



Personal & Employment Data

Client 1

| | | | |
|-----------------------------|----------------------|----------------------|----------------------|
| Name (First, Middle, Last): | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | First | Middle | Last |
| Preferred Name: | <input type="text"/> | Social Security #: | <input type="text"/> |
| Date of Birth: | <input type="text"/> | Marital Status: | <input type="text"/> |
| Any Prior Marriages? | <input type="text"/> | How Long? (Prior) | <input type="text"/> |
| Mobile Phone: | <input type="text"/> | Personal Email: | <input type="text"/> |

Any medical conditions that would effect your long term financial future?

| | | | |
|----------------------------|----------------------|----------------------|----------------------|
| Current Employer/Company: | <input type="text"/> | | |
| Job Title/Occupation: | <input type="text"/> | | |
| Employer Address: | <input type="text"/> | | |
| City, State, & Zip: | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | City | State | Zip |
| Work Phone: | <input type="text"/> | Work Email: | <input type="text"/> |
| Start Date with Employer: | <input type="text"/> | Preferred Email: | <input type="text"/> |
| Projected Retirement Date: | <input type="text"/> | | |

Client 2 (Spouse)

| | | | |
|-----------------------------|----------------------|----------------------|----------------------|
| Name (First, Middle, Last): | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | First | Middle | Last |
| Preferred Name: | <input type="text"/> | Social Security #: | <input type="text"/> |
| Date of Birth: | <input type="text"/> | Marital Status: | <input type="text"/> |
| Any Prior Marriages? | <input type="text"/> | How Long? (Prior) | <input type="text"/> |
| Mobile Phone: | <input type="text"/> | Personal Email: | <input type="text"/> |

Any medical conditions that would effect your long term financial future?

| | | | |
|----------------------------|----------------------|----------------------|----------------------|
| Current Employer/Company: | <input type="text"/> | | |
| Job Title/Occupation: | <input type="text"/> | | |
| Employer Address: | <input type="text"/> | | |
| City, State, & Zip: | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | City | State | Zip |
| Work Phone: | <input type="text"/> | Work Email: | <input type="text"/> |
| Start Date with Employer: | <input type="text"/> | Preferred Email: | <input type="text"/> |
| Projected Retirement Date: | <input type="text"/> | | |

| | | | |
|----------------------|----------------------|----------------------|----------------------|
| Wedding Anniversary: | <input type="text"/> | Home Phone: | <input type="text"/> |
| Home Address: | <input type="text"/> | | |
| City, State, & Zip: | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | City | State | Zip |



Personal Interests (Client 1)

Please place an x in the boxes next to the items you are interested in.

| | | |
|---|--|--|
| <input type="checkbox"/> Antiques | <input type="checkbox"/> Dogs | <input type="checkbox"/> Outdoor/Adventure |
| <input type="checkbox"/> Art | <input type="checkbox"/> Environment | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Baking | <input type="checkbox"/> Fantasy Sports | <input type="checkbox"/> Physical Fitness |
| <input type="checkbox"/> Boating | <input type="checkbox"/> Fermenting Wine | <input type="checkbox"/> Reading |
| <input type="checkbox"/> Brewing beer | <input type="checkbox"/> Fishing | <input type="checkbox"/> Recreational Vehicles |
| <input type="checkbox"/> Camping | <input type="checkbox"/> Gardening | <input type="checkbox"/> Rock climbing |
| <input type="checkbox"/> Canoeing | <input type="checkbox"/> Golfing | <input type="checkbox"/> Running |
| <input type="checkbox"/> Cats | <input type="checkbox"/> Gourmet/Fine Food | <input type="checkbox"/> Shooting |
| <input type="checkbox"/> Collecting | <input type="checkbox"/> Hiking | <input type="checkbox"/> Shopping |
| <input type="checkbox"/> College basketball | <input type="checkbox"/> Horseback riding | <input type="checkbox"/> Skiing |
| <input type="checkbox"/> College football | <input type="checkbox"/> Hunting | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Concerts | <input type="checkbox"/> Kayaking | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Knitting | <input type="checkbox"/> Theatre |
| <input type="checkbox"/> Crafting | <input type="checkbox"/> MLB | <input type="checkbox"/> Traveling |
| <input type="checkbox"/> Cycling | <input type="checkbox"/> Mountain Biking | <input type="checkbox"/> Volunteering |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> NBA | <input type="checkbox"/> Wine |
| <input type="checkbox"/> Decorating | <input type="checkbox"/> NFL | <input type="checkbox"/> Yoga |

Personal Interests (Client 2)

Please place an x in the boxes next to the items you are interested in.

| | | |
|---|--|--|
| <input type="checkbox"/> Antiques | <input type="checkbox"/> Dogs | <input type="checkbox"/> Outdoor/Adventure |
| <input type="checkbox"/> Art | <input type="checkbox"/> Environment | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Baking | <input type="checkbox"/> Fantasy Sports | <input type="checkbox"/> Physical Fitness |
| <input type="checkbox"/> Boating | <input type="checkbox"/> Fermenting Wine | <input type="checkbox"/> Reading |
| <input type="checkbox"/> Brewing beer | <input type="checkbox"/> Fishing | <input type="checkbox"/> Recreational Vehicles |
| <input type="checkbox"/> Camping | <input type="checkbox"/> Gardening | <input type="checkbox"/> Rock climbing |
| <input type="checkbox"/> Canoeing | <input type="checkbox"/> Golfing | <input type="checkbox"/> Running |
| <input type="checkbox"/> Cats | <input type="checkbox"/> Gourmet/Fine Food | <input type="checkbox"/> Shooting |
| <input type="checkbox"/> Collecting | <input type="checkbox"/> Hiking | <input type="checkbox"/> Shopping |
| <input type="checkbox"/> College basketball | <input type="checkbox"/> Horseback riding | <input type="checkbox"/> Skiing |
| <input type="checkbox"/> College football | <input type="checkbox"/> Hunting | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Concerts | <input type="checkbox"/> Kayaking | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Knitting | <input type="checkbox"/> Theatre |
| <input type="checkbox"/> Crafting | <input type="checkbox"/> MLB | <input type="checkbox"/> Traveling |
| <input type="checkbox"/> Cycling | <input type="checkbox"/> Mountain Biking | <input type="checkbox"/> Volunteering |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> NBA | <input type="checkbox"/> Wine |
| <input type="checkbox"/> Decorating | <input type="checkbox"/> NFL | <input type="checkbox"/> Yoga |



Children & Dependents

Please also include adult children & their spouses

| | | | |
|------------------------|----------------------|----------------------|----------------------|
| Name: | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | First | Middle | Last |
| Preferred Name: | <input type="text"/> | Marital Status: | <input type="text"/> |
| Date of Birth: | <input type="text"/> | Social Security #: | <input type="text"/> |
| Home Address: | <input type="text"/> | | |
| City, State, & Zip: | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | City | State | Zip |
| Phone: | <input type="text"/> | Email: | <input type="text"/> |
| Financially Dependent: | <input type="text"/> | Relationship: | <input type="text"/> |

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Grandchildren

Please include as much information as you have on hand

| | | | |
|------------------------|----------------------|----------------------|----------------------|
| Name: | <input type="text"/> | <input type="text"/> | <input type="text"/> |
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| | City | State | Zip |
| Phone: | <input type="text"/> | Email: | <input type="text"/> |
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| City, State, & Zip: | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | City | State | Zip |
| Phone: | <input type="text"/> | Email: | <input type="text"/> |
| Financially Dependent: | <input type="text"/> | Relationship: | <input type="text"/> |



Professional Contacts

Accountant

| | | | |
|---------------------|------|--------|-----|
| Advisor Name: | | | |
| Firm Name: | | | |
| Address: | | | |
| City, State, & Zip: | | | |
| | City | State | Zip |
| Phone: | | Email: | |

Attorney

| | | | |
|---------------------|------|--------|-----|
| Advisor Name: | | | |
| Firm Name: | | | |
| Address: | | | |
| City, State, & Zip: | | | |
| | City | State | Zip |
| Phone: | | Email: | |

Life Insurance Agent

| | | | |
|---------------------|------|--------|-----|
| Advisor Name: | | | |
| Firm Name: | | | |
| Address: | | | |
| City, State, & Zip: | | | |
| | City | State | Zip |
| Phone: | | Email: | |

Property & Casualty Agent

| | | | |
|---------------------|------|--------|-----|
| Advisor Name: | | | |
| Firm Name: | | | |
| Address: | | | |
| City, State, & Zip: | | | |
| | City | State | Zip |
| Phone: | | Email: | |

Stock Broker or Planner

| | | | |
|---------------------|------|--------|-----|
| Advisor Name: | | | |
| Firm Name: | | | |
| Address: | | | |
| City, State, & Zip: | | | |
| | City | State | Zip |
| Phone: | | Email: | |

Other

| | | | |
|---------------------|------|--------|-----|
| Advisor Name: | | | |
| Firm Name: | | | |
| Address: | | | |
| City, State, & Zip: | | | |
| | City | State | Zip |
| Phone: | | Email: | |

Securities offered through LPL Financial, Member FINRA SIPC. Investment advice offered through Stratos Wealth Partners, a registered Investment Advisor. Stratos Wealth Partners and Wealth Advocate Group LLC are separate entities from LPL Financial.