

# KNOW YOUR CLIENT FORM

## CLIENT INFORMATION

TITLE \_\_\_\_\_ SALUTATION \_\_\_\_\_ DATE OF BIRTH (m/d/y) \_\_\_\_\_ LANGUAGE  ENGLISH  
 FIRST NAME \_\_\_\_\_ S.I.N. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  FRENCH  
 LAST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME TELEPHONE (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
 \_\_\_\_\_ HOME FAX (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
 CITY \_\_\_\_\_ BUSINESS TELEPHONE (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Ext. \_\_\_\_\_  
 PROVINCE \_\_\_\_\_ BUSINESS FAX (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
 POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_ E-MAIL AT HOME \_\_\_\_\_  
 PREFER MAIL  AT HOME  AT WORK E-MAIL AT WORK \_\_\_\_\_  
 PREFER CALLS  AT HOME  AT WORK

## EMPLOYMENT INFORMATION

OCCUPATION \_\_\_\_\_  
 EMPLOYER NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## FAMILY INFORMATION

MARITAL STATUS  Single  Married  Divorced  Widowed  
 SPOUSE FIRST NAME \_\_\_\_\_  
 LAST NAME \_\_\_\_\_  
 MAIDEN NAME \_\_\_\_\_  
 S.I.N. \_\_\_\_\_  
 DATE OF BIRTH \_\_\_\_\_  
 NUMBER OF DEPENDANTS \_\_\_\_\_ Please see reverse

## IDENTIFICATION

CITIZENSHIP \_\_\_\_\_ (I.D.'s are required for security regulations with insurance companies)  
 ID#1(Driver's licence) \_\_\_\_\_ ID#2 (medicare card) \_\_\_\_\_

## FINANCIAL INFORMATION

GROSS ANNUAL INCOME (\$)	NET WORTH (\$)	INVESTMENT KNOWLEDGE	RANGE OF INVESTMENTS
<input type="checkbox"/> UNDER \$25,000	<input type="checkbox"/> under \$50,000	<input type="checkbox"/> SOPHISTICATED	<input type="checkbox"/> BONDS
<input type="checkbox"/> \$25,000 – \$49,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> GOOD	<input type="checkbox"/> MORTGAGES
<input type="checkbox"/> \$50,000 - \$74,999	<input type="checkbox"/> \$100,001 to \$200,000	<input type="checkbox"/> FAIR	<input type="checkbox"/> STOCKS
<input type="checkbox"/> \$75,000 - \$99,999	<input type="checkbox"/> \$200,001 to \$500,000	<input type="checkbox"/> NOVICE	<input type="checkbox"/> MUTUAL FUNDS
<input type="checkbox"/> \$100,000 - \$124,999	<input type="checkbox"/> \$500,001 to \$1,000,000		<input type="checkbox"/> TERM DEPOSITS/GIC'S
<input type="checkbox"/> \$125,000 - \$199,000	<input type="checkbox"/> \$1,000,001 to \$2,500,000		<input type="checkbox"/> REAL ESTATE
<input type="checkbox"/> OVER \$200,000	<input type="checkbox"/> \$2,500,001 to \$5,000,000		<input type="checkbox"/> LIMITED PARTNERSHIPS
	<input type="checkbox"/> over \$5,000,000		<input type="checkbox"/> SEGREGATED FUNDS

## INVESTMENT INFORMATION

INVESTMENTS OBJECTIVES		LIQUIDITY (YEARS)	VOLATILITY	RISK TOLERANCE
<input type="checkbox"/> RETIREMENT PLANNING	<input type="checkbox"/> TAX SAVINGS	<input type="checkbox"/> NONE <input type="checkbox"/> 1-3	<input type="checkbox"/> LOW	<input type="checkbox"/> LOW
<input type="checkbox"/> SAFETY	<input type="checkbox"/> INCOME	<input type="checkbox"/> 3-5 <input type="checkbox"/> 5-10	<input type="checkbox"/> MODERATE	<input type="checkbox"/> MEDIUM
<input type="checkbox"/> BALANCED	<input type="checkbox"/> GROWTH	<input type="checkbox"/> 11-20 <input type="checkbox"/> 20+	<input type="checkbox"/> HIGH	<input type="checkbox"/> MEDIUM HIGH
<input type="checkbox"/> AGGRESSIVE GROWTH	<input type="checkbox"/> SPECULATION			<input type="checkbox"/> HIGH
<input type="checkbox"/> SHORT TERM SAVINGS				

## SIGNATURES

CLIENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 JOINT CLIENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 REPRESENTATIVE \_\_\_\_\_ CODE 9848- \_\_\_\_\_  
 REPRESENTATIVE SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 SIGNATURE OF AUTHORIZED OFFICER \_\_\_\_\_ DATE \_\_\_\_\_

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## ADDITIONAL INFORMATION

OTHER PHONE NUMBERS \_\_\_\_\_  
 CELLULAR \_\_\_\_\_  
 PAGER \_\_\_\_\_

## DEPENDANT INFORMATION

<u>Childrens' Names</u>	<u>Date of Birth (m/d/y)</u>	<u>S.I.N.</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

## MISCELLANEOUS

How did you hear about D. D. Humes Financial Services?

Advertising  Seminar  Other: \_\_\_\_\_  
 Referral (whom) \_\_\_\_\_

Hobbies & Interests

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## TO WHAT EXTENT DO YOU AGREE WITH THE FOLLOWING STATEMENTS

I appreciate an advisor-assisted relationship  
 Strongly Agree 5  4  3  2  1  Strongly Disagree

I value Humes Financial's unique lifestyle approach to planning  
 Strongly Agree 5  4  3  2  1  Strongly Disagree

I am more focused on realizing objectives than individual transactions  
 Strongly Agree 5  4  3  2  1  Strongly Disagree

I will refer my family and friends to Humes Financial Services Inc  
 Strongly Agree 5  4  3  2  1  Strongly Disagree

I am aware of and utilize Humes extensive services:  
 Financial and lifestyle planning and products; life, health, disability, critical illness and group insurances, Humes Strategic Alliances  
 Strongly Agree 5  4  3  2  1  Strongly Disagree

## OTHER COMMENTS

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_