

**DISTRICT OF COLUMBIA
DEPARTMENT OF INSURANCE, SECURITIES AND BANKING
CONFIDENTIAL BIOGRAPHICAL AFFIDAVIT**

Instructions: A biographical affidavit must be completed by each director, officer, underwriter, if any, and promoter, if any, including any persons who will own more than 10 percent of the outstanding shares of the issuer. Answer each question in this affidavit and provide a detailed explanation where necessary. Do not leave a question blank. Incomplete affidavits will be returned.

Name and Address of Issuer

In connection with the above named securities offering, I herewith make representations and supply information about myself as hereinafter set forth. (Attach addendum or separate sheet if space is insufficient to answer any question fully.)

1. Affiant's Full Name

Marital Status _____ Social Security Number _____

2. Have you ever had your name changed? _____ If yes, state the name and the reason for the change:

3. Date of Birth _____ Place of Birth _____

Color of Hair _____ Eyes _____ Height _____ Weight _____

4. Present position with the issuer

5. Affiant's Business Address

6. Affiant's Business Telephone

7. What is your present primary occupation?

Position or Title _____

Employer's Name _____ Telephone Number _____
Address _____

How long with this employer? _____

8. Other jobs, director and officer positions, held at present:

9. Within the past five years, have you been convicted or been the subject of a final court or agency order arising out of your participation in a securities offering or violations of the federal securities laws or have you been subject to a United States Postal Service false representation order?

Dated and signed this _____ day of _____ at _____

I hereby certify under penalty of perjury that the foregoing statements are true and correct to the best of my knowledge and belief.

(Signature of Affiant)

Personally appeared before me the above named _____
personally known to me, who, being duly sworn, deposes and says that he/she executed the above instrument and that the statements and answers contained therein are true and correct to the best of his/her knowledge and belief.

Subscribed and sworn to before me this _____ day _____ of _____, 20

Signature of Notary Public _____

My commission expires on:

NOTARY SEAL