GOAL PLANNING & MONITORING GOALS AND RESOURCES

PERSONAL INFORMATION

	Client (C		Co-Client (Co)		
Name					
Date of Birth	1	1	1	1	
	Employed	Retired	Employed	Retired	
Employment Status	Business Owner	Homemaker	Business Owner	Homemaker	
	Presently Not Workin	g	Presently Not Working		
Employment Income	\$		\$		
Other Income (non-investment only)	\$		\$		
Desired retirement age					
How willing are you to retire later if it may	Not at All	Somewhat	Not at All	Somewhat	
help you achieve your goals?	Part-time work	Very	Part-time work	Very	
Based on your health and family history, how long do you expect to live?	Age:	Use Estimate	Age:	Use Estimate	

The amount re	_				g., housing, utilities, food, transportation, property taxes, etc.)
A pproximate	ly how much	will y	ou need t	o meet y	our essential living expenses in retirement?
	\$	/	month	year	I'm not sure. Use an estimate for now.
If one spouse	retires befor	e the	other, wil	l withdra	awals from savings be needed to meet expenses?
Y	es \$	/	month	year	No
Will you have	emplover-sp	onso	ed health	ncare in r	retirement? Yes No

DESIRED SPENDING GOALS

Think about some of the ideal ways you would like to spend your money either prior to or during retirement and list them below. Examples might be travel, gifting, luxury items, home remodel, new car, etc.

	Importance	When	Will	Goal	Start		
Name & Description	Low High	Start	At		ement	Dollar	How
of Goal	1 ↔ 10	Year	С	Co	Both	Amount	Often
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	

SOCIAL SECURITY RETIREMENT BENEFITS

To obtain an estimate of your Social Security benefits go to ssa.gov/myaccount/

	Cli	ent (C)	Co-Client (Co)			
Are you eligible?	Yes No	Receiving Now	Yes No	Receiving Now		
Benefit Amount (PIA)	\$	Use an Estimate	\$	Use an Estimate		
When will you start collecting?	When I Retire	At Age	When I Retire	At Age		

RETIREMENT INCOME SOURCES

List any pensions, rental income, part-time work, etc.

Description	Recipient		Amount	Ctouto	Endo	Inflation	Survivor
Description		Со	Amount	Starts	Ends	Adjustment	Pension %
			\$			%	%
			\$			%	%
			\$			%	%
			\$			%	%

INVESTMENT ASSETS & SAVINGS

List any investment assets held outside of Raymond James. Include employer retirement plans, IRAs, brokerage accounts, etc.

Account Decemination	Cli	ent	Co-Client		
Account Description Include account type and where it is held	Current Value	Annual Additions	Current Value	Annual Additions	
	\$	\$	\$	\$	
	\$	\$	\$	\$	
	\$	\$	\$	\$	
	\$	\$	\$	\$	
	\$	\$	\$	\$	
	\$	\$	\$	\$	
	\$	\$	\$	\$	
	\$	\$	\$	\$	
	\$	\$	\$	\$	

OTHER ASSETS

Please list any other assets (nonfinancial) such as home, business, collectibles, investment properties, etc.

Asset Description	Owner	Current Value
		\$
		\$
		\$
		\$

RISK TOLERANCE

	Эn	a scale of 1 t	o 100 (1=lowest,	100=highest),	how would	l you rate y	our willingness	to take ris	k with yo	ur investments?
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Client _____ Co-Client ____

For our next meeting, please bring the following items:

- Social Security statement(s)
- Employer Retirement Plan statement(s)

- Investment / Brokerage / Bank statement(s)
- Insurance Policies

