

4. Name of cooperative, condominium, homeowners association, senior residence or timeshare which gave rise to this filing.

Address of same _____

5. The offering or selling will take place in:

- New York State only.
- New York and other states: specify _____

6. The offering will be made by:

- officers, directors and employees of registrant.
- selling agent. If so, give name(s) and address(es): _____

7. Has registrant, any officer, director, principal or partner ever:

- A. been suspended or expelled from membership in any securities exchange, association of securities dealers or investment advisers or counsel? Yes No
- B. had a license or registration as a dealer, broker, investment adviser or salesperson denied, suspended or revoked? Yes No
- C. been enjoined or restrained by any court or agency from:
 - 1. the issuance, sale or offer for sale of securities? Yes No
 - 2. rendering securities advice or counsel? Yes No
 - 3. handling or managing trading accounts? Yes No
 - 4. continuing any practices in connection with securities? Yes No
- D. been convicted of any crime? Yes No
- E. used or been known by any other name? If "Yes," give other name(s)..... Yes No
- F. been the subject of any professional disciplinary proceeding? Yes No
- G. been adjudged a bankrupt or made a general assignment for the benefit of creditors or been an officer, director or principal or any entity which was reorganized in bankruptcy, adjudged a bankrupt or made a general assignment for the benefit of creditors? Yes No
- H. had an offering or selling of securities within the last three years or been an officer, director, principal or partner of any entity which had sold or offered securities within the last three years? Yes No

If any answer to any of the above (Question 7) is "Yes," attach statement of full particulars, giving date, nature of offense, title and location of agency or court involved, circumstances and final disposition.

8. List names and residence addresses of all securities salespersons (if none, so indicate).

9. Provide the following information for each proprietor, officer, director, principal or partner. Attach continuation sheets if more space is needed. **All fields must be completed, or form will be deemed incomplete.**

A. Name: _____ Title: _____

Home Address: _____ Phone: _____

Place of Birth: _____ Date of Birth: _____

Social Security No.: _____

For foreign applicants without a social security number, provide one of the following:

Individual Taxpayer Identification Number: _____

Passport Number: _____ (Annex photocopy hereto)

Other home addresses for past ten years:

Complete employment and and business affiliation record for the past five years. Include periods of self-employment and unemployment. Include all corporations or other entities where person holds or held a substantial equity or controlling interest.

From Mo. Yr.	To Mo. Yr.	Employer or Business Affiliation Name Address	Position Held

A. Name: _____ Title: _____

Home Address: _____ Phone: _____

Place of Birth: _____ Date of Birth: _____

Social Security No.: _____

For foreign applicants without a social security number, provide one of the following:

Individual Taxpayer Identification Number: _____

Passport Number: _____ (Annex photocopy hereto)

Other home addresses for past ten years:

From Mo. Yr.	To Mo. Yr.	Employer or Business Affiliation Name Address	Position Held

10. The undersigned constitute all proprietors, officers, directors, principals or partners of the registrant. Each hereby represents that all statements contained herein are true and correct and understands that any false statement shall constitute a violation of Article 23-A of the General Business Law. **Signatures must be dated, or form will be deemed incomplete.**

Signature

Name and Title (Please type or print)

Date

_____	_____	_____
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