

PHILADELPHIA U.S. IMMIGRANT INVESTMENT FUND

Preliminary Investor Questionnaire*

Please attach one (1) copy of the personal data page of your current passport

Investor Information

Name: _____
(LAST) (FIRST) (MIDDLE)

Home address: _____
(STREET)

(CITY) (STATE) (ZIP/POSTAL CODE)

Place of Birth: _____
(CITY) (STATE) (COUNTRY)

Date of Birth: ____/____/____ Country of Citizenship: _____
(MONTH / DAY / YEAR)

Marital Status: _____ Spouse Name: _____

Date of Marriage: ____/____/____ Spouse Date of Birth: ____/____/____
(MONTH / DAY / YEAR) (MONTH / DAY / YEAR)

Place of Birth: _____ Nationality: _____
(CITY) (STATE) (COUNTRY)

Children's Information

Name	Date of Birth (mm/dd/yyyy)	Place of Birth (City, State, Country)	Nationality
	/ /		
	/ /		
	/ /		
	/ /		

Have you or your spouse ever been denied entry to the U.S.? If yes, please briefly explain the circumstances.

Have you or your spouse ever been convicted of a crime? _____

Do you know of any medical condition that may disqualify you, your spouse or your children under the age of 21 from receiving U.S. immigrant visas?

Summarize your past work experience(s) (job title, dates started/ended, and company name(s)), including your present occupation.

Will you be able to clearly document that the cash required to make your investment comes from a lawful source such as profit or earnings from a business, the profits or proceeds from the sale of real estate, or the profits or earnings from stock or other investments, inheritance, gifts or loans?

Summarize how you acquired your wealth, including the source of the investment funds. _____

(SIGNATURE OF APPLICANT)

_____/_____/_____

(MONTH / DAY / YEAR)

*NOTE: To satisfy banking laws, the above information will be shared with U.S. Bank National Association, the Escrow Agent for the Fund.