

## CLIENT DATA GATHERING FORM

Account Type: Individual \_\_\_\_\_ Joint \_\_\_\_\_ Trust \_\_\_\_\_ Qualified \_\_\_\_\_ Corporation \_\_\_\_\_ Other \_\_\_\_\_

### I. Personal Information:

**Client:**

Name \_\_\_\_\_ Soc. Sec. or Taxpayer ID # \_\_\_\_\_

Birth Date \_\_\_\_\_ US Citizen:    Yes    No

Home Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Mailing Address (If Different) \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Marital Status:

( ) Single    ( ) Married    ( ) Widowed

Occupation \_\_\_\_\_

Position \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**Spouse (Partner):**

Name \_\_\_\_\_ Soc. Sec. or Taxpayer ID # \_\_\_\_\_

Birth Date \_\_\_\_\_ US Citizen:    Yes    No

Occupation \_\_\_\_\_

Position \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**Dependents:**

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Soc Sec # \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Soc Sec # \_\_\_\_\_

**Additional Information:**

Are you / Spouse a director, senior officer or controlling person of a publicly traded company? Yes / No

If Yes, Name of Institution \_\_\_\_\_

Are you / Spouse employed by a member firm of a stock exchange or other broker or dealer? Yes / No

If yes, Name of Institution \_\_\_\_\_

**USA PATRIOT ACT Requirement:**

(Please check at least one form of ID listed below and attach a copy for office file)

\_\_\_ Driver's License # \_\_\_\_\_ Issuing State \_\_\_\_\_

\_\_\_ ID card # \_\_\_\_\_ Issuing State \_\_\_\_\_

\_\_\_ Passport # \_\_\_\_\_ Issuing Country \_\_\_\_\_

\_\_\_ Alien Registration Card # \_\_\_\_\_

**II. Investment Objectives, Risk Tolerance, and Financial Data:**

**Investment Objectives \*\*\*\*\*:**

(If more than one is applicable, please list in order of importance)

- ( ) Income (Current income with some capital appreciation)
- ( ) Income and Growth (Current income with long-term capital appreciation)
- ( ) Growth and Income (Long-term capital appreciation with moderate current income)
- ( ) Growth (Long term capital appreciation with some current income)
- ( ) Aggressive (Maximum long term capital appreciation)
- ( ) Other (please specify): \_\_\_\_\_

\*\*\*\*\* Investments involve risk including the possible loss of principal.

**Risk Tolerance:** (Please check one):

( ) Conservative ( ) Moderately Conservative ( ) Moderately

( ) Moderately Aggressive ( ) Aggressive

**Financial Data:**

Annual Income \_\_\_\_\_ Tax Bracket \_\_\_\_\_ Liquid Assets \_\_\_\_\_

Net Worth (excluding primary residence): \_\_\_\_\_

**III. Signatures and Acknowledgements:**

Client Certification: The information above is true, complete, and correct. I understand that it is my responsibility to notify my financial advisor if my financial situation changes.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Signature (if applicable)

\_\_\_\_\_  
Date