

## GENERAL PARTNER(S) INDIVIDUAL INFORMATION

**\* If General Partner is a Corporation, Limited Liability Company, Partnership or Trust, please provide individual information for each principal. Please attach additional sheets if necessary.**

General Partner #1

Name			Social Security or Taxpayer ID #		
Home Address			Telephone	Fax #	E-mail Address
City	State	Zip Code	Country		
			Date of Birth		
Current Employer ( <i>Indicate if retired, and list last occupation</i> )			Years Employed		
Address			Business Telephone Number		
City	State	Zip Code	Nature of Business		Job Title

General Partner #2

Name			Social Security or Taxpayer ID#		
Home Address			Telephone	Fax #	E-mail Address
City	State	Zip Code	Country		
			Date of Birth		
Current Employer ( <i>Indicate if retired, and list last occupation</i> )			Years Employed		
Address			Business Telephone Number		
City	State	Zip Code	Nature of Business		Job Title

General Partner #3

Name			Social Security or Taxpayer ID#		
Home Address			Telephone	Fax #	E-mail Address
City	State	Zip Code	Country		
			Date of Birth		
Current Employer ( <i>Indicate if retired, and list last occupation</i> )			Years Employed		
Address			Business Telephone Number		
City	State	Zip Code	Nature of Business		Job Title