



BrokerCheck® Dispute Form

Complete this form if you wish to update or dispute information that is disclosed in your BrokerCheck report. Further information regarding the BrokerCheck dispute process, including the requirements that must be met for FINRA to investigate a dispute, is available on FINRA's website.

Once FINRA receives your submission, you will be notified in writing as to whether the dispute is eligible for investigation and, if eligible, the outcome of the investigation.

This form must be completed in its entirety and accompanied by all available supporting documentation. FINRA will not process any BrokerCheck Dispute Form that is incomplete, unsigned or submitted by a person or firm that is not the subject of the BrokerCheck report in question.

PART I – GENERAL INFORMATION

First Name:	Middle Initial:	Last Name:	
Title (if dispute is being brought on firm's behalf):			
Address:	City:	State:	Zip Code:
Phone Number:		Individual/Firm CRD Number:	

PART II – INFORMATION ABOUT THE DISPUTE

Provide a statement identifying the information that you allege is inaccurate, including the location that such information appears in a BrokerCheck report (section and page number), and the reason you believe the information to be inaccurate.

PART III - ACKNOWLEDGEMENTS

I understand that FINRA will consider any BrokerCheck Dispute Form submitted to be a communication to FINRA and, as such, to be conduct covered by FINRA Rule 2010, which requires members to observe just and equitable principles of trade and high standards of commercial honor. Accordingly, FINRA will consider disciplinary or other appropriate action against an individual or firm that, for example, willfully makes a false or misleading statement in a BrokerCheck Dispute Form.

I further understand that any information or documentation submitted in connection with this dispute may be provided to the entity that reported the information under dispute to the Central Registration Depository®.

If submitting this dispute on behalf of a firm, I acknowledge that I am authorized to do so.

I have read the above statements and all of the information I have provided is true and accurate to the best of my knowledge. I understand that I may be subject to administrative or civil penalties if I provide false or misleading information.

Signature: _____

Date: _____

BrokerCheck Dispute Checklist:

To ensure timely processing of your dispute, please check the following:

- ☐ All parts of this form are complete.
- ☐ The applicable section(s) and page(s) of the BrokerCheck report where the disputed information is located have been identified. If you wish, you may provide a copy of the BrokerCheck report with the disputed information circled or highlighted.
- ☐ All available supporting documentation has been attached to this form.

Please email this signed and dated form along with your supporting documentation to:
BrokerCheckDispComm@finra.org

Questions: Call FINRA's Gateway Call Center at (301) 590-6500