



HIGHPOINT  
ADVISOR GROUP

# Financial Planning & Consulting Delivery Receipt

IAR ID

Instructions: Complete the relevant sections of this form upon completion of Financial Planning & Consulting services. The form must be submitted by the Advisor to [fpca@hiptpartners.com](mailto:fpca@hiptpartners.com) for processing.

## 1. Client Information

Client Name(s)

Investment Advisor Representative(s)

## 2. Services Provided (Check all that apply.)

- Financial Planning – I have received a written financial plan.
- Consulting – I have received the services listed on the Consulting Agreement.

**3. Acknowledgment and Completion.** By signing below, I acknowledge that I have received the financial planning and/or consulting services outlined on the Financial Planning & Consulting Agreement. By signing this receipt, I confirm that the services have been completed.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Client Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Client Name

\_\_\_\_\_  
Date

As shown on the Financial Planning & Consulting Agreement, our recommendations may be implemented, at your sole discretion, with the professional adviser(s) of your choosing (including your broker, accountant, attorney, etc.). No portion of the financial plan or any Planning Services rendered by us should be interpreted by you as legal or accounting advice. We recommend that you seek the advice of a qualified attorney and accountant.

Recommendations are based on our professional judgment. We do not guarantee the results of any of our recommendations. You are free to obtain legal, accounting, and brokerage services from any professional source to implement our recommendations. You retain absolute discretion over all implementation decisions.