

Social Security Optimization Report Request



Prepared By:

Prepared For:

Date:





Please provide the following information to secure your Social Security Optimization Report.

Personal Information

Husband:
DOB:
Desired Retirement Age:
Currently Receiving Social Security Benefits:
If yes, date benefits began and amount:
If no, projected Primary Insurance Amount or PIA:
Age you intend to collect benefits:
Projected Life Expectancy:
Portfolio Preference:
Desired Probability of Success:

Wife:
DOB:
Desired Retirement Age:
Currently Receiving Social Security Benefits:
If yes, date benefits began and amount:
If no, projected Primary Insurance Amount or PIA:
Age you intend to collect benefits:
Projected Life Expectancy:
Portfolio Preference:
Desired Probability of Success:

Income Information

Before Tax Monthly Household Retirement Income Goal:

Husband:
Pension:
If yes:
If public you MUST also provide a copy of SSA report
Does pension provide COLA's:
Are you currently collecting this pension:
If yes, age at which pension payments began:
Current Monthly Pension Benefit:
If no, pension benefit amount at age 62, 63, 64, 65, 66, 67, 68, 69, 70
Projected Monthly Earned Income from Age 62 until FRA:
Projected Monthly Earned Income from FRA until age:
Annual Tax Free Municipal Bond Dividend Income:
Before Tax Annual Survivor Income Goal:
Retirement Assets:

Wife:
Pension:
If yes:
If public you MUST also provide a copy of SSA report
Does pension provide COLA's:
Are you currently collecting this pension:
If yes, age at which pension payments began:
Current Monthly Pension Benefit:
If no, pension benefit amount at age 62, 63, 64, 65, 66, 67, 68, 69, 70
Projected Monthly Earned Income from Age 62 until FRA:
Projected Monthly Earned Income from FRA until age:
Annual Tax Free Municipal Bond Dividend Income:
Before Tax Annual Survivor Income Goal:
Retirement Assets:

For purposes of determining the effects of the windfall elimination provision SSO will cross reference your taxable Social Security earnings history provided in your Social Security statement with the "Substantial Earnings" figures for each year provided in SSA Publication No. 05---10045. This will provide us with your number of YOC's or "years of credit".



Asset Inventory

Non-Qualified Investment/Savings

Checking/Savings _____

Certificates of Deposit _____

Annuities _____

Stocks _____

Bonds _____

Mutual Funds _____

Life Ins. Cash Value _____

Other _____

TOTAL: _____

Retirement Investment/Savings

IRA's _____

401(k), 403(b), 457 Plans _____

Pension Assets _____

Other _____

TOTAL: _____

Net Value of Automobiles

Primary Vehicle _____

Secondary Vehicle _____

Modified for Medical Transport _____

TOTAL: _____

Net Value of Real Estate

Primary Residence _____

Second Home _____

Rental Properties _____

TOTAL: _____

TOTAL ASSETS: _____

Dependents other than spouse occupy primary residence? Yes No

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