**Oregon Department of Consumer and Business Services Division of Financial Regulation** 350 Winter St. NE, Rm. 410, Salem, Oregon 97301-3881 Mailing address: P.O. Box 14480, Salem, OR 97309-0405 503-378-4140 • Fax: 503-947-7862 • TTY: 503-378-4100 http://dfr.oregon.gov



## REGISTRATION FOR SPECIAL QUALIFICATIONS PROGRAM UNDER OREGON REVISED STATUTES 713.300 BY A FOREIGN OR EXTRANATIONAL BANKING CORPORATION OR FOREIGN SAVINGS ASSOCIATION

Name of institution:		
Principal place of business (for purpose of mailing documents):		
Street address:		
City:	State:	: ZIP:
Name of officer (type or print):		
Officer's title (must be president, secretary, treasurer, or general man	nager):	
Officer's signature:	Date:	Phone:
Contact person and mailing address (for invoicing):		
Name and title:		Department:
Street address:		
City:	State	: ZIP:
\$200 initial filing fee		\$200 annual license fee
<b>For new applicants:</b> Complete this form and check both boxes. Please send this form together with the appropriate fee to this office. The date that the fee is received in this office will be your annual renewal date.		
<b>For renewals:</b> Complete and return this form, a check for the fee, and the copy of the enclosed invoice to receive proper credit and/or reactivate this registration.		

