

INDIVIDUAL NAME:
INDIVIDUAL CRD #:

U6 – SUBJECT OF ACTION			
FIRST NAME:	MIDDLE NAME:	LAST NAME:	
SUFFIX:	ALIAS:		
DOB(DD/MM/YYYY):	SSN:	CRD #:	
RESIDENTIAL STREET ADDRESS LINE 1:		RESIDENTIAL STREET ADDRESS LINE 2:	
CITY:	STATE:	COUNTRY:	ZIP/POSTAL CODE:
RESIDENTIAL STREET ADDRESS LINE 1:		RESIDENTIAL STREET ADDRESS LINE 2:	
CITY:	STATE:	COUNTRY:	ZIP/POSTAL CODE:
BUSINESS STREET ADDRESS LINE 1:		BUSINESS STREET ADDRESS LINE 2:	
CITY:	STATE:	COUNTRY:	ZIP/POSTAL CODE:
REGULATOR CONTACT:		REGULATOR PHONE NUMBER:	

INDIVIDUAL NAME:

INDIVIDUAL CRD #:

DISCLOSURE REPORTING PAGES

U6 - BANKRUPTCY/SIPC/COMPROMISE WITH CREDITORS DRP

Rev. DRP (05/2009)

1. Action Type (select appropriate item):

- Bankruptcy [Circle one: Chapter 7, Chapter 11, Chapter 13, Other]
- Compromise Declaration Liquidation Receivership Other: _____

2. Action Date (MM/DD/YYYY) (Provide date bankruptcy was filed, or date SIPC was initiated, or date of compromise with creditor): _____ Exact Explanation
 If not exact, provide explanation:

3. If the financial action relates to an organization over which the subject exercise(d) control, provide:

- A. Organization Name: _____
- B. Position, title or relationship: _____
- C. *Investment-related* business? Yes No

4. Court action brought in: Federal Court State Court Foreign Court Other: _____
 A. Name of Court: _____
 B. Location of Court (City or County and State or Country): _____
 C. Docket/Case#: _____
 Check this box if the Docket/Case# is your SSN, a Bank Card number, or a Personal Identification Number.

5. Is action currently pending? Yes No

6. If not pending, provide Disposition Type (select appropriate item):
 Direct Payment Procedure Discharged Dismissed Dissolved SIPA Trustee Appointed
 Satisfied/Released Other: _____

7. Disposition Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

8. If a compromise with creditors, provide:

- A. Name of Creditor: _____
- B. Original amount owed: \$ _____
- C. Terms/Compromise reached with creditor:

9. If a SIPA trustee was appointed or a direct payment procedure was begun:

- A. Provide the amount paid or agreed to be paid by the subject: \$ _____ ; or
 The name of the Trustee: _____
- B. Currently Open? Yes No
- C. Date Direct Payment Initiated/Filed or Trustee Appointed
 (MM/DD/YYYY): _____ Exact Explanation

If not exact, provide explanation:

10. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the action as well as the current status or final disposition. Include the details as to creditors, terms, conditions, amounts due and settlement schedule (if applicable). Your information must fit within the space provided.

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INDIVIDUAL NAME:

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U6 - CIVIL JUDICIAL DRP

1. Court Action initiated by:

A. (Select appropriate item):

SEC Other Federal Agency Jurisdiction Foreign Financial Regulatory Authority Firm Private Plaintiff

B. Name of party initiating the proceeding: _____

2. Relief Sought: (select all that apply):

Cease and Desist Injunction Restraining Order
 Civil and Administrative Penalty(ies)/Fine(s) Monetary Penalty other than Fines Other: _____
 Disgorgement Restitution

3. A. Filing Date of Court Action (MM/DD/YYYY): _____

Exact

Explanation

If not exact, provide explanation:

B. Date notice/process was served (MM/DD/YYYY): _____

Exact

Explanation

If not exact, provide explanation:

4. Product Type(s): (select all that apply)

<input type="checkbox"/> No Product	<input type="checkbox"/> Derivative	<input type="checkbox"/> Mutual Fund
<input type="checkbox"/> Annuity-Charitable	<input type="checkbox"/> Direct Investment-DPP & LP Interest	<input type="checkbox"/> Oil & Gas
<input type="checkbox"/> Annuity-Fixed	<input type="checkbox"/> Equipment Leasing	<input type="checkbox"/> Options
<input type="checkbox"/> Annuity-Variable	<input type="checkbox"/> Equity Listed (Common & Preferred Stock)	<input type="checkbox"/> Penny Stock
<input type="checkbox"/> Banking Product (other than CD)	<input type="checkbox"/> Equity-OTC	<input type="checkbox"/> Prime Bank Instrument
<input type="checkbox"/> CD	<input type="checkbox"/> Futures Commodity	<input type="checkbox"/> Promissory Note
<input type="checkbox"/> Commodity Option	<input type="checkbox"/> Futures-Financial	<input type="checkbox"/> Real Estate Security
<input type="checkbox"/> Debt-Asset Backed	<input type="checkbox"/> Index Option	<input type="checkbox"/> Security Futures
<input type="checkbox"/> Debt-Corporate	<input type="checkbox"/> Insurance	<input type="checkbox"/> Unit Investment Trust
<input type="checkbox"/> Debt-Government	<input type="checkbox"/> Investment Contract	<input type="checkbox"/> Viatical Settlement
<input type="checkbox"/> Debt-Municipal	<input type="checkbox"/> Money Market Fund	<input type="checkbox"/> Other: _____

5. Formal Action was brought in:

Federal Court State Court Foreign Court Military Court Other: _____

A. Name of Court: _____

B. Location of Court (City or County and State or Country): _____

C. Docket/Case#: _____

6. Employing Firm when activity occurred which led to the civil judicial action: _____

7. Describe the allegations related to this civil action. (Your information must fit within the space provided.):

8. Current Status? Pending On Appeal Final

9. If pending and any limitations or restrictions are currently in effect, provide details:

INDIVIDUAL NAME:

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U6 – CIVIL JUDICIAL DRP (CONTINUED)

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10. If on appeal:

A. Action appealed to (provide name of court): _____

B. Court Location: _____

C. Docket/Case#: _____

D. Date appeal filed (MM/DD/YYYY): _____ Exact Explanation

If not exact, provide explanation:

E. Appeal details (including status):

F. If on Appeal and any limitations or restrictions are currently in effect, provide details:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

11. Resolution Detail:

A. How was matter resolved? (select appropriate item):

Consent

Judgment Rendered

Settled

Vacated

Vacated Nunc Pro Tunc / ab initio

Dismissed

Withdrawn

Other: _____

B. Resolution Date (MM/DD/YYYY): _____

Exact

Explanation

If not exact, provide explanation:

12. Sanction Detail:

A. Were any of the following Sanctions Ordered or Relief Granted? (select all that apply):

Civil and Administrative Penalty(ies)/Fine(s)

Injunction

Cease and Desist

Monetary Penalty other than fines

Disgorgement

Restitution

B. Other Sanctions: _____

C. If *enjoined*, provide:

Injunction Details

Registration Capacities Affected (e.g., General Securities Principal, Financial Operations Principal, All Capacities, etc.):

Duration (length of time): _____

Exact

Explanation

If not exact, provide explanation:

Start Date (MM/DD/YYYY): _____

Exact

Explanation

If not exact, provide explanation:

End Date (MM/DD/YYYY): _____

Exact

Explanation

If not exact, provide explanation:

INDIVIDUAL NAME:

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U6 - CIVIL JUDICIAL DRP (CONTINUED)

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Injunction Details

Registration Capacities Affected (e.g., General Securities Principal, Financial Operations Principal, All Capacities, etc.):

Duration (length of time): _____ Exact Explanation
 If not exact, provide explanation:

Start Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

End Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

Injunction Details

Registration Capacities Affected (e.g., General Securities Principal, Financial Operations Principal, All Capacities, etc.):

Duration (length of time): _____ Exact Explanation
 If not exact, provide explanation:

Start Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

End Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

D. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide:

Monetary Related Sanction Details

Monetary Related Sanction Type: Monetary Fine Disgorgement Restitution Other (requires explanation)
 Explanation:

Total Amount: \$ _____
 Portion levied against the subject: \$ _____

Date Paid by the subject (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

Was any portion of penalty waived? Yes No

If yes, amount: \$ _____

INDIVIDUAL NAME:

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U6 - CIVIL JUDICIAL DRP (CONTINUED)

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Monetary Related Sanction Details

Monetary Related Sanction Type: Monetary Fine Disgorgement Restitution Other (requires explanation)
 Explanation:

Total Amount: \$ _____
 Portion levied against the subject: \$ _____
 Date Paid by the subject (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

Was any portion of penalty waived? Yes No
 If yes, amount: \$ _____

Monetary Related Sanction Details

Monetary Related Sanction Type: Monetary Fine Disgorgement Restitution Other (requires explanation)
 Explanation:

Total Amount: \$ _____
 Portion levied against the subject: \$ _____
 Date Paid by the subject (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

Was any portion of penalty waived? Yes No
 If yes, amount: \$ _____

13. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the action, as well as the current status or final disposition and/or finding(s). Include the number of investors in the reporting jurisdiction, the total number of investors in the program, the amount invested in the reporting jurisdiction, and the total amount invested. Your information must fit within the space provided.

INDIVIDUAL NAME:

INDIVIDUAL CRD #:

U6 - CRIMINAL DRP

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1. If charge(s) were brought against an organization over which the subject exercise(d) *control*:

A. Organization Name: _____

B. *Investment-related* business? Yes No

C. Position, title or relationship: _____

2. Formal action was brought in:

Federal Court State Court Foreign Court Military Court Other: _____

A. Name of Court: _____

B. Location of Court (City or County and State or Country): _____

C. Docket/Case#: _____

3. Event Status:

A. Current status of the Event? Pending On Appeal Final

B. Event Status Date (complete unless status is pending) (MM/DD/YYYY): _____ Exact Explanation

If not exact, provide explanation:

4. Event and Disposition Disclosure Detail (Use this for both organizational and individual charges.):

A. Date First Charged (MM/DD/YYYY): _____ Exact Explanation

If not exact, provide explanation:

B. Event and Disposition Detail:

Charge Details (complete every field for each charge.)

Formal Charge/Description:

No. of Counts: _____

Felony or Misdemeanor: *Felony* *Misdemeanor*

Plea for each Charge: _____

Disposition of Charge:

Acquitted Dismissed Pre-trial Intervention

Amended Found not guilty Reduced

Convicted Pled guilty Other (requires explanation)

Deferred Adjudication Pled not guilty

Explanation:

Date of Amended Charge, if applicable: _____

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U6 - CRIMINAL DRP (CONTINUED)

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If original charge was amended or reduced, specify new charge (i.e., list amended charge or reduced charge):

No. of Counts (for amended or reduced charge): _____

Specify if amended or reduced charge is a *Felony* or *Misdemeanor*: *Felony* *Misdemeanor* Other: _____

Plea for each amended or reduced charge: _____

Disposition of amended or reduced charge:

- | | | |
|---|--|--|
| <input type="radio"/> Acquitted | <input type="radio"/> Dismissed | <input type="radio"/> Pre-trial Intervention |
| <input type="radio"/> Amended | <input type="radio"/> Found not guilty | <input type="radio"/> Reduced |
| <input type="radio"/> Convicted | <input type="radio"/> Pled guilty | <input type="radio"/> Other (requires explanation) |
| <input type="radio"/> Deferred Adjudication | <input type="radio"/> Pled not guilty | |

Explanation:

Charge Details (complete every field for each charge.)

Formal Charge/Description:

No. of Counts: _____

Felony or *Misdemeanor*: *Felony* *Misdemeanor*

Plea for each Charge: _____

Disposition of Charge:

- | | | |
|---|--|--|
| <input type="radio"/> Acquitted | <input type="radio"/> Dismissed | <input type="radio"/> Pre-trial Intervention |
| <input type="radio"/> Amended | <input type="radio"/> Found not guilty | <input type="radio"/> Reduced |
| <input type="radio"/> Convicted | <input type="radio"/> Pled guilty | <input type="radio"/> Other (requires explanation) |
| <input type="radio"/> Deferred Adjudication | <input type="radio"/> Pled not guilty | |

Explanation:

Date of Amended Charge, if applicable: _____

If original charge was amended or reduced, specify new charge (i.e., list amended charge or reduced charge):

No. of Counts (for amended or reduced charge): _____

Specify if amended or reduced charge is a *Felony* or *Misdemeanor*: *Felony* *Misdemeanor* Other: _____

Plea for each amended or reduced charge: _____

Disposition of amended or reduced charge:

- | | | |
|---|--|--|
| <input type="radio"/> Acquitted | <input type="radio"/> Dismissed | <input type="radio"/> Pre-trial Intervention |
| <input type="radio"/> Amended | <input type="radio"/> Found not guilty | <input type="radio"/> Reduced |
| <input type="radio"/> Convicted | <input type="radio"/> Pled guilty | <input type="radio"/> Other (requires explanation) |
| <input type="radio"/> Deferred Adjudication | <input type="radio"/> Pled not guilty | |

Explanation:

INDIVIDUAL NAME:

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U6 - CRIMINAL DRP (CONTINUED)

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Charge Details (complete every field for each charge.)

Formal Charge/Description:

No. of Counts: _____

Felony or Misdemeanor:

Felony

Misdemeanor

Plea for each Charge: _____

Disposition of Charge:

Acquitted

Dismissed

Pre-trial Intervention

Amended

Found not guilty

Reduced

Convicted

Pled guilty

Other (requires explanation)

Deferred Adjudication

Pled not guilty

Explanation:

Date of Amended Charge, if applicable: _____

If original charge was amended or reduced, specify new charge (i.e., list amended charge or reduced charge):

No. of Counts (for amended or reduced charge): _____

Specify if amended or reduced charge is a Felony or Misdemeanor: Felony Misdemeanor Other: _____

Plea for each amended or reduced charge: _____

Disposition of amended or reduced charge:

Acquitted

Dismissed

Pre-trial Intervention

Amended

Found not guilty

Reduced

Convicted

Pled guilty

Other (requires explanation)

Deferred Adjudication

Pled not guilty

Explanation:

C. Date of Disposition (MM/DD/YYYY): _____ Exact Explanation

If not exact, provide explanation:

D. Sentence/Penalty; Duration (if suspension, probation, etc): Start Date of Penalty: (MM/DD/YYYY); End date of Penalty: (MM/DD/YYYY); If Monetary penalty/fine - Amount paid; Date monetary/penalty fine paid: (MM/DD/YYYY) if not exact, provide explanation.

5. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the charge(s) as well as the current status or final disposition. Include the relevant dates when the conduct that was the subject of the charge(s) occurred. Include the number of investors in the reporting jurisdiction, the total number of investors in the program, the amount invested in the reporting jurisdiction, the total amount invested and whether the action is based on a referral or *investigation* from your securities division. Your information must fit within the space provided.

INDIVIDUAL NAME:

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U6 - REGULATORY ACTION DRP

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1. Regulatory Action initiated by:

A. (Select appropriate item):

- SEC
 Other Federal Agency
 Jurisdiction
 SRO
 CFTC
 Foreign Financial Regulatory Authority
 Federal Banking Agency
 National Credit Union Administration
 Other: _____

B. Full name of regulator (if other than the SEC) that initiated the action: _____

2. Sanction(s) Sought (select all that apply):

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Bar | <input type="checkbox"/> Cease and Desist | <input type="checkbox"/> Censure |
| <input type="checkbox"/> Civil and Administrative Penalty(ies)/Fine(s) | <input type="checkbox"/> Denial | <input type="checkbox"/> Disgorgement |
| <input type="checkbox"/> Expulsion | <input type="checkbox"/> Monetary Penalty other than Fines | <input type="checkbox"/> Prohibition |
| <input type="checkbox"/> Reprimand | <input type="checkbox"/> Requalification | <input type="checkbox"/> Rescission |
| <input type="checkbox"/> Restitution | <input type="checkbox"/> Revocation | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Undertaking | <input type="checkbox"/> Other: _____ | |

3. Date Initiated (MM/DD/YYYY): _____

- Exact Explanation

If not exact, provide explanation:

4. Docket/Case#: _____

5. Employing Firm when activity occurred which led to the regulatory action: _____

6. Product Type(s) (select all that apply):

- | | | |
|--|---|--|
| <input type="checkbox"/> No Product | <input type="checkbox"/> Derivative | <input type="checkbox"/> Mutual Fund |
| <input type="checkbox"/> Annuity-Charitable | <input type="checkbox"/> Direct Investment-DPP & LP Interest | <input type="checkbox"/> Oil & Gas |
| <input type="checkbox"/> Annuity-Fixed | <input type="checkbox"/> Equipment Leasing | <input type="checkbox"/> Options |
| <input type="checkbox"/> Annuity-Variable | <input type="checkbox"/> Equity Listed (Common & Preferred Stock) | <input type="checkbox"/> Penny Stock |
| <input type="checkbox"/> Banking Product (other than CD) | <input type="checkbox"/> Equity-OTC | <input type="checkbox"/> Prime Bank Instrument |
| <input type="checkbox"/> CD | <input type="checkbox"/> Futures Commodity | <input type="checkbox"/> Promissory Note |
| <input type="checkbox"/> Commodity Option | <input type="checkbox"/> Futures-Financial | <input type="checkbox"/> Real Estate Security |
| <input type="checkbox"/> Debt-Asset Backed | <input type="checkbox"/> Index Option | <input type="checkbox"/> Security Futures |
| <input type="checkbox"/> Debt-Corporate | <input type="checkbox"/> Insurance | <input type="checkbox"/> Unit Investment Trust |
| <input type="checkbox"/> Debt-Government | <input type="checkbox"/> Investment Contract | <input type="checkbox"/> Viatical Settlement |
| <input type="checkbox"/> Debt-Municipal | <input type="checkbox"/> Money Market Fund | <input type="checkbox"/> Other: _____ |

7. Describe the allegations related to this regulatory action. (Your information must fit within the space provided.):

8. Current Status? Pending On Appeal Final

9. If pending, are there any limitations or restrictions currently in effect? Yes No

If the answer is 'yes', provide details:

INDIVIDUAL NAME:

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U6 - REGULATORY ACTION DRP (CONTINUED)

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10. If on appeal:

A. Action appealed to:

- SEC SRO CFTC Federal Court State Agency or Commission State Court
 Other: _____

B. Date appeal filed (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

C. Are there any limitations or restrictions currently in effect while on appeal? Yes No
 If the answer is 'yes', provide details:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 14 only.

11. Resolution Detail:

A. How was matter resolved? (select appropriate item):

- Acceptance, Waiver & Consent (AWC) Consent Decision
 Decision & Order of Offer of Settlement Dismissed Order
 Settled Stipulation and Consent Vacated
 Vacated Nunc Pro Tunc/ab initio Withdrawn
 Other: _____

B. Resolution Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

12. Does the order constitute a *final order* based on violations of any laws or regulations that prohibit fraudulent, manipulative or deceptive conduct? Yes No

13. Sanction Detail:

A. Were any of the following sanctions ordered? (Select all appropriate items):

- | | | |
|--|--|--|
| <input type="checkbox"/> Bar (Permanent) | <input type="checkbox"/> Bar (Temporary/Time Limited) | <input type="checkbox"/> Cease and Desist |
| <input type="checkbox"/> Censure | <input type="checkbox"/> Civil and Administrative Penalty(ies)/Fine(s) | <input type="checkbox"/> Denial |
| <input type="checkbox"/> Disgorgement | <input type="checkbox"/> Expulsion | <input type="checkbox"/> Letter of Reprimand |
| <input type="checkbox"/> Monetary Penalty other than Fines | <input type="checkbox"/> Prohibition | <input type="checkbox"/> Requalification |
| <input type="checkbox"/> Rescission | <input type="checkbox"/> Restitution | <input type="checkbox"/> Revocation |
| <input type="checkbox"/> Suspension | <input type="checkbox"/> Undertaking | |

B. Other sanctions ordered: _____

C. If the regulator provided in Question 1A above is the SEC, CFTC, an SRO, did the action result in a finding of a willful violation or failure to supervise? Yes No

If yes, was the subject *found* to have:

- (1) willfully violated any provision of the Securities Act of 1933, the Securities Exchange Act of 1934, the Investment Advisers Act of 1940, the Investment Company Act of 1940, the Commodity Exchange Act, or any rule or regulation under any of such Acts, or any of the rules of the Municipal Securities Rulemaking Board, or to have been unable to comply with any provision of such Act, rule or regulation? Yes No
- (2) willfully aided, abetted, counseled, commanded, induced, or procured the violation by any person of any provision of the Securities Act of 1933, the Securities Exchange Act of 1934, the Investment Advisers Act of 1940, the Investment Company Act of 1940, the Commodity Exchange Act, or any rule or regulation under any of such Acts, or any of the rules of the Municipal Securities Rulemaking Board? Yes No
- (3) failed reasonably to supervise another person subject to the subject's supervision, with a view to preventing the violation by such person of any provision of the Securities Act of 1933, the Securities Exchange Act of 1934, the Investment Advisers Act of 1940, the Investment Company Act of 1940, the Commodity Exchange Act, or any rule or regulation under any of such Acts, or any of the rules of the Municipal Securities Rulemaking Board? Yes No

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U6 - REGULATORY ACTION DRP (CONTINUED)

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D. If suspended or barred, provide:

Sanction Details

Sanction type: Bar (Permanent) Bar (Temporary/Time Limited) Suspension
 Registration Capacities affected (e.g., General Securities Principal, Financial Operations Principal, All Capacities, etc.):

Duration (length of time): _____ Exact Explanation
 If not exact, provide explanation:

Start Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

End Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

Sanction Details

Sanction type: Bar (Permanent) Bar (Temporary/Time Limited) Suspension
 Registration Capacities affected (e.g., General Securities Principal, Financial Operations Principal, All Capacities, etc.):

Duration (length of time): _____ Exact Explanation
 If not exact, provide explanation:

Start Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

End Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

Sanction Details

Sanction type: Bar (Permanent) Bar (Temporary/Time Limited) Suspension
 Registration Capacities affected (e.g., General Securities Principal, Financial Operations Principal, All Capacities, etc.):

Duration (length of time): _____ Exact Explanation
 If not exact, provide explanation:

Start Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

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U6 - REGULATORY ACTION DRP (CONTINUED)

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End Date (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:

E. If requalification by exam/retraining was a condition of the sanction, provide:

Requalification Details

Requalification type: Requalification by Exam Re-Training Other
 Length of time given to requalify/retrain: _____
 Type of Exam required: _____
 Has condition been satisfied? Yes No
 Explanation:

Requalification Details

Requalification type: Requalification by Exam Re-Training Other
 Length of time given to requalify/retrain: _____
 Type of Exam required: _____
 Has condition been satisfied? Yes No
 Explanation:

Requalification Details

Requalification type: Requalification by Exam Re-Training Other
 Length of time given to requalify/retrain: _____
 Type of Exam required: _____
 Has condition been satisfied? Yes No
 Explanation:

F. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide:

Monetary Sanction Details

Monetary Related Sanction Type: Civil and Administrative Penalty(ies)/Fine(s) Disgorgement
 Monetary Penalty other than Fines Restitution
 Total Amount: \$ _____
 Portion Levied against the subject: \$ _____
 Payment Plan:
 Is Payment Plan Current? Yes No
 Date Paid by the subject (MM/DD/YYYY): _____ Exact Explanation
 If not exact, provide explanation:
 Was any portion of penalty waived? Yes No
 If yes, amount: \$ _____

INDIVIDUAL NAME:

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Monetary Sanction Details

Monetary Related Sanction Type: Civil and Administrative Penalty(ies)/Fine(s) Disgorgement
 Monetary Penalty other than Fines Restitution

Total Amount: \$ _____

Portion Levied against the subject: \$ _____

Payment Plan:

Is Payment Plan Current? Yes No

Date Paid by the subject (MM/DD/YYYY): _____ Exact Explanation

If not exact, provide explanation:

Was any portion of penalty waived? Yes No

If yes, amount: \$ _____

Monetary Sanction Details

Monetary Related Sanction Type: Civil and Administrative Penalty(ies)/Fine(s) Disgorgement
 Monetary Penalty other than Fines Restitution

Total Amount: \$ _____

Portion Levied against the subject: \$ _____

Payment Plan:

Is Payment Plan Current? Yes No

Date Paid by the subject (MM/DD/YYYY): _____ Exact Explanation

If not exact, provide explanation:

Was any portion of penalty waived? Yes No

If yes, amount: \$ _____

14. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the action as well as the current status or final disposition and/or finding(s). Include relevant terms, conditions and dates. Include the number of investors in the reporting jurisdiction, the total number of investors in the program, the amount invested in the reporting jurisdiction, the total amount invested and whether the action is based on a referral or *investigation* from your securities division. Your information must fit within the space provided.

INDIVIDUAL NAME:

INDIVIDUAL CRD #:

U6 - SRO ARBITRATION DRP

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1. Case Name: _____

2. Arbitration/Reparation filed with: _____

3. Date case was initiated (MM/DD/YYYY): _____

4. Docket/Case#: _____

5. Employing Firm when events occurred which led to the arbitration/reparation:

6. Allegation(s):

7. Product Type(s): (select all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> No Product | <input type="checkbox"/> Derivative | <input type="checkbox"/> Mutual Fund |
| <input type="checkbox"/> Annuity-Charitable | <input type="checkbox"/> Direct Investment-DPP & LP Interest | <input type="checkbox"/> Oil & Gas |
| <input type="checkbox"/> Annuity-Fixed | <input type="checkbox"/> Equipment Leasing | <input type="checkbox"/> Options |
| <input type="checkbox"/> Annuity-Variable | <input type="checkbox"/> Equity Listed (Common & Preferred Stock) | <input type="checkbox"/> Penny Stock |
| <input type="checkbox"/> Banking Product (other than CD) | <input type="checkbox"/> Equity-OTC | <input type="checkbox"/> Prime Bank Instrument |
| <input type="checkbox"/> CD | <input type="checkbox"/> Futures Commodity | <input type="checkbox"/> Promissory Note |
| <input type="checkbox"/> Commodity Option | <input type="checkbox"/> Futures-Financial | <input type="checkbox"/> Real Estate Security |
| <input type="checkbox"/> Debt-Asset Backed | <input type="checkbox"/> Index Option | <input type="checkbox"/> Security Futures |
| <input type="checkbox"/> Debt-Corporate | <input type="checkbox"/> Insurance | <input type="checkbox"/> Unit Investment Trust |
| <input type="checkbox"/> Debt-Government | <input type="checkbox"/> Investment Contract | <input type="checkbox"/> Viatical Settlement |
| <input type="checkbox"/> Debt-Municipal | <input type="checkbox"/> Money Market Fund | <input type="checkbox"/> Other: _____ |

8. Alleged Compensatory Damage Amount: \$ _____

9. Is arbitration/reparation currently pending? Yes No

10. Resolution Details:

A. If status is not pending, how was arbitration/reparation resolved?

- Award Denied Dismissed Other Settled Stipulated Award Withdrawn

B. Resolution Date (MM/DD/YYYY): _____

C. Disposition Details:

11. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the action as the current status or disposition. Your information must fit within the space provided.

INDIVIDUAL NAME:

INDIVIDUAL CRD #:

U6 – INVESTIGATION DRP

Rev. DRP (05/2009)

1. *Investigation* initiated by:

A. Notice Received From (select appropriate item):

- SRO
 Foreign Financial Regulatory Authority
 Jurisdiction
 SEC
 Other Federal Agency
 Other _____

B. Full name of regulator (other than SEC) that initiated the *investigation*:

2. Notice Date (MM/DD/YYYY): Exact Explanation

If not exact, provide explanation:

3. Describe briefly the nature of the *investigation*, if known. (Your information must fit within the space provided.):

4. Is *investigation* pending? Yes No

If no, complete item 5. If yes, skip to item 6.

5. Resolution Details:

A. Date Closed/Resolved (MM/DD/YYYY): Exact Explanation

If not exact, provide explanation: _____

B. How was *investigation* resolved? (select appropriate item):

- Closed Without Further Action
 Closed – Regulatory Action Initiated
 Other: _____

6. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the *investigation*, as well as the current status or final disposition and/or finding(s). Your information must fit within the space provided.