

Mail this completed form to:
 Department of Consumer Credit
 3613 NW 56th Street
 Suite 240
 Oklahoma City, OK 73112-4512

State of Oklahoma
 Department of Consumer Credit

FOR DOCC USE ONLY

Date entered _____ Changes made? _____

2015 Annual Report Notice

Supervised Lender _____ **This Report is due on or before May 1, 2016.** Calendar year ending December 31, 2015.
A \$50 late fee is due for any report received after May 1, 2016.
This report must be completed and returned for each license even if no business is conducted.

<p><u>Licensee Information:</u></p> <p>License #: _____</p> <p>Licensee Name: _____</p> <p>Address: _____</p>

Section 1 - All Oklahoma outstanding accounts as of December 31, 2015

NOTE: for the purpose of this form, a "consumer loan" is a debt incurred primarily for personal, family or household purposes regardless of interest rate.

A. 1. All consumer loans with APRs of 30%	#	\$	_____
2. All consumer loans with APRs in excess of 30% (aka "B" loans)	#	\$	_____
3. All consumer credit sales (financing goods or sales by assignment of retail installment contracts)	#	\$	_____
B. Delinquency on accounts outstanding as of December 31, 2015:			
1. All consumer loans with APRs of 30% or less with payments over 90 days past due	#	\$	_____
2. All consumer loans with APRs <u>greater than</u> 30% with payments 60 to 90 days past due (aka "B" loans)	#	\$	_____
3. All consumer loans with APRs <u>greater than</u> 30% with payments over 90 days past due (aka "B" loans)	#	\$	_____
4. All consumer credit sales (financing goods or sales by assignment of retail installment or contracts) with payments over 90 days past due	#	\$	_____
C. Credit insurance written on consumer loans:			
1. Indicate number of loans with:	Credit Life #	_____	Accident & Health # _____
			Personal Property # _____

Section II - All Oklahoma transactions originated during calendar year 2015

A. 1. All consumer loans "originated in 2015" with APRs of 30% or less that were funded by you	#	\$	_____
2. All consumer loans "originated in 2015" with APRs of 30% or less that were NOT funded by you	#	\$	_____
3. All consumer loans "originated in 2015" with APRs in excess of 30% (aka "B" loans)	#	\$	_____
4. All consumer credit sales "originated in 2015" (financing goods or sales by assignment of retail installment contracts)	#	\$	_____
B. 1. Bankruptcies filed in 2015	#	\$	_____ Estimated amount of loss if actual is not known
2. Repossessions / foreclosures in 2015	#	\$	_____ Estimated amount of loss if actual is not known

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

Name: _____ Phone: _____

<p>Affidavit</p> <p>This affidavit must be executed by a duly authorized officer or a partner (if a corporation) or by the owner (if an individual proprietorship).</p> <p>_____, being first duly sworn according to law, affirms that he/she is a(n) _____ of the above-named Supervised Lender, and that the foregoing schedules represent a true condition of the said Supervised Lender's business as of the close of business on December 31, 2015.</p>	<p>NOTARY (THIS FORM MUST BE NOTARIZED)</p> <p>Subscribed and sworn to before me on:</p> <p>Date _____</p> <p>Notary _____</p> <p>County _____</p> <p>Commission Expires _____ (Seal)</p>
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