

**UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF NORTH CAROLINA
CHARLOTTE DIVISION**

**U.S. COMMODITY FUTURES TRADING
COMMISSION,**

Plaintiff,

v.

**CAPITALSTREET FINANCIAL, LLC,
SEAN F. MESCALL,**

Defendants,

and

**GERALD T. MESCALL,
and GAINCAPITAL, INC.,**

Relief Defendants.

CASE NO. 3:09-cv-387-RJC-DCK

**NOTICE OF CLAIM VERIFICATION FORM AND CLAIMS BAR DATE
FOR INVESTORS IN CAPITALSTREET FINANCIAL, LLC**

PLEASE TAKE NOTICE that the Court has approved the attached Claim Verification Form to be used by Investors in CapitalStreet Financial, LLC (“CapitalStreet”) in establishing their claims against the CapitalStreet receivership estate. Investors should complete the Claim Verification Form, make any changes necessary to ensure accuracy, sign and return it along with supporting documentation as instructed on the last page of the Claims Verification Form. If you are not able to answer a question or provide copies of requested documents, or if you believe that you have already provided sufficient documentation of your claim, please provide a written explanation, either in the space provided or on an attached sheet. You may also attach to the

Claims Verification Form any other written information that you believe is relevant to your claim.

TAKE FURTHER NOTICE that Claim Verification Forms are due on or before **July 27, 2010**, the **Claims Bar Date**. Claims received after the Claims Bar Date may not be allowed a distribution. Claim forms may be submitted by email, fax, mail, or hand delivery as follows:

Email: CapitalStreetreceivership@grierlaw.com
Fax to: 704.332.0215
Mail or deliver to: CapitalStreet Claims
Grier Furr & Crisp, PA
101 North Tryon Street, Suite 1240
Charlotte, NC 28246

Questions regarding the Claim Verification Form or the Claims Bar Date may be addressed to CapitalStreetreceivership@grierlaw.com.

This is the 24th day of June, 2010.

GRIER FURR & CRISP, PA

/s/Joseph W. Grier, III
Joseph W. Grier, III (State Bar No. 7764)
A. Cotten Wright (State Bar No. 28162)
Anna S. Gorman (State Bar No. 20987)
101 North Tryon Street, Suite 1240
Charlotte, North Carolina 28246
Phone: 704.375.3720; Fax: 704.332.0215
jgrier@grierlaw.com
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*Attorneys for Joseph W. Grier, III,
Court Appointed Receiver*

**INVESTOR CLAIM VERIFICATION FORM
CAPITALSTREET FINANCIAL, LLC**

1. This Claim Verification Form is submitted by or on behalf of the following individual(s) or entity relative to funds invested with CapitalStreet Financial, LLC (“CapitalStreet”) for commodity trading:

2. My interest is recorded by Capital Street under the following account number:

_____.

3. I originally learned about CapitalStreet from _____ and was solicited to invest in CapitalStreet by _____.

4. I received information regarding my account with CapitalStreet from:

_____.

5. Please indicate which statement(s) are accurate and provide the information requested:

_____ a. No other person has any interest of any kind in this CapitalStreet account.

_____ b. The following persons have an interest in this CapitalStreet account (list names and addresses):

_____ c. I act as the trustee or representative of one or more other persons who hold a beneficial interest in this CapitalStreet account (list names and addresses of all persons holding such beneficial interests):

_____ d. I am a representative or agent of the following entity that invested in funds in CapitalStreet (list name and address and your relationship to the entity):

6. On the dates listed below, I, or someone acting on my behalf, transferred the following amounts to fund my investment in CapitalStreet (attach additional pages as necessary).

Individual or Entity That Made Transfer	Date of Transfer	Amount of Transfer	Bank Name and Account Number from which Funds were Transferred	Form of Transaction (Check / Wire Transfer)
TOTAL				\$ _____

7. On the dates listed, Capital Street, or a person or entity acting on its behalf, transferred the following distributions of funds to me, or on my behalf, on account of my investment in CapitalStreet (attach additional pages as necessary).

Individual or Entity That Received Withdrawal	Date of Withdrawal	Amount Withdrawn	Bank Name and Account Number to which Funds were Transferred	Form of Transaction (Check / Wire Transfer)
TOTAL				\$ _____

8. Following is a list of all transfers to or from Capital Street, or a person or entity acting on its behalf, and me, or a person or entity acting on my behalf, that are not listed in paragraphs 6 or 7 above (for example, loans, salary, commission, expenses, or other) (attach additional pages as necessary):

Individual or Entity That Made Transfer	Individual or Entity That Received Transfer	Amount of Transfer	Date of Transfer	Reason For Transfer

TOTAL				

9. I have enclosed with this Claim Verification Form copies of all available statements received regarding my transfers to and withdrawals from CapitalStreet. If not, please explain.

10. I have enclosed with this Claim Verification Form copies of all checks, wire transfer advices and all other records of transfers relating to the funds deposited with or withdrawn from CapitalStreet. If not, please explain.

11. I have enclosed copies of all other documents in my possession or control in connection with my investment in CapitalStreet, including correspondence, emails, K-1 or other tax forms, and the like. If not, please explain.

12. In addition to the account listed above, I also own an interest in the following CapitalStreet account: _____ (Account Name), _____ (Account Number). I have enclosed documentation of transfers between my CapitalStreet accounts.

13. This Claim Verification Form (circle one, if applicable) amends / replaces a Claim Form submitted on _____.

I aver and affirm that the above information is true and correct under penalty of perjury.

Signature

Date

Name: _____
(Please print or type)
Address: _____

Daytime
Phone: _____
Email
Address: _____

CLAIM FORMS MAY BE SUBMITTED BY EMAIL, FAX, MAIL, OR HAND DELIVERY AS FOLLOWS:

Email: CapitalStreetreceivership@grierlaw.com

Fax to: 704.332.0215

Mail or hand deliver to: CapitalStreet Claims
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