

# AdvisorSmart® Report Request Form

To request an AdvisorSmart® Report, please provide the following information:

Requestor Information:	Required
First Name:	Yes
Last Name:	Yes
Postal Mailing List:	Yes
Phone Number:	Yes
Email Address:	Yes
<b>Individual Financial Advisor Information</b>	
First Name:	Yes
Last Name:	Yes
Postal Mailing List:	Yes
Email Address:	No
Website:	No
<b>Firm Information for the Individual Financial Advisor:</b>	
Firm Name:	Yes
Mailing Address:	Yes
Website:	Yes

## To submit your request:

Please make your check payable to AdvisorSmart® for \$250 and mail to us at the following address:

**AdvisorSmart®**  
**4705 Fremont Avenue South**  
**Minneapolis, MN 55419**

Please indicate your preference to have your AdvisorSmart® Report delivered:

- Postal Mail
- Email

Allow approximately ten days for our team to research your request.