

REGISTRATION FOR RESALE, OR DEALING AND TRADING

ORS 59.035(9), OAR 441-065-0040

I. Identity of the broker/dealer applicant:

1.	Name of applicant:		CRD number:	
2.	Street address of principal executive office of the applicant:			
	City:			
3.	Applicant's phone number:			
4.	Chief executive officer of the applicant:			
	Title and class of security to be registered:			
	Par or stated value of security to be registered:			
	Were the securities the applicant is seeking to register acquired in applicant and are not part of an unsold allotment or an attempt to	the or	dinary and usual cou	rse of business by the
8.	Please attach a separate statement describing the reasons why the	exemp	tion is being sought.	
9.	Is the registration being submitted directly or indirectly on behalf of:			
	The issuer? Yes No			
	Any director of the issuer? \Box Yes \Box No			
	Any controlling person of the issuer? \Box Yes \Box No			
	Any officer of the issuer? Yes No			
	The beneficial owner of more than 10 percent of the outst the issuer? \Box Yes \Box No	anding	units or shares of an	y equity security of
10.	Is the applicant or any associated person affiliated directly or inc	lirectly	with the issuer?	
11.	Is the registration being sought directly or indirectly for the bene	fit of a	nother broker-dealer	? 🗌 Yes 🔲 No
	If yes, please state the name of the broker-dealer:			
				Continued

□ Visa □ MasterCard □ Discover Phone: _		Make che Department of
Credit card number	Expiration date	Mail a DCI
Name of cardholder as shown on credit card	\$	P.O. Sale
Cardholder signature	Amount	
Secure fax for credit card pa 503-947-2333 If paying by credit card, the applican	Fiscal use only: 621	
the credit-card information b	OX.	



eck or money order payable to f Consumer and Business Services.

> pplication with payment to: BS — Fiscal Services Box 14610 m, OR 97309-0445

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II. Identity and background of the issuer:

12.	. Name of issuer:					
13.	. Street address of principal executive office of the					
	City:	State:	ZIP:			
14.	. Chief executive officer of the issuer:					
	. Issuer's phone number:					
16.	. State of incorporation:					
17.	. Is the issuer organized under the laws of the Ur	nited States or any state as defined in O	ORS 174.100? Yes No			
18.	. Type of organization:					
19.	. Names and addresses of each of the issuer's cu	rrent officers (attach additional sheets,	if necessary):			
20.	Names and addresses of each of the issuer's cu	rrent directors (attach additional sheets	, if necessary):			
21.	. Name and address of any officer or director tha if necessary):	at has held office within the past five ye	ears (attach additional sheets,			
~~						
	 Number of employees on a recent date: To the best of the applicant's knowledge, has the second s	Specify the date:	or, or general partner of the			
	issuer within the past five years of the date of the	his application:				
	• Been the subject of an administrative order Services (DCBS) for violation of any provi					
	 director? Yes No Been or is engaged in dishonest or fraudule 	ant conduct with regard to securities?				
	 Been of is engaged in distributes of madule Been convicted of a misdemeanor, an esser 	-				

• Been convicted of a felony? 🗌 Yes 🗌 No

- Made or caused to be made to the director any false representations of a material fact or has suppressed or withheld from the director any material information? □ Yes □ No
- Refused to permit an examination to be made by the director of DCBS or failed to file any report, including any financial report, or furnish any information required by the director in connection with the Oregon Securities Law? □ Yes □ No
- Been the subject to any order entered by a governmental agency or self-regulatory organization prohibiting or suspending the person from engaging in or continuing any conduct or practice involving any aspect of the securities business? □ Yes □ No
- Been subject to any judgment or decree of any court of competent jurisdiction, which is based on either securities violations or fraud? ☐ Yes ☐ No

If the answer to any of these questions is "yes," give details in an attached statement. Include an identification of the jurisdiction, relevant dates, charge, and disposition of the matter.

24. Name and location of each subsidiary of the issuer (attach additional sheets, if necessary):

25. Describe the nature of products or services offered by the issuer (attach additional sheets, if necessary):

26. Describe the nature and extent of the issuer's facilities (attach additional sheets, if necessary):

27. Describe the history of the issuer, including dates of consolidations, mergers, or spinoffs. Give names of companies, partnerships, etc. involved (attach additional sheets, if necessary):

III. Description of issuer's securities:

28. Number of shares or total amount of the securities outstanding as of the end of the issuer's most recent fiscal year:

Number of shares or units eligible for secondary trading without the benefit of registration under the Securities Act of 1933:

- 29. Has the issuer made an offer, except to employees, of the same class of securities sought to be registered in the past six months? 🗌 Yes 🔲 No
- 30. Dates of securities issued in a public offering, if any (attach additional sheets, if necessary):

		States in which those securities were issued:	
		Number of shares:	
		Price per share (adjusted to reflect present capitalization):	
		Net proceeds to the issuer:	
		Name and address of the underwriter:	
		Attach copies of the latest prospectus, annual report, and proxy statement for the securities.	
	31. Disclose all facts pertaining to the issuance of securities in transactions other than those described in No. 30. Include a description of warrants and options that have been granted but not yet authorized.		
	32.	The issuer had of stockholders on Recent date	
	33.	Number of people domiciled in the United States who beneficially own more than 10 percent or more of the outstanding securities of the security sought to be registered:	
	34.	Date of the issuer's annual meeting:	
IV.	Fina	ancial status of the issuer:	
	35.	Is the issuer insolvent or in unsound financial condition? Yes No	
	36. Attach audited balance sheet, income statement, and statement of cash flows of the issuer's most recent fiscal		
	37. In addition to the financial data requested in No. 36, include a statement from an officer of the issuer that to the best of his or her knowledge and belief that there have been no material adverse changes in the financial conduct of the issuer since the date of the last audited financial statement.		
	38.	Attach audited or unaudited balance sheet, income statement, statement of cash flows for the issuer's most recent fiscal year and for the last three fiscal years.	
v.	Ider	ntity of the issuer's transfer agent:	
	39.	Name of the issuer's transfer agent:	
		Street address of transfer agent:	
		City: State: ZIP:	

Signature and affirmation:

I am the duly authorized of <u>Name of applicant</u> and I have read and am familiar with the information in this Application for Registration for Resale, or Dealing and Trading form and with all other materials or documents to be used in connection with the sale of securities to be made pursuant thereto. I am aware of and will comply with all applicable requirements in ORS 59.035(9) and OAR 441-065-0040 promulgated thereunder and the Oregon Securities Law. To the best of my knowledge, information, and belief, the information contained in this form is true, correct, and complete. I am duly authorized to execute this form and to make this affirmation for and on behalf of the applicant.

Typed name

Typed title or position

Authorized signature

Date