

Social Security Maximization

Data Intake Form



Client

First & Last Names

Spouse

First & Last Names

DOB		Gender	
SS Primary Insurance Amount (at Full Retirement Age) \$			
Already Taking SS? Y / N	If Yes, when did you start? ____ / _____ MM/YYYY		
Use Life Expectancy Table? <input type="checkbox"/>	or	Specify Life Expectancy Age:	
Annual Salary \$	Age you would like to retire?		

DOB		Gender	
SS Primary Insurance Amount (at Full Retirement Age) \$			
Already Taking SS? Y / N	If Yes, when did you start? ____ / _____ MM/YYYY		
Use Life Expectancy Table? <input type="checkbox"/>	or	Specify Life Expectancy Age:	
Annual Salary \$	Age you would like to retire?		

I would like to see these reports:

COLA _____%

- Social Security Taxation – Adjusted Gross Income in Retirement \$ _____ (Not including SS)
Portion that is interest? _____ % Portion that is dividends? _____ %
- Working in Retirement – How will working *and* collecting SS affect my benefit?
- Individual Breakeven Analysis
- How to fill the Income Gap – Do you want to use the *recommended* SS strategy? Y / N

☆Monthly income desired? \$	☆Start Income at Client / Spouse Age:
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☆Other Income \$	☆Type of Income?
☆Client / Spouse?	☆Start Age: ☆End Age:

☆Other Income \$	☆Type of Income?
☆Client / Spouse?	☆Start Age: ☆End Age:

Additional Information:

Agent Name:

Date: