YOUR FINANCIAL GOALS

RETIREMENT G	OAL										
Goal Importance)									
10	9	8	7	6	5	4	3	2		1	
	Needs			Want	s			ishes/			
Age to retire:					Life	expectanc	:y:				
Retirement Livir	ng Expense	s:									
Enter living expens	ses for the fo	ollowing r	retirement pe	eriods:							
Expense Period 1 -	— Client reti	red/Co-C	Client workin	g	\$		р	er	□ M	lonth	
Expense Period 2 — Co-Client retired/Client working				g	\$		р	er	□ M	lonth	
Expense Period 3 — Client AND Co-Client retired					\$		p	er	□ M	lonth	
Expense Period 4 — Client alone				\$		p	er	□ M	lonth		
Expense Period 5 — Co-Client alone				\$		p	er	□ M	lonth		
Expenses that end	during retir	ement (e.	g., mortgage	, loan):							
									_		
Des	cription		Year Expense Will End			Amo (Current				In	flat
				\$			□ Month	□ Yea	r	□ Yes	[
				\$			☐ Month	☐ Yea	r	☐ Yes	
				\$			☐ Month	☐ Yea	r	☐ Yes	
				\$			☐ Month	☐ Yea	r	☐ Yes	
Will this amount	inflate?	No □\	es, Base Inf	lation Ra	te 🗆 `	Yes, Base I	nflation Ra	te +/-			
Will you change	states in re	tirement	:? □ No □	Yes	Sta	ite where y	ou will mov	/e:			
When Wi	II You Move	? 🗆 Clie	nt's Retirem	ent □ C	o-Clier	nt's Retiren	nent OR Ye	ear			
			5								_

COLLEGE GO	AL						
Child's name:			Year to Start:	# of years o	f college:		
Goal Importan	ce (circle one)						
10	9 8	7 6	5 4	3 2	l		
	Needs	Wants	3	Wishes			
Cost Estimate	: (fill in A, B or C)						
A. My cost estir	nate: \$	(Annual Cos	t)				
B. Use an avera	ge cost:						
□ Public Ir	n-State (4-year)	□ Public Ou	ut-of-State (4-yea	ır)			
☐ Public In-State (2-year) ☐ Public Out-of-State (4-year)							
☐ Private (4-year) ☐ Average All							
C. Specific coll	ege:			□ Undergraduate	□ Graduate		
State in whi	ch the college is located	l:					
Include cost	t of the following: (Check	k which to include)					
☐ Tuition	☐ Out-of-State Fees	□ Room & Board	□ Books & Su	pplies Other Cost	S		
Have you p	repaid for college usir	ng a 529 Prepaid Tu	ition Plan? □ N	No □ Yes			
How many y	ears of tuition and fees	will be covered for t	his college?				
Outside fundir	ng for college (optional))					
Other funding s	ources during college: (a	annual amounts)					
Scholarships: \$		S	tudent employme	ent: \$			
Students loans:	\$	G	Gifts and other: \$				
Your own incom	e: \$	Y	our loans: \$				
Outside assets (Assets not own	s ed by you that will be use	ed to pay for this coll	lege, not including	g UGMAs, UTMAs or 52	9 Plans)		
1. Type of assets		С	escription:				
Current value	: \$	Annual additi	on: \$	Growth	rate: %		
2. Type of asset:		С	escription:		-		
Current value	: \$	Annual additi	on: \$	Growth	rate: %		
Will this amou	nt inflate? (Note: the de	efault rate is 6%)					
□ No □ Yes, Ba	ase Inflation Rate 🗆 Yes	s, Base Inflation Rate	e +/- %				

Child's name:			Year to Start:	# of years o	# of years of college:			
Goal Importan	ce (circle one)							
10	9 8	7 6	5 4	3 2 1				
	Needs	Wan	ts	Wishes				
Cost Estimate	: (fill in A, B or C)							
A. My cost estin	nate: \$	(Annual Co	st)					
B. Use an avera	ge cost:							
□ Public Ir	n-State (4-year)	□ Public C	out-of-State (4-ye	ar)				
□ Public Ir	-State (2-year) Public Out-of-State (4-year)							
□ Private ((4-year)	☐ Average	All					
C. Specific coll	ege:			□ Undergraduate	☐ Graduate			
State in whi	ch the college is located	l:						
Include cos	t of the following: (Check	k which to include)						
☐ Tuition	☐ Out-of-State Fees	☐ Room & Board	☐ Books & S	upplies Other Cost	S			
Have you p	orepaid for college usin	ng a 529 Prepaid T	uition Plan? 🗆	No □ Yes				
How many y	ears of tuition and fees	will be covered for	this college?					
Outside fundir	ng for college (optional))						
Other funding s	ources during college: (a	annual amounts)						
Scholarships: \$			Student employm	nent: \$				
Students loans:	\$		Gifts and other: \$	\$				
Your own incom	e: \$		Your loans: \$					
Outside assets (Assets not owned by you that will be used to pay for this college, not including UGMAs, UTMAs or 529 Plans)								
1. Type of asset			Description:					
Current value	: \$	Annual addi	tion: \$	Growth	rate: %			
2. Type of asset			Description:					
Current value	: \$	Annual addi	tion: \$	Growth	rate: %			
Will this amount inflate? (Note: the default rate is 6%)								
□ No □ Yes, B	ase Inflation Rate 🛚 Yes	s, Base Inflation Ra	te +/- %					

PRIVATE SCHOOL GOAL						
Child's name:		Year to Start:	# of years of college:			
Goal Importance (circle one)						
10 9 8	7 6	5 4	3 2 1			
Needs	Want	S	Wishes			
Annual cost: \$	(today's dollars)					
Will this amount inflate? □ No	☐ Yes, Base Inflation Ra	ite 🗆 Yes, Base In	flation Rate +/-	%		
Child's name:		Year to Start:	# of years of college:			
Goal Importance (circle one)						
10 9 8	7 6	5 4	3 2 1			
Needs	Want	S	Wishes			
Annual cost: \$	(today's dollars)					
Will this amount inflate? □ No	□ Yes, Base Inflation Ra	ite 🗆 Yes, Base In	flation Rate +/-	%		
Child's name:		Year to Start:	# of years of college:			
Goal Importance (circle one)						
10 9 8	7 6	5 4	3 2 1			
Needs	Want	S	Wishes			
Annual cost: \$	(today's dollars)					
Will this amount inflate? ☐ No ☐ Yes, Base Inflation Rate ☐ Yes, Base Inflation Rate +/-						

FINANCIAL GOA	L (Major Purchases, V	Weddings, Travel, New Home,	etc.)				
Description:							
Goal Importance:	(circle one)						
10	9 8 7	6 5 4	3 2 1				
	Needs	Wants	Wishes				
Year of goal:		Cost: \$	☐ M onth	□ Year			
Will this amount inflate? ☐ No ☐ Yes, Base Inflation Rate ☐ Yes, Base Inflation Rate +/-							
Is this goal recurri	ing? □ No □ Yes	How often will it occur: Ex	very year(s)				
When will it end?	nen will it end? ☐ Client's Retirement ☐ Co-Client's Retirement ☐ End of Client's Plan ☐ End of Co-Client's Plan ☐ End of Plan OR ☐ Total Occurrences:						
Description:							
Goal Importance:	(circle one)						
10	9 8 7	6 5 4	3 2 1				
	Needs	Wants	Wishes				
Year of goal:		Cost: \$	☐ Month	□ Year			
Will this amount in	nflate? □ No □ Yes, E	Base Inflation Rate ☐ Yes, Base	Inflation Rate +/-	%			
Is this goal recurr	ing? □ No □ Yes	How often will it occur: Ev	very year(s)				
When will it end?	☐ Client's Retirement☐ End of Co-Client's F		☐ End of Client's Plan☐ Total Occurrences:				
Description:							
Goal Importance:	(circle one)						
10	9 8 7	6 5 4	3 2 1				
	Needs	Wants	Wishes				
Year of goal:		Cost: \$	☐ Month	□ Y ear			
Will this amount in	nflate? □ No □ Yes, E	Base Inflation Rate ☐ Yes, Base	Inflation Rate +/-	%			
Is this goal recurr	ing? □ No □ Yes	How often will it occur: Ev	very year(s)				
When will it end?	☐ Client's Retirement☐ End of Co-Client's F		☐ End of Client's Plan ☐ Total Occurrences:				

GIFT OR DONAT	ION				
Description:					
Importance: (circle	e one)				
10	9 8	7 6	5 4	3 2	1
	Needs	Wants	3	Wishes	
Who is the donor?					
Who will receive t	his gift?				
Year you plan to g	ive this gift or dona	ation?			
Amount of gift or	donation?\$		per 🗆 Month	□ Year	
Will this amount in	nflate? □No □Ye	es, Base Inflation Ra	te □ Yes, Base	Inflation Rate +/-	%
Is this goal recurri	ng? □ No □ Yes	How often	will it occur: Ev	very year(s)	
When will it end?	☐ Client's Retirem☐ End of Co-Client	ent □ Co-Client :'s Plan □ End of l	's Retirement Plan OR	☐ End of Client's Plan☐ Total Occurrences:	
Description:					
Importance: (circle	e one)				
10	9 8	7 6	5 4	3 2	1
	Needs	Wants	3	Wishes	
Who is the donor?					
Who will receive t	his gift?				
Year you plan to g	ive this gift or dona	ation?			
Amount of gift or	donation?\$		per 🗆 Month	□ Year	
Will this amount in	nflate? □No □Ye	es, Base Inflation Ra	te □ Yes, Base	Inflation Rate +/-	%
Is this goal recurri	ng? □ No □ Yes	How often	will it occur: Ev	very year(s)	
When will it end?	☐ Client's Retirem	ent □ Co-Client	's Retirement	☐ End of Client's Plan	
	☐ End of Co-Client	's Plan □ End of I	Plan OR	☐ Total Occurrences:	

LEAVE BEQUEST											
Descri	iption/Rec	ipient:									
Import	tance: (circ	cle one)									
	10	9	8	7	6	5	4	3	2	1	
		Needs			Wai	nts			Wishes		
Who will receive this gift?											
When will the bequest be made: ☐ End of Client's Plan ☐ End of Co-Client's Plan											
Amoui	Amount of bequest: \$ (today's dollars)										
Will this amount inflate? ☐ No ☐ Yes, Base Inflation Rate ☐ Yes, Base Inflation Rate +/-								%			
Descri	Description/Recipient:										
Import	tance: (circ	cle one)									
	10	9	8	7	6	5	4	3	2	1	
	Needs Wants Wishes										
Who will receive this gift?											
When will the bequest be made: ☐ End of Client's Plan ☐ End of Co-Client's Plan											
Amoui	nt of bequ	est: \$			(toda	y's dollars	:)				
Will this amount inflate? ☐ No ☐ Yes, Base Inflation Rate ☐ Yes, Base Inflation Rate +/-								%			

WILLINGNESS TO ADJUS	I PREFERENCES	<u>'</u>							
1. How willing are you to retire later than your target retirement age?									
□ Not at All □ Sli	ghtly Willing	☐ Somewhat Willing	☐ Very Willing						
2. In what order do you prefer to	o retire?								
☐ Both retire in the sa	me year	er can retire first							
☐ Client can retire first ☐ Co-Client can retire first									
3. If you had to save more, what is the maximum extra amount you could save annually to meet your goals? This amount is above and beyond the total additions you are already making to investment assets.									
\$									
4. How willing are you to save n	nore money?								
☐ Slightly Willing	□ Somewhat W	/illing □ Very Willing							
5. When considering all of the gamounts from the target?	goals you have clas	sified as NEEDS , how wi	lling are you to reduce your goal						
☐ Slightly Willing	□ Somewhat W	/illing □ Very Willing							
6. When considering all of the gamounts from the target?	goals you have clas	sified as WANTS , how w	rilling are you to reduce your goal						
☐ Slightly Willing	□ Somewhat W	/illing □ Very Willing							

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