The 7 Money Milestones®

Discovery Form

Name(s)	DOB	Phone	Annual Income	Bonus

Address

Name of dependent(s)	Age	Name of dependent(s)	Age

Goals

	Short-Term 1-3 Years	Mid-Term 3-7 Years	Long-Term 7+ Years
Build retirement wealth			
Create guaranteed retirement income			
Buy new home			
Set up emergency fund			
Fund education			
Support parents			
Start a business			

Financial Questions

End-of-the-month amount you can allocate to goals

Previous year's tax refund

Existing college plans

If applicable, what are your parents' plans for long-term care?

Do you want a complimentary analysis of options that could help you maximize Social Security income?

Yes No

Do you have a will and/or a trust?

Yes No

Do you have a long-term care policy?

Yes No

Do you have a pension?

Yes No

Life Insurance

Insured	Company	Type	Amount	Cash Value	Premium	Year Issued

Assets

Tax Now	BALANCE	MONTHLY CONTRIB.	Tax Later	BALANCE	MONTHLY CONTRIB.	Tax Never	BALANCE	MONTHLY CONTRIB.
MUTUAL FUNDS			ANNUITIES (FIXED / VARIABLE)			ROTH IRA		
BROK. ACCTS. / STOCKS / BONDS			TRAD. IRA / SEP IRA			CASH VALUE LIFE INSURANCE		
CHECKING / SAVINGS / CD'S			401(K) / 403(B) / OTHER QUAL. PLAN			EMPLOYER MATCH		

Other

Any other assets or expenses to consider? (expected inheritances, child w/ special needs, etc.)