

# *AIC Investment Advisors, Inc.*

30 Stockbridge Road  
Great Barrington, MA 01230  
413.528.9779

## Confidential Information Form

**Date:** \_\_\_\_\_  
**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Tel No:** \_\_\_\_\_  
**Occupation/Company:** \_\_\_\_\_ **Bus No:** \_\_\_\_\_  
**Salary:** \$ \_\_\_\_\_ **Retired:** Yes \_\_\_ No \_\_\_ **Federal Tax Rate:** \_\_\_\_\_ %

<b>Dependents:</b>	<b>Relationship:</b>	<b>Age:</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

### **Fund Objective(s) / Portfolio Income Requirements:**

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

### **List: Life Insurance, Pension Plans, and Annuities – (Company/Policy Type/Cash Value/Issue Age)**

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

### **Mortgages or Personal Notes Receivables:** \_\_\_\_\_

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

### **Brokerage Firm(s):**

### **Telephone Number(s):**

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

I (We) hereby agree to engage *AIC Investment Advisors, Inc.* to perform its *Portfolio Management Service* upon receipt of this signed form.

**Signature(s):** \_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_

**Assets**

**Totals**

**Fixed-Income** **\*IRA**

*Bank/Savings Deposits* .....

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*Money Market Accounts* .....

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*Bond Issues* .....

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**Gold-Related Assets**      **Coin Type/Shares**    **# Ounces**      **Cost Basis**      **\*IRA**

*Bullion & Coins* .....

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*Mining Shares* .....

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**Equities**                      **Units**                      **Issue**                      **Cost Basis**      **\*IRA**

*Common Stocks* .....

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*Mutual Funds* .....

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