

## Goal Planning and Monitoring Form

Primary Inform

### **Name of Primary Client \***

First Name Last Name

### **Name of Co-Client**

First Name Last Name

### **Primary Client Date of Birth \***

Month Day Year

### **Co-Client Date of Birth**

Month Day Year

### **Employment Status of Client**

### **Employment Status of Co-Client**

## **Employment Income \***

In USD

## **Desired Retirement Age \***

## **Employment Income of Co-Client**

In USD

**Based on your health and family history how long do you expect to live?**

**Based on your health and family history how long do you expect to live? (Co-Client)**

### **Essential Living Expenses in Retirement**

The amount required to cover your essential needs (e.g. housing, utilities, food, transportation, property taxes, etc.)

## **Desired Retirement Age of Co-Client**

**Approximately how much will you need to meet your essential living expenses in retirement?**

After tax and adjust for inflation

**If one spouse retires before the other, will withdrawals from savings be needed to meet expenses?**

After tax and adjust for inflation

**Will you have employer-sponsored healthcare in 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.

<b>Name and Description of Goal</b>	<b>Importance 1-10 low-high</b>	<b>Start Year</b>	<b>Goal Will Start at Retirement (Client)?</b>	<b>Goal Will Start at Retirement (Co-Client)?</b>	<b>Dollar Amount</b>	<b>How Often</b>
<b>Goal 1</b>						
<b>Goal 2</b>						
<b>Goal 3</b>						
<b>Goal 4</b>						
<b>Goal 5</b>						

**Social Security Retirement Benefits:**

To obtain an estimate of your social security benefits go to <https://www.ssa.gov/myaccount/>

	<b>Are you eligible?</b>	<b>Receiving now?</b>	<b>Benefit Amount (PIA)</b>	<b>Receiving now</b>
<b>Client (C)</b>				
<b>CleanlinessCo-Client (Co)</b>				

**Retirement Income Sources:**

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

<b>Description</b>	<b>Recipient</b>	<b>Amount</b>	<b>Starts</b>	<b>Ends</b>
<b>Income 1</b>				

**Income 2**

**Income 3**

**Income 4**

**Income 5**

**Investment Assets & Savings**

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

**Type a question**

<b>Account Description</b>	<b>Holder</b>	<b>Current Value</b>	<b>Annual Additions</b>	<b>Is the account being matched?</b>
<b>Account 1</b>				
<b>Account 2</b>				
<b>Account 3</b>				
<b>Account 4</b>				
<b>Account 5</b>				

**Other Assets**

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

<b>Asset Description</b>	<b>Owner</b>	<b>Current Value</b>
<b>Asset 1</b>		
<b>Asset 2</b>		
<b>Asset 3</b>		

**Asset 4**

**Asset 5**

For our next meeting please bring Social Security Statement(s), investment/brokerage/bank statement(s), employer retirement plan statement(s) and insurance policies

**Liabilities**

Please list any outstanding loans, credit cards, automobile, mortgage, student loans, lines of credit, etc.

**Type a question**

Liability Description	Owner	Balance
Liability 1		
Liability 2		
Liability 3		
Liability 4		
Liability 5		

**Generational Wealth Management**

[wealthstrategiespartners.com](http://wealthstrategiespartners.com)

<b>Nashville Office</b> 5500 Maryland Way, Suite 133 Brentwood, TN 37027	P: 615-457-3481 TF: 855-372-5295	<b>Sarasota Office</b> 400 Burns Court Sarasota, FL 34236	P: 941-413-0570 TF: 855-372-5295	<i>Securities offered through Raymond James Financial Services, Inc., member FINRA / SIPC. Investment advisory services offered through Raymond James Financial Services Advisors, Inc. Wealth Strategies Partners is not a registered broker/dealer and is independent of Raymond James Financial Services.</i>
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