

THE WORRYFREE RETIREMENT®



FAMILY INFORMATION

Today's Date _____

Name _____ Go By _____ Date of Birth _____

Spouse _____ Go By _____ Date of Birth _____

Mailing Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Your Cell _____ Spouse Cell _____

Other Phone _____ Best Email _____

Marital Status _____ Number of Children _____ Number of Grandchildren _____

Child's Full Name _____ Birthdate _____ Address _____

2. _____

3. _____

4. _____

5. _____

EMPLOYMENT/INCOME INFORMATION

You

Occupation _____

Retire Date _____ Employer _____

Are you employed? Yes No

Annual Wages _____

Monthly Pension _____

Social Security _____

Interest/Dividends _____

Other _____

Other _____

Spouse

Occupation _____

Retire Date _____ Employer _____

Are you employed? Yes No

Annual Wages _____

Monthly Pension _____

Social Security _____

Interest/Dividends _____

Other _____

Other _____

DOCUMENTS NEEDED FOR APPOINTMENT

- | | |
|---|--|
| <input type="checkbox"/> Social Security Estimate Statement | <input type="checkbox"/> Annuity Contracts |
| <input type="checkbox"/> Current Insurance Policies (life, long-term care) | <input type="checkbox"/> Most Recent Tax Return |
| <input type="checkbox"/> Investment Statements (brokerage, IRA, 401(k), Roth) | <input type="checkbox"/> Most Recent Paycheck Stub |
| <input type="checkbox"/> Bank Statements (CDs, Money Market, Savings) | <input type="checkbox"/> Pension Statement/Information |
| Other _____ | Other _____ |

FINANCIAL INFORMATION

Total Assets	Current Value	Amount of Debt	Monthly Payment	Interest Rate
Residence	_____	_____	_____	_____ %
Other Real Estate	_____	_____	_____	_____ %
Retirement Accounts:				
 Yourself	_____	_____	_____	_____ %
 Spouse	_____	_____	_____	_____ %
Stock Brokerage Accounts (non IRA)	_____	_____	_____	_____ %
 Checking	_____	_____	_____	_____ %
 Savings/Money Markets	_____	_____	_____	_____ %
 CDs	_____	_____	_____	_____ %
Life Insurance Cash Value:				
 Yourself	_____	_____	_____	_____ %
 Spouse	_____	_____	_____	_____ %
Life Insurance Death Benefit:				
 Yourself	_____	_____	_____	_____ %
 Spouse	_____	_____	_____	_____ %
Annuities (non IRA or retirement accts)	_____	_____	_____	_____ %
Other	_____	_____	_____	_____ %
Other	_____	_____	_____	_____ %

