

Account Information (Internal Use Only)		
Registration(s):	Custodian:	All Accounts:    Yes    No

Client Information (Client A/Trust/Corporation)			
Name (First, Middle Initial, Last)	SSN/Tax ID	Date of Birth/Date of Trust	
Citizenship (US, Resident Alien, Non-Resident Alien)	Marital Status	Number of Dependents	
Home Street Address	City	State	Zip
Primary Email Address	Home Telephone Number	Office Telephone Number	Mobile Telephone Number
Occupation	Employer Name		
Employer Street Address	City	State	Zip

Client Information (Client B/Trustee/Authorized Individual)			
Name (First, Middle Initial, Last)	SSN/Tax ID	Date of Birth/Date of Trust	
Citizenship (US, Resident Alien, Non-Resident Alien)	Marital Status	Number of Dependents	
Home Street Address	City	State	Zip
Primary Email Address	Home Telephone Number	Office Telephone Number	Mobile Telephone Number
Occupation	Employer Name		
Employer Street Address	City	State	Zip

Household/Trust/Corporation Financial & Investment Information			
Annual Income	Net Worth (excluding Primary Residence)	Liquid Net Worth	<span style="background-color: yellow; border: 1px solid red; padding: 2px;"><b>Industry regulations require us to obtain this information.</b></span> Federal Tax Bracket ≤25%    28%-33%    ≥35%

**Investment Objectives:** Please select the most accurate description of your *primary* investment objective for your portfolio:

Aggressive Growth	Growth	Growth and Income	Income
-------------------	--------	-------------------	--------

Risk Tolerance	General Investment Knowledge	Time Horizon
Conservative    Moderate    Aggressive	Extensive    Good    Limited	Short(0-5yrs)    Intermediate(6-10yrs)    Long(+10yrs)

<b>Source of Funds</b> (Rollover, Savings, Sale Proceeds, etc.):	Amount:
--	---------

My signature below denotes my understanding of and agreement with the information provided on this form. I will notify my investment advisor should any material change occur in my investment objectives and/or financial condition.

Client/Trustee/Authorized Individual Name	Client Signature	Date
Client/Trustee/Authorized Individual Name	Client Signature	Date
Investment Advisor Representative Name	Investment Advisor Representative Signature	Date