

## Personal Information

*Please fill out to the best of your ability. Please refer to your most recent My Social Security Statement for the most accurate estimates of the information requested below.*

Information	Spouse #1	Spouse #2
<i>Name (First &amp; Last)</i>		
<i>Date of Birth</i>		
<i>Age on Last Birthday</i>		
<i>Are you currently collecting social security benefits? If so, what is your gross monthly benefit?</i>		
<i>Are the benefits you are currently receiving age based, or disability benefits?</i>		
<i>If you are not currently collecting benefits, and have not yet reached your Full Retirement Age, what is your estimated benefit at your Full Retirement Age?</i>		
<i>If you are not currently collecting benefits, and have passed your Full Retirement Age, what is the estimated benefit available to you now on your most recent Social Security Statement?</i>		
<i>How do you feel about your potential life expectancy? Less than average, average, or longer than average?</i>		

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