

9.	Do you ever appoint the custodian which holds the assets? If yes, describe the conditions: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.	Does your client approve the selection of the custodian for its assets?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11.	Do you limit the amount of client assets (multiple clients or assets of one client) which you will place with any one custodian? If no, describe your reasoning. _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12.	Who furnishes the client with a summary/statement of account activity? _____ How frequently? <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annually <input type="checkbox"/> Annually		
13.	Does the custodian provide you with a copy of the client's statement of investment account activity which was made in response to your instructions? If yes, how often? _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14.	Does the custodian for the client's investment assets charge the client directly for their fees?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15.	Has your firm had any employee fidelity losses in the past 5 years? If yes, indicate the date/circumstances/corrective action taken on a separate sheet.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
16.	Have you ever committed or have you been charged with SEC disciplinary violations? If yes, please attach a statement providing full details of the incident.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
17.	Does your firm use telefacsimile messages sent to the custodians for your client plans which request specific transaction activity within the respective accounts? If yes, how does the custodian verify that the fax request is legitimate and properly authorized by you? _____ _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
18.	Does each custodian have a list of personnel at your firm who are authorized to request account changes? If yes, how does the custodian verify that an account change request has originated from an authorized person? _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19.	Have all the custodians who hold the assets for the ERISA plans for which you provide advice been advised in writing never to release client assets back to anyone in your firm?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
20.	Are any of your requests for security purchases for your client plans made through an omnibus account which groups purchases for several plans? If yes, does the use of an omnibus account prevent the custodian from presenting a client with an individual confirmation of account activity for the period? _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please attach a sample copy of the contract which you enter into with your clients.

ARKANSAS FRAUD STATEMENT. Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

COLORADO FRAUD STATEMENT: "It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policy holder or claimant for the purpose of defrauding or attempting to defraud the policy holder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies."

KENTUCKY FRAUD STATEMENT Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

FLORIDA FRAUD STATEMENT: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

MINNESOTA FRAUD STATEMENT: A person who submits an application or files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

NEW JERSEY FRAUD STATEMENT: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

NEW YORK FRAUD STATEMENT: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

OHIO FRAUD STATEMENT: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

PENNSYLVANIA FRAUD STATEMENT: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Application completed by (Name and Title): _____

Date: _____ Signature: _____