



Retirement Planning The Way It Should Be...
In a Language You Can Understand

RETIRESTRONG FINANCIAL ADVISORS

11457 Olde Cabin Road Suite 310
Creve Coeur, MO 63141
P: (314) 998-0999
www.retirestrongfa.com

CONFIDENTIAL INFORMATION

PERSONAL INFORMATION – CLIENT
Legal Name
I Prefer To Be Called
Address
Date of Birth
Cell Phone
Email Address
Occupation
Employer

PERSONAL INFORMATION – CO - CLIENT
Legal Name
I Prefer To Be Called
Address
Date of Birth
Cell Phone
Email Address
Occupation
Employer

Marital Status Single Married Divorced Widow(er) Unmarried Partner

CHILDREN/DEPENDENTS					
Name & Relationship	Date of Birth	Annual Cost of College	1st Year of College	Earmarked Funds	What % will you pay?

YOUR TOP FINANCIAL QUESTIONS & CONCERNS
Please list your top 5 questions or concerns you are looking for help with.
1)
2)
3)
4)
5)



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SOURCES OF INCOME – CLIENT
Base Salary
Expected Bonus
Social Security (Annual)
Pension
Other

SOURCES OF INCOME – CO - CLIENT
Base Salary
Expected Bonus
Social Security (Annual)
Pension
Other

FINANCIAL PLANNING OBJECTIVES

Please rank from 1-10, 1 being the most important	Client's Ranking	Please rank from 1-10, 1 being the most important	Client's Ranking
Adequate Life, Long Term Care & Disability Insurance		Adequate Life, Long Term Care & Disability Insurance	
Build Wealth		Build Wealth	
College Funding Strategy		College Funding Strategy	
Leave a Legacy to My Children		Leave a Legacy to My Children	
Purchase a Home		Purchase a Home	
Purchase a Vacation Home		Purchase a Vacation Home	
Reduce Estate Taxes		Reduce Estate Taxes	
Reduce Income Tax		Reduce Income Tax	
Retirement Comfort		Retirement Comfort	
Other (Specify)		Other (Specify)	

SOURCES OF INCOME – CLIENT

What do you consider a reasonable average rate of return on a long-term investment portfolio? %

If your investment account dropped in value, at what percent decline would you be concerned? %

What investments would you consider? (Check all that apply)
 CDs Stocks Mutual Funds Bonds Annuities ETF Other, please explain

What is the best investment you ever made?

What is the worst investment you ever made?

If you are considering changing your current investment advisor, please explain why.



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ESTATE PLANNING

Client

Do you have a will? Yes No

Have you exchanged powers of attorney with anyone? Yes No
If so, who?

Do you have a current health care directive? Yes No

Do you have any trusts? Yes No
Why did you establish it?

Are any inheritances expected? Yes No
When? How much?

Co-Client

Do you have a will? Yes No

Have you exchanged powers of attorney with anyone? Yes No
If so, who?

Do you have a current health care directive? Yes No

Do you have any trusts? Yes No
Why did you establish it?

Are any inheritances expected? Yes No
When? How much?

RETIREMENT PLANNING

At what age do you plan to retire? Client Co-Client

How much annual income, in today's dollars, will you want in retirement?

Do you plan on working after retirement? Yes No Earnings per year \$

How many years will you work?

Do you have any aspirations to make seasonal location changes? (ie. winters in Florida?) Yes No Explain:

Do you have plans to change your residence in the near future? Yes No Explain:

Do you have long term plans of owning a vacation home? Yes No Explain:

Have you verified the status of your social security benefits? Yes No

If yes, what is the full monthly benefit you can expect? Client Co-Client

Do you expect to have any debts in retirement? Yes No Explain:

ASSETS Indicate Ownership: C = Client, CO = Co Client, J = Joint, T = Trust

Bank/Money Market Accounts/Checking/Savings	Ownership	Current Value	Interest Rate - %

Investment Accounts/Brokerage	Ownership	Current Value	Annual Contribution



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RETIREMENT PLANS – CLIENT

Type: IRA, ROTH IRA, 401(k), 403(b), Pension Plan, Profit Sharing, SEP, SIMPLE IRA, etc.	Where invested?	Current Value	Your Annual Contribution	Employer Match %	% Vested In Plan

RETIREMENT PLANS – CO - CLIENT

Type: IRA, ROTH IRA, 401(k), 403(b), Pension Plan, Profit Sharing, SEP, SIMPLE IRA, etc.	Where invested?	Current Value	Your Annual Contribution	Employer Match %	% Vested In Plan

REAL ESTATE PROPERTY

	Home	Other #1	Other #2
Address			
Please Describe (vacation home, investment property etc.)			
Owner (Joint, Trust, etc.)			
Current Market Value			
Current Mortgage Balance			
Interest Rate/Years Remain			

HOME EQUITY LOAN/LINE OF CREDIT

Bank Name	Credit Limit	Outstanding Balance	Original Date	Interest Rate	Form of Payment

PERSONAL PROPERTY (OTHER THAN REAL ESTATE)

	Car #1	Car #2	Furniture & Jewelry	Collectibles	Other: Describe
Owner					
Estimated Value					



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LIABILITIES (NOT REAL ESTATE)

List all Loans and Debts (Auto, School, Credit Cards, etc)	Amount Due	Monthly Payment	Est. Payoff Date	Interest Rate

LIFE INSURANCE

Life Insurance	Policy #1	Policy #2	Policy #3	Policy #4
Company Name				
Policy Type (Whole life, term, universal life, group, etc)				
Face Value \$				
Cash Value \$				
Premium \$				
Insured				
Beneficiary				