## CONFIDENTIAL QUESTIONNAIRE FOR REVOCABLE IRA TRUST

RUSHFORTH FIRM LTD.

A Nevada Professional Limited-Liability Company

1. CLIENT(S); SIGNIFICANT OTHER.

<b>N</b> A	MAILING ADDRESS				
A) Full Name (as it appears on legal documents)		B) Full Name (as it appear	rs on legal documents)		
[ ]-Not US citizen		[]-Non-Client Significant Oth	er []-Not US citizen		
Name (as you want it in your documents)		Name (as you want it in your documents)			
Birth Date		Birth Date			
Social Sec. #		Social Sec. #			
Internet e-mail Work I address:	Phone:	Internet e-mail address:	Work Phone:	Home Phone:	Fax:

2. CHILDREN & BENEFICIARIES. (Name all beneficiaries. Name all children and the children of each deceased child, including those who will receive nothing. Attach additional sheets if necessary. Spell the names as you want them in the documents.)

Name (Specify Relationship if not child.)	BIRTH DATE / SEX	Address and Phone			<b>D TO:</b> * One)
	M F		A	В	Both
[] – Disabled or Minor					
[] Disabled on Minor	M F		A	В	Both
[] – Disabled or Minor					
	M F		A	В	Both
[] – Disabled or Minor					
[] – Disabled or Minor	M F		A	В	Both
	M F		A	В	Both
[] – Disabled or Minor					
			A	В	Both
[] – Disabled or Minor	M F				

<sup>\*</sup>A=Client #1; B=Client #2 or Significant Other

		FIRST CHOICE	SECOND CHOICE	THIRD CHOICE
TR	USTEE	PIRST CHOICE	SECOND CHOICE	THRD CHOICE
	(1) []-Co (2) []-Di (b) Ineligible (1) []-10 (2) []-Di a. [ b. [ c. [ d. [ e. [	ife-expectancy) Beneficiaries (onduit; OR scretionary. (10-year) Beneficiaries ( <i>Check</i> )% a year for 10 years; scretionary for 10 years; and t ]-Pour into each beneficiary's <i>Please provide copy of trust a</i> ]-Lump-sum distribution; OR ]-Discretionary distributions in% for years; OR ]-Generation-skipping (dynas)	k one.): hen (after the IRA is closed): share under this trust: greement or certification.]; OR	nt the trust assets distributed
<u>;.                                    </u>	ADDITIONAL	Information.		
Na	me of Trust:			
	ferred by:			