

**MAESTRO  
WEALTH**  
ADVISORS

*Orchestrating Your Financial Future*

# Life Planning Organizer

## **Creating Income that Lasts in Retirement**

*Preparing for the day when you transition from work to retirement is only half the story. Drawing wisely from your portfolio is just as critical, particularly after market downturns.*



*Completing the following organizer is the first step in our **MO RE** Program. A program designed to help you Maximize your Social Security Benefit and Evaluate your current portfolio and situation with the ultimate goal of creating real solutions for you to reach your Retirement goals.*

*The information will allow us to more effectively build a plan that considers all the assets you have to fund your retirement and how to structure them in a way that takes into account how and when you intend to rely on them.*

# What you will need to complete this Life Planning Organizer

We have created this checklist, to give you an idea of the various statements and documents you will need access to, in order to complete this Life Planning Organizer.

- ✔ **Most recent statements for any Bank, Brokerage, Mutual Fund, 401k, or Pension accounts.**
- ✔ **Recent Paystub.**
- ✔ **Most recent Social Security Statement. Can be found at [www.ssa.gov/myaccount](http://www.ssa.gov/myaccount) .**
- ✔ **Will or trust, power of attorney, and personal directives.**
- ✔ **Employee benefits and pension plan booklet, if applicable.**
- ✔ **Any other documentation that might impact your financial situation.**

AND, if during our meeting we have gained your trust and you would like for us to continue the conversation, please bring the listed statements and documents with you.



The following data is strictly confidential.

**Family Data**

**Date:** \_\_\_\_\_

Name (First & Last)		Preferred Name		Name (First & Last)		Preferred Name	
Date of Birth		Age		Date of Birth		Age	
Home Address				Home Phone			
Employer Name				Employer Name			
Occupation				Occupation			
Work Phone		Work Email		Work Phone		Work Email	
Cell Phone		Personal Email		Cell Phone		Personal Email	

Children's Names	Age	DOB	Gender	Address	Phone Number	Married/ Single	# Children

When do you plan to Retire? \_\_\_\_\_ When does your spouse plan to Retire? \_\_\_\_\_

What is your Annual Income Goal in Retirement? \_\_\_\_\_ Is this a Net or Gross Goal?    Net    Gross

What do you estimate your Annual Expenses to be in Retirement? \_\_\_\_\_

Do you want to provide a legacy, to children or charity?    Yes    No    How Much? \_\_\_\_\_

What are your top three concerns:

1
2
3

Are there any finance related life events in the foreseeable future that may change your financial picture?




When entering figures, you can round to the nearest dollar--no need to include cents. If you are unable to complete some sections or have questions, we can talk about it when we meet. If you prefer not to complete, **enclose copies of all investment statements** and we will organize it.

### Liquid Assets: Cash Reserves

Things like: Checking, Savings, Money Market, CD's, Treasury Bills				
Owner(s)	Institution	Investment Type	Value	Notes

### Liquid Assets: Investment Assets

Things like: IRAs, Roth IRAs, Brokerage Accounts, IRAs, Roth IRAs, 401ks, 403bs				
Owner(s)	Institution	Investment Type	Value	Notes

### Life Insurance & Annuities

Things like: Whole Life, Term, VUL, UL, Annuity							
Owner	Insured	Company	Insurance Type	Face Value	Cash Value	Premium	Notes

### Non Liquid Assets: Real Estate

Things like: Primary Residence, Inherited Property, 2nd homes, Investment/Rental Property						
Owner	Property Description	Estimated Value	Mortgage Balance	Estimated Payoff Date or @ what Age	Monthly Payment	Interest Rate



## Non Liquid Assets: Business Interests

Things like: Business Ownership			
Owner	Description	Estimated Value	Notes

## Liabilities

Things like: Business Loans, Credit Card Debt, Auto/Boat Loans			
Type	Total Liability	Amount and frequency of payment	Estimated Payoff Date or @ what Age

## Current Income & Expenses:

## Current Savings Plan:

Owner(s)	Source	Annual Value
	Compensation	
	Compensation	
	Business Profit	
	Investments	
	Other _____	

Owner	Account	Your Annual Contribution	Employer Match
	Employer Plan		
	Employer Plan		
	Business		
	Investments/ Savings		
	Other _____		

## Income Sources at Retirement

From your SSA.gov Social Security Report:						
Owner	Type	Amount at age 62	Amount at Full Retirement Age	Amount at age 70	Notes	
	Social Security				Already started?	Yes No
	Social Security				Already started?	Yes No

## Other Sources of Income: Pensions and Annuities

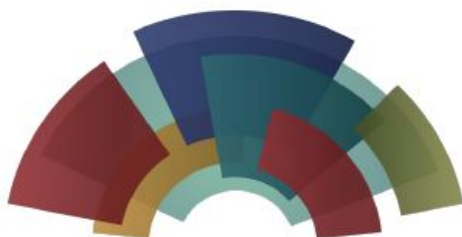
Owner	Type	Lump Sum Amount	100% Option	50%/50% Option	Other	Per month / annual?	Age to Begin	Cost of Living Adjustment?	Notes
	Pension							%	
	Pension							%	
	Annuity							%	
	Annuity							%	
								%	

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Signed: \_\_\_\_\_



# MAESTRO WEALTH

ADVISORS

*Orchestrating Your Financial Future*

**M Craig Moser, CFP®, CRPC®**

Senior Portfolio Manager  
Financial Advisor  
Registered Representative  
Licensed Insurance Professional

**Matt Moser, CRPC®**

Financial Advisor  
Licensed Insurance Professional

**John D. Eller, III, LUTCF®**

Financial Advisor  
Licensed Insurance Professional

**Conrad Beauchamp**

Investment Advisor Representative

**Serving you from two convenient locations:**

755 Highland Oaks Drive, Suite 101  
Winston-Salem, NC 27103

603 Dolley Madison Road, Suite 202  
Greensboro, NC 27410

(336) 448-1086 phone  
(336) 448-1087 fax  
[www.MaestroWealth.com](http://www.MaestroWealth.com)

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