Financial Planning & Consulting
Schedule A

WPA

LPL Account Number (for journals only)

Rep ID

Instructions: Complete all applicable sections of this agreement in full.

Section I: Individual Information

1. Client Information

Client Name

Age or Date of Birth

Social Security / Tax ID Number

Street Address, City, State and Zip Code (no P.O. Boxes)

Liquid Net Worth $

Annual Income $

2. Investment Advisor Representative (IAR) Information

IAR Name(s)

Advisor Email

Section II: Financial Planning & Consulting

1. Financial Planning & Consulting Fee Structure (mark all that apply)

☐ One-Time Flat Fee $

☐ Hourly Rate $ / hour

☐ Ongoing Fee Frequency:

◯ Monthly $

◯ Quarterly $

◯ Semi-Annual $

◯ Annual $

Total Yearly Fee $

2. WealthVision℠

☐ WealthVision℠ Access Subscription Fee $ / year

Client Initials

By initialing I acknowledge this agreement is for WealthVision℠ online access and agree to the stated fee. Additionally, I acknowledge that I have received the WealthVision℠ activation email and have the ability to log on to the WealthVision℠ website.

3. Payment Method (mark all that apply)

☐ Check Amount $ Check #

☐ Journal Amount $ Account* #

For ongoing fees, please select the date of the month the fee should be journaled from the indicated LPL account**: ◯ 5th ◯ 20th

☐ AdvicePay Amount $ Invoice*** #

*Account number required if different from account number listed at the top of the form.

**If a date for ongoing journals is not indicated it will default to the 5th of the month.

***Invoice number only needed if invoice has already been created and is known.

4. Areas of Analysis

Your financial planning and consulting discussions may contain at least one of the following areas of discussion/analysis:

- Retirement Planning
- Education Planning
- Estate Planning
- Cash Flow/Budget Planning
- Risk Management Planning
- Personal Wealth Planning
- Tax Planning
- Business Planning
- Investment Planning/Asset Allocation

5. Client Report

Will the client receive a software-generated plan or analysis as part of the financial planning and consulting services? ◯ Yes* ◯ No (Please complete Section II.7)

*Please indicate the LPL approved software used to create the financial plan:

Section II: Financial Planning & Consulting (continued)

6. Investment Objective (required if delivering a client report)

Please choose the one investment objective that most accurately reflects the client's risk tolerance for this agreement.

◯ Income with Capital Preservation
Emphasis is placed on generation of current income with minimal risk of capital loss.

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

◯ Growth with Income
Emphasis is placed on modest capital growth with some focus on generation of current income.

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

◯ Aggressive Growth
Emphasis is placed on aggressive growth and maximum capital appreciation. There is no focus on generation of current income.

7. Description of Services

Please provide a brief description of the services being rendered to the client under this arrangement:

Section III: Acknowledgment

1. Client Acknowledgment and Signature

I acknowledge by signing below that I have received, read, understand, and agree to the terms of the Financial Planning & Consulting Agreement (Agreement). I also understand and acknowledge receipt of this Agreement, the LPL Financial Form ADV Part 2A, and brochure supplement (ADV Part 2B) for the IAR(s) providing the services under the Agreement. This Agreement is governed by and I acknowledge receipt of the predispute arbitration clause located in Section 8.

Account Holder Signature | Account Holder Name (print) | Date (required)

Account Holder Signature | Account Holder Name (print) | Date (required)

2. Advisor Acknowledgment and Signature

Email address for approval notification:

I hereby certify that the information above is true and correct. In addition, I have obtained the information and assumptions used in the preparation of the consulting service from my client(s) or other relevant source documents. I further certify that the value of securities assets as utilized within the consulting service have been obtained from either (1) source documents (i.e. sponsor statements) or (2) the client, as evidenced on the fact finder questionnaire, copies of which are maintained in my branch office files. I have read the Financial Planning & Consulting Advisor Guides and the Definition of Services document and the services to be provided under this engagement are limited to those permitted under the Financial Planning & Consulting Programs.

I attest that the funds used for payment of the advisory services described above have not incurred a commission within the past 12 months, were not subject to a penalty, or a deferred sales charge. I gave the client a current LPL Firm Brochure, my Brochure Supplement, the Financial Planning & Consulting Agreement, and a copy of the Schedule A. I affirm this contract was executed prior to providing services.

Investment Advisor Representative Signature | Investment Advisor Representative Name (print) | Date (required)

Investment Advisor Representative Signature | Investment Advisor Representative Name (print) | Date (required)

LPL Account Number (for journals only)