



**COMPLAINT FORM**  
**INVESTOR PROTECTION UNIT**

RETURN THIS FORM TO:

**INVESTOR PROTECTION UNIT  
DELAWARE DEPARTMENT OF JUSTICE  
820 N. FRENCH STREET, 5<sup>TH</sup> FLOOR  
WILMINGTON, DE 19801**

**Phone: (302) 577-8424**

**Fax: (302) 577-6987**

**Email: [investor.protection@state.de.us](mailto:investor.protection@state.de.us)**

FOR OFFICIAL USE:

Case Number: \_\_\_\_\_

Investigator: \_\_\_\_\_

**Your Name:**

\_\_\_\_\_

**Name of Person or Business Complaint is Against:**

\_\_\_\_\_

**Your Home Address:**

Number and Street

City

State and Zip Code

**Phone Numbers:**

**Home:** \_\_\_\_\_

**Work:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Their Address:**

Number and Street

City

State and Zip Code

**Phone Number(s):** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Other Affiliated Persons/Entities:** \_\_\_\_\_

\_\_\_\_\_

**CRD Number, if known:** \_\_\_\_\_

If you are not a resident of Delaware, please specify why you are filing your complaint with the State of Delaware (**NOTE: incorporating a company in Delaware is rarely enough grounds to pursue a case**):

\_\_\_\_\_  
\_\_\_\_\_

## INVESTMENT INFORMATION

Place of transaction(s). Please specify the state(s) in which you and the salesman were located when the transaction(s) took place.

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Identify any witnesses to the transaction: \_\_\_\_\_

How much money did you invest: \_\_\_\_\_

What was the source of your investment funds (savings, retirement account, loan, etc)? \_\_\_\_\_

Do you have and can you provide evidence of investment (front and back of checks; cashier's checks; money orders; bank statements; account statements; etc.)?    YES    NO

Please give a brief explanation of your prior investment experience.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please give a brief explanation of how you learned about this investment.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What were you told your money would be used for?

\_\_\_\_\_  
\_\_\_\_\_

Were you promised a specific return on your investment?

\_\_\_\_\_

What were you told about the risks of this investment?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did you receive a offering document, prospectus, or other information describing the investment?

\_\_\_\_\_

Did the seller give you information that later turned out to be untrue? If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did you sign any papers or documents in connection with the investment(s)?    YES    NO  
*If Yes, please attach copies of them.*

Have you complained to the Company or Firm? YES NO  
If yes, to whom?

What was the response?

Have you made a complaint with any other governmental or regulatory agencies? YES NO

If yes, who? \_\_\_\_\_ Which agency? \_\_\_\_\_

At what address? \_\_\_\_\_

Please provide the names, telephone numbers, and addresses of other known investors.

Does an attorney represent you in this matter? YES NO

If yes, provide attorney's name and address:

Have you or other victims filed a lawsuit against anyone regarding this investment? YES NO

If yes, provide name of court: \_\_\_\_\_

Case number: \_\_\_\_\_ Date case filed: \_\_\_\_\_

*Attach copies of court documents to this complaint.*

**NARRATIVE**

Please PRINT or TYPE your complaint in FULL detail. You may add additional sheets if necessary.

*Narrative continued, if necessary:*

**Attach COPIES, not originals, of all related documents, including advertisements, contracts, receipts, bills, cancelled checks, written agreements, letters or emails.**

**READ THE FOLLOWING CAREFULLY BEFORE SIGNING BELOW:**

- I have attached copies of all papers that relate to this complaint.
- I understand that in order to successfully handle this complaint, the Investor Protection Unit may need to send this complaint to the person or firm that I have complained about.

**YOU MUST CHECK ONE OF THE FOLLOWING:**

You have my permission to send this complaint to the person or business I have complained.

You **DO NOT** have my permission to send this complaint to the person or business I have complained.

The information contained in this complaint is true to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please be advised:**

- The Delaware Department of Justice is prohibited by law from giving you legal advice, legal opinions, or acting as your private attorney.
- You may have a private right of action that must be acted upon within certain time limits; filing this complaint with the Delaware Department of Justice will not stop those time limits from running.

Therefore, you should consult with a private attorney to discuss your legal rights and remedies.