

ONBOARDING



This form goes into our secure system and establishes your beneficiaries, trusts, and trusted contacts in our system. Each client submits a separate form.

THE BASICS

Full Name

Pronouns

Date of Birth

Email Address

Primary Phone

Social Security No.



ADDRESS

Address

Apt/Suite

City

State

Zip



WORK

Employer

Occupation

Employer Address

Unit

City

State

Zip

BENEFICIARIES + TRUSTS

A beneficiary is a designated person who will inherit your account if something happens to you. You can choose as many beneficiaries as you'd like. They can be designated as **PRIMARY** and **BACKUP** (in the event that something happens to the Primary). If you're not sure, you can add this information later.

1

<hr/>		<hr/>	<hr/>
Full Name		Trust or Entity Name	SSN or EIN
<hr/>	<hr/>	Type: <input type="checkbox"/> PRIMARY	<hr/>
Date of Birth <i>(Trust: UA date)</i>	Relationship	<input type="checkbox"/> BACK-UP	Share %

2

<hr/>		<hr/>	<hr/>
Full Name		Trust or Entity Name	SSN or EIN
<hr/>	<hr/>	Type: <input type="checkbox"/> PRIMARY	<hr/>
Date of Birth <i>(Trust: UA date)</i>	Relationship	<input type="checkbox"/> BACK-UP	Share %

3

<hr/>		<hr/>	<hr/>
Full Name		Trust or Entity Name	SSN or EIN
<hr/>	<hr/>	Type: <input type="checkbox"/> PRIMARY	<hr/>
Date of Birth <i>(Trust: UA date)</i>	Relationship	<input type="checkbox"/> BACK-UP	Share %

4

<hr/>		<hr/>	<hr/>
Full Name		Trust or Entity Name	SSN or EIN
<hr/>	<hr/>	Type: <input type="checkbox"/> PRIMARY	<hr/>
Date of Birth <i>(Trust: UA date)</i>	Relationship	<input type="checkbox"/> BACK-UP	Share %

I Do Not Want To Receive Electronic Statements Via Email

I Do Not Want My Advisor To Vote My Proxies For Me

TRUSTED CONTACT

A Trusted Contact is someone you'd authorize TD Ameritrade to contact if there are questions about your whereabouts or health status.

Circumstances to Use a Trusted Contact:

- Possible fraud or exploitation
- TD Ameritrade suspects you may no longer be able to handle your financial affairs
- Unable to get in touch with you

This form grants your Saltbox advisor permission to be in touch with TD Ameritrade, but not your Trusted Contact.

1

_____	_____	
Full Name	Phone	
_____	_____	
Email Address	Relationship	
_____	_____	
Address	Apt/Suite	
_____	_____	_____
City	State	Zip



ADDRESS

2

_____	_____	
Full Name	Phone	
_____	_____	
Email Address	Relationship	
_____	_____	
Address	Apt/Suite	
_____	_____	_____
City	State	Zip



ADDRESS