



Federal Retirement Planning Fact Finder

Personal Information

Client Name: _____ DOB: _____

Spouse Name: _____ DOB: _____

Address: _____

City, State, ZIP: _____

Phone: _____ Email: _____

Employer: _____ Spouse's Employer: _____

Years of Service: _____ Service Start Date: _____

Expected Retirement Date: _____

Income Details

Annual Salary: \$ _____ Spouse's Salary: \$ _____

Social Security: \$ _____ at age _____ Spouse SS: \$ _____ at age _____

Estimated Pension Income at Retirement: \$ _____

Additional Income Sources: _____

Thrift Savings Plan (TSP): Current Balance \$ _____ Contributions \$ _____

Roth Balance: \$ _____ Contributions \$ _____

Assets & Financial Accounts

IRA/Roth IRA: Monthly \$ _____ Total \$ _____

Savings Accounts: Monthly \$ _____ Total \$ _____

401(k)s: _____

Other Investments: _____

