

Disclosure of Financial Advisor Compensation

Purpose

The purpose of this document is to provide full and specific disclosure to determine the "Total Fees and Costs" I will pay (or currently pay) with regard to my investment accounts on an annual basis. In addition, this will help to fully explain possible conflicts-of-interest affecting either current or future investment recommendations or advice regardless of fiduciary status, as of the given date.

Instructions

Please complete and sign this form on your company's behalf. You should attach explanatory material in support of your answers, which should include a detailed description of any related entity or affiliate.

1. Are you a fiduciary under the law, and will you continue to be my fiduciary at all times during the advisor- client relationship we will enter into, and with respect to all of my accounts with you and all of the advice you provide to me? Yes NO
 - A. If a Fiduciary, will you sign a Fiduciary Oath? Yes NO

2. How are you Compensated?
 Fee-Only – You are paid only by compensation from me as the client.
 Fee and Commissions - You are paid from fees and commissions.
 Commission

3. Other Compensation and Fees Paid to Firm and/or Affiliates (Check all that apply)
 12b(1) Fees Back-End Fees Wrap Fees Surrender Charges
 Contingency Fees

 Eligible for Sales Prizes Soft-Dollar Benefits Performance Compensation
 Trailing Commissions

4. What conflicts of interest do you, your firms, or any affiliated firms possess with respect to the advice you may provide to me? _____

5. Will you provide a written and signed disclosure of Remuneration/Economic Benefit for my investments that include all fee, commissions and expenses? YES NO
Please Include any Soft Dollar Arrangements, 12b-1, Revenue Sharing, Bond Commissions/Credits, and Finder's Fees.

6. Does any member of your firm act as a general partner, participate in, or receive compensation from investments you may recommend to me? Yes NO

7. Do you receive referral fees from attorneys, accountants, insurance agents, mortgage brokers, or others? Yes NO
8. Are there financial incentives for you to recommend certain financial products?
Yes NO
(If yes, please explain) _____
9. For the twelve (12) month period ending (date)_, please use the accompanying "Disclosure of Remuneration and Economic Benefit" document, and complete it related to what you, your firm, its employees, and any of its affiliated or related entities receive as types of remuneration/economic benefit.
10. Will you be recommending any "proprietary products" to me? Yes NO
11. Will you be engaging in any "principal trade" with me? Yes NO

Certification and Signature

I affirm that I am authorized to complete this document on behalf of (provider company name) _____ and certify that all answers are a true and complete representation of the remuneration and economic benefit received by me, my firm, and any of its employees and any of its affiliates or related entities in relation to the services of the clients' accounts, current or proposed.

Signature: _____ Date: _____
Name: _____

Fiduciary Oath (Please sign if you answered "YES" to Question 1)

1. I believe in placing your best interests first. Therefore, I am proud to commit to the following five fiduciary principles:
2. I will always put your best interests first.
3. I will act with prudence; that is, with the skill, care, diligence, and good judgment of a professional.
4. I will not mislead you, and I will provide conspicuous, full and fair disclosure of all important facts.
5. I will avoid conflicts of interest.
6. I will fully disclose and fairly manage, in your favor, any unavoidable conflicts.

Advisor: _____

Firm/Affiliate: _____

