

# SCHEDULE A

## Representative Information Form

**General Information:**

Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Broker/Dealer & Investment Adviser Information:**

Name of your Broker/Dealer: LPL Financial

Registered Representative Number: \_\_\_\_\_

Name of your Registered Investment Advisory Firm\*: LPL Financial

\*You must be registered as an Investment Advisor Representative ("IAR") in order to act as a solicitor for Brinker.

**REPRESENTATIVE'S SIGNATURE BOX**

I hereby represent that the information contained on this form is true and accurate.

PRINTED NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**BRINKER CAPITAL INVESTMENTS, LLC**

17605 Wright Street  
Omaha, NE 68130

By: \_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

Title: \_\_\_\_\_

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