

**NY Form CM-2**

**\*\* File no. \_\_\_\_\_**

(Rev. 5/18)

**STATE OF NEW YORK, Office of the Attorney General**

**INVESTOR PROTECTION BUREAU**

**COMMODITY SALESPERSON STATEMENT**

**This form must always be accompanied by the Supplemental Commodity Broker-Dealer Statement (NY Form CM-3) unless this is an original filing.**

1. \_\_\_\_\_  
 Last Name                      First Name                      Middle Name

2. \_\_\_\_\_  
 Residence                                      City                      State                      Zip

3. \_\_\_\_\_ 4. \_\_\_\_\_  
 Residence Telephone                                      Social Security

5. \_\_\_\_\_ 6. \_\_\_\_\_  
 Place of Birth                                      Date of Birth

7. \_\_\_\_\_ 8. \_\_\_\_\_ 9. \_\_\_\_\_ 10. Ft. \_\_\_\_\_ In. \_\_\_\_\_  
 Color of Hair      Color of eyes      Weight                      Height

**Attach 2 X 2 photo taken within the preceding six months**

**11. Insert name and address of current employer (Commodity Broker-Dealer)**

Name \_\_\_\_\_ Address \_\_\_\_\_

**12. Have you or any entity in which you were a principal ever:**

- A. been suspended or expelled from membership in any securities or commodities exchange, association of securities or commodities dealers or investment or commodities trading advisors or counsel? .....** Yes [ ] No [ ]
- B. had a license or registration as a securities or commodity dealer, broker, investment advisor, salesperson, futures commission merchant, associated person, commodity pool operator or commodity trading advisor denied, suspended, revoked, cancelled or refused? .....** Yes [ ] No [ ]
- C. been enjoined or restrained by any court or government agency from:**
  - 1. the issuance, sale or offer for sale of securities or commodities? .....** Yes [ ] No [ ]
  - 2. rendering securities or commodities advice or counsel? .....** Yes [ ] No [ ]
  - 3. handling or managing trading accounts? .....** Yes [ ] No [ ]
  - 4. continuing any practices in connection with securities or commodities? .....** Yes [ ] No [ ]
- D. Is any action or proceeding seeking the relief enumerated in A-C presently pending? .....** Yes [ ] No [ ]
- E. been convicted of any crime? .....** Yes [ ] No [ ]
- F. used or been known by any other name? .....** Yes [ ] No [ ]
- G. been the subject of any professional disciplinary proceeding? .....** Yes [ ] No [ ]
- H. been adjudged a bankrupt or made a general**

assignment for benefit of creditors; been the subject of a receivership or bankruptcy proceeding; been an officer, director, principal, partner, manager, supervisor or any 10% or more equity holder of any entity which was reorganized in bankruptcy, adjudged a bankrupt or made a general assignment for benefit of creditors? .....

Yes [ ] No [ ]

I. had a judgment entered against them or it which is presently unsatisfied? (Not including judgments involving domestic relations.) .....

Yes [ ] No [ ]

J. been a party in any litigation or administrative proceeding in which it is alleged that they or it committed fraud or otherwise violated any provision of the Martin Act or any other securities or commodities laws? .....

Yes [ ] No [ ]

K. if any answer to any of the above is "YES", attach statement of full particulars.

13. Following is my complete employment record for the past five years: (Indicate periods of self-employment & unemployment).

From Mo. Yr.	To Mo. Yr.	Employer	Position Held
		<b>Name</b>	<b>Address</b>
		<b>Present</b>	

14. Following is my complete education history:

Name of School and location	From	To	Did you Graduate
Elementary School			
High School			
College University			
or Technical School			

Other Schools or

Special Courses

A \$25 fee must accompany this statement. Personal checks not accepted. Attorney's check, certified check, bank check, money order only, payable to the N.Y.S. Office of the Attorney General. Attach additional sheets where space provided is inadequate. You may submit a photocopy of this form. We will return it with your fee receipt for your records. Send remittance to: Investor Protection Bureau, NYS Department of Law, 28 Liberty Street, 15<sup>th</sup> Floor, New York, NY 10005.

DATED: \_\_\_\_\_ Signature: \_\_\_\_\_

STATE OF )  
 : SS.:  
COUNTY OF )

\_\_\_\_\_, being duly sworn, deposes and says that I am the applicant and I signed the above form. I have read the questions and answers and information supplied, and they are true, accurate and complete.

\_\_\_\_\_  
(Signature of Affiant/Commodity Salesperson)

Sworn to before me this  
day of , 19

(Notary signature and legible official stamp)

(spe)

**\*\*Found on the fee receipt you received for original filing.**