

AGATE FINANCIAL SERVICES
NEW ACCOUNT REQUIRED INFORMATION FORM

Name 1: _____ SSN: _____ DOB: _____

Address: _____

Mailing Address: _____

Daytime Phone: _____ Evening Phone: _____ Cell Phone: _____

Email: _____ EStatements: Yes No Emails: Yes No

Employer: _____ Employer Address: _____

Type of Business: _____ Occupation: _____ Title: _____ Yrs of Empl. _____

Driver's License #: _____ State: _____ Date of Issue: _____ Exp. Date: _____

US Citizen: Yes No Affiliation with Investment Firm or Company

_____ Family Member is a Rep. _____ I am a Rep.

Marital Status: _____ Dependants: _____

Name 2: _____ SSN: _____ DOB: _____

Address: _____

Daytime Phone: _____ Evening Phone: _____ Cell Phone: _____

Email: _____ EStatements: Yes No Emails: Yes No

Employer: _____

Employer Address: _____

Type of Business: _____ Occupation: _____

Title: _____ Yrs of Empl. _____

Driver's License #: _____ State: _____ Date of Issue: _____ Exp. Date: _____

US Citizen: Yes No Affiliation with Investment Firm or Company

_____ Family Member is a Rep. _____ I am a Rep.

<u>Annual Income:</u>		<u>Est. Liquid Net Worth:</u>	
Under \$25,000	\$200,000 - \$399,999	Under \$25,000	\$200,000 - \$499,999
\$25,000 - \$49,999	\$400,000 - \$999,999	\$25,000 - \$49,999	\$500,000 - \$999,999
\$50,000 - \$99,999	Over \$1,000,000	\$50,000 - \$99,999	\$1,000,000 - \$2,499,999
\$100,000 - \$199,999		\$100,000 - \$199,999	\$Over \$2,500,000

<u>Federal/State Max. Tax Margin:</u>	<u>Est. Net Worth:</u>	
Less than 15%	Under \$25,000	\$200,000 - \$499,999
15% - 27%	\$25,000 - \$49,999	\$500,000 - \$999,999
28% - 32%	\$50,000 - \$99,999	\$1,000,000 - \$2,499,999
33% and above	\$100,000 - \$199,999	\$Over \$2,500,000

Investments:

Years of Experience

\$ _____ Real Estate	\$ _____ Equities	Annuities _____	Mutual Funds _____
\$ _____ Mutual Funds	\$ _____ Alt. Investments	Partnerships _____	Margin _____
\$ _____ Checking/Savings	\$ _____ Bonds	Stocks _____	Bonds _____
\$ _____ Annuities	\$ _____ Other	Options _____	Other: _____
\$ _____ Insurance			

Liquidity Needs: Under 3 years 3-5 years 6-10 years 11-20 years over 20 years

Risk Tolerance: Low Medium High Time Horizon: 0-5 years 6-10 years over 10

Investment Objectives (1-4): ___ Tax Adv. ___ Income ___ Growth ___ Speculation

Type of Account:

Individual	Trust	UGMA/UTMA	529 Plan
JTWROS	Estate	IRA Type _____	
Tenants in Common	Non-Corp	QP Type _____	
TOD	Corp.	Other _____	

I plan to use this account for:

___ Generate income for current and future expenses
 ___ Partially fund my retirement
 ___ Wholly Fund my Retirement
 ___ Steadily accumulate wealth over the long term
 ___ Preserve wealth and pass it on to my heirs
 ___ Pay for education
 ___ Market Speculations
 ___ Other: _____

Portfolio Investment in this Account:

less than 1/3
 1/3 to 2/3
 more than 2/3

Initial Source of Funds: _____

Beneficiaries:

Name: _____ Relationship: _____ SSN: _____ DOB: _____

Address: _____ Percentage: _____

Name: _____ Relationship: _____ SSN: _____ DOB: _____

Address: _____ Percentage: _____

Name: _____ Relationship: _____ SSN: _____ DOB: _____

Address: _____ Percentage: _____

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