

UNITED STATES  
COMMODITY FUTURES TRADING COMMISSION  
Washington, D.C. DC 20581

OMB APPROVAL  
OMB Number: 3038-008  
Expires: 10/31/14

FORM WB-APP

APPLICATION FOR AWARD FOR ORIGINAL INFORMATION  
**SUBMITTED/PROVIDED**  
PURSUANT TO SECTION 23 OF THE COMMODITY EXCHANGE ACT

**A. APPLICANT'S INFORMATION (REQUIRED FOR ALL SUBMISSIONS) A. TELL US ABOUT YOURSELF (Required for All Submissions)**

1. Last Name:		First Name:	M.I.:	SSN Last Four Digits:
2. Street Address:		Apartment/Unit #:		
City:	State/Province:	ZIP/Postal Code:	Country:	
3. Telephone:	Alt. Phone:	E-mail Address:		

**B. YOUR ATTORNEY'S INFORMATION (IF APPLICABLE - SEE INSTRUCTIONS If Applicable - See Instructions)**

1. Attorney's Name:			
2. Firm Name:			
3. Street Address:			
City:	State/Province:	Zip/Postal Code:	Country:
4. Telephone:	Fax:	E-mail Address:	

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Please be advised that pursuant to 5 C.F.R. § 1320.5(b)(2)(i), you are not required to respond to this collection of information unless it displays a currently valid OMB control number.

**C. TIP/COMPLAINT DETAILS. TELL US ABOUT YOUR TIP OR COMPLAINT**

1. Manner in which information was submitted to the CFTC: 1a. How did you submit original information? Website <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Other <input type="checkbox"/>	1b. Date that you submitted the information (mm/dd/yyyy)
2a. Did you file a CFTC Form TCR? YES <input type="checkbox"/> NO <input type="checkbox"/>	
2a. Tip, Complaint or Referral Number	2c. 2b. Date that you filed your Form TCR referred to in 2a submitted to CFTC: (mm/dd/yyyy)
3. Name Subject(s) of the Tip, Complaint individual(s) and/or Referral entity(s) to which your tip or complaint relates	

**D. NOTICE OF COVERED ACTION**

1. Date of relevant Notice of Covered Action to Which Claim Relates: (mm/dd/yyyy)	2. Notice Number
3a. Case Name	3b. Case Number

**E. CLAIMS PERTAINING TO RELATED ACTIONS**

1. Name of other agency or organization to which the whistleblower you provided the whistleblower's your information	
2. Name and contact information for point of contact at the agency or organization, if known	
3a. Date the whistleblower that you provided the whistleblower's information (mm/dd/yyyy)	3b. Date of action filed by the agency or organization (mm/dd/yyyy)
4a. Case Name	4b. Case Number

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**F. ELIGIBILITY REQUIREMENTS AND OTHER INFORMATION**

1. ~~Is the whistleblower~~ Are you currently, or ~~was the whistleblower~~ were you at the time ~~the whistleblower~~ that you acquired the original information ~~the whistleblower~~ that you submitted to the CFTC, a member, officer or employee of ~~the Department of Justice, the Commodity Futures Trading Commission, the Comptroller of the Currency, the CFTC, the Board of Governors of the Federal Reserve System, the~~ ; the Office of the Comptroller of the Currency; the Board of Directors of the Federal Deposit Insurance Corporation; the Director of the Office of Thrift Supervision; the National Credit Union Administration; Board; the Securities and Exchange Commission; the Department of Justice; a registered entity; a registered futures association; a self-regulatory organization; ~~any~~ a law enforcement organization; or a foreign regulatory authority or law enforcement organization?

YES  NO

2. Did ~~the whistleblower~~ you provide the information identified in Section C above pursuant to a cooperation agreement with the CFTC or another agency or organization?

3. Did the whistleblower acquire the information the whistleblower provided to the CFTC from any person described in questions F1 through F2?

YES  NO

4. If the whistleblower answered "yes" to any of questions 1 through 3 above, please provide details: (Use additional sheets, if necessary)

5a. Did the whistleblower provide ~~3. Before you provided~~ the information identified in Section C above ~~before the whistleblower, did you~~ (or anyone representing you) ~~received~~ receive any request, inquiry or demand that relates to the subject matter of ~~the whistleblower's~~ your submission; (i) from the CFTC; (ii) in connection with an investigation, inspection or examination by any registered entity, registered futures association or self-regulatory organization; or (iii) in connection with an investigation by the Congress, or any other federal or state authority?

YES  NO

5b. If the whistleblower answered "yes" to question 5a, please provide details: (Use additional sheets, if necessary)

6a. Is the whistleblower ~~4. Are you~~ currently a subject or target of a criminal investigation, or have ~~the whistleblower~~ you been convicted of a criminal violation, in connection with the information identified in Section C above and upon which ~~the whistleblower's~~ your application for an award is based?

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5. Did you acquire the information that you provided to the CFTC from any person described in Questions 1 through 4 above?

YES  NO

6b.6 If the whistleblower you answered "Yes" to question 6a any of Questions 1 through 5 above, please provide details. Use additional sheets, if necessary.

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G. ENTITLEMENT TO AWARD

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Explain the basis for ~~the whistleblower's~~ your belief that ~~the whistleblower is~~ you are entitled to an award in connection with ~~the whistleblower's~~ your submission of information to the CFTC, or to another agency or organization in a related action. Provide any additional information ~~the whistleblower thinks~~ that you think may be relevant in light of the criteria for determining the amount of an award set forth in Section 23 of the ~~Commodities~~ Commodity Exchange Act and Part 165 of the ~~Commission's Regulations thereunder.~~ (CFTC's regulations. Include any supporting documents in ~~the whistleblower's~~ your possession or control, and use additional sheets, if necessary).

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**H. CLAIMANT'S DECLARATION**

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I declare under penalty of perjury under the laws of the United States that the information contained herein is true, correct and complete to the best of my knowledge, information and belief. I fully understand that I may be subject to prosecution and ineligible for a whistleblower award if, in my submission of information, my other dealings with the Commodity Futures Trading Commission, or my dealings with another agency or organization in connection with a related action, I knowingly and willfully make any false, fictitious or fraudulent statements or representations, or use any false writing or document knowing that the writing or document contains any false, fictitious or fraudulent statement or entry.

Print Name

### **H. DECLARATION**

I declare under penalty of perjury under the laws of the United States that the information contained herein is true, correct and complete to the best of my knowledge, information and belief. I fully understand that I may be subject to prosecution and ineligible for a whistleblower award if, in my submission of information, my other dealings with the CFTC, or my dealings with another authority in connection with a related action, I knowingly and willfully make any false, fictitious, or fraudulent statements or representations, or use any false writing or document knowing that the writing or document contains any false, fictitious, or fraudulent statement or entry.

Print Name

Signature

Date

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### **I. COUNSEL CERTIFICATION**

I certify that I have reviewed this form for completeness and accuracy and that the information contained herein is true, correct and complete to the best of my knowledge, information and belief. I further certify that I have verified the identity of the whistleblower award claimant on whose behalf this form is being submitted by viewing the claimant's valid, unexpired government issued identification (e.g., driver's license, passport) and will retain an original, signed copy of this form, with Section H signed by the claimant, in my records. I further certify that I have obtained the claimant's non-waivable consent to provide the Commodity Futures Trading Commission with his or her original signed Form WB-APP upon request, and that I consent to be legally obligated to do so within seven (7) calendar days of receiving such a request from the Commodity Futures Trading Commission.

Print Name of Attorney and Law Firm, if Applicable

Signature

Date

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**Privacy Act Statement**

This notice is given under the Privacy Act of 1974. The Privacy Act requires that the Commodity Futures Trading Commission (CFTC ~~or Commission~~) inform individuals of the following when asking for information. The solicitation of this information is authorized under the Commodity Exchange Act, 7 ~~USC~~ U.S.C. § 1 ~~et seq.~~. The information provided will enable the ~~Commission~~ CFTC to determine the ~~whistleblower's~~ whistleblower award ~~claimant's~~ eligibility for payment of an award pursuant to Section 23 of the Commodity Exchange Act ~~and Part 165 of the CFTC's regulations.~~ This information will be used to investigate and prosecute violations of the Commodity Exchange Act and ~~Commission~~ the CFTC's regulations. This information may be disclosed to ~~Federal~~ federal, state, local, or foreign agencies ~~or other authorities~~ responsible for investigating, prosecuting, enforcing, or implementing laws, rules, or regulations implicated by the information consistent with the confidentiality requirements set forth in Section 23 of the Commodity Exchange Act and Part 165 of the ~~Commission's Regulations thereunder.~~ CFTC's regulations. The information will be maintained and additional disclosures may be made in accordance with System of Records Notices CFTC-49, "Whistleblower Records" (exempted), CFTC-10, "Investigatory Records" (exempted), and CFTC-16, "Enforcement Case Files." The ~~Commission~~ CFTC requests the last four digits of ~~the claimant's~~ Social Security Number for use as an individual identifier to administer and manage the whistleblower award program. Executive Order 9397 (~~Nov-November~~ 22, 1943) allows ~~Federal~~ federal agencies to use the Social Security Number as an individual identifier. ~~Furnishing the information is voluntary.~~ However, if an individual is providing information for the whistleblower award program, not providing required information may result in the ~~whistleblower~~ individual not being eligible for award consideration.

Questions concerning this form may be directed to ~~the~~ Commodity Futures Trading Commission, ~~Attention:~~ TCR Whistleblower Office, Three Lafayette Centre, 1155 21st Street, ~~N.W.;~~ NW, Washington, DC 20581.

**General**

**Submission Procedures**

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• This form ~~should~~must be used by persons making a claim for a whistleblower award in connection with information provided to the CFTC, or to another agency or organization in a related action. In order to be deemed eligible for an award, ~~the whistleblower~~you must meet all the requirements set forth in Section 23 of the ~~Commodities~~Commodity Exchange Act and ~~the rules thereunder~~Part 165 of the CFTC's regulations.

• ~~The whistleblower~~You must sign the Form WB-APP as the claimant. ~~If you wish to submit the whistleblower provided the whistleblower's information to the CFTC~~Form WB-APP anonymously, ~~the whistleblower~~you must ~~now disclose~~do so through an attorney, your attorney must sign the Counsel Certification Section of the Form WB-APP that is submitted to the CFTC, and you must give your attorney your original signed Form WB-APP so that it can be produced to the whistleblower's identity on this form and CFTC upon request.

• During the whistleblower's whistleblower award claim process, your identity must be verified in a form and manner that is acceptable to the CFTC prior to the payment of any award.

○ ~~If the whistleblower is~~you are filing ~~the whistleblower's~~your claim in connection with information that ~~the whistleblower~~you provided to the CFTC, then ~~the whistleblower's~~your Form WB-APP, and any attachments thereto, must be received by the CFTC within ninety (90) days of the date of the Notice of Covered Action, or the date of a final judgment in a related action to which the claim relates.

○ ~~If the whistleblower is~~you are filing ~~the whistleblower's~~your claim in connection with information ~~the whistleblower~~that you provided to another agency or organization in a related action, then ~~the whistleblower's~~your Form WB-APP, and any attachments ~~there to~~thereto, must be received by the ~~Commodity Futures Trading Commission~~CFTC as follows:

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• If a final order imposing monetary sanctions has been entered in a related action at the time ~~the whistleblower submits the whistleblower's~~ that you submit your claim for an award in connection with a ~~CommissionCFTC~~ action, ~~the whistleblower~~ you must submit ~~the whistleblower's~~ your claim for an award in that related action on the same Form WB-APP that ~~the whistleblower uses~~ you use for the ~~CommissionCFTC~~ action.

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• If a final order imposing monetary sanctions in a related action has not been entered at the time ~~the whistleblower submits the whistleblower's~~ that you submit your claim for an award in connection with a ~~CommissionCFTC~~ action, ~~the~~ whistleblower you must submit ~~the whistleblower's~~ your claim on Form WB-APP within ninety (90) days of the issuance of a final order imposing sanctions in the related action.

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• ~~The whistleblower must To~~ submit ~~the whistleblower's~~ your Form WB-APP. ~~you must print it and either submit it by mail to us in one of the following two ways:~~

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○ ~~By mailing or delivering the signed form to the~~ Commodity Futures Trading

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Commission, ~~Attention: TCR~~ Whistleblower Office, Three Lafayette Centre, 1155 21st Street,

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NW, Washington, DC 20581; or

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○ ~~By faxing the signed form by facsimile~~ to (202) 418-5975.

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### Instructions for Completing Form WB-APP

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#### General

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All references to "you" and "your" are intended to mean the whistleblower award claimant.

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#### Section A: Applicant's Information Tell Us about Yourself

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Questions 1-3: ~~Provide~~ Please provide the following information about yourself:

- ~~First and~~ last name, ~~and first name,~~ middle initial, ~~and social security number and the last~~ four digits of your Social Security Number;
- ~~Complete~~ complete address, including city, state and zip code;
- ~~Telephone~~ telephone number and, if available, an alternate number where ~~the whistleblower~~ you can be reached; and
- ~~E-mail address.~~

- your e-mail address (to facilitate communications, we strongly encourage you to provide an email address, especially if you are making your claim anonymously).

**Section B: ~~Your~~ Attorney's Information.** ~~If the whistleblower is represented by an attorney in~~

~~Complete this matter, provide the information requested. If the whistleblower is not~~ section

~~only if you are~~ represented by an attorney in this matter, ~~leave this Section blank.~~

Questions 1-4: ~~Provide~~ Provide the following information about ~~the your~~ attorney ~~representing the whistleblower~~ in this matter:

- ~~Attorney's name;~~
- ~~Firm~~ attorney's name;
- ~~Complete~~ firm name;
- ~~complete~~ address, including city, state and zip code;
- ~~Telephone~~ telephone number and fax number; and
- ~~E~~ e-mail address.

**Section C: ~~Tell Us about Your Tip/ or Complaint~~ Details**

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Question 1a: Indicate the manner in which the whistleblower you submitted your original information to the CFTC.

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Question 1b: Provide the date on which you submitted your original information was submitted to the CFTC.

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Question 2a: Include the State whether you filed a CFTC Form TCR (Tip, Complaint or Referral) number to which this claim relates.

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Question 2b: Provide If you filed a CFTC Form TCR, provide the date on which the whistleblower submitted the whistleblower's information to the CFTC Form's number.

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Question 2c: If you filed a CFTC Form TCR, provide the date on which you filed the Form.

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Question 3: Provide the name(s) of the individual(s) and/or entity(s) to which the whistleblower's your tip or complaint, or referral related relates.

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Section D: Notice of Covered Action

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The process for making a claim for a whistleblower award for a CFTC action begins with the publication of a "Notice of a Covered Action" on the Commission's CFTC's website. This Notice is published whenever a judicial or administrative action brought by the Commission CFTC results in the imposition of monetary sanctions exceeding \$1,000,000. The Notice is published on the Commission's CFTC's website subsequent to the entry of a final judgment or order in the action that by itself, or collectively with other judgments or orders previously entered in the action, exceeds the \$1,000,000 threshold required for a whistleblower to be potentially eligible for an award. The Commission CFTC will not contact whistleblower claimants directly as to Notices of Covered Actions; prospective claimants should monitor the Commission CFTC website for such Notices.

Question 1: Provide the date of the Notice of Covered Action to which this claim relates.

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Question 2: Provide the notice number of the Notice of Covered Action.

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Question 3a: Provide the case name referenced in the Notice of Covered Action.

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Question 3b:- Provide the case number referenced in the Notice of Covered Action.

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**Section E: Claims Pertaining to Related Actions**

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Question 1:- Provide the name of the agency or organization to which ~~the whistleblower~~ you provided ~~the whistleblower's~~ your information.

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Question 2:- Provide the name and contact information for ~~the whistleblower's~~ your point of contact at the agency or organization, if known.

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Question 3a:- Provide the date on which ~~that the whistleblower~~ you provided ~~the whistleblower's~~ your information to the agency or organization referenced in ~~question E1~~ Question 1 of this section.

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Question 3b:- Provide the date on which the agency or organization referenced in ~~question E1~~ Question 1 of this section filed the related action that was based upon the information ~~the whistleblower~~ that you provided.

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Question 4a:- Provide the case name of the related action.

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Question 4b:- Provide the case number of the related action.

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**Section F: Eligibility Requirements and Other Information**

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Question 1:- State whether ~~the whistleblower is~~ you are currently, or ~~was~~ were at the time ~~the whistleblower~~ that you acquired the original information that ~~the whistleblower~~ you submitted to the CFTC, a member, officer or employee of ~~the Department of Justice, the Commodity Futures Trading Commission, the Comptroller of the Currency, the CFTC, the Board of Governors of the Federal Reserve System, the Office of the Comptroller of the Currency, the Board of Directors of the Federal Deposit Insurance Corporation, the Director of the Office of Thrift Supervision, the National Credit Union Administration, Board, the Securities and Exchange Commission, the Department of Justice, a registered entity, a~~

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registered futures association; a self-regulatory organization; any a law enforcement organization; or a foreign regulatory authority or law enforcement organization.

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Question 2: State whether the whistleblower you provided the information that you submitted to the CFTC pursuant to a cooperation agreement with the CFTC or with any other agency or organization.

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Question 3: State whether the whistleblower acquired the you provided this information the whistleblower provided to the CFTC from any individual described in Question 1 through 2 of this Section.

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Question 5: If the whistleblower answered "yes" to questions 1 through 3 of this Section, please provide details.

Question 5a: State whether the whistleblower provided the information submitted to the CFTC

before the whistleblower you (or anyone representing the whistleblower you) received any request, inquiry or demand that relates to the subject matter of the whistleblower's your submission; (i) from the CFTC; (ii) in connection with an investigation, inspection or examination by any registered entity, registered futures association or self-regulatory organization; or (iii) in connection with an investigation by the Congress, or any other federal or state authority.

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Question 5b: If the whistleblower answered "yes" to questions 5a, please provide details. Use additional sheets if necessary.

Question 6a: State whether the whistleblower is the you are currently a subject or target of a criminal investigation, or has whether you have been convicted of a criminal violation, in connection with the information that you submitted to the CFTC and upon which the whistleblower's your application for an award is based.

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Question 6b: If the whistleblower answered "yes" to question 6a, please provide details, including the name of the agency or organization that conducted the investigation

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or initiated the action against you, the name and telephone number of the whistleblower's point of contact at the agency or organization, if available, and the investigation/case name and number, if applicable. Use additional sheets, if necessary.

Question 5: State whether you acquired the information that you provided to the CFTC from any individual described in Questions 1 through 4 of this section.

Question 6: If you answered yes to any of Questions 1 through 5 of this section, please provide details.

**Section G: Entitlement to Award**

**This section is optional.** Use this section to explain the basis for the whistleblower's your belief that the whistleblower is you are entitled to an award in connection with the whistleblower's your submission of information to the Commission CFTC, or to another agency in connection with a related action. Specifically, address how the whistleblower believes the whistleblower why you believe that you voluntarily provided the Commission CFTC with original information that led to the successful enforcement of a judicial or administrative action filed by the Commission CFTC, or a related action. Refer to Section 165.149 of Part 165 of the Commission's Regulations CFTC's regulations for further information concerning the relevant award criteria. The whistleblower may use additional sheets, if necessary.

Section 23(c)(1)(B) of the CEA requires the Commission Commodity Exchange Act and Section 165.9(a) of Part 165 of the CFTC's regulations require the CFTC to consider the following factors in determining the amount of an award: the following factors: (a) (1) the significance of the information

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provided by a whistleblower to the success of the ~~Commission~~CFTC action or related action; ~~(b2)~~ the degree of assistance provided by the whistleblower and any legal representative of the whistleblower in the ~~Commission~~CFTC action or related action; ~~(e3)~~ the programmatic interest of the ~~Commission~~CFTC in deterring violations of the Commodity Exchange Act (including ~~Regulations~~regulations under the Act) by making awards to whistleblowers who provide information that leads to the successful enforcement of such laws; ~~and (d4)~~ whether the award otherwise enhances the ~~Commission's~~CFTC's ability to enforce the Commodity Exchange Act, protect customers, and encourage the submission of high quality information from whistleblowers; ~~and (5) potential adverse incentives from oversize awards.~~ Address these factors in ~~the whistleblower's~~your response as well.

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#### Section H: Claimant's Declaration

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~~This section must be signed by the claimant~~You must sign this Declaration if you are submitting this claim pursuant to the CFTC whistleblower program and wish to be considered for an award. If you are submitting your claim anonymously, you must do so through an attorney, and you must provide your attorney with your original signed Form WB-APP.

#### Section I: Counsel Certification

If you are submitting this claim pursuant to the CFTC whistleblower program anonymously, you must do so through an attorney, and your attorney must sign the Counsel Certification Section.

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