



GOALS PROGRESS STRATEGY™
YOUR FINANCIAL WORLD IN ORDER™

Application for GPS Financial Service System™

Licensee's Name _____
Last First MI

Advisor's Name _____
If different from licensee Last First MI

Advisor Business Information

Business Name _____

Physical Address _____

Mailing Address _____

Phone number _____

Email Address _____

Web Address _____

Registered Investment Advisor? Y / N

Broker Dealer Name _____

I agree to update this business information within 60 days of any changes.

Signature of Licensee Date

Return a signed and dated copy of this application to Bill McArthur by mail, fax, or email:
2113 Fort Union Drive, Santa Fe, NM 87505; 505-983-2186; bill@mcarthurandcompany.com