



CLIENT CARE INFORMATION

CLIENT INFORMATION:

First Name	Middle	Last Name	Suffix
SSN/Tax ID	Date of Birth	Gender: ☐ Male ☐ Female	Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Widowed
Legal Street Address (not P.O. Box)	City	State	Zip Code
*Mailing address is only necessary if different from legal address.			
Mailing Address	City	State	Zip Code
Home Phone	Cell Phone	E-mail Address	
Spouse / Beneficiary Name	SSN/Tax ID	Address (street, city, state, zip)	

ID VERIFICATION:

Driver's License No.	Issue Date	Exp. Date	State/Country
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EMPLOYMENT: ☐ Employed ☐ Self-Employed ☐ Retired ☐ Student ☐ Not Employed / Not Applicable

Employer Name	Occupation	Business Phone
Work Address	City	State Zip Code

FINANCIAL INFORMATION:

Annual Income:	Approximate Net Worth: :
Federal Tax Bracket:	Investable Net Worth:

INVESTMENT EXPERIENCE: Use one number to signify experience for each category: 1 None 2 Occasional 3 Frequent 4 Extensive

Stocks:	Bonds:	Options:	Commodities:	Real Estate:	Mutual Funds:
Insurance/Annuities:	REITs/DPP/LP:	Other:			

Please list specific dollar amounts for current holdings **outside** Wealthcare/Cambridge. ☐ None

Stocks:	\$	.00	Bonds:	\$	.00	Options:	\$	.00
Commodities:	\$	.00	Real Estate:	\$	.00	Mutual Funds:	\$	.00
Insurance/Annuities:	\$	.00	REIT/DPP/LP:	\$	.00	Other:	\$	.00

PRIMARY INVESTMENT OBJECTIVE:

Risk	Conservative	Moderate-Conservative	Moderate	Moderate-Aggressive	Aggressive
Tolerance:	☐ Current Income ☐ High Current Income ☐ Growth & Income ☐ Growth	☐ Current Income ☐ High Current Income ☐ Growth & Income ☐ Growth	☐ Current Income ☐ High Current Income ☐ Growth & Income ☐ Growth	☐ High Current Income ☐ Growth & Income ☐ Growth ☐ Speculation	☐ High Current Income ☐ Growth & Income ☐ Growth ☐ Speculation

SECONDARY INVESTMENT OBJECTIVE: (optional)

If desired, select up to **two** secondary objectives for this account or other accounts. This will allow for more options for additional investments.

☐ Current Income	☐ High Current Income	☐ Growth & Income
☐ Growth	☐ Speculation	

TIME HORIZON/LIQUIDITY NEEDS:

Account Time Horizon: ☐ 0-2 yrs ☐ 2-5 yrs ☐ 5-10 yrs ☐ 10+ yrs
Liquidity Needs

Annual Expenses (recurring)	\$	.00
Est. Special Expenses (future, non-recurring)	\$	.00
Special Expense Timeframe:	☐ 0-2 years ☐ 2-5 years ☐ 5+ yrs	

ACCOUNT LIST

TYPE OF ACCOUNT (IRAs, Brokerage, Annuities, Insurance, Cash) AMOUNT:

Account Type: _____

Amount \$_____ .00

Account Type: _____

Amount \$_____ .00

Account Type: _____

Amount \$_____ .00

Account Type: _____

Amount \$_____ .00

Account Type: _____

Amount \$_____ .00

Account Type: _____

Amount \$_____ .00

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