



# GRINKMEYER LEONARD FINANCIAL

## INVESTMENT ADVICE REQUEST FORM

Would you like help allocating the investments in your employer-sponsored retirement plan? In order to respond to your request in a timely manner, we ask that you provide the following information so that we can help build an investment portfolio that corresponds to your needs and goals. Keep in mind that we may not be able to offer specific advice unless all sections are completed below. Please note that this information will remain confidential and will not be shared with your Employer or third parties.

1. PERSONAL INFORMATION			
Name:	Age:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
Address:			
City:		State:	Zip:
Daytime Phone:		E-mail Address (Required):	
Employer:		Occupation:	
2. SUITABILITY INFORMATION			
Years of Investment Experience: <input type="checkbox"/> 0 <input type="checkbox"/> 1-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> 10+	Previous Investment Experience: <input type="checkbox"/> Mutual Funds <input type="checkbox"/> Real Estate <input type="checkbox"/> Annuities	<input type="checkbox"/> Stocks <input type="checkbox"/> Bonds	Estimated Retirement Age: _____ Current 401(k) Deferral Rate: _____ %
In how many years do you plan on taking withdrawals for retirement? <input type="checkbox"/> 1-5 years <input type="checkbox"/> 6-10 years <input type="checkbox"/> 10-20 years <input type="checkbox"/> 20 years+	Do you have an emergency fund? <input type="checkbox"/> No <input type="checkbox"/> Yes, but it is less than 6 months of my income needs <input type="checkbox"/> Yes, I have an adequate emergency fund	What are your expectations for household income in the next five years? <input type="checkbox"/> The same <input type="checkbox"/> Less <input type="checkbox"/> More	
At what rate do you expect to save for the next five years? <input type="checkbox"/> The same <input type="checkbox"/> Less <input type="checkbox"/> More	Approximate Annual Household Income: <input type="checkbox"/> \$0-\$25,000 <input type="checkbox"/> \$25,000-\$50,000 <input type="checkbox"/> \$50,000-\$100,000 <input type="checkbox"/> \$100,000-\$250,000 <input type="checkbox"/> \$250,000-\$500,000 <input type="checkbox"/> \$500,000+		
Total Investment Assets (Stocks, Bonds, Cash, Mutual Funds, etc.)	Total Investment Assets: <input type="checkbox"/> \$0-\$25,000 <input type="checkbox"/> \$25,000-\$50,000 <input type="checkbox"/> \$50,000-\$100,000 <input type="checkbox"/> \$100,000-\$250,000 <input type="checkbox"/> \$250,000-\$500,000 <input type="checkbox"/> \$500,000-\$1,000,000 <input type="checkbox"/> \$1,000,000-\$2,500,000 <input type="checkbox"/> \$2,500,000+		
Liquid Net Worth (What amount of your assets could readily be turned into cash?):	Liquid Net Worth: <input type="checkbox"/> \$0-\$25,000 <input type="checkbox"/> \$25,000-\$50,000 <input type="checkbox"/> \$50,000-\$100,000 <input type="checkbox"/> \$100,000-\$250,000 <input type="checkbox"/> \$250,000-\$500,000 <input type="checkbox"/> \$500,000+		



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*Trent Grinkmeyer, Valerie Leonard and Jamie Kertis are Registered Representatives and Investment Adviser Representatives with/and offer securities and advisory services through Commonwealth Financial Network, Member FINRA/SIPC, a Registered Investment Adviser. Fixed insurance products and services offered by Grinkmeyer Leonard Financial are separate and unrelated to Commonwealth. This communication is not intended to replace the advice of a qualified tax advisor or attorney.*

### 3. RISK TOLERANCE

Based on your tolerance for fluctuations in the market and your overall investment goals, how comfortable are you with risk in your investment portfolio?

LOW  
RISK

MORE  
RISK

**CHECK ONE:**

Conservative

Moderate  
Conservative

Balanced

Moderate  
Aggressive

Aggressive

*I Prefer low-risk investments and am very concerned about risk.*

*I prefer mostly lower-risk investments.*

*I Prefer investments with a moderate amount of risk.*

*I am somewhat comfortable with risk.*

*I am comfortable with higher-risk investments and risk is not a concern.*

### 4. ELECTRONIC DELIVERY CONSENT

In order for us to offer investment advice, we are required to provide you some important disclosure documents. The documents included on the accompanying CD-ROM, or e-mail transmission, include Commonwealth's Privacy Policy, ADV Part 2A Brochure, and Advisor's Part 2B Brochure Supplement. As part of your plan sponsored Consulting Agreement, the services being provided to you as a plan participant are available to you at no charge. To request to receive a copy of these documents in printed format please contact the representative who provided you the CD-ROM and/or e-mail. By signing this Consent form, you agree to receive these documents electronically.

I hereby consent to receive these documents as well any communications that are available for delivery by Commonwealth Financial Network® ("Commonwealth") in electronic format. I understand that, depending upon the documents to be delivered electronically, Commonwealth will either (i) issue me an e-mail or CD-ROM with documents attached in Portable Document Format (PDF); or (ii) notify me by e-mail that documentation is available for online viewing by accessing a link or Internet address (URL) in the e-mail. In order to receive or access documents delivered to me electronically, I understand that I must have a valid e-mail address on record with you, as well as Internet access via a browser that is JavaScript-enabled, and that my Internet service provider may apply a charge. I understand that documents are currently provided in PDF, that in order to access PDF documents I must have Adobe® Acrobat Reader® software, and that this software is available for download at no cost at [www.adobe.com](http://www.adobe.com). I understand that I may revoke this consent at any time, in which case you will send all communications to me via U.S. Mail.

**Check One:**

I consent to receive these documents at the e-mail address listed in Section 1.

Please send these documents to: \_\_\_\_\_  
Alternate E-mail Address

**Print Name** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Upon completion of this form, please fax it to (866) 774-9029 or e-mail it to [info@grinkmeyerleonard.com](mailto:info@grinkmeyerleonard.com) and our office will contact you within 2 business days.**

**ADVISOR USE ONLY**

Advisor:  Trent Grinkmeyer  Valerie Leonard  Jamie Kertis | Date Participant Contacted: \_\_\_\_\_

Are participant's investments currently aligned with risk tolerance?  Yes  No  Unknown

Did you discuss the importance of asset allocation and diversification with participant?  Yes  No

Other topics discussed with participant:  Cash Flow / Budgeting Techniques  Education Planning Strategies  Estate Planning  Protection Planning / Insurance Needs  Retirement Plan Provisions  Contribution Goals and Limits  Tax Planning Strategies  Outside Investments

Investment recommendation(s) made to participant (Use reverse side, if necessary): \_\_\_\_\_

Commonwealth Privacy Policy, ADV Part 2A Brochure, Part 2B Brochure Supplement - Date Sent: \_\_\_\_\_

Follow-up Required: \_\_\_\_\_