

# ARC™ QUESTIONNAIRE



## Client Information

	Name	Gender	Date of Birth	State of Residence	Risk Class
Client 1					
Client 2					

## Pre-Retirement Information

Type	Annual Gross Income	Occupation	Expected Annual Increase	Retirement Age
Gross Income (Client 1)	\$		%	
Gross income (Client 2)	\$		%	
Other (e.g. rental property, royalties, part-time work)	\$		%	
Other (e.g. rental property, royalties, part-time work)	\$		%	

## Expenses

Annual Living Expenses	Amount	Start Year	End Year
Housing (rent, mortgage, taxes, insurance)	\$		
Car Loan(s)	\$		
Insurance Premiums	\$		
2nd Home	\$		
Credit Card Debt	\$		
Education (loan payments)	\$		
Utilities (gas, electric, water, sewer)	\$		
Technology (cable, internet, phone)	\$		
Medical Expenses (insurance, prescriptions)	\$		
Child Expenses (day care, child support)	\$		
Home Improvement	\$		
Groceries	\$		
Eating Out	\$		
Transportation (gas, repairs, insurance)	\$		
Travel	\$		
Clothing	\$		
Church/Charity	\$		
Entertainment	\$		
Other	\$		
<b>TOTAL</b>	\$		

(Please provide **either** total annual expenses **or** use the itemized list above.)



## Retirement Assumptions

Income Goals	
<i>Please provide either Gross, After-Tax, or Replacement Ratio</i>	
<b>Annual Gross Income</b> (today's dollars)	\$
<b>Annual After-Tax</b> (today's dollars)	\$
<b>Replacement Ratio of Current Gross Income</b>	%

Expectations	
<b>Years of Retirement</b>	
<b>Pre-Retirement Growth Rate</b>	%
<b>Post Retirement Growth Rate</b>	%
<b>Annual Inflation Adjustment</b>	%

## Post-Retirement Income Sources

Type	Owner	Yearly Income	Inflation Adjustment	Age Income Begins	Age Ends (if applicable)
Social Security		\$	%		
Social Security		\$	%		
Pension		\$	%		
Pension		\$	%		
Other (specify in notes section)		\$	%		
Other (specify in notes section)		\$	%		

## Assets

Asset Name (i.e 401(k), Roth IRA, Brokerage)	Owner	Asset Value	Annual Contributions	Contributed By (Client, Spouse, Employer)
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

Cash Reserves (i.e Checkings, Savings, other)	Owner	Amount	Annual Contribution
		\$	\$
		\$	\$
		\$	\$

*(Cash Reserves will not be counted towards retirement savings goals)*

# ARC™ QUESTIONNAIRE CONT.



## Education Funding

Names of Children	Date of Birth	Annual Tuition <i>(today's dollars)</i>	Years in College	Tuition Inflation	Current Savings for Child	Current Contributions
		\$		%	\$	\$
		\$		%	\$	\$
		\$		%	\$	\$
		\$		%	\$	\$
		\$		%	\$	\$

## Insurance Policies

Type <i>(i.e Life, Disability, Long Term Care)</i>	Insured	Annual Premium	Premium Duration	Benefits	Cash Value	Inflation Adjustment <i>(Disability, LTC only)*</i>
		\$			\$	%
		\$			\$	%
		\$			\$	%
		\$			\$	%
		\$			\$	%

\*Inflation Adjustment for Disability or LTC is assumed to be compound growth unless stated in the notes

### Additional Notes