

SUITABILITY FORM

Regulatory authorities require that there be reasonable grounds for believing that each portfolio is suitable for a client. Such decision will be based on the facts, if any, disclosed by the client after a reasonable inquiry and on other information known by the registered investment advisor.

Name (please print) _____

Shareholder Type: Single Investor Joint Ownership IRA Trust Corporate UGMA/UTMA

Investment Objectives: I/we/am/are investing in the (name of fund, unit investment trust or limited partnership) _____

I/We understand the product's investment objective is consistent with my/our investment objective(s) of:

Aggressive Growth Conservative Moderate Indexed

Total Plan Assets: (qualified pension or profit sharing plan only) \$ _____

Suitability Information of Owner or Person Providing Funds for this Purchase: (for corporations and trusts, complete "Investment Objective" and "Net Worth")

Personal Residence Market Value \$	Mortgage Balance \$	Checking and Savings Balances \$	Tax Bracket <input type="checkbox"/> 15% <input type="checkbox"/> 28% <input type="checkbox"/> 31%
Estimated Family Income \$	Estimated Value Other Investments \$	Net Worth \$	

Investor's Occupation	Date of Birth
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Joint Owner's Occupation	Date of Birth
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Name and Address of Employer(s) _____

Are you or your Spouse a Registered Representative, an Employee or an associated person of another firm? Yes If yes, Explain No

If shareholder type Uniform Gifts (or Transfer) to Minors Act, Minor's Date of Birth _____

Source of Funds: (need not be completed if shareholder type is "trust" or "corporate")
Is the source of the money for this purchase from emergency cash, borrowed money, proceeds from the sale of mutual funds or cash values from an insurance policy? No Yes, If yes, please explain: _____

Client Statement:
I/We have been given the opportunity to ask any questions. I/We have regarding this portfolio objective, and they have been answered to my/our satisfaction.

Signature	Date	Signature	Date
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(Authorized Trustee's or Officer's Signature(s) if shareholder type is "trust" or "corporate")

For Limited Partnerships Only

Additional Client Statements for Individuals Investing in Limited Partnership Products

I/We understand this is an illiquid investment.
 I/We have read the net worth and other requirements stated in the prospectus and subscription agreement, and I/We confirm that my/our financial circumstances satisfy all those requirement.

Signature	Date	Signature	Date
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(Authorized Trustee's or Officer's Signature(s) if shareholder type is "trust" or "corporate")