Confidential Preliminary Retirement Income & Budget Planning Sheet

Name:
Spouse's Name (If applicable):
Address (City, State, ZIP):
Email address: Phone:
Your date of birth: Spouse's date of birth:
Retirement Concerns
Are you happy with the amount of money you have saved for retirement? Yes No
Are you concerned about the amount of income you will have for retirement? Yes No
Are you satisfied with your current amount of life insurance? Yes No
Have you reviewed your will, estate plan, powers of attorney in the last three years? Yes No
Have you reviewed your beneficiaries on any trusts, annuities, life insurance, or retirement accounts in the last three years? Yes No
Are you concerned about long-term care planning? Yes No
Are you concerned about income planning for a senior parent or special needs child? Yes No
Have you created a written retirement income budget? Yes No
Are you entitled to Social Security Benefits? Yes No
(If yes, have you visited Social Security website to calculate your estimated benefit? Yes No)
Do you have a pension(s) from a former employer? Yes No
Do you own any income annuities? Yes No
Risk Assessment
Are you more concerned about protecting assets than growth? Yes No
Do you worry about the ups and downs in the stock or investment markets? Yes No
Do you feel optimistic about your financial future? Yes No
Do agree simplifying your life might give you more time for what matters most? Yes No
Do you feel you are likely to live longer than average? Yes No
Do you feel your spouse is likely to live longer than average? Yes No
Other concerns you have about retirement?
Do you feel you are likely to live longer than average? Yes No

Anticipated Retirement Expenses (In today's dollars.)

Mortgage / Rent or lease payment	
Property taxes	
Food and household incidentals	
Utilities	
Cell phone	
Automobile (payment, operation, and maintenance)	
Vacation property, boat & RV (payment, operation, and maintenance)	
Clothing and personal items	
Property improvements & upkeep	
Domestic help	
Entertainment & vacations	
Charitable contributions	
Childcare Alimony, child support	
Books, papers, subscriptions	
Home furnishings	
Gifts (birthdays, holidays, special events)	
Medical expenses	
Credit card payments	
Other loan payments	
Life insurance premiums	
Medical insurance premiums	
Auto insurance premiums	
Homeowner's insurance / Umbrella policy premiums	
Long-term care insurance premiums	
Other expenses	
Other expenses	
Total:	

Anticipated Retirement Income (In today's dollars.)

Estimated Monthly Social Security Income: For help visit: https://www.ssa.gov/OACT/quickcalc/	
Estimated Pension Income:	
Estimated Annuity Income:	
Estimated Other Income:	
Estimated Other Income:	
Total:	

Anticipated Retirement Income Gap/Surplus

A: Total Anticipated Retirement Income:	
B: Total Anticipated Retirement	
Expenses:	
(Subtract Line B from Line A)	
Net Surplus / Shortage:	

Complete and Return by Fax, Mail or Email to:



209 Main St., Milford, OH 45150

Phone: 513-891-9888 | Fax: 513-891-3088 ted@mccarthystevenot.com | www.mccarthystevenot.com | Privacy Policy: https://www.mccarthystevenot.com/privacy-policy

*McCarthy Stevenot Agency, Inc., is a licensed life and health insurance agency in the state of Ohio. Rev 7/2020.