

# Retirement Plan Analysis

**COMPLETE THIS FORM AND BRING IT WITH YOU TO YOUR FIRST APPOINTMENT**

1. Please Print and if you are not sure about a question, please leave it blank.
2. Please use approximate values – round to the nearest thousand.
3. Please return this form with last year’s tax return.

**Client Information:**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

NickName: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_ x \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

**Spouse Information:**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Nickname: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

**Amounts in Banks, Savings & Loans, and Credit Unions (NON-IRA)**

<u>Name of Bank</u>	<u>Type of Account</u>	<u>Maturity Date</u>	<u>Interest Rate</u>	<u>Approximate Balance</u>

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## IRA accounts and Other Retirement Accounts

(Please bring in most recent statement/report)

<u>Location of Account</u> (Bank, Broker, Employer)	<u>Type of Account</u> (401(k), 403(b), IRA, etc)	<u>Approximate Market Value</u>	<u>Account Holder</u>

When do you plan to retire? \_\_\_\_\_

## Stock and Bond Certificates

(Please bring in most recent statement/report)

<u>Name of Stock/Bond</u>	<u>Number of Shares</u>	<u>Approximate Market Value</u>	<u>Account Holder</u>

## Mutual Fund and/or Brokerage Accounts

(Please bring in most recent statement/report)

<u>Name of Brokerage Firm or Mutual Fund</u>	<u>Approximate Market Value</u>	<u>Account Holder</u>

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## Real Estate and Residence

<u>Property Address</u>	<u>Original Cost</u>	<u>Approximate Market Value</u>	<u>Debt Owed</u>

## Family Business / Partnerships

<u>Name of Partnership</u>	<u>Type of Investment</u>	<u>Amount Invested</u>	<u>Market Value</u>

## Long Term Care

<u>Insured</u>	<u>Monthly Benefit/ Premium Amount</u>

## Life Insurance

(Please bring in policies and latest statements)

<u>Name of Company</u>	<u>Insured</u>	<u>Type of Insurance</u>	<u>Cash Value</u>	<u>Death Benefit</u>

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## Pensions or Other Streams of Income

(Including: social security, current employment, rentals, etc.)

<u>Source</u>	<u>Account Holder</u>	<u>Monthly Amount</u>	<u>Survivorship %</u>

(Please bring in policies and latest statements)

## Children

<u>Name</u>	<u>Sex</u>	<u>Date of Birth</u>	<u>Filed as Dependant</u>	<u>Funds Needed for College</u>
			Y / N	
			Y / N	
			Y / N	

## Other Assets

Approximate value of Person Property (Household goods, Jewelry, Cars, Etc): \$ \_\_\_\_\_

Family Business (Provide name, value, and how held. Is it a Corporation?):  
\_\_\_\_\_  
\_\_\_\_\_

Other Assets:  
\_\_\_\_\_  
\_\_\_\_\_

What are your Primary Financial Concerns?  
\_\_\_\_\_  
\_\_\_\_\_

Approximate Monthly Expenses?  
\_\_\_\_\_

## Appointment Checklist:

(Make sure you have the following items for your financial evaluation)

- Annuity Statements     Brokerage Statements     Mutual Fund Statements     Social Security Statement  
 Retirement Account Statements     Life Insurance Policies and Statements     Last Year's Tax Return

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