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Jim Wycoff: Investing for Retirement-Income for Your Confidence
Retirement isn't quitting. It's a new beginning.

Retirement Freedom Analysis Questionnaire

Name: _____ Date: ____/____/____

Please relax when you fill out this questionnaire. This is not a test! You can't "flunk" the paperwork. This information simply helps us better understand your investment and financial picture. Most of the information we need is in comprehensive "formal" statements that you can provide instead of filling in data. Here's what we need.

- **Federal income tax return (include dividend and capital gains schedules)**
- **Investment statements (every account, by firm)**
- **Annuity / Insurance statements (life, disability, long term care)**
- **Company Pension Plan Payout Options**
- **Company Retirement Plans (include list of investment choices)**
- **Severance Package Details**
- **Deferred Compensation / Stock Option Statements**
- **Bank account statements (yield & maturity information)**
- **Social Security Benefit Summary Statement (s)**
- **Other statements/ documents that will complete your financial picture**

*This analysis could cost you \$1000 or more from your CPA or any other financial planner.

*** STRICTLY CONFIDENTIAL ***

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PERSONAL & FAMILY INFORMATION

About You

Name _____ US Citizen? YES / NO

Address _____

Email Address _____

Telephone: Home (____) _____ Bus. / Cell (____) _____

Date of Birth _____ Health Concerns _____

Employer _____ Occupation _____ How long _____

About Your Spouse

Name _____ US Citizen? YES / NO

Date of Birth _____ Health Concerns _____

Employer _____ Business/Cell (____) _____

Occupation _____ How long _____

About Your Children/Heirs

Name	Relationship	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Potential Inheritances (Source and Estimated Amount of Inheritance)

To Whom (expected date)	From Whom	Estimated Amount
_____	_____	\$ _____
_____	_____	\$ _____

Other Circumstances That Will Affect Financial Planning

FINANCIAL GOALS & OBJECTIVES

My main financial concern is _____

My target retirement date _____ Spouse's target retirement date _____

Annual additions to Company Retirement plan(s) each year YOU \$ _____ SPOUSE \$ _____

Employer Matching Contributions to Retirement plan (s) YOU \$ _____ SPOUSE \$ _____

How much more can you add? YOU \$ _____ SPOUSE \$ _____

How much are you adding to your traditional IRA(s) each year? YOU \$ _____ SPOUSE \$ _____

How much are you adding to your Roth IRA(s) each year? YOU \$ _____ SPOUSE \$ _____

How much are you adding to other savings each year? YOU \$ _____ SPOUSE \$ _____

What "after-tax" spending income would you like to have in today's dollars? _____

Other Financial goals and comments: (goal, cost, time frame) _____

Within the 1.5-hour time constraints of our first meeting, please identify your priority needs so we are sure to address them. For the goals that apply to you, indicate the order of importance by assigning number "1" to your most important goal, number "2" to the next important goal, etc. Your comments are helpful too.

Order of Importance Goal Objective

- _____ Choosing an investment advisory team
- _____ IRA rollover of lump sum distributions from current/prev. employer plans
- _____ Current income needs from investments
- _____ Future income needs from investments & pensions, social security
- _____ Income withdrawals from IRA for under age 59.5 (72t systematic withdrawal)
- _____ Choosing Pension Payout options (includes lump sum payout vs. pension)
- _____ Traditional IRA & Roth IRA, Roth IRA Conversion from traditional IRA
- _____ Self Employed Retirement Plan Alternatives or Review
- _____ Portfolio X-ray and review for possible reallocation of investments
- _____ Bond Portfolio Review
- _____ Income tax-efficient investing
- _____ Employee Stock Option exercise strategies
- _____ Disability income disruption strategies
- _____ Long Term Care needs (assisted living, nursing home)
- _____ Life Insurance needs review, and policy check-up
- _____ Estate Planning transition strategies
- _____ Other

Comments: _____

ESTATE INFORMATION

Attorney's Name _____ Accountant's Name _____

Do you have a Will? Yes / No Describe Provisions: (last revised?) _____

Do you have a Trust? Yes / No Describe Provisions: (last revised?) _____

NET WORTH (other than Investments & Savings)

ASSETS:

Real Estate: Resience \$ _____ Other \$ _____

Business Interests (Approx. Net Value) \$ _____

Other Assets (Specify): _____

LIABILITIES

Consumer Debt (Charge Accounts, Credit Cards, etc) _____

Loans Outstanding: (Balance, % rate, Term Remaining, Monthly payment)

Home Mortgage _____

Home Equity Loans _____

Other Real Estate _____

Other Loans, Liabilities _____

Thank you for taking the time to give us the information we need to help you! No Cost or Obligation is involved for our initial meeting, even though our Competitors often charge \$1,000 or more for similar reviews.

Please e-mail, fax, or mail information [see 1st page for our address information]