



ALASKA MONEY SERVICES BUSINESS AFFIDAVIT
 AS 06.55.101, AS 06.55.102, 3 AAC 13

Date: _____

Full Name of Money Services Business: _____

I, _____, (printed name of affiant) being first duly sworn upon oath, depose and say based on my personal knowledge, information and belief:

1. I am employed by: _____ (applicant) as its _____ (title).
2. I am authorized to execute this Affidavit on behalf of the applicant.
3. The applicant has applied to be licensed as a money services business with the administrator of the Alaska Division of Banking and Securities, Consumer Finance Section.
4. I acknowledge that the administrator wishes to determine whether the applicant has engaged in money transmission or currency exchange in Alaska. I have conducted a review of the applicant's records and made diligent inquiry in this regard.
5. I understand that this Affidavit constitutes a statement to the administrator, pursuant to AS 06.55, and that filing a false statement to the administrator is a violation of the Alaska Uniform Money Services Act and grounds for action against the affiant and the applicant.
6. The affiant and the applicant hereby certify:
 - A. The applicant, directly or indirectly, by telephone, by electronic means, by mail, through the Internet, in person, or by the applicant itself or through any of its authorized delegates HAS NOT provided or has not offered to provide money transmission or currency exchange in the state of Alaska and will not engage in money transmission or currency exchange in Alaska until duly licensed with the administrator.
 - B. The applicant, directly or indirectly, by telephone, by electronic means, by mail, through the Internet, in person, or by the applicant itself or through any of its authorized delegates, HAS provided or has offered to provide money transmission or currency exchange in the state of Alaska. Attached to this Affidavit is a listing of the names, addresses, and phone numbers of all Alaska customers; transaction dates; descriptions of the transactions; specific exemptions relied upon, if any; and the amount of fees generated from each Alaska customer. If the applicant or authorized delegate has engaged in advertising, provide a copy of the advertising, the date distributed, and the number of Alaska consumers who received it.

Dated this _____ day of _____, 20 ____.

 (Signature of Affiant)

 (Printed name of Affiant)

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20 ____.

NOTARY SEAL

 (Signature of notary public)
 County of: _____
 Notary public for the state of: _____
 My commission expires: _____