

**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**

<b>Pawnbroker</b>	<b>2011 Annual Report Notice</b>	Calendar year ending December 31, 2010
This report is due on or before May 1, 2011.		

Corporate

Name  
 Address  
 Address  
 State, City ZIP

License  
 Number

**THIS FORM MUST BE SIGNED AND NOTARIZED**

Company  
 Name  
 Address  
 Address  
 State, City ZIP

As required by Oklahoma Statute §59-1508, we request that you complete this Annual Report. The information you provide will be compiled and published as a consolidated analysis of licensed Pawnbroker activity. This information will not be shared with unauthorized persons.

**Schedule A -- Report of pawn transactions (credit extended for report year 2010)**

- 1. Total number of pawn tickets written (includes renewals) ..... # \_\_\_\_\_
- 2. Total amount financed ..... \$ \_\_\_\_\_
- 3. Total pawn finance charges actually collected ..... \$ \_\_\_\_\_
- 4. Total number and dollar amount of buy agreements ..... # \_\_\_\_\_ \$ \_\_\_\_\_

**Schedule B -- Report of pledged goods not redeemed**

- 5. Total number of pawns pulled for sale ..... # \_\_\_\_\_
- 6. Dollar amount loaned on pawns pulled for sale ..... \$ \_\_\_\_\_
- 7. Number of pawns surrendered to peace officers ..... # \_\_\_\_\_
- 8. Balance due on pawns surrendered to peace officers ..... \$ \_\_\_\_\_
- 9. Number and dollar amount of buy agreements surrendered to peace officers # \_\_\_\_\_ \$ \_\_\_\_\_

**Pawnbroker Office Information**

- 10. Number of employees (including self) ..... # \_\_\_\_\_
- 11. Licensed as (check one): Individual \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ LLC \_\_\_\_\_ Other \_\_\_\_\_

**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 Pawnbroker, and that the foregoing schedules  
 represent a true condition of the said Pawnbroker'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)