Multi-Generational IRA

Please PRINT Clearly

IRA Owner Information

Prefix *(Mr., Mrs.)* | First Name | Middle Name | **Last Name*** | Suffix *(Jr., Sr.)* | Date of Birth*

Spouse Information

Prefix *(Mr., Mrs.)* | First Name | Middle Name | **Last Name*** | Suffix *(Jr., Sr.)* | Date of Birth*

Address

Street Address | City | State | Zip Code

Telephone | Fax Number

Federal Tax Bracket* _____

Beneficiary Information

Name*	**Date of Birth or Age***	**Percentage***
		%
		%
		%
		%
		%

IRA Owner's Assets	**Value as of 12/31/2000**	**Growth Rate (%)**
Existing Qualified Plans/IRAs*		%
Other Non-Qualified Assets		%
Additional Annual Contributions to Plan		

Year Until Participant Death:* _____ **Years Between Spouse and Participant's Death:*** _____

Existing Life Insurance	**IRA Owner**	**Spouse**	**Survivorship**
Type			
Face Amount			
Included in Estate (Participant/Owner):	☐	☐	☐
In Trust Outside Estate:	☐	☐	☐

Please attach a separate piece of paper for additional Policies.

Distributions from IRA

Have Distributions started? Y/N _____ At What Age _____

Agent Information

Name* | **WRL#*** | Date

Street Address | City | State | Zip Code

Telephone* | Fax Number | E-mail

Please Fax this Information Sheet to Mary Pierce at (727) 299-1728.

* Required information