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## **LICENSE APPLICATION INSTRUCTIONS**

A completed application package for an Oklahoma Consumer Litigation Funder License shall be mailed or delivered to the:

**Oklahoma Department of Consumer Credit  
3613 NW 56<sup>th</sup> St., Suite 240  
Oklahoma City, OK 73112-4512**

**A completed application package consists of the following information, documentation and fees:**

### **I. APPLICATION.**

**II. BOND OR IRREVOCABLE LETTER OF CREDIT:** A bond or an irrevocable letter of credit in the amount of \$50,000.00 (Fifty Thousand Dollars) is required. The applicant shall furnish a certified copy of the bond or irrevocable letter of credit with the application. The bond terms or irrevocable letter of credit shall run concurrent with the licensing period. The bond or irrevocable letter of credit shall include the following terms:

- A.** The license holder will, during the licensing period, faithfully conform to and abide by the requirements of the Oklahoma Consumer Litigation Funding Act (the Act), 14A O.S. §§ 3-801-3-817, and the rules adopted by the Administrator to administer the Act; and
- B.** Provide any amount that may become due or owing to the Oklahoma Department of Consumer Credit from the license holder under the Act.

### **III. BUSINESS DOCUMENTS:**

#### **A. Sole Proprietorships:**

- 1. A certified copy of the Trade Name Report filed with the Oklahoma Secretary of State, if applicable.

#### **B. Partnerships:**

- 1. A copy of the executed partnership agreement.
- 2. A certified copy of the Trade Name Report filed with the Oklahoma Secretary of State, if applicable.

#### **C. Oklahoma Limited Partnerships:**

- 1. A certified copy of the Certificate of Limited Partnership filed with the Oklahoma Secretary of State.
- 2. A certified copy of the Trade Name Report filed with the Oklahoma Secretary of State, if applicable.
- 3. A Certificate of Good Standing issued by the Oklahoma Secretary of State.

**D. Oklahoma Limited Liability Company:**

1. A certified copy of the Articles of Organization filed with the Oklahoma Secretary of State.
2. A certified copy of the Trade Name Report filed with the Oklahoma Secretary of State, if applicable.
3. A Certificate of Good Standing issued by the Oklahoma Secretary of State.

**E. Oklahoma Corporation:**

1. A certified copy of the Certificate of Incorporation filed with the Oklahoma Secretary of State.
2. A certified copy of the Trade Name Report filed with the Oklahoma Secretary of State, if applicable.
3. A Certificate of Good standing issued by the Oklahoma Secretary of State.

**F. Foreign Business Entities**

1. A certified copy of the Certificate of Qualification (foreign corporation), Certificate of Authority (foreign limited partnership) or Application for Registration (foreign limited liability company), filed with the Oklahoma Secretary of State, as applicable.
2. A Certificate of Good Standing issued by the Oklahoma Secretary of State.
3. If the foreign business entity is exempt from obtaining a Certificate of Authority, Registration or Qualification from the Oklahoma Secretary of State, as applicable, please provide the exemptions that are applicable and a copy of a certificate issued by an authorized officer of the jurisdiction in which the foreign business entity was formed or incorporated evidencing the existence and good standing of the foreign business entity.
4. A certified copy of the Trade Name Report or Fictitious Name Report filed with the Oklahoma Secretary of State, if applicable.

Additional information concerning the business documents described above may be obtained from the:

**Oklahoma Secretary of State  
2300 N. Lincoln Blvd., Rm. 101  
Oklahoma City, OK 73105  
(405) 521-3912**

- IV. FEES:** An application must include a fee in the amount of \$290.00 (Two Hundred Ninety Dollars) payable to the Oklahoma Department of Consumer Credit.
- V. AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES:** A notarized affidavit must be submitted for individual applicants or sole proprietorships to verify the lawful presence of the individual in the United States of America. Information and forms are included with the application.
- VI. ATTESTATION:** An authorized officer, member, manager, director or agent, as applicable, of the business entity must sign the application and attest to the information submitted in the application. If the applicant is a sole proprietorship, the applicant shall sign the application and attest to the information submitted in the application.

## **RENEWAL REQUIREMENTS**

Biennial renewal of the consumer litigation funder license is the responsibility of each licensee. Initial licenses issued in accordance with the Oklahoma Consumer Litigation Funding Act shall expire December 31, 2015. The licensee is required to submit a license renewal application that contains the following documentation, information and fees:

- A. A license renewal application;
- B. A license renewal fee of \$290.00 (Two Hundred Ninety Dollars), payable to the Oklahoma Department of Consumer Credit;
- C. A certified copy of a current bond or irrevocable letter of credit;
- D. A current Certificate of Good Standing issued by the Oklahoma Secretary of State, if applicable, for a business entity licensee. Any foreign business entity licensee that is exempt from obtaining a Certificate of Authority, Registration or Qualification from the Oklahoma Secretary of State shall provide a current Certificate of Good Standing by an authorized official of the jurisdiction in which the foreign business entity was formed or incorporated evidencing the existence and good standing of the foreign business entity. A current Certificate of Good Standing means a Certificate of Good Standing issued within thirty days (30) of the license renewal application;
- E. A notarized affidavit of lawful presence for individuals or sole proprietorships that are qualified aliens.

**BEFORE THE ADMINISTRATOR )**  
**OF THE DEPARTMENT OF )**  
**CONSUMER CREDIT OF THE )**  
**STATE OF OKLAHOMA IN THE )**  
**MATTER OF THE APPLICATION )**  
**OF: )**  
 \_\_\_\_\_ )

Name of business to be licensed

**OKLAHOMA CONSUMER LITIGATION FUNDER LICENSE APPLICATION**

\_\_\_\_\_  
 Legal name of applicant

\_\_\_\_\_  
 Trade name(s) of applicant in the State of Oklahoma, if applicable.

\_\_\_\_\_  
 Fictitious name of the applicant in the State of Oklahoma, if applicable, for a foreign corporation, partnership or limited liability company

\_\_\_\_\_  
 Internet website, if applicable

**Type of business:**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Sole Proprietorship   | <input type="checkbox"/> Oklahoma Limited Partnership      | <input type="checkbox"/> Oklahoma Limited Liability Company |
| <input type="checkbox"/> Partnership   | <input type="checkbox"/> Foreign Corporation               | <input type="checkbox"/> Foreign Limited Partnership        |
| <input type="checkbox"/> Oklahoma Corporation  | <input type="checkbox"/> Foreign Limited Liability Company |   |
| <input type="checkbox"/> Other (please specify and include a separate document if necessary) |  |   |

**BUSINESS DOCUMENTS:** Please attach all applicable business documents as specified in the license application instructions.

**BOND OR LETTER OF CREDIT:** Please attach a certified copy of a bond or irrevocable letter of credit in the amount of \$50,000.00, with all applicable provisions as specified in the license application instructions.

**FEES:** Please include payment of a \$290.00 (Two Hundred Ninety Dollars) license fee, payable to the Oklahoma Department of Consumer Credit.

**Principal place of business:**

\_\_\_\_\_  
 Street Address

\_\_\_\_\_  
 Telephone Number

\_\_\_\_\_  
 City, State and Zip Code

\_\_\_\_\_  
 Facsimile Number

\_\_\_\_\_  
 Mailing address (if different from street address)

**Contact person (The applicant shall specify the name, title and contact information of the person(s) designated to receive correspondence from the Department of Consumer Credit).**

\_\_\_\_\_  
Name and title

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Electronic mail address

\_\_\_\_\_  
Facsimile number

\_\_\_\_\_  
Mailing address (if different than mailing address of applicant)

**REGISTERED AGENT: Please indicate the registered agent for receipt of service of process within the State of Oklahoma.**

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
Electronic mail address

**INDIVIDUALS AND SOLE PROPRIETORSHIPS: Please complete if the applicant is an individual or sole proprietorship.**

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Mailing address (if different from street address)

\_\_\_\_\_  
Electronic mail address

**LIMITED LIABILITY COMPANY OR PARTNERSHIP: Please complete if the applicant is a limited liability company or partnership. Please list all members, partners, general partners and/or limited partners, as applicable, and attach a separate document if necessary. A limited partnership shall specify which partners are general partners and which partners are limited partners. Please attach a separate document if necessary to include the requested information:**

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Street address

\_\_\_\_\_  
Street address

\_\_\_\_\_  
Mailing address (if different from street address)

\_\_\_\_\_  
Mailing address (if different from street address)

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Electronic mail address

\_\_\_\_\_  
Electronic mail address

\_\_\_\_\_  
**Full Name**

\_\_\_\_\_  
**Street address**

\_\_\_\_\_  
**Mailing address (if different from street address)**

\_\_\_\_\_  
**Telephone number**

\_\_\_\_\_  
**Electronic mail address**

\_\_\_\_\_  
**Full Name**

\_\_\_\_\_  
**Street address**

\_\_\_\_\_  
**Mailing address (if different from street address)**

\_\_\_\_\_  
**Telephone number**

\_\_\_\_\_  
**Electronic mail address**

**CORPORATION, LIMITED LIABILITY COMPANY OR PARTNERSHIP: Please complete if the applicant is a corporation, limited liability company or partnership, as applicable. A corporation shall list all directors and officers. A limited liability company shall list all managers. A partnership shall list any agents, if applicable. Please attach a separate document if necessary to include the requested information:**

\_\_\_\_\_  
**Full Name and title**

\_\_\_\_\_  
**Street address**

\_\_\_\_\_  
**Mailing address (if different than street address)**

\_\_\_\_\_  
**Telephone Number**

\_\_\_\_\_  
**Electronic mail address**

\_\_\_\_\_  
**Full Name and title**

\_\_\_\_\_  
**Street address**

\_\_\_\_\_  
**Mailing address (if different than street address)**

\_\_\_\_\_  
**Telephone Number**

\_\_\_\_\_  
**Electronic mail address**

\_\_\_\_\_  
**Full Name and title**

\_\_\_\_\_  
**Street address**

\_\_\_\_\_  
**Mailing address (if different than street address)**

\_\_\_\_\_  
**Telephone number**

\_\_\_\_\_  
**Electronic mail address**

\_\_\_\_\_  
**Full Name and title**

\_\_\_\_\_  
**Street address**

\_\_\_\_\_  
**Mailing address (if different than street address)**

\_\_\_\_\_  
**Telephone number**

\_\_\_\_\_  
**Electronic mail address**

**DISCLOSURES**

1. Does the applicant and/or any officer, director, member, partner, manager or agent, as applicable, have any pending administrative, civil or criminal actions pending? If so, please include a certified copy of the applicable court or administrative document that initiated the action. **Yes** \_\_\_ **No** \_\_\_
2. Has the applicant and/or any officer, director, member, partner, manager or agent, as applicable, ever had a business or professional license suspended or revoked by any state or federal agency of the United States of America? If so, please include a certified copy of the applicable order imposing the suspension or revocation. State includes the District of Columbia and any commonwealth, possession or territory of the United States of America. **Yes** \_\_\_ **No** \_\_\_
3. Has the applicant and/or any officer, director, member, partner, manager or agent, as applicable, ever had any monetary penalties imposed by a state or federal agency of the United States of America in connection with activities conducted under a business or professional license? If so, please include a certified copy of the applicable order imposing the monetary penalty. **Yes** \_\_\_ **No** \_\_\_
4. Has the applicant and/or any officer, director, member, partner, manager or agent, as applicable, ever been convicted of a felony in any state, federal or military court of the United States of America? If so, please include a certified copy of the applicable Judgment and Sentence. **Yes** \_\_\_ **No** \_\_\_.

The law of the state, federal or military court in which the applicant and/or any officer, director, member, partner, manager or agent, was convicted determines whether a particular crime is classified as a felony.

**Scott Leshner**  
Administrator



**Mary Fallin**  
Governor

**STATE OF OKLAHOMA  
DEPARTMENT OF CONSUMER CREDIT**

**VERIFICATION OF LAWFUL PRESENCE NOTIFICATION**

All natural persons, including sole proprietorships, applying for a license from the Department of Consumer Credit must verify their lawful presence in the United States in accordance with 59 O.S. § 71, before a license may be issued.

Attached are two affidavits, labeled as Forms 1 and 2 (each person will choose one affidavit to sign):

- If you are a United States citizen, you will sign Form 1
- If you are a qualified alien and you are in the United States lawfully under the Federal Immigration and Naturalization Act, you will sign Form 2

**You are either a United States citizen or a qualified alien -- please do not submit both forms.** The affidavit must be notarized and must be submitted to the Department of Consumer Credit by United States mail or courier service. The Department of Consumer Credit does not accept a faxed or emailed copy of the affidavit. United States citizens are not required to submit a new affidavit for license renewals. Qualified aliens must submit a new affidavit for each license renewal.

**Oklahoma Department of Consumer Credit**

**AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES**

**Form 1 - For U. S. Citizens**

**Section A (Applicant Information)**

Affidavit of:

\_\_\_\_\_  
Name of Individual Applicant

\_\_\_\_\_  
Company Name

**Section B (Notary Public)**

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

\_\_\_\_\_, of lawful age, being first duly

Printed Name of Individual Applicant

sworn, upon oath states under penalty of perjury as follows:

I am a United States citizen.

\_\_\_\_\_  
Signature of Applicant

Subscribed and sworn to or affirmed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

(Seal)

\_\_\_\_\_  
Commission Number

\_\_\_\_\_  
My Commission Expires

**Oklahoma Department of Consumer Credit**

**AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES**

Form 2 - For Qualified Aliens

Section A (Applicant's Information)

Please type or print clearly. **You must include a copy of both the front and back of your green card with this form.**

Full Legal Name of Applicant: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Nationality: \_\_\_\_\_

Company Name: \_\_\_\_\_

Section B (Notary)

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

\_\_\_\_\_, of lawful age, being first duly sworn, upon oath

Printed Name of Individual Applicant

states under penalty of perjury as follows:

I am a qualified alien under the Federal Immigration and Naturalization Act, and I am lawfully present in the United States.

\_\_\_\_\_  
Signature of Applicant

Subscribed and sworn to or affirmed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Commission Number

\_\_\_\_\_  
My Commission Expires

(Seal)

**ATTESTATION**

I certify that to the best of my knowledge and belief, the information contained in this application, including documentation attached to the application, is accurate and complete. I further certify that I am the person named below and that I am authorized to attest to the information contained in this application on behalf of the Applicant.

\_\_\_\_\_  
Signature of authorized officer

\_\_\_\_\_  
Printed name and title

\_\_\_\_\_  
Date