

MEMORANDUM CONFIRMATION OF BUSINESS REVIEW

TO: _____ Fax _____ E-Mail _____ Original _____
 Representative Name Rep. No.
 Fax Number / Email address NAF Att'd: Yes _____ No: _____ On File: _____
 AML Checked: Yes _____ Att'd _____

Date of Transaction: _____ Date Rec'd by KCD: _____
 Account Registration: _____ Age: _____
 Investment Company: _____
 Product /Share Class: _____ QUALIFIED _____ R/O: ☐ Y ☐ N NQ _____
 Amount of Investment: \$ _____ Est Concessions Rec: \$ _____ RIA: ☐ Y ☐ N
 Source of Funds: _____

REVIEW NOTES: VAs only: (Suitability issues, special considerations, additional information.)

M&E: _____ Investment Objective: _____
 Rider Fees: _____ Surrender Schedule: _____
 Long-Term Benefit Rider: Yes _____ No: _____ Description: _____
 Sub Account Fees: _____ Time Horizon: _____
 Prospective fee pgs Att'd: Yes _____ No: _____ Letter of Suitability Att'd: Yes _____ No: _____

***Letter of Suitability required if:** 1. client is over 65 _____ 2. short term surrender schedule vs time horizon variance _____ 3. Other: _____

Additional Notes: _____

DEFICIENT _____ **BEFORE THIS TRANSACTION IS MAILED YOU MUST SUBMIT THE FOLLOWING ITEMS IN ORDER FOR US TO COMPLETE OUR REVIEW.** After submitting, wait for final approval before mailing the original paperwork to the company.

APPROVED _____ Items submitted appear in order; you may mail your business to the company.

Notes: _____

Retain this final approval in your files with your copy of the business paperwork.