery should be. Having the ability to have someone, whatever concierge group, and this group was really just focused on the local.

The nice thing is you're buying access. I've got my general practitioner's cell phone, I can pretty much meet with him in a day and all that. I wanted a higher-level service for my wife to just really make sure. Dan, that's where your organization and I'm going to say organizations like yours really come in. I was concerned because my wife was on Medicare that some of the doctors that are going to be talented aren't going to necessarily take her. How do we get a top-tier second opinion? I'm a pretty well-connected guy but not in healthcare I found out.

I think this is something that's being repeated all the time, the power of second opinions. We're big believers on the financial side. Maybe share a little of the experience of helping others, where you're making a difference, nobody gets out of life unscarred. Stuff happens and sometimes it happens when you're traveling, which complicates it tremendously. Sometimes it's even local. How do you navigate that? I can Google search and find doctors and everything else. We were blown away with the quality that you put us in front of.

Dan: Okay, fair enough. You had a problem where you thought you had a solution but you actually had a bigger problem which is, is the solution my for my wife the right solution? You should be concerned because there's a lot of conflict of interest in medicine now. The hospital is putting a lot of pressure on surgeons to do surgery because it generates revenue for the hospital. Sometimes the surgery is appropriate, sometimes it's not. The problem is you need to know is it appropriate and is it right, is it real?

In my world in World Clinic, we're completely outside of the conventional hospital medical center world. We're completely objective. Our methodology is very simple. When we have a specific problem, we start working the connections we have across the United States to find the right physician. We do this navigation process on a physician to physician basis. For example, we recently had a case of a breast reconstruction. I had to speak to an oncologist at Yale. The oncologist was wonderful. I said, "The next step now, we're done with the cancer journey. We're now in the reconstruction journey. Who's there?" They named 3 or 4 physicians. I said, "No, I'm not interested in the list. Who would this have been for your wife, your sister, your mom?" You know, John, that's a very short list.

John: I love that because that's what it felt like with the woman that you recommended for my wife. This is something as we're having more success as entrepreneurs and the importance of our energy, making these kinds of investments, we do so much due diligence on our strategic partners, our vendors, and all that. We leave healthcare, I know I found myself doing this leaving it to our insurance companies. We're on an assembly line. Sometimes it works, sometimes it doesn't. Boy, the value of asking that question, physician to physician without the conflict of interest, who would you take your spouse to is so valuable.

Dan: No, I totally agree. The sad truth, John, is no one is really on your side when you start a healthcare journey, particularly a complex one. There's a lot of other agendas in play. I think that's where we have or add a lot of value. We quality check things. That if we find someone terrific, we do send them to a significant number of patients, particularly in the big capital cities in the United States. Equally, if we have a patient who's had a bad experience, model is so tight, follow-up is critical.

If we find a physician that's maybe not a good communicator or is abrupt with the patient or doesn't make time to really tell our patient what just happened, that guy, it's usually a guy, not always. That physician gets struck from our list and there's no more business coming their way. We have a little leverage with these folks because we are sending them a unique clientele obviously. They're typically a clientele that's expecting quality, great customer service, great communication. When they don't get it, it reflects negatively on us, so we make sure it doesn't happen again.

John: I find it invaluable. That's one of the reasons why I wanted to share you with our audience, Dan. Health to me, a good friend of mine is Peter Diamandis. He has a program on human longevity company. He's working very hard with some of the most senior genetic research people to help us all live a high quality of life to 100. I know every one of us is cheering him and others like him on. This is a disease that we all have is aging. I want to have a long productive life. We're all becoming more conscious of this, but didn't know this was available.

Tell me how you're using technology. This is one of the challenges in healthcare right now is technology. It's mandated. It's not necessarily, big government solving technology challenges is probably not the right solution. I think all entrepreneurs, we can all agree on that. How are you using technology to ensure better outcome for your client's last patients?

Dan: Sure. A 3-part solution. Part 1 is I ended up building a very, very complex software platform that connects all the resources in the healthcare system from obviously our virtual emergency room all the way out to the Quest lab store, what it's hours are, can I make an appointment for my patient to get blood work done, e-prescribing, interfacing with other hospital systems. It's a ton of stuff. That platform enables a lot of this to happen quickly. It's part 1.

Part 2 is that we're now getting involved in the world of monitors where we have such a high retention rate of our patients. I've been at this for 16 years. My patients, like me, have grown old. I started this when I was 39. I'm 57 now. They're acquiring the diseases of aging like hypertension, adult onset diabetes, atrial fibrillation. Now there's this very rapidly emerging market of devices that talk to smart phones. They've captured the data point, the blood

pressure, the cardiac rhythm, the blood sugar, whatever. They transmit it to guys like me. I integrate it into our platform.

We write management rules so that if you send me a blood pressure reading that's say critically high, you get a phone call within about 35 seconds. On the other hand, if it's a good value or I'm just monitoring a condition, I've logged the fact that you're inside compliance and you're on track. When you're on track, honestly John, you just live a hell of a lot longer. Your blood sugar's well-controlled, you're going to get a decade of extra life. That's the second part.

Then the third part is keeping track of the stuff that's emerging. One of the blessings of my early adopters with these high net worth individuals, these are folks who are constantly tracking the latest and greatest in everything. They were the folks that turned the switch on for us for example to look at genomic science very, very seriously. It's still immature but we now are at a point where we've genomically mapped a handful of our patients because genetically they were at high risk for certain disease states.

In one case we found a patient who had a very, very significant marker that required now a calendared surveillance of the pancreas, their prostate, and their gallbladder. I don't want to get into real details, but again, I'm going to add 10 years into this person's life because this cancer risk is never going to sneak up on them. We're always going to be six months ahead of it. It's a little bit infrastructure, it's a little bit device in the patient, and then it's a little bit look at their genome and keep an eye on the cutting-edge therapies and technologies. When they ask you, "Hey, seriously, is this the best therapy for me right now?" You want to say in good faith either yes or no. You want to make sure it's based in truth and you really understand what's going on.

I write the health column for Worth magazine and I have a very, I'm trying to think of the nice word for it. My editor is dictator in the sense he always wants to know what's on the horizon. It's a blessing for our patients and my knowledge base. It's a curse because boy, you got to do a lot of research about what's on the horizon. The net effect is we were tipped off to the genomic science long before the markets were, stem cells, we're starting to use a lot of stem cells in certain therapies now. It's a long answer.

John: It's an important one, Dan. What I'm thinking about the blessing of 10 years of additional, not 10 years in a life in a nursing home, but 10 years of a high-quality life. For entrepreneurs and particularly for those of us who really love what we're doing, we're in business not just for more business. We're in business to support the quality of life that we want for those that we love and the causes we care about. This is going to make such a huge difference. I don't think people realize that.

I want to go a little different tack and go into the business part of it here. I want to look at the key drivers of success and talk about it. I was looking at one of our mutual friends, Russ Alan Prince interviewed you for a Forbes article. Russ wrote down 4 things that your type of business must have. This was coming from you. I'd like you to touch on each of these. A client-centered mindset, the efficient operation, the appropriate financing, and targeted business development.

I think we've done the client mindset. We've already covered that. We haven't, I hope I have. It's that whole client pathing that you're around to really when life intrudes, but also when life doesn't intrude. You're there making sure things are moving smoothly. We've talked about operations a bit. I'm wondering about the capital intensity and the targeted business development, who you're right for, if we could touch on those two.

Dan: Sure, sure. We'll just talk about operations for a second. The promise is in my world, because we're all emergency physicians, is to solve any problem 24 hours a day. Sometimes it's a minor problem with food poisoning and you're in Bali open up your little World Clinic kit and I treat you with the stuff that makes you stop vomiting.

John: I wish I had had, I wasn't a member when I was in Puerto Rico at a 6-star hotel and got food poisoning at night and had to deliver an 8 AM speech the next morning. This is life happens and didn't know. I do carry my little kit around now. I will be making that call of that happens again, Dan.

Dan: We want you to. Operationally, that's our promise. A little thing, a big thing, the best quality in care. As I mentioned before, we built this extraordinary infrastructure that's really helping a lot. Let me talk a little, can I jump to the revenue model or the business of the business?

John: Yeah, let's do that.

Dan: All right, it's been an interesting journey for me. As I mentioned, the early adopters were extremely high net worth families. Our original market was the family office space. That remains pretty much one of our strongest markets. About 3 or 4 years ago, very interesting. One of our families hired my company down into their portfolio companies to partner with the security firms that were protecting their executives. The thinking was very straightforward. They literally came to me and said, "Dan, look, I got 22 people scattered around the world, spending a fortune on security to protect them. I want you to take over their healthcare." That was a transformative moment for us because that is a very large market. It's a very scalable market. There's a finite number of identified distribution channel type partners in security, personal security for instance.

That was a moment where I realized, hey guys, we built the first working model with a very demanding clientele of high net worth families. Now we're in a market where it's possible to really scale, to move from the customized solution to an excellent one, generic is too weak a word but a really good personal solution that has enclosures around it, meaning I'm never going to have to travel to Jamaica to train the island managers in your personal private residence, but rather my company will be on call to your corporate security office or the CFO to deal with a situation where there's been a medical crisis with the executive.

That's been an interesting transition because now we used to be just on the on-call doctor guys. Now we've I guess metamorphose sized into a pretty powerful corporate risk management tool. The risk is the unanticipated loss of an executive. Our job is to make sure that never happens. We're having a lot of fun with that because it's a big market.

John: It's a huge opportunity. I'm hoping you don't lose any of our family executives as well along the way. This is one where there's so alignment because we spend all this money certainly on, I used to be in sports and entertainment. We had a huge security budget. Quite honestly we didn't do this. The concierge or healthcare was not as big. This is back in the late 90s, early 2000. What a missed opportunity. I know this would have been one of the biggest areas. That's why I wanted to have you on, Dan. Let me go to a segment on resources. I'm going to pull up your website. I'd like you to comment on the business and how they can really explore whether they are right for you and you're right for them.

Dan: Sure, sure. Thank you, that's a great question. What are the criteria for being a candidate patient or candidate member? One is the ultimate criteria is the value of your time because we make things happen so quickly. If you're a time pressured individual whose time is worth a fortune, we're a good fit for you, part 1. Part 2 is if you're in a situation where you want to aggressively manage your health risk, whatever age you are, could be 35, could be 95. You want someone to step in and say, "Look, I don't ever want to die." I can't promise that. I can sure as heck prevent the usual culprits from taking your life too early. That's the other criteria.

Then I would say to any family advisor or security officer, even booking agent, if this person, if their sickness represents a catastrophic economic loss, you should think about us. For example, we take care of a bunch of rock and rollers. Every year they're going on tour and we take care of the band, in some cases the extended family of the band. Believe me, that's an interesting melange of people. We get the tour schedule and they've got our kits, and in some cases the tour manager has a big box. We're always one city ahead of them. This morning they're in Calgary packing up. Later tonight they may be down in Edmonton for the next show. We're obviously always on call but we've already preloaded the docs in Edmonton.

We have an interesting of a couple celebrity type movie star people. Again, when they get sick or they have a medical condition, they need confidentiality, they need speed, and they need the best possible outcome. Their physical presence is their income. That's how they make their living. Those are the 3 criteria. As it breaks down, like I said, high net worth families, celebrities and performers, and now this whole new world of corporate risk management for the executive teams and the road warriors. In some cases, we're on call to the whole company because the company feels very strongly, they have an egalitarian ethos. Every employee may not have one of our kits. They may not travel to Timbuktu or Calgary. Nevertheless, the corporation said, look, we got a medical problem. We want World Clinic to solve it to its optimal outcome.

John: Yeah, it's great, Dan. Therefore, I want to share you with my fellow entrepreneurs because it is something that is so important. I want to encourage everybody if you're driving and listening to this or if you're watching it, you can always go to bug me. I have AESnation.com. We'll have the transcript, the show notes. I want to encourage, we're so many entrepreneurs, I know on health for example if there was a pill that you could give me, Dan, that I wouldn't have to exercise, I'd be the first guy to take it. I love going out and doing things but I have absolutely no desire to exercise. I hire a trainer. The trainer comes in the morning 2 to 3 times a week when I'm at home. I do exercise. He keeps the routine and so on.

We have all these different people, most of us hire for our life to help. If you're not doing it and you're like me, you should. You want to create this structure. One of the most important things is health. I just encourage everyone to really take some time and step back and use the criteria that Dan was talking about and assess your own family situation, your business. The impact, as we're all making more and more money as we have more success delivering more value to the marketplace, we have a responsibility not only to the marketplace, not only to our teammates, but to all the stakeholders including in our families keep ourselves healthy. Boy, what a great thing to do. Dan, thank you again. I want to encourage everybody to take action on this, to have a plan that really is going to keep them healthy and fully engaged in making a difference in the world.

Dan: Right, thank you John. John, I couldn't agree more with you. The most common mistake I see with entrepreneurs is they pour everything into the business. They have their liquidity exit event and they're ready to party, ready to go, but they've neglected their health. Now health is inevitable and it sneaks up on them. You want to make those golden years or post exit years golden, take care of your health now. Don't prioritize it to the bottom of the list.

John: The example I always bring up, and I see this repeatedly as we go out racing and we trade our youth for money. Then when we're old, we're buying our youth back. Let's do it all along the way. Let's go out and make a difference. I wish you all the best of success. Your

future clients and all these stakeholders, particularly your family, they're counting on you. Don't let them down. Wish you the best.

Dan: Exceptional, remarkable breakthroughs. AESnation.com.

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