1.

STATE OF WISCONSIN DEPARTMENT OF FINANCIAL INSTITUTIONS

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Division of Securities

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Division of Securities
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<u>DFIDLSecuritiesEnforcement@dfi.wisconsin.gov</u> <u>dfi.wi.gov</u>



Enforcement Questionnaire

This form may be used to file a complaint against firms or individuals not registered with the Division of Securities. Use of this form is voluntary. After we receive your completed questionnaire, an examiner from DFI will contact you. Please locate and retain all relevant documentation. Information may be used for secondary purposes. This document can be made available in alternate formats upon request to qualifying individuals with disabilities.

YOUR INFORMATION	THE BUSINESS YOUR COMPLAINT IS AGAINST	
Name	Name	
Address	Address	
City State Zip Code	City State Zip Code	
Reach me by phone between 8 a.m. and 4 p.m. at:	Name of person you dealt with:	
Account number with business, if any:	Phone number: ()	
Email address:	Email address:	

)	
ccount number with business, if any:	Phone number: ()
mail address:	Email address:
Describe what you were told about the transaction:	
a. When (date, month and year)?	
b. Where were you (location by city, county and state)?	
c. What forms of communication were used (email, text, tele	ephone, social media, etc.)?
d. Who told you (name of individual and company)?	

	e.	What were you told you would get in return for your money (stock, promissory note, limited partnership, etc.)?
	f.	What were you told your money would be used for?
	g.	What type of investment literature did you receive before you invested?
	h.	What were you told about the benefits and risks of the investment?
2.	Des	scribe the transfer of funds putting money in the venture or giving the loan. When did you transfer funds and how much (date, month and year)?
	b.	Where did you send the money from (city, county, state)?
	c.	What did you use (check, cash, money order, wire transfer, etc.)?
	d.	How did you send the money (mail, private courier, wire transfer, etc.)?
	e.	Whom did you give the money to (name of individual and company)?

		Were you 65 years of age or older at the time that you made the transaction(s)? If yes, please list your age at the time of your transaction(s).
3.	Desc	cribe your understanding of the investment, how it would work and what your money would be used for.
4.	Was	your investment secured by any type of collateral or guarantee? If yes, describe:
5.	Wha	t type of return did you expect and why?
6.	How	much money did you lose/gain through your investments? If gain, how and when were you paid back? Who paid you?
7.	Deta	il information provided during the transaction that you think may not have been true and/or complete.

8.	Detail information not provided during the transaction that you think may have affected your decision to be involved.
9	What has occurred since the transaction?
·	What has occurred since the adiisaction.
10.	Please provide any other information you think is important.
11	Please provide names, addresses and telephone numbers of others involved in the transaction.
11.	riease provide names, addresses and telephone numbers of others involved in the transaction.
mes	all documents such as checks, wires, investment literature and correspondence (including but not limited to written letters, text sages, emails, etc.) referenced above, please provide copies with this questionnaire. Please retain the original documents for your file.
The	above statement is true and accurate to the best of my knowledge.
	Consent to Release Information
The und	information provided may be used in efforts to resolve my problem and may be shared with the party complained against. I erstand certain information may be subject to open records laws.
You	ur signature Date