Oregon Department of Consumer and Business Services Division of Financial Regulation

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| PERSONNEL LEDGER | | | | |
|--------------------------|---|--------|------|--|
| *Name: | | | | |
| Home addr | ess: | | | |
| | | | | |
| Business ac | ldress: | | | |
| City: | | State: | ZIP: | |
| *Date of bi | rth: | | | |
| *NMLS Unique identifier: | | | | |
| *Position or title: | | | | |
| *Responsibilities: | | | | |
| | | | | |
| | | | | |
| | | | | |
| *Starting da | ate: | | | |
| | on date: | | | |
| | r leaving/termination: | | | |
| | | | | |
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| | | | | |
| **Criminal | record check completed: | | | |
| | required per OAR 441-865-0050 ired under OAR 441-860-0045(1) | | | |
| Optional: | Emergency contact: | | | |
| | Name: | | | |
| | Phone: | | | |

