

Fee and Commission Conflict of Interest Disclosure Form

The undersigned financial services firm _____,
and _____, the Advisor, hereby certify that as of this
date, _____, the Firm's gross revenue was as follows:

1. Total Gross Revenue \$ _____
2. Fee for service, retainers, AUM, or AUA* \$ _____
3. Non-fee income** (line 2 minus line 1) \$ _____

The percentage of revenue for fees and non-fee income is as follows;

1. Fee income (line 2 / line 1) _____%
2. Commission and Other Income (line 3 / line 1) _____%

I certify that the above statements and data is true and accurate on this date, the _____ day of _____, 20_____.

Firm

Advisor

*This is income that is paid directly to the firm solely based hourly charges, flat annual retainers, assets under management (AUM) or assets under advisement (AUA).

**This includes income earned by the firm from the sale of any financial product, or income received from any life insurance company, mutual fund, ETF, or brokerage firm, or other miscellaneous income.