



Department of Consumer and Business Services

**Division of Financial Regulation**

P.O. Box 14480, Salem, Oregon 97309-0405

Phone: 503-947-7984, Fax: 503-378-4351

888-877-4894 (toll-free)

350 Winter St. NE, Salem, Oregon

---

## Security Deposit Exchange Form

1. Company name: \_\_\_\_\_  
Company address: \_\_\_\_\_

Company contact: Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

2. New asset information

a. Asset name: \_\_\_\_\_  
b. Cusip #: \_\_\_\_\_  
c. Amount (par value, market value): \_\_\_\_\_  
d. Due date: \_\_\_\_\_  
e. Interest: \_\_\_\_\_

3. Current asset information (if processing an exchange)

Asset name: \_\_\_\_\_  
Cusip #: \_\_\_\_\_  
Amount (par value, market value): \_\_\_\_\_  
Due date: \_\_\_\_\_  
Interest: \_\_\_\_\_

4. Delivery instructions: \_\_\_\_\_  
\_\_\_\_\_

---

Authorized signature (president or treasurer)

Title

Date

Questions: 503-947-7259 or 503-947-7982

