

Account Update Form

This form is used to make any corrections or changes to your account. You may not use this form to change the account registration or the account type. All pages must be submitted together for processing. Complete all applicable sections.

ACCOUNT INFORMATION - REQUIRED

Account Title (Name of this account)				Account				
Client Name				Broker Rep Code				
<input type="checkbox"/> ADDRESS CHANGE								
Please change the address on my account to the following:								
Legal Address (no PO Box)								
City	State	Zip	Country					
Mailing Address (if different from legal address)								
City	State	Zip	Country					
<input type="checkbox"/> EMAIL ADDRESS/PHONE NUMBER CHANGE								
Home Phone		Business Phone		Mobile Phone				
Email Address								
<input type="checkbox"/> OCCUPATION/BUSINESS NATURE/EMPLOYER CHANGE								
Employment and Industry Affiliations							IF EMPLOYED / SELF-EMPLOYED IS INDICATED, PLEASE COMPLETE ALL EMPLOYMENT FIELDS	
<input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Homemaker <input type="checkbox"/> Student								
Employer Name		Years Employed		Occupation				
Employer's Address								
City	State	Zip	Country					
<input type="checkbox"/> MONEY SWEEP PROGRAM INSTRUCTIONS – ALL ACCOUNT HOLDERS MUST INITIAL								
<input type="checkbox"/> I elect to use COR Insured Deposit (DLD) Program <input type="checkbox"/> I do not elect to use COR Insured Deposit (DLD) Program (Cash only)							INITIALS REQUIRED HERE:	
Disclaimer: By initialing this document, I represent my consent and authorization to participate in the chosen Sweep Program. I acknowledge that I have read and understand the terms and conditions of the Sweep Program included in the Customer Agreement. To the extent that my choice of Sweep Program constitutes a change from my previous Sweep Program I acknowledge herein that I understand the changes to the product as well as the options available to me should I decide not to accept the product or its terms and conditions.							PRIMARY _____	

<input type="checkbox"/> FINANCIAL INFORMATION			
Annual income	Net Worth (excluding residence)	Liquid Net Worth	Tax Bracket
<input type="checkbox"/> Under \$25,000 <input type="checkbox"/> \$25,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$200,000 <input type="checkbox"/> \$200,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 (specify) _____	<input type="checkbox"/> Under \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1,000,000 <input type="checkbox"/> \$1,000,001 - \$3,000,000 <input type="checkbox"/> Over \$3,000,000 (specify) _____	<input type="checkbox"/> Under \$25,000 <input type="checkbox"/> \$25,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$200,000 <input type="checkbox"/> \$200,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1,000,000 <input type="checkbox"/> \$1,000,001 - \$3,000,000 <input type="checkbox"/> Over \$3,000,000 (specify) _____	<input type="checkbox"/> 0% <input type="checkbox"/> 15% <input type="checkbox"/> 28% <input type="checkbox"/> 31% <input type="checkbox"/> 38% <input type="checkbox"/> Above 38% <input type="checkbox"/> Other (specify) _____
Risk Exposure	Investment Knowledge	Liquidity Needs	Annual Expenses
<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> Aggressive <input type="checkbox"/> Speculative	<input type="checkbox"/> Limited <input type="checkbox"/> Good <input type="checkbox"/> Excellent	<input type="checkbox"/> less than 1 year <input type="checkbox"/> 1 - 5 years <input type="checkbox"/> 5 - 10 years <input type="checkbox"/> 10 - 15 years <input type="checkbox"/> Over 15 years <input type="checkbox"/> Not applicable	<input type="checkbox"/> \$50,000 and under <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$250,000 <input type="checkbox"/> \$250,001 - \$500,000 <input type="checkbox"/> Over \$500,000
Special Expenses	Time Horizon	Investment Objective	
<input type="checkbox"/> \$50,000 and under <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$250,000 <input type="checkbox"/> \$250,001 - \$500,000 <input type="checkbox"/> Over \$500,000 Timeframe for special expenses <input type="checkbox"/> Within 2 years <input type="checkbox"/> 3 - 5 years <input type="checkbox"/> 6 - 10 years	<input type="checkbox"/> Undefined <input type="checkbox"/> less than 1 year <input type="checkbox"/> 1 - 5 years <input type="checkbox"/> 5 - 10 years <input type="checkbox"/> 10 - 15 years <input type="checkbox"/> Over 15 years	<input type="checkbox"/> Current Income Preservation of capital with a primary consideration on current income <input type="checkbox"/> Balanced A balance between capital appreciation and current income with the primary consideration being current income <input type="checkbox"/> Growth & Income A balance between capital appreciation and current income with the primary consideration being capital appreciation <input type="checkbox"/> Growth Capital appreciation through quality equity investment and little or no income <input type="checkbox"/> Maximum Growth Maximum capital appreciation with higher risk and little to no income. <input type="checkbox"/> Speculation Maximum total return potential, involving a higher degree of risk through investment in a broad spectrum of securities.	

Investment Experience

Investment

	Years of Experience			Transactions per year		
Individual Stocks	<input type="checkbox"/> 0	<input type="checkbox"/> 1 - 5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0 - 5	<input type="checkbox"/> 6 - 15	<input type="checkbox"/> Over 15
Options	<input type="checkbox"/> 0	<input type="checkbox"/> 1 - 5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0 - 5	<input type="checkbox"/> 6 - 15	<input type="checkbox"/> Over 15
Bonds	<input type="checkbox"/> 0	<input type="checkbox"/> 1 - 5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0 - 5	<input type="checkbox"/> 6 - 15	<input type="checkbox"/> Over 15
Mutual Funds/ETFs	<input type="checkbox"/> 0	<input type="checkbox"/> 1 - 5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0 - 5	<input type="checkbox"/> 6 - 15	<input type="checkbox"/> Over 15
Insurance/Annuities	<input type="checkbox"/> 0	<input type="checkbox"/> 1 - 5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0 - 5	<input type="checkbox"/> 6 - 15	<input type="checkbox"/> Over 15
Securities Futures	<input type="checkbox"/> 0	<input type="checkbox"/> 1 - 5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0 - 5	<input type="checkbox"/> 6 - 15	<input type="checkbox"/> Over 15
Alternative*	<input type="checkbox"/> 0	<input type="checkbox"/> 1 - 5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0 - 5	<input type="checkbox"/> 6 - 15	<input type="checkbox"/> Over 15
Margin	<input type="checkbox"/> 0	<input type="checkbox"/> 1 - 5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0 - 5	<input type="checkbox"/> 6 - 15	<input type="checkbox"/> Over 15

*May include structured products, derivatives, hedge funds, etc.

SIGNATURES – ALL ACCOUNT HOLDERS, ALONG WITH AN AUTHORIZED FIRM REPRESENTATIVE, MUST SIGN BELOW

Account Holder Signature x	Print Name	Date
Account Holder Signature x	Print Name	Date
Account Holder Signature x	Print Name	Date
Broker Signature x	Print Name	Date
General Principal Signature x	Print Name	Date