Syndicate Subscription Legal Plans

INVESTOR PROTECTION / SECURITIES FRAUD CLIENT INTAKE QUESTIONNAIRE:

ACT PROMPTLY: Investment fraud claims have time limits (FINRA arbitration claims are generally eligible for only 6 years). Do not sign any settlement or release, and keep every statement and message. Beware of "recovery" companies that contact fraud victims and demand upfront fees.

CONFIDENTIAL. This questionnaire helps us evaluate losses caused by brokers, advisors, brokerage firms, or investment promoters, including fraud, unsuitable recommendations, unauthorized or excessive trading, and failure to supervise. Estimates are fine. Account numbers: last 4 digits only. If a question does not apply, write "N/A." If unknown, write "Unknown."

NAME OF THE CLIENT (INVESTOR):

Client type:

[__] Individual   [__] Joint account holders

[__] Trust   [__] Business / entity

[__] Family member / agent for investor

[__] Investor Full Legal Name(s): ____________________

Date of Birth: ____________________ Syndicate Plan Member ID: ____________________

Address: ____________________

City: ____________________ County: ____________ State: _____ Zip: _______

Phone: ____________________ Email: ____________________

Your name / relationship (if completing for the investor): ____________________

Preferred method of contact:

[__] Phone   [__] Text   [__] Email

PART 1 — INVESTOR PROFILE (AT THE TIME OF INVESTING)

Brokers must recommend investments suitable for your circumstances. These answers help evaluate suitability.

1.1 Occupation / retired: ____________________

1.2 Annual income: $ ____________________ Liquid net worth: $ ____________________

Total net worth (excluding home): $ ____________________

1.3 Investment experience:

[__] None   [__] Limited   [__] Moderate   [__] Extensive

1.4 Your actual investment goal:

[__] Preserve principal / income   [__] Moderate growth

[__] Aggressive growth   [__] Speculation

1.5 Your actual risk tolerance:

[__] Low   [__] Moderate   [__] High

1.6 When did you expect to need the money (time horizon)? ____________________

1.7 Did account forms list goals or finances you did not provide? [__] Yes [__] No

If yes, explain: ____

____

PART 2 — THE BROKER, ADVISOR, OR PROMOTER

Name	Firm	Role (broker, advisor, agent, promoter)	CRD / License No.	Years Dealing With

2.1 Have you checked them on FINRA BrokerCheck or the SEC database? [__] Yes [__] No

2.2 Was the person unlicensed or selling outside their firm? [__] Yes [__] No

If yes, explain: ____

____

2.3 Are you related to, or a friend of, the broker or promoter? [__] Yes [__] No

PART 3 — ACCOUNTS & INVESTMENTS

Firm / Custodian	Account Type (brokerage, IRA, margin, managed, annuity)	Acct (last 4)	Date Opened	Discretionary?

3.1 Investments Involved:

Investment / Product	Date Purchased	Amount Invested $	Current Value $	Recommended By

PART 4 — WHAT WENT WRONG?

Trading Misconduct:

[__] Excessive trading / churning
[__] Unauthorized trading
[__] Failure to execute trades
[__] Front running
[__] Margin account abuse
[__] Mutual fund switching
[__] Pricing violations
[__] Failure to protect profits / assets

Unsuitable or Risky Products:

[__] Unsuitable investments
[__] Overconcentration
[__] Variable annuities
[__] REITs (traded / non-traded)
[__] Direct participation programs
[__] Unit investment trusts
[__] Junk bonds
[__] Preferred shares
[__] Convertible notes
[__] Oil & gas investments
[__] Hedge funds
[__] Penny stocks

Fraud & Schemes:

[__] Misrepresentation / omissions
[__] Ponzi scheme
[__] Pump & dump
[__] Boiler room
[__] Fraudulent private placement
[__] Unlicensed salesperson
[__] EB-5 investor fraud
[__] Stuffing scheme
[__] Other fraud

Supervision & Duty:

[__] Failure to supervise
[__] Breach of fiduciary duty
[__] Elder financial abuse
[__] Negligence

4.1 Describe what you were told, what actually happened, and when: ______________________________

____

____

____

PART 5 — YOUR LOSSES

Amount	Amount $
Total amount invested	
Withdrawals / distributions received	
Current value of investments	
Commissions & fees paid	
Margin interest paid	
Estimated net loss	

5.1 When did you first realize something was wrong? ______________________________

How did you find out? ____

PART 6 — COMPLAINTS & ACTIONS TAKEN

6.1 Did you complain to the broker or firm? [__] Yes [__] No

If yes — date, to whom, and response: ______________________________

6.2 Complaints filed with:

[__] FINRA [__] SEC [__] State securities regulator

[__] Police / FBI [__] None

6.3 Have you filed an arbitration claim or lawsuit? [__] Yes [__] No

If yes, explain: ______________________________

____

6.4 Have you been offered a settlement or asked to sign a release? [__] Yes [__] No

If yes, explain: ______________________________

____

6.5 Are other investors affected, or is there a receiver or criminal case? [__] Yes [__] No

If yes, explain: ______________________________

____

6.6 Does your account agreement require arbitration? [__] Yes [__] No

PART 7 — GOALS & DOCUMENTS

7.1 What outcome do you want?

[__] Recover my losses
[__] Stop ongoing misconduct
[__] Report to regulators
[__] Transfer accounts safely
[__] Protect an elderly family member
[__] Understand my options

Please provide copies of the following, if available. Check each item you are including.

[__] Monthly / quarterly account statements
[__] Trade confirmations
[__] New account forms / applications
[__] Advisory / account agreements
[__] Offering documents (prospectus, PPM)
[__] Subscription agreements
[__] Marketing materials / presentations
[__] Emails, texts, letters with broker
[__] Notes of phone calls
[__] Complaint letters & responses
[__] Tax forms (1099s, K-1s)
[__] Any settlement offers

Authorization & Certification:

[__] I authorize Syndicate Subscription Legal Plans to obtain my account records and communicate with the firms, regulators, and agencies involved regarding this matter.

I declare that the information provided in this questionnaire is true, correct, and complete to the best of my knowledge. I understand this information is provided to Syndicate Subscription Legal Plans in confidence for the purpose of evaluating my investment loss matter.

Signed and dated this ____ day of ________________________, 20___

Signature (Investor): ____

Print Name: ______________________________

Signature (Joint Holder): ____

Print Name: ______________________________

Please Print and Email to STEVE@STEVEMUELLERLEGAL.COM, or save this document as a PDF and email to STEVE@STEVEMUELLERLEGAL.COM,
Your information will be reviewed within one hour.