

Retirement Planning



In order for us to better service you as we explore your retirement options, here are some items that you may provide to give us a better understanding of your current situation:

1. **Recent pay stub(s)** so we can accurately calculate current income.
2. Current balances of any **Retirement Assets** including **IRAs, 401Ks, brokerage statements, mutual funds, stocks, variable annuities, fixed annuity contracts, etc.** Please make sure to include **cash on hand** and/or **emergency fund** balances.
3. Bring recent copies of any personal **insurance statements**, including **life insurance, long term care and disability income insurance.**
4. Bring recent **Statement(s) of Benefits from the Social Security Administration.** If you do not have your statement(s), please log on to www.ssa.gov and click "My Social Security" to create an account. If you already have an account, you should be able to download your most recent statement. If you have further questions, please call the Social Security office toll-free at 800-772-1213.
5. Please bring any **Insurance or pension benefits provided by your employer**, if any. This may include health, life or disability income insurance policies, along with any pension benefit statements. If you have a pension, please make sure if you have a pension that you have the pension benefits available. This information can be obtained by contacting your pension plan.
6. Bring **recent tax return** (state & federal). We will need your total Itemized deductions and personal exemptions.
7. Any charitable contributions that you are making or considering to make.

We look forward to helping you plan your retirement and find the best solutions that fit your needs. If you have any questions, please feel free to call our office at 717-597-5500

Retirement can be a subject that causes a lot of anxiety. We will help you to be confident and comfortable knowing that your funds are GROWING and SECURE.

Please complete the entire questionnaire to help us prepare for your appointment. We are not trying to be intrusive; however, this information is essential for proper planning.

Information Gathering

Name: _____ Spouse Name: _____

1. Date of Birth:_____ Spouse DOB:_____ Anniversary: _____
2. Email:_____ Preferred Phone: _____
3. Occupation/Employer: _____
4. Retirement date: (if known, or retirement goal:

5. Children's name & DOB:

For the following, Please include ownership of the accounts

Account	Company Name	Estimated Balances
Checking/Savings		
CD's		
IRA		
401K/403B		
Brokerage Account		
Money Market		

Please provide any debt you have in the table below

Type	Debt Balance	Monthly Payment
Mortgage		
Auto Loan		
Credit Cards		
Misc. Debts		

Please provide INCOME YOU ARE CURRENTLY RECEIVING.

Monthly Income Amounts	Mr.	Mrs.
Work Income		
Social Security Income		
IRA/401k Income		
Interest/Dividends		
Pensions		

Proper information ensures proper planning. Include any information about your current situation and future plans that would be beneficial for us to know.

Personal Health & Financial information is always kept safe and confidential.

Thank you for your time in completing this form. Thank you for your trust.