



Please print or type

Date: ___/___/_____

*Estimated initial investment, including the initial franchise fee is between \$250,000.00 and \$1,250,000.00. Dependent upon franchisee leased space with leasehold improvements or new store construction. These figures are estimate only.

GENERAL INFORMATION

Principal Applicant's Name _____

Date of Birth ___/___/_____

Social Security Number ___/___/_____

Residence Address _____

City _____ State _____ Zip _____

Home Phone () _____

Best Time To Reach _____

How Long at Present Address _____

Own? Yes ___ No ___ Rent? Yes ___ No ___

Previous Addresses (List For Last 10 years)

Current Employer _____

Position _____ Duties _____

Employer's Address _____

May We Contact You At Work? Yes ___ No ___

Best Time To Reach You _____

Business Phone () _____

EDUCATION

High School _____ College _____ Degree _____

Hobbies and Interests _____

Attach Your Resume If Available Please

If a Husband/Wife Team, In What Position and Capacity Will Spouse Be Involved? _____

Spouse's Name _____

Spouse's Date of Birth ___/___/_____

Spouse's Social Security Number ___/___/_____

Spouse's Residence Address _____

Spouse's Home Phone () _____

Best Time To Reach _____

How Long at Present Address _____

Own? Yes ___ No ___ Rent? Yes ___ No ___

Spouse's Previous Addresses (List For Last 10 years)

Spouse's Current Employer _____

Position _____ Duties _____

Employer's Address _____

May We Contact You At Work? Yes ___ No ___

Best Time To Reach You _____

Business Phone () _____



SPOUSE'S EDUCATION

High School _____ College _____ Degree _____
Hobbies and Interests _____ Attach Your Resume If Available Please

GENERAL HEALTH

Principal Applicant: Good ____ Fair ____ Poor ____
Back Issues? Yes ____ No ____
Vision Issues? Yes ____ No ____

Spouse: Good ____ Fair ____ Poor ____
Back Issues? Yes ____ No ____
Vision Issues? Yes ____ No ____

DEPENDENTS

Names and Ages of Children _____
Other Dependents _____ Relationship and Ages _____
Will You Have a Partner or Partners Other Than Your Spouse? Yes ____ No ____
If Yes, Please List Their Names and Specify How Will They Be Involved _____

*Please Have "Other" Partners Fill Out a Separate Franchise Application

Have You or Your Spouse Been Convicted of a Felony Charges? Yes ____ No ____
Do You or Your Spouse Currently Have Any Felony Charges Pending, Being Appealed, or Are You Under
Indictment? Yes ____ No ____

FINANCIAL INFORMATION

Present Annual Income _____
Spouse's Present Annual Income _____
Interest and Dividend _____ Other Income _____
Total Income _____
Attach Prepared Statement If Available
Name of Your Bank _____
Bank Phone () _____ Bank Officer _____
Checking Account No. _____ Savings Account No. _____
Do You Own Your Own Home? Yes ____ No ____ Do You Own Your Own Business Yes ____ No ____
Have Your Ever Filed For Personal or Business Bankruptcy? Yes ____ No ____
Have You Ever Had Anything Repossessed? Yes ____ No ____
How Do You Plan to Pay For The Initial Franchise Fee? _____
What Is Your Customary Earnings Level? _____
What Is Your Spouse's Customary Earnings Level? _____
Estimated Minimum Income Required For Your Current Living Expenses? _____



ASSETS

Cash In Checking _____
 Cash In Savings _____
 Real Estate (Home) _____
 Other Real Estate _____
 Describe Other Real Estate _____
 Cash Surrender of Life Insurance _____
 Stocks and Bonds _____
 Automobiles _____
 Your Own Business Appraised _____
 Collectibles _____
 Money Due To You _____
 Other Assets _____
 Describe Other Assets _____

LIABILITIES

Notes Payable to Banks _____
 Notes Payable to Others _____
 Real Estate Debt _____
 Automobile Debt _____
 Owing On Life Insurance _____
 Taxes Payable _____
 Charge Account _____
 Charge Account _____
 Charge Account _____
 Other Liabilities _____
 Other Liabilities _____
 Other Liabilities _____

Total Assets \$ _____
 Less Total Liabilities \$ _____
 Net Worth \$ _____

Exact Amount of Capital You Have For This Franchise \$ _____
 If The Required Amount is Not Available, How Would The Investment Be Obtained? Please Explain _____

Have You Ever Been a Principal Owner of a Business Before? Yes ___ No ___
 If Yes, Please Explain _____

LEGAL FORMAT

() Sole Proprietor Name _____
 () Corporation Name _____
 () Partnership Name _____
 () Other Explain _____

Have You Ever Been Granted a Franchise or License Before? Yes ___ No ___
 If Yes, Please Explain _____

LOCATION

Do You Have a Location In Mind Already? Yes ___ No ___
 If So, What City, State and If Known, What Zip Code? _____



REFERENCES

I hereby authorize Daddy Marketing Group, L.L.C. to contact credit reporting bureaus, and other sources (including, without limitation, the following references) for information about me. I release Daddy Marketing Group, L.L.C., its affiliates, agents and employees from any liability arising either from the receipt or use of any such information.

Applicant's Signature

Date

CREDIT REFERENCES

Name _____

Address _____

City, State, Zip _____

Phone () _____

Name _____

Address _____

City, State, Zip _____

Phone () _____

BUSINESS REFERENCES

Name _____

Address _____

City, State, Zip _____

Phone () _____

Name _____

Address _____

City, State, Zip _____

Phone () _____

PERSONAL REFERENCES

Name _____

Address _____

City, State, Zip _____

Phone () _____

Name _____

Address _____

City, State, Zip _____

Phone () _____



INDICATORS FOR SUCCESS

- Do You Object To Working Evenings, Weekends, Holidays and Vacations? Yes ___ No ___
- Do You Enjoy and Get Along Well With Adults and Children? Yes ___ No ___
- Do You Have a Background In Sales? Yes ___ No ___
- Can You Feel Comfortable In Presenting a Service In Which You Believe In? Yes ___ No ___
- Are You a Self Motivator? Yes ___ No ___
- Will You Be Willing To Share Some of Your Business Experiences of Your Franchise With Other My Daddy's Cheesecake Franchisees? Yes ___ No ___
- Are You Willing to Follow a Plan to Make Your Business Successful? Yes ___ No ___
- If We Were to Go Ahead, What Would Be Your Schedule For Starting? _____

Why Do You Think You Would Enjoy and Do Well In This Business? _____

APPLICATION STATEMENT/AFFIRMATION

It is understood that the purpose of this application is for information only, and is no way binding upon either Daddy Marketing Group, L.L.C. or the applicant. The information I have submitted within this application is true and complete to the best of my knowledge and belief.

Applicant's Signature

Date



CERTIFICATION

I certify, individually and on behalf of the corporation, Daddy Marketing Group, L.L.C. or any other entity named below, that:

1. I am not, nor to the best of my knowledge have I been designated, a "suspected terrorist," as defined in Executive Order 13224.
2. To the best of my knowledge, neither such entity, nor its officers, directors, shareholders, members, employees or agents has been designated a "suspected terrorist," as defined in Executive Order 13224, and that such entity is not owned or controlled by a "suspected terrorist," as defined in Executive Order 13224.

Applicant's Signature

Date

Mail complete application to: Daddy Marketing Group, L.L.C.
 Attention: Kevin Stanfield
 265 S. Broadview
 Cape Girardeau, Missouri 63701



REQUEST FOR OFFERING CIRCULAR

Dear Sir:

I request from you information concerning a My Daddy's Cheesecake Franchise. I recognize and acknowledge that I may receive information that represents trade secrets that are the property of Daddy Marketing Group, L.L.C. I hereby agree that I will not use or disclose any of the information I receive from Daddy Marketing Group, L.L.C. for any personal benefit or for the benefit of any other person or company without the express written consent of Daddy Marketing Group, L.L.C.

I am not currently connected in any manner whatsoever with any business or service similar to River City Desserts, L.L.C. - Daddy Marketing Group, L.L.C. and/or My Daddy's Cheesecake, nor have I been requested or directed to obtain information on behalf of any other company or individual.

Name _____
Address _____
City, State, Zip, Country _____
Home Phone () _____
Work Phone () _____
Best Time to Reach You _____

Your Signature _____
Date

Witnessed By _____
Address of Witness _____

This request, along with the application, must be filed out in its entirety, signed, dated and witnessed before the Uniform Offering Circular will be sent. Completion of this request, however, does not guarantee that the Uniform Franchise Circular will be sent.

Mail to: Daddy Marketing Group, L.L.C.
Attention: Kevin Stanfield
265 S. Broadview
Cape Girardeau, Missouri 63701