

**If you invested money with
Denari Capital LLC managed by Denari Capital LLC,
Travis Capson, or Arnab Sarkar, or if you have any claims
against any of the Receivership Defendants (as defined
below), you may be entitled to relief if you complete and
submit this claim form by **APRIL 6, 2020**.**

A federal court authorized this notice. This is not a solicitation from a lawyer.

This case involves an action for fraud asserted by the Commodity Futures Trading Commission. The Court has placed all assets belonging to the following entities and individuals under the control of a Court-appointed Receiver:

Receivership Defendants:

Denari Capital LLC
Travis Capson
Arnab Sarkar

The Court must determine a fair and equitable means to distribute the assets above to investors, as well as any potential creditors, in the aforementioned entities. The purpose of this claim form is to identify all potential investors and creditors with valid claims against the Receivership Defendants.

If you invested money with any of the following entities or individuals, or are a creditor, you must complete and submit this form to the Receiver by [Date].

Denari Capital LLC
Travis Capson
Arnab Sarkar

Failure to do so could result in the disallowance of your claim. Completed claim forms should be delivered to one of the following:

1. Email: kphelps@diamondmccarthy.com
2. Kathy Bazoian Phelps, Receiver
1999 Avenue of the Stars, Suite 1100
Los Angeles, CA 90067-4402

If you have any questions, the Receiver may be contacted at (310) 651-2997.

PROOF OF CLAIM

This is an important legal document that will affect your legal rights if you have an interest in or claim against one or more of the Receivership Defendants as an investor or creditor. If you have an interest in or claim against one or more of the Receivership Defendants as an investor or creditor, you must submit this Proof of Claim Form on or before APRIL 6, 2020. Failure to do so could result in the forfeiture of your claim.

The Court has not yet determined how the assets of the Receivership Entities will be allocated or distributed or how claims against the Receivership Entities will be paid. However, when the Court makes this determination, the information provided in this Proof of Claim Form will be used to calculate your interest in or claim against the Receivership Defendants and your entitlement, if any, to participate in any distribution from the Receivership Defendants' estate (the "Receivership Estate").

The Receiver has the right to dispute and/or verify any information you have provided in order to determine the proper distribution amount, if any, to which you may be entitled. The Receiver additionally reserves the right to request additional documentation supporting your claim at a later date. All original documentation should be preserved as it may be requested at a future date. If you are an investor, the Receiver has the right to correct for administrative, or computational error, any information you provide as to your investment activity. The Receiver does not waive any right to (1) deny, contest the validity of, or otherwise object to a claim, or (2) if warranted, amend the provided investment activity to correct for such administrative or computational errors.

IMPORTANT INFORMATION TO READ PRIOR TO SUBMITTING THIS FORM:

ANY PERSON OR ENTITY SUBMITTING THIS PROOF OF CLAIM FORM, EXCEPT FOR STATE AND LOCAL GOVERNMENT ENTITIES, SUBMITS TO THE EXCLUSIVE JURISDICTION OF THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF CALIFORNIA AS TO ANY CLAIMS, OBJECTIONS, DEFENSES, OR COUNTERCLAIMS THAT COULD BE OR HAVE BEEN ASSERTED BY THE RECEIVER AGAINST SUCH CLAIMANT OR THE HOLDER OF SUCH CLAIM IN CONNECTION WITH THIS RECEIVERSHIP, INCLUDING THOSE ARISING OUT OF (1) ANY DEALING OR BUSINESS TRANSACTED BY OR WITH ANY RECEIVERSHIP DEFENDANT, OR (2) ANY DEALING OR BUSINESS TRANSACTED THAT RELATES IN ANY WAY TO ANY RECEIVERSHIP PROPERTY.

YOU MUST SUBMIT THIS COMPLETED FORM, SIGNED UNDER PENALTY OF PERJURY, TO THE RECEIVER BY DELIVERY TO THE RECEIVER BY NO LATER THAN **APRIL 6, 2020**. SUBMIT YOUR FORM TO ONE OF THE FOLLOWING:

1. Email: KPHELPS@DIAMONDMCCARTHY.COM
2. Kathy Bazoian Phelps, Receiver
Diamond McCarthy LLP
1999 Avenue of the Stars, Suite 1100
Los Angeles, CA 90067-4402

IF YOU DO NOT SUBMIT THE COMPLETED CLAIM FORM BY [DATE], YOU WILL BE FOREVER BARRED FROM ASSERTING ANY CLAIM AGAINST THE RECEIVERSHIP DEFENDANTS' ASSETS AND WILL NOT BE ELIGIBLE TO RECEIVE ANY DISTRIBUTIONS FROM THE RECEIVERSHIP ESTATE.

Contact Information

GENERAL CONTACT INFORMATION (REQUIRED OF ALL CLAIMANTS)		
1	Name of Creditor/Investor:	
2	U.S. Taxpayer I.D. No.: (if applicable)	
3	Street Address/P.O. Box:	
4	City, State, Zip Code:	
5	Contact Person(s):	
6	Telephone Number(s):	
7	Email Address(es):	
GENERAL CLAIM INFORMATION (REQUIRED OF ALL CLAIMANTS)		
8	Total amount you are owed as of <u>December 4, 2019</u>:	Unpaid Principal: \$ _____ Unpaid Expected Profit or Interest: \$ _____ (do not include any interest incurred after December 4, 2019)
9	Explain the basis for your claim (i.e. how did your claim arise?):	
(Attach additional sheets if needed)		

10	Name of Receivership Entity that owes you (i.e., Denari Capital, LLC, Travis Capson, or Arnab Sarkar)	
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IMPORTANT: You must attach documentation to support your claim, including invoices, canceled checks [front and back], account statements, trust deeds, property information and any other document that supports your claim (you do not need to provide documents you previously sent to the Receiver)

11	Supporting documents: Please attach copies of any documents that support your claim, such as bank statements, canceled checks, correspondence, investor statements or subscription agreements. DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING	Number of pages of supporting documents attached:_____
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12	Do you hold a lien, trust deed or security interest related to your claim?	___YES / ___NO
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INVESTMENT INFORMATION

13	Have you ever received a payment of interest, principal, dividends or investment distributions from any Receivership Entity?	___YES / ___NO
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14	If you answered "YES" to question 13 please provide the following information for each payment and amount received (attach additional sheets if needed):				
		Date of payment (mm/dd/yy)	Amount of Payment	Payment of Principal or Interest, if known	Name of Entity Making Payment
	1	___/___/___	\$		
	2	___/___/___	\$		
	3	___/___/___	\$		
	4	___/___/___	\$		
	5	___/___/___	\$		
	6	___/___/___	\$		
7	___/___/___	\$			

If you need additional space to complete an answer, please attach a separate sheet of paper and indicate the number of the question for which you are providing the additional information.

CERTIFICATION AND SIGNATURE (REQUIRED OF ALL CLAIMANTS)

By signing below, I declare under penalty of perjury that the information in this proof of claim form is true and correct, and that I have been authorized to file this proof of claim from on behalf of the claimant

Signature: X

Print Name: _____

Title: _____

Date: _____

IMPORTANT: ANY PERSON OR ENTITY SUBMITTING THIS PROOF OF CLAIM FORM SUBMITS TO THE EXCLUSIVE JURISDICTION OF THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF CALIFORNIA FOR ALL PURPOSES, INCLUDING, WITHOUT LIMITATION, AS TO ANY CLAIMS, OBJECTIONS, DEFENSES, OR COUNTERCLAIMS BY THE RECEIVER AGAINST SUCH CLAIMANT IN CONNECTION WITH THIS RECEIVERSHIP, INCLUDING THOSE ARISING OUT OF (1) ANY DEALING OR BUSINESS TRANACTED BY OR WITH ANY RECEIVERSHIP ENTITY OR (2) ANY DEALING OR BUSINESS TRANACTED THAT RELATES IN ANYWAY TO ANY RECEIVERSHIP PROPERTY. FURTHER, CLAIMANTS WAIVE ANY RIGHT TO A JURY TRIAL WITH RESPECT TO SUCH CLAIMS, OBJECTIONS, DEFENSES, AND COUNTERCLAIMS.