

State of Rhode Island DEPARTMENT OF BUSINESS REGULATION Securities Division 1511 Pontiac Avenue, Bldg. 69-2 Cranston, Rhode Island 02920

FRANCHISE SELLER DISCLOSURE FORM

- 1. List all who will solicit, offer or sell franchises for the Franchisor in this state:
 - A. Name:
 - B. Business address and telephone number:
 - C. Present employer:
 - D. Present title:
 - E. Employment during the past five years. For each employment, state the name of the employer, position held, and beginning and ending dates:
- 2. State whether the person identified in 1 above:
 - A. Has an administrative, criminal or material civil action pending against that person alleging a violation of franchise, antitrust or securities law, or alleging fraud, unfair or deceptive practices, or any comparable allegations?

Yes_____No_____

If you answered "yes", please provide:

- 1. Name of the parties:
- 2. Forum, nature and current status of the pending action:
- 3. Case or proceeding identification number:
- B. Had during the 10-year period immediately before the disclosure document's issuance date been convicted of or pleaded nolo contendere to a felony charge; or been held liable in a civil action involving an alleged violation of a franchise, antitrust or securities law, or allegations of fraud, unfair or deceptive practices, or comparable allegations?

Yes_____No____

If you answered "yes", please provide:

- 1. Name of the parties
- 2. The forum:
- 3. Case or proceeding identification number:
- C. Is subject to a currently effective injunction or restrictive order or decree resulting from a pending or concluded action brought by a public agency and relating to the franchise, or to a Federal, State or Canadian franchise, securities, antitrust, trade regulation or trade practice law.

Yes_____No_____

If you answered "yes", please provide:

- 1. Name of the person:
- 2. Public agency or court:
- 3. Case or proceeding identification number: