

Contact Form

Personal Information #1

First Name _____ MI _____ Last Name _____

SS#: _____ Birthdate: _____

Single Married Widowed Divorced

E-mail: _____

Mobile Phone: _____ Work/Home Phone: _____

Home Address (NO PO BOX) _____

City _____ State _____ Zip Code _____

Mailing Address (NO PO BOX) _____

City _____ State _____ Zip Code _____

Preferred Method of Contact: _____ Permission to Text: YES NO

Employed Self-Employed Unemployed Retired Homemaker Student

Employer Name: _____

Occupation: _____ Type of Business: _____

Occupation code (Last Page): _____ Type of Business code (Last Page): _____

Employer Street Address _____

City _____ State _____ Zip Code _____

US CITIZEN NON-US IF NON, type of citizenship: _____

Birth State: _____ DL State: _____

Driver's License Number: _____ Expiration Date: _____

Approximate Net Worth:

\$0 - \$14,999 \$15,000-\$49,000 \$50,000-\$99,999 \$100,000-\$249,999

\$250,000-\$499,999 \$500,000-\$999,999 \$1,000,000-\$1,999,999 \$2,000,000 +

• Annual Income \$ _____

• Pension \$ _____

• Bonus \$ _____

• Annuity \$ _____

• Social Security \$ _____



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Contact Form

Personal Information #2

First Name _____ MI _____ Last Name _____

SS#: _____ Birthdate: _____

Single Married Widowed Divorced

E-mail: _____

Mobile Phone: _____ Work/Home Phone: _____

Home Address (NO PO BOX) _____

City _____ State _____ Zip Code _____

Mailing Address (NO PO BOX) _____

City _____ State _____ Zip Code _____

Preferred Method of Contact: _____ Permission to Text: YES NO

Employed Self-Employed Unemployed Retired Homemaker Student

Employer Name: _____

Occupation: _____ Type of Business: _____

Occupation code (Last Page): _____ Type of Business code (Last Page): _____

Employer Street Address _____

City _____ State _____ Zip Code _____

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Birth State: _____ DL State: _____

Driver's License Number: _____ Expiration Date: _____

Approximate Net Worth:

\$0 - \$14,999 \$15,000-\$49,000 \$50,000-\$99,999 \$100,000-\$249,999

\$250,000-\$499,999 \$500,000-\$999,999 \$1,000,000-\$1,999,999 \$2,000,000 +

- Annual Income \$ _____
- Bonus \$ _____
- Social Security \$ _____
- Pension \$ _____
- Annuity \$ _____
- Combined Household Income \$ _____



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Contact Form

Source of Account Funding:

What best describes the ongoing source of funding for the accounts you will be opening?

Employment/wages Retirement Funds Gift Savings Inheritance/Trust
Investments Unemployment/Disability Legal Settlement Lottery/Gambling
Spousal/Parental Support Other (describe source of funds): _____

Dependent Information:

1. First Name _____ MI _____ Last Name _____
SS# _____ Birthdate _____
2. First Name _____ MI _____ Last Name _____
SS# _____ Birthdate _____
3. First Name _____ MI _____ Last Name _____
SS# _____ Birthdate _____
4. First Name _____ MI _____ Last Name _____
SS# _____ Birthdate _____

Beneficiary Information:

1. First Name _____ MI _____ Last Name _____
SS# _____ Birthdate _____
Type of Beneficiary: Primary Contingent Share % _____
Phone _____ Email _____
2. First Name _____ MI _____ Last Name _____
SS# _____ Birthdate _____
Type of Beneficiary: Primary Contingent Share % _____
Phone _____ Email _____
3. First Name _____ MI _____ Last Name _____
SS# _____ Birthdate _____
Type of Beneficiary: Primary Contingent Share % _____
Phone _____ Email _____



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Pet Information

1. Name _____ Breed _____
2. Name _____ Breed _____
3. Name _____ Breed _____
4. Name _____ Breed _____

Trusted Contact (Optional)

Your Trusted Contact must be someone other than the account owner and cannot be the Investment Advisor. You may provide more than two Trusted Contact Persons through additional paperwork. This person will through TD Ameritrade paperwork, be contacted for the following reasons: if there are questions or concerns about your whereabouts or health status. If TD Ameritrade suspects that you may be a victim of fraud or financial exploitation; if TD Ameritrade suspects you may no longer be able to handle your financial affairs; to confirm the identity of any legal guardian, executor, trustee, authorized trade, or holder of power of attorney; or if TD Ameritrade has any other concerns or is unable to contact you about your account(s) held at TD Ameritrade

First Name _____ MI _____ Last Name _____
Relationship _____ Primary Telephone Number _____
Email Address _____
Mailing Address _____
City _____ State _____ Zip Code _____

First Name _____ MI _____ Last Name _____
Relationship _____ Primary Telephone Number _____
Email Address _____
Mailing Address _____
City _____ State _____ Zip Code _____

This information was provided by: _____

Client #1 Signature: _____

Client #2 Signature: _____

Date Provided: _____



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Contact Form

Occupation Codes

| | | |
|--|--|---|
| A42 Accountant/Auditor/Bookkeeper | C82 Compliance/Regulatory Professional | N21 Nurse |
| A62 Adjuster | C92 Consultant | O11 Office Associate |
| A82 Advertiser/Marketer/PR Professional | C43 Counselor/Therapist | O21 Other; If Other, include a description in the Occupation box. |
| A33 Air Traffic Controller | C53 Customer Service Representative | P81 Pharmacist |
| A43 Ambassador/Consulate Professional | D11 Dealer | P91 Physical Therapist |
| A53 Analyst | D61 Dentist | P22 Pilot |
| A63 Appraiser | D31 Distributor | P32 Police Officer/Firefighter/Law Enforcement Professional |
| A73 Architect/Designer | D41 Doctor/Surgeon/Physician | P42 Politician |
| A83 Artist/Performer/Actor/Dancer | D51 Driver | P52 Project Manager |
| A93 Assistant/Executive Assistant | E51 Engineer | R81 Real Estate Professional |
| A44 Athlete | E71 Exterminator | R71 Researcher |
| A64 Attorney/Judge/Legal Professional | F71 Factory/Warehouse Worker | S41 Salesperson |
| A74 Auctioneer | F81 Farmer/Rancher | S51 Scientist |
| L51 Banker/Lending Professional | F91 Financial Planner/Advisor | S61 Seamstress/Tailor |
| B21 Barber/Beautician/Hairstylist | F22 Flight Attendant | S71 Security Guard |
| B31 Broker/Registered Rep | F32 Human Resources Professional | S81 Social Worker |
| B41 Business Executive (VP, Director, etc.) | I41 Importer/Exporter | T41 Teacher/Professor |
| B51 Business Owner | I51 Inspector/Investigator | T51 Technician |
| C81 Caregiver | I81 Investor | T61 Teller |
| C91 Carpenter/Construction Worker/Contractor | I91 IT Professional/IT Associate | T71 Tradesperson/Craftsperson |
| C22 Cashier | J31 Janitor | T81 Trainer/Instructor |
| C32 Chef/Cook | J41 Jeweler | U21 Underwriter |
| C42 Chiropractor | L31 Laborer | V11 Veterinarian |
| C52 Civil Servant | L41 Landscaper | W21 Writer/Journalist/Editor |
| C62 Clergy | M91 Mechanic | |
| C72 Clerk | M22 Military, Officer or Associated | |
| | M32 Mortician/Funeral Director | |

Industry of Occupation Codes

| | | |
|--|--|--|
| A11 Accounting | F11 Fashion/Clothing | O31 Other; If Other, include a description in the Industry of Occupation box |
| A21 Advertising/Marketing | F21 Financial Services | P11 Parking and Car Washes |
| A31 Aerospace/Defense | F51 Firearms and Explosives | P21 Pawn Shops/Brokers |
| A41 Agriculture/Forestry | G11 Gaming/Casino/Card Club | P31 Personal Care/Hygiene (Beauty, Salon, Cosmetics, Massage, etc.) |
| A51 Amusement and Recreation | G21 Government/Public Administration | P41 Pharmaceuticals |
| A61 Animal Services and Veterinary | G31 Grocery/Supermarket | P51 Printing/Publishing |
| A71 Architecture/Design | H11 Healthcare/Medical Services | P71 Professional/Civic Organizations (Non-Retail) |
| A81 Arts/Antiques | H21 Hotel/Hospitality | R11 Real Estate |
| A91 Athletics/Fitness | I11 Import/Export | R21 Religious Organization |
| A32 Automotive | I21 Information Technology (IT) | R31 Repair Services - Home, Auto, and Other |
| B11 Aviation | I31 Insurance | R41 Restaurant/Food Service |
| C11 Bar/Nightclub/Adult Entertainment Club | J11 Jewelry, Gems, and Precious Metals | R51 Retail Sales/Retail Trade |
| C21 Childcare | L11 Legal Services/Public Safety | S11 Science and Biotechnology |
| C31 Cleaning/Janitorial/Housekeeping | L21 Logistics/Supply Chain | S21 Security |
| C41 Communications/Telecommunications | M11 Manufacturing | T11 Transportation |
| C51 Construction/Carpentry/Landscaping | M21 Maritime | T31 Travel |
| C61 Convenience Store/Liquor Store/Gas Station | M31 Media/Entertainment | U11 Utilities (Public) |
| C71 Customer Service and Support | M41 Mining, Oil, and Gas | W11 Wholesale Sales/Trade |
| E11 Education | M51 Money Services Businesses (Check Cashing, Money Transmitting, Payday Loans, Currency Exchange) | |
| E21 Embassy/Consulate | N11 Non-Profit/NGO (Non-Government Agency)/Charity | |
| E31 Energy | | |
| E41 Engineering | | |



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Contact Form

Power of Attorney Supplement

Please use this form to provide required information for an individual possessing power of attorney in regard to a TD Ameritrade Institutional account. This form should not be used to appoint or supplement an advisor or advisor representative as power of attorney

First Name _____ MI _____ Last Name _____

SS#: _____ Birthdate: _____

E-mail: _____

Mobile Phone: _____ Work/Home Phone: _____

Home Address (NO PO BOX) _____

City _____ State _____ Zip Code _____

Mailing Address (NO PO BOX) _____

City _____ State _____ Zip Code _____

Preferred Method of Contact: _____ Permission to Text: YES NO

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