NEW YORK STATE DEPARTMENT OF LAW
INVESTMENT PROTECTION BUREAU
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NY FORM M-4

*** NYS File Number/CRD Numb** _____

SUPPLEMENTAL SALESPERSON STATEMENT

The Supplemental Broker-Dealer Statement must accompany this report of new employment.
This form should not be used by salespersons of NASD member firms.

_____
Salesperson Last Name First Name Middle Name

_____
Street Address City State Zip

Social Security # _____ *Social security numbers and residential information are strictly confidential.*

A Securities Salesperson shall, <u>not later then 30 days after occurrence,</u> complete this statement to report:

1. CHANGE OR TERMINATION OF EMPLOYMENT. If dual registration, so indicate.

   Date Terminated _____ Reason Terminated _____

   Name (Former Employer) _____

   Address _____

   New Employer _____ Date Commenced _____

   Address _____

   Real Estate License No. _____ Expiration Date _____

2. CHANGE IN NAME OR ADDRESS.

   To: _____ From: _____ Date: _____

3. DISCLOSURE ITEMS. Specify nature of offense, dates, circumstances and final disposition for each occasion when salesperson is convicted of any criminal offense involving securities or commodities or of any felony whatsoever, or is restricted by any court or governmental agency from engaging in any practice involving securities or commodities.

   _____

   _____

4. [ ] CANCEL MY SALESPERSON REGISTRATION.

   NOTE: No fee required to cancel registration. However, re-employment as a salesperson of securities after cancellation will require a new registration and payment of $150 filing fee.

I hereby state and represent that I am the person who executed the foregoing Supplemental Salesperson Statement, that all the answers and facts contained therein are true and that I fully understand that any false statement shall constitute a violation of Article 23-A of the General Business Law.

Date: _____ **Signature:** _____

Fee for Supplemental Salesperson Statement..... $30.00 Payment by Attorney's check, company check, certified check, bank check or money order. Personal checks not accepted.	Make check payable to the **NYS Department of Law.** **Send remittance to:** **Investment Protection Bureau** **NYS Department of Law** **120 Broadway, 23rd Floor** **New York, New York 10271**

*NYS File Number found on fee receipt for original filing