



**MONEY TRANSMITTER LICENSE
 RENEWAL APPLICATION**

Renewal applicants:

Copy the renewal application form. Keep a blank copy for amending or renewing your application as required. Please take the time to prepare a legible application for licensing. If we cannot read what you submit, the renewal application process will take longer.

Applicant must submit:

- A copy of your anti-money-laundering program that complies with the requirement of the Bank Secrecy Act.
- Renewal application form with all areas completed.
- Renewal fee of \$500, payable to: Oregon Department of Consumer & Business Services.

Additional considerations for applicant:

- Is your filing with the Office of the Secretary of State current?
- Is your security device (as described in ORS 717.200(17)) current?
- Does the existing contract between your company and the authorized delegates comply with **ORS 717.270 (Conduct of money transmission business through authorized delegates; contracts)?**

Make check or money order payable to the Department of Consumer & Business Services. If paying by credit card, applicant must sign credit card information box.

Mail application with payment to:

DCBS — Fiscal Services
 P.O. Box 14610
 Salem, OR 97309-0405

<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Discover	Phone: ()
Credit card number		Expiration date	
Name of cardholder as shown on credit card			
Cardholder signature		\$	Amount

Fiscal use only: 61280/1007





MONEY TRANSMITTER LICENSE RENEWAL APPLICATION

SECTION ONE:

- Licensee's name/trade name: _____
Assumed business name: _____
- Name and address of principal contact person:
Name: _____ Phone: () _____
Address: _____ Fax: () _____
City/State/ZIP: _____ E-mail: _____
- Licensee's principal business address:
Address: _____ Phone: () _____
City/State/ZIP: _____ Fax: () _____
- Address at which licensee keeps books and records (if different from answer to No. 3):
Address: _____ Phone: () _____
City/State/ZIP: _____ Fax: () _____
- Licensee is a(n) (check appropriate classification): FEIN: _____
 Individual Association Corporation
 Partnership Joint stock association Other (explain): _____
- Type of money transmission activity conducted (check all that apply):
 Checks Drafts Money orders Stored value
 Traveler's checks Wire transfers Other (explain): _____
- Money transmission sales are conducted through (check all that apply):
 Company-owned outlets Independent authorized delegates
 Subsidiaries or affiliates Other (explain): _____
- Submit the complete name and address of each location in the state from which the licensee or its authorized delegates conduct money transmission sales. You may submit in electronic format – tab delimited ASCII file.
State the number of your sales locations in this state: _____
- FinCEN registration number: _____

SECTION TWO:

Instructions: Please check “yes” or “no” in response to the following questions regarding changes since application or previous renewal. If there have been any changes, please provide the requested information. (Note: A response to the following does not constitute compliance with any separate statutory notice or reporting requirement.)

1. Has your company changed principal officers, directors, partners, or individuals with a 25 percent or more ownership interest in the licensee since application or renewal?
 Yes No

If yes, please explain changes on a separate sheet and include the name, title, business address, and percentage ownership of each person who has acquired an ownership interest or become an officer or director of the licensee.
2. Has the licensee had its renewal refused or its license suspended or revoked in any other state since application or renewal?
 Yes No If yes, please explain on a separate sheet.
3. Has the licensee been subject to any enforcement actions by the licensing authority in any other state since application or renewal?
 Yes No If yes, please explain on a separate sheet.
4. Has the licensee been involved in any material litigation since application or renewal? Material litigation means litigation that, in accordance with accepted accounting principles, is deemed significant to the licensee’s financial health and would be required to be included in its annual audited financial statements, report to shareholders, or similar documents.
 Yes No If yes, please describe the proceedings on a separate sheet.
5. Has there been felony indictment or criminal conviction of any principal officer or partner of the licensee or any individual with a 25 percent or more ownership interest in the licensee since application or renewal?
 Yes No If yes, please explain on a separate sheet.
6. Have there been substantive changes to the form of instruments issued by the licensee since application or renewal that were not provided previously?
 Yes No If yes, please provide a specimen.
7. Has there been a change of the licensee’s principal clearing institutions, clearing bank addresses, or account numbers since the last application or renewal?
 Yes No If yes, please list the name, address, contact name, and account number on a separate sheet.
8. Have there been material changes to the licensee’s authorized-delegate contract since application or renewal?
 Yes No If yes, please provide a copy.
9. Has there been a change of independent auditors since application or renewal?
 Yes No If yes, please provide the new contact name and phone number on a separate sheet.
10. Has the licensee or any principal officer, director, partner, or individual with a 25 percent or more ownership interest in the licensee filed a petition in bankruptcy or reorganization since the last application or renewal?
 Yes No If yes, please describe the proceedings on a separate sheet and provide a copy of the petition and a copy of the discharge, if applicable.



SECTION THREE:

1. Submit the following:
 - A. The most recent audited financial statements of the licensee, including balance sheet, statement of income, statement of stockholders' equity, and statement of cash flow for the preceding year, prepared by an independent certified public accountant, if not previously provided.
 - B. The most recent unaudited interim financial statements prepared for the licensee, dated no more than 120 days from the date of this application, if not previously provided.
 - C. Below, please enter:
 1. The total dollar amount of the licensee's outstanding instruments and transmissions in this state:
 - a. as of the date of the most recent audited financial statement and
 - b. as of the date of the unaudited interim financial statement, (1B).
 2. The total dollar amount of the licensee's outstanding instruments and transmissions in the United States:
 - a. as of the date of the most recent audited financial statement and
 - b. as of the date of the unaudited interim financial statement, (1B).

Outstanding as of:

	Date	Total, State of Oregon	Total, United States
Audited financial statement		\$	\$
Interim financial statement		\$	\$

2. In the spaces below, provide the number and dollar amount of payment instruments sold or issued and money transmissions conducted by the licensee in the 12-month period beginning (date) _____ and ending at close of business (date) _____ :

	Total, State of Oregon	Total, United States
Number		
Amount	\$	\$

3. **Submit a list of the licensee's permissible investments and the book or market value of such investments as of the date of the most recent audited financial statement and as of the date of the unaudited interim financial statement.**
4. If audited financial statements are not provided and if permissible investments are required by state law, the following is required:

Certification by an independent certified public accountant that the licensee's permissible investments possess book or market value calculated in accordance with generally accepted accounting principles of not less than the aggregate dollar amount of all outstanding payment instruments issued or sold by the licensee in the United States.
5. Submit proof of surety required and/or a list of deposits and other obligations maintained in lieu of all or part of the corporate surety bond, as authorized by statutes. For each deposit, please designate the amount, the financial institution in the state that is the depository, and the account number.

CERTIFICATION

Name of licensee: _____

Officer or authorized employee name: _____

Title: _____

I certify that the foregoing responses are true, accurate, and complete to the best of my knowledge and belief.

Signature: _____ Date: _____

