Retirement Planning Questionnaire

WESTGATE CAPITAL CONSULTANTS

Reset form

Personal Information

	Client 1	Client 2
Name		
Email Address		
Date of Birth	/ /	/ /
Home Address		
Employment Status	☐ Employed ☐ Retired ☐ Business Owner ☐ Homemaker	☐ Employed ☐ Retired ☐ Business Owner ☐ Homemaker
Annual Salary	$	$
Marital Status		
At what age would you like to retire?		

Investment Assets

Client 1

Investment Type	Current Value	Annual Additions
Current Retirement Plan (401(k), 403(b), etc)	$	$ or %
• Employer Contribution	---	$ or %
Former Employer Retirement Plan(s)	$	---
Tradtional IRA	$	$ or %
ROTH IRA	$	$ or %
Taxable/Brokerage	$	$

Investment Assets continued

Client 2

Investment Type	Current Value	Annual Additions
Current Retirement Plan (401(k), 403(b), etc)	$	$ or %
• Employer Contribution	---	$ or %
Former Employer Retirement Plan(s)	$	---
Traditional IRA	$	$ or %
ROTH IRA	$	$ or %
Taxable/Brokerage	$	$

Social Security Benefits - If unknown, an estimate will be included.

	Client 1	Client 2
Benefit amount	Primary Insurance Amount (PIA) $ _____	Primary Insurance Amount (PIA) $ _____
When to start	☐ At Full Retirement Age (per Social Security) ☐ At age _____ ☐ At retirement	☐ At Full Retirement Age (per Social Security) ☐ At age _____ ☐ At retirement

Retirement Income - (Pension, part-time work, etc.)

Description	Monthly Income	Start Year	Year It Ends or No. of Years	Check if amount inflates	Gov't Offset
	$			☐	☐
	$			☐	☐