



OFFICE OF THE STATE BANK COMMISSIONER (OSBC) INDIVIDUAL FORM
UNIFORM BIOGRAPHICAL STATEMENT AND CONSENT FORM FOR MONEY TRANSMITTERS

This form is used by individuals required to submit biographical and other information to the OSBC as part of the money transmitter license application. Not all sections of the OSBC Individual Form may apply to all applicants.

1. Identifying Information

(A) Full last, first and middle names:

_____ Last Name _____ First Name _____ Full Middle Name _____ Suffix (if any)

(B) _____ Date of Birth (MM/DD/YYYY) (C) Gender: Female Male

(D) US Citizen: YES NO

(E) Business phone, home phone, cell phone, fax and email:

() - _____ Business Phone _____ Extension () - _____ Home Phone (optional) () - _____ Cell Phone (optional)
() - _____ Fax Line (optional) _____ Email Address

(F) Mailing Address: Same as Current Residential Address

_____ Number & Street _____ City _____ State _____ Country/Province _____ Postal Code

2. Other Names

Other than your legal name, list all name(s) you are using or have used since the age of 18. Examples include nicknames, aliases, and names used before or after marriage. (Use additional sheets as necessary).

Name _____ Name _____
Name _____ Name _____

3. Employment History

Starting with current employment, provide a complete employment history for the past ten years without gaps. Account for all time including full & part-time employments, self-employment, military service, and homemaking. Also include periods such as unemployed, retirement, full-time student, extended travel, etc. Indicate by "YES" or "NO" whether the employment is/was financial service-related business. (Attach additional sheets as needed.)

From (MM/YYYY)	To (MM/YYYY)	Employer (company name)	Position Held (no abbreviations)	Address/City	State and Postal Code	Country/Province	Financial Services-Related?
	Current						<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Other Business

Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent or otherwise? (Please exclude non-financial services-related activity that is exclusively charitable, civic, religious, or fraternal and is recognized as tax exempt.) If YES, provide the following details (attach additional sheets as needed.):

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Business Name _____

Does this business conduct financial services-related activities? Yes No

Number & Street _____ City _____ State _____ Country/Province _____ Postal Code _____

Nature of business: _____
 Position, Title or Relationship with business _____

Start Date: _____ Hours per month: _____

Describe your duties: _____

5. Disclosure Questions

If the answer to any of the following is "YES", please provide a written statement complete with details of all events or proceedings. Remember to file updates to these disclosures as needed.

	YES	NO
Financial Disclosure		
(A)		
(1) Have you filed a personal bankruptcy petition or been the subject of an involuntary bankruptcy petition within the past 10 years?	<input type="checkbox"/>	<input type="checkbox"/>
(2) Based upon events that occurred while you exercised control over an organization, has any organization filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition within the past 10 years?	<input type="checkbox"/>	<input type="checkbox"/>
(3) Have you been the subject of a foreclosure action within the past 10 years?	<input type="checkbox"/>	<input type="checkbox"/>
(B) Has a bonding company ever denied, paid out on, or revoked a bond for you?	<input type="checkbox"/>	<input type="checkbox"/>
(C) Based upon activities that occurred while you exercised control over an organization, has any bonding company ever denied, paid out on, or revoked a bond for any organization?	<input type="checkbox"/>	<input type="checkbox"/>
(D) Do you have any unsatisfied judgments or liens against you?	<input type="checkbox"/>	<input type="checkbox"/>
(E) Are you delinquent on any court ordered child support payments?	<input type="checkbox"/>	<input type="checkbox"/>
Criminal Disclosure		
(F)		
(1) Have you ever been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any felony?	<input type="checkbox"/>	<input type="checkbox"/>
(2) Are there pending charges against you for any felony?	<input type="checkbox"/>	<input type="checkbox"/>
(G) Based upon activities that occurred while you exercised control over an organization:		
(1) Has any organization ever been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any felony?	<input type="checkbox"/>	<input type="checkbox"/>
(2) Are there pending charges against any organization for any felony?	<input type="checkbox"/>	<input type="checkbox"/>
(H)		
(1) Have you ever been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to committing or conspiring to commit a misdemeanor involving: (i) financial services or a financial services-related business, (ii) fraud, (iii) false statements or omissions, (iv) theft or wrongful taking of property, (v) bribery, (vi) perjury, (vii) forgery, (viii) counterfeiting, or (ix) extortion?	<input type="checkbox"/>	<input type="checkbox"/>
(2) Are there pending charges against you for a misdemeanor specified in (H(1))?	<input type="checkbox"/>	<input type="checkbox"/>

	YES	NO
(I) Based upon activities that occurred while you exercised control over an organization:		
(1) Has any organization ever been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any misdemeanor specified in (H)(1)?	<input type="checkbox"/>	<input type="checkbox"/>
(2) Are there pending charges against any organization for any misdemeanor specified in (H)(1)?	<input type="checkbox"/>	<input type="checkbox"/>
Civil Judicial Disclosure		
(J)	YES	NO
(1) Has any domestic or foreign court ever:		
(a) enjoined you in connection with any financial services-related activity?	<input type="checkbox"/>	<input type="checkbox"/>
(b) found that you were involved in a violation of any financial services-related statute(s) or regulation(s)?	<input type="checkbox"/>	<input type="checkbox"/>
(c) dismissed, pursuant to a settlement agreement, a financial services-related civil action brought against you by a State, federal, or foreign financial regulatory authority?	<input type="checkbox"/>	<input type="checkbox"/>
(2) Is there a pending financial services-related civil action in which you are named for any alleged violation described in (J)(1)?	<input type="checkbox"/>	<input type="checkbox"/>
(3) Based upon activities that occurred while you exercised control over an organization, is there a pending financial services-related civil action in which any organization is named for any alleged violation described in (J)(1)?	<input type="checkbox"/>	<input type="checkbox"/>
Regulatory Action Disclosure		
(K) Has any State or federal regulatory agency or foreign financial regulatory authority or self-regulatory organization (SRO) ever:	YES	NO
(1) found you to have made a false statement or omission or been dishonest, unfair or unethical?	<input type="checkbox"/>	<input type="checkbox"/>
(2) found you to have been involved in a violation of a financial services-related business regulation(s) or statute(s)?	<input type="checkbox"/>	<input type="checkbox"/>
(3) found you to have been a cause of a financial services-related business having its authorization to do business denied, suspended, revoked or restricted?	<input type="checkbox"/>	<input type="checkbox"/>
(4) entered an order against you in connection with a financial services-related activity?	<input type="checkbox"/>	<input type="checkbox"/>
(5) revoked your registration or license?	<input type="checkbox"/>	<input type="checkbox"/>
(6) denied or suspended your registration or license or application for licensure, disciplined you, or otherwise by order, prevented you from associating with a financial services-related business or restricted your activities?	<input type="checkbox"/>	<input type="checkbox"/>
(7) barred you from association with an entity regulated by such commissions, authority, agency, or officer, or from engaging in a financial services-related business?	<input type="checkbox"/>	<input type="checkbox"/>
(8) issued a final order against you based on violations of any law or regulations that prohibit fraudulent, manipulative, or deceptive conduct?	<input type="checkbox"/>	<input type="checkbox"/>
(9) entered an order concerning you in connection with any license or registration?	<input type="checkbox"/>	<input type="checkbox"/>
(L) Have you ever had an authorization to act as an attorney, accountant, or State or federal contractor that was revoked or suspended?	<input type="checkbox"/>	<input type="checkbox"/>
(M) Based upon activities that occurred while you exercised control over an organization, has any State or federal regulatory agency or foreign financial regulatory authority or self-regulatory organization (SRO) ever taken any of the actions listed in (K) through (L) above against any organization?	<input type="checkbox"/>	<input type="checkbox"/>
(N) Is there a pending regulatory action proceeding against you for any alleged violation described in (K) through (L)?	<input type="checkbox"/>	<input type="checkbox"/>
(O) Based upon activities that occurred while you exercised control over an organization, is there a pending regulatory action proceeding against any organization for any alleged violation described in (K) through (L)?	<input type="checkbox"/>	<input type="checkbox"/>

Customer Arbitration/Civil Litigation Disclosure		YES	NO
(P) Have you ever been named as a respondent/defendant in a financial services-related consumer-initiated arbitration or civil litigation which:			
(1) is still pending?		<input type="checkbox"/>	<input type="checkbox"/>
(2) resulted in an arbitration award or civil judgment against you, regardless of amount, or that required corrective action?		<input type="checkbox"/>	<input type="checkbox"/>
(3) was settled for any amount?		<input type="checkbox"/>	<input type="checkbox"/>
Termination Disclosure		YES	NO
(Q) Have you ever voluntarily resigned, been discharged, or permitted to resign after allegations were made that accused you of:			
(1) violating statute(s), regulation(s), rule(s), or industry standards of conduct?		<input type="checkbox"/>	<input type="checkbox"/>
(2) fraud, dishonesty, theft, or the wrongful taking of property?		<input type="checkbox"/>	<input type="checkbox"/>
6. Individual's Acknowledgment & Consent			
I swear (or affirm) that I executed this application on my own behalf, and agree to and represent the following:			
(1) That the information and statements contained herein, including exhibits attached hereto, and other information filed herewith, all of which are made a part of this application, are current, true, accurate and complete and are made under the penalty of perjury, or un-sworn falsification to authorities, or similar provisions as provided by law;			
(2) To the extent any information previously submitted is not amended, and hereby, such information remains accurate and complete;			
(3) That the State of Kansas may conduct any investigation into my background, in accordance with all laws and regulations;			
(4) To keep the information contained in this form current and to file accurate supplementary information on a timely basis; and			
(5) To comply with all provisions of the Kansas Money Transmitter Act, K.S.A. 9-508 <i>et seq.</i> and all other applicable state and federal statutes and regulations, including the maintenance of accurate books and records.			
If an Applicant has made a false statement of a material fact in this application or in any documentation provided to support the foregoing application, then the foregoing application may be denied pursuant to K.S.A. 9-513a.			
_____ Signature of individual		_____ Date (MM/DD/YYYY)	