

## *The Changing World of Retirement Planning*

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## CONFIDENTIAL DATA FORM

### Confidential Data Form Instructions

Please read this page in its entirety before completing this data form. Completing each portion of this form will provide the most accurate projections. Supportive documents are extremely helpful in reviewing your financial situation. Please include with the completion of this form copies of the following: **Social Security statements, all pension & investment account statements, insurance summary statements, most recent year tax return, an itemized monthly spending budget, and any other documents** that help support the data you provided.

### Notice of Privacy Policy

We strongly believe in protecting the confidentiality and security of the information we collect from you. This notice describes our privacy policy and describes how we treat the information we receive.

#### **Information We Collect**

The personal information we collect may include: names and addresses, birth dates, tax identification numbers, driver license numbers, assets, liabilities, income, real estate information, and investment activities.

#### **How We Protect Information**

We do not sell your personal information to other individuals, companies, or institutions. We treat information about current and former students and clients and their accounts in a confidential manner. Our employees may access information and provide it to third parties only when completing a transaction at your request or when providing our other services to you.

At your request, we may disclose information to attorneys, accountants, lawyers, securities professionals and others to assist us, or them, in providing services to you. We may also share information with companies that perform services on our behalf, such as the companies that we hire to perform marketing or administrative services. Companies we may hire to provide support services are not allowed to use your personal information for their own purposes. We may make additional disclosures as permitted by law.

We may also maintain physical, electronic, and procedural safeguards to protect information. Employees and our professional service representatives are required to comply with our established information confidentiality provisions.

#### **Correction of Information**

If your personal information with us becomes inaccurate, or if you need to make a change to that information, please contact us so we can update our records. For additional information regarding our privacy policy, please contact us.

**CONFIDENTIAL DATA FORM**

**CLIENT INFORMATION**

Client:	DOB: / /	SSN: - -	DL#:	ST.	Exp.
Spouse:	DOB: / /	SSN: - -	DL#:	ST.	Exp.
Children:	DOB: / /	SSN: - -	Anniversary:		
	DOB: / /	SSN: - -	Notes:		
	DOB: / /	SSN: - -			
	DOB: / /	SSN: - -			
Home Address:			Home Phone: ( ) -		
City:	State:	Zip Code:	Cell Phone: ( ) -		
Ref. #			E-Mail: @		

**CLIENT EMPLOYMENT AND EARNINGS INFORMATION**

**SPOUSE EMPLOYMENT AND EARNINGS INFORMATION**

Employer: _____	Employer: _____
Position: _____	Position: _____
Address: _____	Address: _____
Work Phone: ( ) - _____	Work Phone: ( ) - _____
Years at Current Job: _____	Years at Current Job: _____
Years in Line of Work: _____	Years in Line of Work: _____
<i>Only include income that can be verified by tax documentation; W-2, 1099, etc...</i>	
Base Income from Employer \$ _____	Base Income from Employer \$ _____
Net Income from Self-Employment \$ _____	Net Income from Self-Employment \$ _____
Bonuses \$ _____	Bonuses \$ _____
Commissions \$ _____	Commissions \$ _____
Other \$ _____	Other \$ _____
<b>TOTAL</b> \$ _____	<b>TOTAL</b> \$ _____
Total Income Last Year \$ _____	Total Income Last Year \$ _____
Total Income This Year \$ _____	Total Income This Year \$ _____
Total Income Next Year \$ _____	Total Income Next Year \$ _____

What amount of income does it take to meet your monthly expenses (after tax)? \_\_\_\_\_

After all your expenses, how much money is left over at the end of the typical month? \_\_\_\_\_

How much of the left over amount would you be willing to earmark for investing? \_\_\_\_\_

If your income will increase this year, what do you plan on doing with the money? \_\_\_\_\_

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**ASSETS**

<u>Account Type</u>	<u>Current Value</u>	<u>Monthly Contribution</u>	<u>Rate of Return</u>
<b>Cash &amp; Short-Term Accounts</b>			
Checking	\$ _____	\$ _____	_____ %
Savings	\$ _____	\$ _____	_____ %
Money Market	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
<b>Brokerage and Investment Accounts</b>			
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
<b>Retirement Accounts</b>			
401(k)	\$ _____	\$ _____	_____ %
IRA	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %

<b>Retirement Benefits and Income</b>			
	<u>Start Date</u>	<u>Monthly Benefit</u>	<u>Annual Increase</u>
Pension for: _____	_____	\$ _____	_____
Pension for: _____	_____	\$ _____	_____
Pension for: _____	_____	\$ _____	_____
Soc. Sec. for: _____	_____	\$ _____	_____
Soc. Sec. for: _____	_____	\$ _____	_____
Other Income: _____	_____	\$ _____	_____

What percentage of your income do you currently contribute to your 401(k), 403(b) or retirement plan? \_\_\_\_\_ / \_\_\_\_\_

If your company matches your retirement contributions, what is the dollar amount or percentage that they match? \_\_\_\_\_ / \_\_\_\_\_

Would you be interested in an analysis of your current retirement plan funds and options? \_\_\_\_\_ / \_\_\_\_\_

How much time do you currently spend selecting and managing your investments? \_\_\_\_\_

How much time would you like to spend selecting and managing your investments? \_\_\_\_\_

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**REAL ESTATE INFORMATION**

	<u>Primary Residence</u>	<u>Secondary Residence</u>	<u>Line of Credit</u>
Current Value of Property	\$ <input type="text"/>	\$ <input type="text"/>	
Current Balance of Loan	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Original Start Date of Loan	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>
Type of Loan	<input type="text"/> Fixed <input type="text"/> Variable	<input type="text"/> Fixed <input type="text"/> Variable	<input type="text"/> Fixed <input type="text"/> Variable
Original Duration of Loan	<input type="text"/> 10 <input type="text"/> 15 <input type="text"/> 20 <input type="text"/> 30	<input type="text"/> 10 <input type="text"/> 15 <input type="text"/> 20 <input type="text"/> 30	<input type="text"/> 10 <input type="text"/> 15 <input type="text"/> 20 <input type="text"/> 30
Interest Rate of Loan	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Principal & Interest / Mo.	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Taxes & Insurance / Mo.	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Mortgage Insurance / Mo.	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Total Monthly Payment	\$ <u><u><input type="text"/></u></u>	\$ <u><u><input type="text"/></u></u>	\$ <u><u><input type="text"/></u></u>

How much longer will you be living in your current home? \_\_\_\_\_

Do you pay extra on your mortgage? If so, typically how much? \_\_\_\_\_

Do you make bi-weekly mortgage payments? \_\_\_\_\_

Do you want to pay off your mortgage? If so, how soon? \_\_\_\_\_

When was the last time you had your home appraised? \_\_\_\_\_

What are you doing with the savings from your last refinance? \_\_\_\_\_

Would you be willing to refinance your mortgage to save money? \_\_\_\_\_



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INSURANCE

Insured                      Type†                      Carrier                      Face Amount                      Cash Value                      Monthly Premium

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† What type of insurance policy, i.e. auto, home, life, umbrella, long-term care, disability etc...

RETIREMENT OBJECTIVES

What is your desired retirement age?                      Client \_\_\_\_\_                      Spouse \_\_\_\_\_

What do you anticipate your life expectancy to be?                      Client \_\_\_\_\_                      Spouse \_\_\_\_\_

What monthly amount of income do you desire in today's dollars (after tax)?                      \$ \_\_\_\_\_

What average rate of return do you anticipate to receive on your retirement assets?                      \_\_\_\_\_ %

To account for inflation in your projections, what inflation rate would you like us to use?                      \_\_\_\_\_ %

What would be your ideal emergency fund balance?                      \$ \_\_\_\_\_

What issues or concerns do you feel would be an obstacle in accomplishing your retirement objectives?

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**CONFIDENTIAL DATA FORM**

**INVESTMENT QUESTIONNAIRE**

What has been your past experience with financial planning?

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Are there any special areas of interest you would like to discuss?

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What is your most pressing financial objective?

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What advisors do you use and to what extent?

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Do you presently feel like you're moving ahead financially?

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What other goals or factors would help us better understand your financial priorities?

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What do you look for in a financial professional?

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How do you envision your retirement assuming money is no object?

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Envision your perfect financial scenario five years from now. What would have to happen between now and then for this ideal scenario to be realized?

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Please tell us about your decision making process.

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