



Retirement Road Map

PERSON A

First Name

Last Name

☐ Male

☐ Female

Date of Birth

☐ Married

PERSON B

First Name

Last Name

☐ Male

☐ Female

Date of Birth

ADDRESS

Street

City

State

Zip

Home Phone

Work Phone

Email Address

1. When do you plan to retire?

☐ Already retired

☐ Plan to retire at age _____

2. How much monthly retirement income do you need?

☐ Estimate based on current monthly earnings of \$ _____

☐ Specify monthly income needs of \$ _____

☐ Enter schedule of monthly needs and wants

RETIREMENT PHASES

Begins at Person A's Age	Description of Retirement Phase	Basic Lifestyle Needs	Additional Wants
	Initial Retirement (more travel, hobbies, activities, etc.)		
	Seasoned Retirement (less activities)		
	Matured Retirement (much less activities, perhaps due to health)		
	Survivorship Years (After hypothetical death of one client)		
Assume	<input type="radio"/> Person A dies at age _____ and the surviving person lives to age _____ <input type="radio"/> Person B		

MONTHLY NEEDS DEFINED IN TODAY'S DOLLARS



3. What is the current value of your retirement plans (401(k), IRA)?

	Current Value of Retirement Plans	Pre-retirement Growth Rate	Total Annual Contributions (including employer)	Apply Annual Increase to Contributions
Person A	\$ _____	_____ %	\$ _____	<input type="radio"/> Yes <input type="radio"/> No
Person B	\$ _____	_____ %	\$ _____	<input type="radio"/> Yes <input type="radio"/> No

4. What is the current value of assets you have set aside for retirement?

Current Balance \$ _____ Pre-retirement Growth Rate _____ %

WHAT IS THE GROWTH RATE TO ASSUME FOR ALL ASSETS AFTER YOU RETIRE?

Post-retirement Growth Rate _____ %

5. Would you like to illustrate Social Security retirement benefits?

- ☐ Do not illustrate benefits
- ☐ Enter benefits from SS Statement

Person A \$ _____ per month

Person B \$ _____ per month

Cost of living rate _____ %

AGE TO START BENEFITS

Person A _____

Person B _____

HAS PENSION FOR WORK NOT COVERED BY SOCIAL SECURITY

	Person A	Person B
Estimated amount of non-covered monthly pension	\$ _____	\$ _____
Monthly retirement benefit from WEP calculator in today's dollars	\$ _____	\$ _____

6. Other Retirement Income

Description	Owner	Amount	Type	Delay Inflation Until Start Age	Start Age	End Age	Annual % Increase	Continu e After Death?	% After Death
	Person A Person B	\$	Monthly Lump Sum	Yes No			%	Yes No	%
	Person A Person B	\$	Monthly Lump Sum	Yes No			%	Yes No	%
	Person A Person B	\$	Monthly Lump Sum	Yes No			%	Yes No	%
	Person A Person B	\$	Monthly Lump Sum	Yes No			%	Yes No	%
	Person A Person B	\$	Monthly Lump Sum	Yes No			%	Yes No	%
	Person A Person B	\$	Monthly Lump Sum	Yes No			%	Yes No	%
	Person A Person B	\$	Monthly Lump Sum	Yes No			%	Yes No	%
	Person A Person B	\$	Monthly Lump Sum	Yes No			%	Yes No	%