



# FINDING YOUR ENOUGH NUMBER

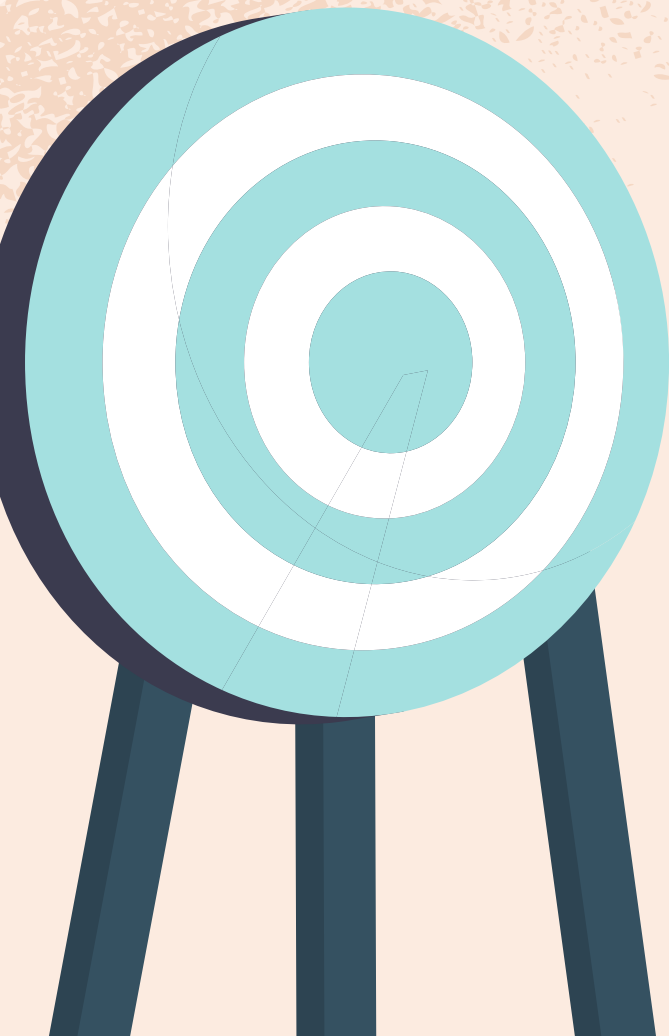
## RETIREMENT PLANNING ORGANIZER

CONFIDENTIAL INFORMATION OF:

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Date updated



When it comes to planning for retirement, many individuals and couples wonder how much will be enough. In order to answer this question, it's important to first understand your current circumstances. Only then can you identify and implement strategies for protecting your accumulated wealth and creating an income plan that meets your needs even as your life unfolds and your circumstances change. With the help of a trusted advisor, you can hit the bullseye in retirement planning at every stage of life.

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# PERSONAL INFORMATION

## SPOUSE ONE

Full name \_\_\_\_\_ Date of birth (MM/DD/YYYY) \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_ Mobile phone \_\_\_\_\_

Personal email \_\_\_\_\_ Work email \_\_\_\_\_

Employer \_\_\_\_\_ Employer phone \_\_\_\_\_

Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Occupation \_\_\_\_\_ Industry \_\_\_\_\_ Retirement date (or expected) \_\_\_\_\_

## SPOUSE TWO

Full name \_\_\_\_\_ Date of birth (MM/DD/YYYY) \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_ Mobile phone \_\_\_\_\_

Personal email \_\_\_\_\_ Work email \_\_\_\_\_

Employer \_\_\_\_\_ Employer phone \_\_\_\_\_

Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Occupation \_\_\_\_\_ Industry \_\_\_\_\_ Retirement date (or expected) \_\_\_\_\_

**Filing status**  Single  Married filing jointly  Married filing separately

If married, date of marriage (MM/DD/YYYY) \_\_\_\_\_ Number of dependents \_\_\_\_\_

Home address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Mailing address (if different from above) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

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## CHILDREN

Child one name \_\_\_\_\_ Date of birth (MM/DD/YYYY) \_\_\_\_\_

Child two name \_\_\_\_\_ Date of birth (MM/DD/YYYY) \_\_\_\_\_

Child three name \_\_\_\_\_ Date of birth (MM/DD/YYYY) \_\_\_\_\_

Child four name \_\_\_\_\_ Date of birth (MM/DD/YYYY) \_\_\_\_\_

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## EDUCATION

Start date \_\_\_\_\_ Number of years \_\_\_\_\_ Place of education \_\_\_\_\_

Start date \_\_\_\_\_ Number of years \_\_\_\_\_ Place of education \_\_\_\_\_

Start date \_\_\_\_\_ Number of years \_\_\_\_\_ Place of education \_\_\_\_\_

Start date \_\_\_\_\_ Number of years \_\_\_\_\_ Place of education \_\_\_\_\_

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## INCOME SOURCES

\$ \_\_\_\_\_ Spouse one salary      \$ \_\_\_\_\_ Spouse one bonus (yearly average)

\$ \_\_\_\_\_ Spouse two salary      \$ \_\_\_\_\_ Spouse two bonus (yearly average)

\$ \_\_\_\_\_ Spouse one Social Security      \_\_\_\_\_ Spouse one Social Security start date (MM/DD/YYYY)

\$ \_\_\_\_\_ Spouse two Social Security      \_\_\_\_\_ Spouse two Social Security start date (MM/DD/YYYY)

\$ \_\_\_\_\_ Pension income      \_\_\_\_\_ Source

\$ \_\_\_\_\_ Deferred compensation      \_\_\_\_\_ Start date      \_\_\_\_\_ Stop date

\$ \_\_\_\_\_ Rental income      \$ \_\_\_\_\_ Other

**Additional information:** \_\_\_\_\_

**PERSONAL PROPERTY** (homes, rental properties, raw land, artwork, automobiles, etc.)

Description	Owner	Market value	Cost basis	Annual taxes	Annual growth %

**LIABILITIES**

Description	Borrower	Type	Lender	Interest rate	Balance	Payment	Payoff date

**ACCOUNTS** (IRA, Roth IRA, 401(k), profit sharing, pension lump sum, brokerage, bank, CD, money market, etc.)

Name(s)	Current value	Cost basis	Custodian/bank	Annual contribution

**Additional information:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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## EMPLOYER BENEFITS

Retirement plan/employer match \_\_\_\_\_% on \_\_\_\_\_% Profit sharing (yearly average) \$ \_\_\_\_\_

Stock options (details) \_\_\_\_\_

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## INSURANCE POLICIES (life, disability, long-term care, annuities, etc.)

Type	Owner	Insured	Term	Benefit	Premium/year

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## ESTATE PLANNING DOCUMENTS

### BASIC ESTATE DOCUMENTS

Will and testament  No  Yes \_\_\_\_\_ Durable POA  No  Yes \_\_\_\_\_  
Date created Date created

Living will  No  Yes \_\_\_\_\_ Healthcare POA  No  Yes \_\_\_\_\_  
Date created Date created

### OTHER ESTATE DOCUMENTS

Revocable trust  No  Yes \_\_\_\_\_ Credit shelter trust  No  Yes \_\_\_\_\_  
Date created Date created

Trust under will  No  Yes \_\_\_\_\_ Irrevocable trust  No  Yes \_\_\_\_\_  
Date created Date created

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## PROFESSIONALS

Attorney name \_\_\_\_\_ Phone \_\_\_\_\_

Estate attorney name \_\_\_\_\_ Phone \_\_\_\_\_

CPA/accountant name \_\_\_\_\_ Phone \_\_\_\_\_

Insurance agent name \_\_\_\_\_ Phone \_\_\_\_\_

