Oakley & Irving Wealth Management, LLC.

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Carlsbad, NM 88220
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OSJ Office
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OAKLEY & IRVING Wealth Management, LLC
Independence powered by LPL Financial
Securities offered through LPL Financial Member FINRA/SIPC

Account Information (each spouse must complete first part of form for joint accounts)

Name(s): ____

Residence Address (no P.O. Boxes): ________________________ City_______________ Zip Code _________

Mailing Address (if different): _____________________________ City _______________ Zip Code _________

Phone Numbers Home: __________________ Cell: ___________________ Business: __________________

Social Security: _____________ Spouse SS#: ____________ Date of Birth: _________ Spouse DOB: __________

Driver's License #: ___________________ State: ________ Issue Date: _________ Expiration Date: __________

Driver's License #: ___________________ State: ________ Issue Date: _________ Expiration Date: __________

Email Address: ___________________________ Would you like to enroll your account in E-Delivery? ◉ Yes ○ No

Marital Status- ☐ Single ☐ Married ☐ Divorced ☐ Widowed

Employer Name, Address, Phone (if retired list former employer): ____
____________Occupation: (if retired list former employer):____________________Industry:______________________

FINANCIAL INFORMATION

Source of Wealth & Income: Employment_______ Retirement________ Investment Income________ Inheritance_________
Sale of home or business_________ Other_____________________________

Annual Income: _____ Net Worth (Not Including Personal Residence): _____

Liquid Net Worth: _____ Approximate Account Value: ______ Tax Bracket: ______

A = Less than $25,000 B = $25,000-$49,999 C = $50,000-$99,999 D = $100,000-$249,000 E = $250,000-$499,999 F = $500,000-$749,999 G = $750,000-$999,999 H = $1,000,000-$1,999,999 I = $2,000,000-$4,999,999 J = $5,000,000 and over

INVESTMENT OBJECTIVE: Circle the investment objective that most accurately reflects your goals for this account (choose only one). Investment objectives are overall objectives for the entire account and may be inconsistent with a particular holding at any time. Please note that the achievement of the stated objectives is a long-term goal for the account.

○ A. Income with Capital Preservation: Designed as a longer-term accumulation account, this is the most conservative investment objective. Emphasis is placed on generation of income and preservation from capital loss.

○ B. Income with Moderate Growth: Emphasis is placed on generation of current income with a secondary focus on moderate capital growth.

○ C. Growth with Income: Emphasis is placed on modest capital growth with some focus on generation of current income. This objective is less conservative than Income with Moderate Growth.

○ D. Growth: Emphasis is placed on achieving high long-term growth and capital appreciation. There is little focus on generation of current income.

○ E. Aggressive Growth: Emphasis is placed on aggressive growth and maximum capital appreciation. No focus on generation of current income. This objective has a very high level of risk and is for investors with a longer time horizon.

○ F. Trading: Emphasis is placed on speculative transaction activity. This objective represents acceptance of an extremely high level of risk.

Trusted Contact & Beneficiary Information

Trusted Contact Information (request required by FINRA Rule 4512, as of February 5, 2018)
Name ______________________________ Relation: ____________ Phone #_________________
Address____

Primary Beneficiary # 1
Name _____________________________ SS# _______________________ DOB _____________ Percentage _____

Primary Beneficiary # 2
Name _____________________________ SS# _______________________ DOB _____________ Percentage _____

Primary Beneficiary # 3
Name _____________________________ SS# _______________________ DOB _____________ Percentage _____

Contingent Beneficiary # 1
Name ____________________________ SS# _______________________ DOB ______________ Percentage _____

Contingent Beneficiary # 2
Name ____________________________ SS# _______________________ DOB ______________ Percentage _____

Do you have other investments (including any other investments held by LPL)? ○ Yes ○ No

PLEASE LIST YOUR NET WORTH IN DOLLARS
Checking/Savings: $ _____________ Mutual Funds: $ _______________ Equities (stocks): $ ___________
Bonds: $ ___________ Insurance: $ ________________ Annuities: $ _______________
Real Estate (not including current residence): $ _____________ Alternative Investments: $ ___________
Other: $ ____________ If Other, please explain: ____

Investment Experience (in years): Annuities _____ Mutual Funds _____ Stocks _____ Bonds _____ Other_____

INVESTMENT NEEDS
What is your investment time horizon for this account? 1-3 years 3-5 years 5-10 years 10+ years
Do you have liquidity needs from the funds in this account? ○ Yes ○ No
If yes, when do you need these funds? 0-3 years 3+ years
If yes, specify the approximate dollar amount for the time range indicated above $ ________________

INVESTMENT GOALS (What do you hope to achieve with this investment?)
____
____