

Married Couples Intake Form

Client 1

Full Name _____ DOB _____ Gender _____ Age of Death _____

If Already Elected: Current Benefit Amount _____ Benefit Start Date _____

If Pension from non-social security covered earnings:

Monthly Pension Amount: _____ Pension COLA _____ Pension Start Date _____

Benefit Calculation Options: (Pension Cases require option A)

A. Earnings History: OBTAIN COPY OF CLIENTS EARNINGS HISTORY (MOST ACCURATE)

Last year's taxed social security earnings _____

Hypothetical Future Earnings							
Year	Earnings	Year	Earnings	Year	Earnings	Year	Earnings
2013		2018		2023		2028	
2014		2019		2024		2029	
2015		2020		2025		2030	
2016		2021		2026		2031	
2017		2022		2027			

B. Benefit Estimate: Estimate at age in which client plans to stop working.

Benefit Age _____ Benefit Estimate _____ Estimate Date _____

Client 2

Full Name _____ DOB _____ Gender _____ Age of Death _____

If Already Elected: Current Benefit Amount _____ Benefit Start Date _____

If Pension from non-social security covered earnings:

Monthly Pension Amount: _____ Pension COLA _____ Pension Start Date _____

Benefit Calculation Options: (Pension Cases require option A)

A. Earnings History: OBTAIN COPY OF CLIENTS EARNINGS HISTORY (MOST ACCURATE)

Last year's taxed social security earnings _____

Hypothetical Future Earnings							
Year	Earnings	Year	Earnings	Year	Earnings	Year	Earnings
2013		2018		2023		2028	
2014		2019		2024		2029	
2015		2020		2025		2030	
2016		2021		2026		2031	
2017		2022		2027			

B. Benefit Estimate: Estimate at age in which client plans to stop working.

Benefit Age _____ Benefit Estimate _____ Estimate Date _____

Assumptions:

Inflation Rate 0 2.8% 3.8% Other _____
Real Long Term Rate of Return 0 1.0% 2.0% Other _____

Income Goals:

What is the desired monthly income upon retirement? _____

What is the desired monthly income after first spouse passes? _____