NORTH CAROLINA SECURITIES DIVISION
COMPLAINT FORM

Mail to:
NORTH CAROLINA SECURITIES DIVISION
P.O. BOX 29622
RALEIGH, N.C. 27626-0622

Or fax to:
(919) 814-5596

Please use this form to submit your complaint to the Securities Division. If you need additional space in order to give a full and accurate answer, please number each answer to match its corresponding question.

How did you hear about us?

| ☐ I attended an event at which a Department representative spoke | ☐ Word of mouth |
| ☐ I am an attorney | ☐ Internet search |
| ☐ I am an investment/financial services professional | ☐ Other (please specify) |
| ☐ I was referred by another agency |

PLEASE TYPE OR PRINT YOUR RESPONSES

1. WHAT IS YOUR NAME AND ADDRESS?
Mr. or Ms.______________________________________________________________
Home Address: __________________________________________________________
_______________________________________________________________________
City: ________________________________ State: _________ Zip Code: __________

Your Telephone Numbers: ____________________________________________
( home phone)
____________________________________
(work phone)

Your E-mail Address: _________________________________________________

May we provide case updates, investor alerts, or investor education materials to you by email? _____Yes _____No

Please tell us a little about yourself:
Your date of birth (MM-DD-YYYY): _____________________
Your education: __________________________________________
What is/was your profession? _______________________________________

(Rev. 09-2020)
Would you describe yourself as a first-time investor, a sophisticated and experienced investor, or something in between? ________________________________
________________________________________________________________________
________________________________________________________________________

2. WHO IS THE PERSON OR FIRM AGAINST WHOM THIS COMPLAINT IS BEING FILED?

Name of the Person or Firm: ________________________________________________
________________________________________________________________________
Address: _______________________________________________________________
________________________________________________________________________
City: __________________ State: ______ Zip Code: _________________
Telephone Number: ____________________________

Name of the Salesperson: _________________________________________________
Position or Title of the Salesperson: ________________________________________
Telephone Number of the Salesperson: _____________________________________
Name(s) and Telephone Number(s) of Other Persons Involved: _________________
________________________________________________________________________
________________________________________________________________________

3. WHAT WAS THE DATE OF THE TRANSACTION ABOUT WHICH YOU ARE COMPLAINING?
________________________________________________________________________
________________________________________________________________________

4. WHAT STATE WERE YOU IN WHEN THE TRANSACTION TOOK PLACE?

________________________________________________________________________

5. WHAT STATE WAS THE SALESMAN IN WHEN THE TRANSACTION TOOK PLACE?

________________________________________________________________________

6. LIST THE NAMES OF ANY WITNESSES TO THE TRANSACTION.

________________________________________________________________________

7. WHAT KIND OF INVESTMENT WAS INVOLVED? (For example, was it stock, bonds, promissory notes, a partnership interest, or a limited liability company interest? If none of these terms describes your investment, please describe it as accurately as you can.)

________________________________________________________________________
8. IF THE INVESTMENT WAS IN A STOCK OR A BOND, WHAT WAS THE NAME OF THE COMPANY THAT ISSUED IT? ____________________________
________________________________________________________________________

IF THE INVESTMENT WAS IN A PARTNERSHIP OR A LIMITED LIABILITY COMPANY, WHAT WAS THE NAME OF THE PARTNERSHIP OR COMPANY? ___________________________________________________________
________________________________________________________________________

IF THE INVESTMENT WAS IN A NOTE, WHO WAS SUPPOSED TO BE RESPONSIBLE FOR PAYING IT? _____________________________________________
________________________________________________________________________

9. WHAT WAS THE AMOUNT YOU INVESTED? __________________________
________________________________________________________________________

IF YOU HAVE MADE MORE THAN ONE PAYMENT, WHAT WERE THE AMOUNTS AND DATES OF THE PAYMENTS? ____________________________
________________________________________________________________________
________________________________________________________________________

TO WHOM AND HOW DID YOU MAKE YOUR PAYMENTS? ___________________________________________________________

10. DO YOU HAVE AND CAN YOU PROVIDE EVIDENCE OF YOUR INVESTMENTS? (For example, the front and back of checks, money orders, or cashier’s checks; receipts from the seller; agreements; letters; copies of e-mails.)

    _____YES    _____NO    (If “yes,” attach copies to this complaint.)

11. DID YOU SIGN ANY PAPERS OR DOCUMENTS?

    _____YES    _____NO    (If “yes,” attach copies to this complaint.)

12. DID YOU RECEIVE A PROSPECTUS OR ANY WRITTEN SALES MATERIALS?

    _____YES    _____NO    (If “yes,” attach copies to this complaint.)

13. HOW DID YOU FIRST LEARN OF THIS INVESTMENT? ________________
______________________________________________
14. WHO CONTACTED YOU ABOUT THIS INVESTMENT? ______________________
_______________________________________________________________________
_______________________________________________________________________

15. DID YOU KNOW THE SALESPERSON OR HAVE DEALINGS WITH THE
COMPANY PRIOR TO MAKING THIS INVESTMENT?

_____YES   _____NO

(If “yes,” please explain your past history with this salesperson or firm.)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

16. WHAT WAS YOUR UNDERSTANDING ABOUT HOW YOUR MONEY
WAS SUPPOSED TO BE USED? __________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

17. WHAT WERE YOU TOLD ABOUT THE INVESTMENT BEFORE YOU
INVESTED? ____________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

18. WHAT UNTRUE STATEMENTS, IF ANY, WERE MADE TO YOU?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

19. DID THE SELLER OMIT TO TELL YOU INFORMATION THAT WOULD
HAVE CHANGED YOUR DECISION TO INVEST? IF SO, WHAT WAS THAT
INFORMATION?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
20. LIST THE NAMES, ADDRESSES, AND PHONE NUMBERS OF ANY OTHER INVESTORS THAT ARE KNOWN TO YOU.

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

21. HAVE YOU COMPLAINED TO THE FIRM OR PERSON WHO SOLD YOU THIS INVESTMENT?

_____YES   _____NO   (If “yes,” when and to whom?)

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

22. WHAT RESPONSE DID YOU GET? ___________________________________

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

23. MAY WE SEND A COPY OF YOUR COMPLAINT TO THE FIRM OR PERSON YOU HAVE COMPLAINED ABOUT?

_____YES   _____NO

24. DOES AN ATTORNEY REPRESENT YOU IN THIS MATTER?

_____YES   _____NO   (If “yes,” give us the following information:)

Name of Attorney: _______________________________________________________
Address of Attorney: _____________________________________________________
City: _________________________________ State: ________ Zip Code: __________
Phone Number of Attorney: _______________________________________________

25. HAVE YOU STARTED ANY LEGAL ACTION AGAINST THE PERSONS WHO SOLD YOU THIS INVESTMENT?

_____YES   _____NO   (If “yes,” give details:)

_______________________________________________________________________
_______________________________________________________________________

26. HAVE YOU CONTACTED ANY OTHER GOVERNMENTAL OR REGULATORY AGENCIES ABOUT THIS INVESTMENT?

_____YES   _____NO
(If “yes,” list the agencies you have contacted.)

________________________________________________________________________
________________________________________________________________________

27. MAY WE SEND A COPY OF YOUR COMPLAINT TO ANOTHER AGENCY
FOR ITS REVIEW OR INVESTIGATION?

_____YES   _____NO

28. ARE YOU WILLING TO TESTIFY OR SIGN AN AFFIDAVIT ABOUT
YOUR DEALINGS WITH THE PERSONS WHO SOLD YOU THIS
INVESTMENT?

_____YES   _____NO

29. DID YOU RECORD ANY OF YOUR CONVERSATIONS RELATING TO
THIS INVESTMENT?

_____YES   _____NO

30. YOUR DESCRIPTION OF THE TRANSACTION. This section is where you
may tell us your story in full, including any details necessary for us to clearly
understand what you have set forth above in this complaint. Please describe how
you came to make this investment; how it was sold to you, or who persuaded you to
purchase it; what statements and promises were made to you by the sellers; and
what has caused you to file this complaint. If needed, attach additional sheets. Be as
specific as you can about names, dates, addresses and documents. Do not assume
that any fact is irrelevant or unimportant. If any part of the transaction took place
outside of North Carolina, be sure to tell us that. If you have documents relating to
the transaction, send us copies -- do not send us the originals; instead keep the
originals for your own records.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
THE INFORMATION I HAVE STATED IN THIS COMPLAINT IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Your Signature: ___________________________ Date: ______________

Return this completed form, and copies of any documents that support your complaint, to:

NORTH CAROLINA SECURITIES DIVISION
ENFORCEMENT SECTION
P.O. BOX 29622
RALEIGH, N.C. 27626-0622

Phone: (919) 814-5400 or 1(800) 688-4507
Fax: (919) 814-5596
Email: secdiv@sosnc.gov
Website: www.sosnc.gov