

STATE OF WYOMING
DEPARTMENT OF AUDIT
DIVISION OF BANKING - UCC
HATHAWAY BUILDING 2ND FLOOR
CHEYENNE, WYOMING 82002

CONSUMER LENDER CREDITOR'S REGISTRATION

PART I. NOTIFICATION (W.S. 40-14-631)

Persons engaged in this State in making consumer loans with an annual percentage rate of less than 10% subject to the Wyoming Uniform Consumer Credit Code.

- A. Name of person or business _____
- B. Mailing address for A above _____
(Address) (City) (State) (Zip)
- C. Name in which business is transacted _____
(Business Name)
- D. Mailing address _____
(Address) (City) (State) (Zip)
- E. Questions regarding the information provided in this notification should be directed to (Please print) _____
(Name)
Telephone _____ Fax _____ E-Mail _____
- F. List all locations INCLUDED IN THIS NOTIFICATION where consumer loans are made. (Attach additional sheets if necessary)

(Address) (City) (State) (Zip)
- G. Type of business conducted _____
- H. Name and address (in Wyoming) of designated agent upon whom service of process may be made (If we have to serve any legal papers, to whom do we serve them):

(Name) (Address) (City) (State) (Zip)
- I. If consumer credit loans are made otherwise than at an office or retail store in this State, a brief description of the manner in which they are made:
 Mail, Home Solicitation, Telephone, Other (Please Specify): _____
- J. Do you make cash loans? YES or NO
If "yes", does the loan finance charge exceed the annual percentage rate of 10%? YES or NO
- K. Do you take assignment of loans, consumer credit sales, or leases initiated by other sellers, lessors or lenders? YES or NO

PART IV. CERTIFICATION

Having the authority to sign, I hereby certify the information provided in this form is true and correct. If information in this registration becomes inaccurate after filing, such change shall be promptly given to the Administrator.

(Authorized Signature) (Title)

(Printed or Typed Name of Authorized Signature) Date: _____

Do not write below this line - For Agency Use Only

Reviewed By: _____ Date: _____

Reference No(s): _____ Code: _____

Access Input By: _____ Date: _____