Mail this completed form to:
Department of Consumer Credit 4545 N. Lincoln Blvd. Suite 164 Oklahoma City, OK 73105-3408

FOR DOCC USE ONLY	
Date entered	*Changes made?*

STATE OF OKLAHOMA
DEPARTMENT OF CONSUMER CREDIT

Deferred Deposit Lender

2011 Annual Report Notice

Calendar year ending December 31, 2010

This report is due on or before May 1, 2011. A $50 late fee is due for any report received after May 1, 2011.

Corporate Name
Address
Address
State, City ZIP

Company Name
Address
Address
State, City ZIP
Corporate
Phone
email
Web Address

License Number

- **All reports must be received by May 1, 2011.**
- **This form must be completed and returned for each license even if no business was conducted.**
- **Composite reports for multiple locations may be submitted; however, each license number must be noted on the report in order to process it correctly.**
- **IMPORTANT: You must fill out the form provided. We cannot accept computer printouts, spreadsheets, or other documents in lieu of this official form.**
- **Reports received after May 1, 2011 must include a late fee of $50.00 per location.**

As required by Oklahoma Statute §59-3114, we request that you complete this Annual Report. The information you provide will be compiled with all Oklahoma licensed DDL data and published as a consolidated analysis of Deferred Deposit Lending activity. This information will not be shared with unauthorized persons.

Section I: Deferred deposit loan transactions conducted from January 1, 2010 through December 31, 2010

1. **Total number of DDL loans made** . . . . . # _____
2. **Total dollar amount of DDL loans made** . . . . . $ _____
3. **Total dollar amount of DDL loan finance charges assessed** . . . . . $ _____
4. **Total number and dollar amount of DDL returned checks (NSF)** . . . . . # _____ $ _____

Section II: Customer activity on deferred deposit loans conducted from January 1, 2010 through December 31, 2010

5. **As of 12-31-10, how many loans had payments 30 to 60 days past due?** . . . . . # _____ $ _____
6. **As of 12-31-10, how many loans had payments over 90 days past due?** . . . . . # _____ $ _____
7. **Number of transactions rescinded by customers between 1-1-10 and 12-31-10** . . . . . # _____
8. **Total number of different individuals who received DDL loans during 2010** . . . . . # _____
9. **Total number of repayment plans initiated between 1-1-10 and 12-31-10** # _____

Print the name and phone number of the person completing this form:

Name: Phone:

AFFIDAVIT

This affidavit must be executed by a duly authorized officer or a partner (if a corporation) or by the owner (if an individual proprietorship).

_____ , being first duly sworn
(signature of person authorized to renew license)

according to law, affirms that he/she is a(n) _____
(officer, partner or owner)

of the above-named Deferred Deposit Lender, and that the foregoing schedules represent a true condition of the said Deferred Deposit Lender's business as of the close of business on December 31, 2010.

NOTARY (THIS FORM MUST BE NOTARIZED)

Subscribed and sworn to before me on:

_____
Date

_____
Notary

_____
County

_____
Commission Expires (Date) (Seal)