

Retirement and Estate Planning Organizer

Provided by:



For the Family of: _____

Date: _____

Securities offered through LPL Financial, member FINRA/SIPC.

Retirement and Estate Planning Organizer

Client Name _____

Spouse's Name _____

Date of Birth _____

Date of Birth _____

Soc Security No. _____

Soc Security No. _____

Employer _____

Employer _____

Occupation _____

Occupation _____

Current Annual Income _____

Current Annual Income _____

Anticipated Retirement Age _____

Anticipated Retirement Age _____

Annual Retirement
Income Goal _____

Tax Bracket _____

Stated in current \$
After-tax

Home Address _____

Business Phone _____

Home Phone _____

Cell Phone _____

E-mail _____

@_____ .com

Names of Children

Date of Birth

Dependent

Married

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Contributions to Investments / Income Streams

Current Annual Contributions to Qualified Retirement Plan (401k, 403b, Profit Sharing):

Client _____ Spouse _____

Current Annual Contributions to IRA's, SEP IRA's or Roth IRA's:

Client _____ Spouse _____

Do you have a Defined Benefit Pension? Y N

If yes, what is the anticipated annual benefit amount?

Client _____ Spouse _____

Payment begin _____ Payment begin _____

Employer-sponsored Non-Qualified Deferred Compensation Plan? Y N

If yes, what is the anticipated annual benefit?

Client _____ Spouse _____

Payment begin _____ Payment begin _____

Are you eligible for Social Security? Client Y N Spouse Y N

If yes, what is the benefit: at 62 _____

at FRA _____

at 70 _____

If no, what is the annual retirement benefit from other government-sponsored plan?

Client _____ Spouse _____

Outside Income (other pensions, rental property, farm rent, consulting, etc.)

Client _____ Spouse _____

Estate Planning Questions

Do you have a will? Y N Year last updated _____

Do you have a living trust? Y N Year established _____

Do you have long-term care insurance? Y N Year purchased _____

Do you make annual gifts to heirs? Y N Amount _____

Do you have life insurance? Y N Cash Value _____ Death Benefit _____

Net Worth Statement

Assets:

Client

Spouse

Joint

Checking/Savings			
CD's			
Stocks			
Stock Options			
Taxable Bonds			
Tax-Exempt Bond			
Equity Mutual Fund			
Fixed Mutual Fund			
Annuities			
Limited Partner.			
Personal Residence			
Other Real Estate			
Business Interest			
Cash Val Life Insur.			
401k, 403b, etc			
Traditional IRA's			
Roth IRA's			
Other Assets			
Total Assets			

Liabilities:

Mortgage	Balance _____	Terms _____
Business Loan	Balance _____	Terms _____
Line of Credit	Balance _____ Limit _____	Terms _____
Student Loans	Balance _____	Terms _____

