

MSB2	BIOGRAPHICAL STATEMENT & CONSENT FORM MONEY TRANSMISSION AND CURRENCY EXCHANGE APPLICANTS	Date of filing
Name of Applicant Company _____		
License Number information. Use additional sheets if necessary.	License #	State
<input type="checkbox"/> NEW APPLICATION		<input type="checkbox"/> RENEWAL APPLICATION
1. Individual's identifying information:		
(A) Full last, first and middle names:		
_____	_____	_____
Last Name	First Name	Full Middle Name
(B) Social Security Number: _____		(C) Gender: _____
(D) Date of Birth (MM/DD/YYYY)	(E) State/Province of Birth:	(F) Country of Birth:
(G) List all names(s), other than your legal name, you have used or are using, or by which you are or were known since the age of 18. This field should include for example, nicknames, aliases, and names used before or after marriage. (Use additional sheets as necessary).		
Name: _____	Name: _____	Name: _____
(H) For amendments only: If this filing reports that an individual's name has changed, enter the new name and attach supporting legal documentation:		
_____	_____	_____
Last Name	First Name	Full Middle Name
(I) Employer Name: _____		
(J) Office of Employment address: (do not use a P.O. Box)		<input type="checkbox"/> If this address is your private residence, check this box.
_____	_____	_____
Number & Street	City	State / Province & Country
(K) Current Residence address (if different from employment address):		_____
_____	_____	_____
Number & Street	City	State / Province & Country
(L) Telephone Numbers and e-mail address:		_____
() - ext	() -	() -
Business Phone	Cell Phone (optional)	Fax Line (optional)
		e-mail address (required)
2. Individual's Acknowledgment & Consent:		
TO WHOM IT MANY CONCERN:		
I hereby authorize the Alaska Department of Commerce, Community, and Economic Development, Division of Banking and Securities, to obtain criminal and civil data on the undersigned, as it pertains to his/her financial condition and responsibility, financial and business experience, competence, character, and general fitness, in his/her capacity as an executive officer, manager, director, principal, owner, or policymaker for the applicant (AS 06.55.105 and 203). Such information and any conviction data received by the Department shall be used by the Department for the exclusive purpose of carrying out the responsibilities of this article, shall not be a public record, shall be privileged, and shall not be disclosed to another person or agency except to any person or agency which otherwise has a legal right to inspect the file. In order to facilitate this inquiry, I understand that I must provide the information below. The Department will notify me if further information is required. This authorization remains effective as long as I am employed in the money services business industry. A copy of this authorization shall be accepted with the same force and validity as the original.		
I hereby certify under penalty of perjury that I have examined the information contained in this form (MSB2), and attached supporting documents (including any disclosure information, if any), and the reported information is correct and complete in accordance with the law and further acknowledge that there are no misrepresentations or omissions of material facts.		
Notary Seal Here	_____ Date (MM/DD/YYYY) Signed or attested before me: _____ on this _____ day of _____, (Date) (Month) _____ Notary Public signature	_____ Signature of individual by _____ Print individual's name _____ at _____ (Year) (State) (County) _____ Notary Appointment Expires (MM/DD/YYYY)
Individual's Acknowledgment & Consent must always be completed in full with original, manual signature and notarization. Affix notary stamp or seal where applicable.		

3. Money Transmitter/Currency Exchange Employment Representation:

At the time of approval, this individual will be familiar with the statutes, regulations, and rules of the *State of Alaska* with which this application is being filed, and will be fully qualified for the position for which application is being made herein. I have taken appropriate steps to verify the accuracy and completeness of the information contained in and with this application. I have provided the individual an opportunity to review the information contained herein and the individual has approved this information and signed the form.

_____ by _____
 Company Name Signature of authorized party Print Name and Title of authorized party

***Employment Representation must always be completed in full with original, manual signature.
 Affix notary stamp or seal where applicable.***

4. Residential History: Starting with current address (item 1K), give all addresses for the past 10 years. (Attach additional sheets as necessary.)

From (MM/YYYY)	To (MM/YYYY)	Street Address	City	State or Province	Zip or Postal Code	Country

5. Employment History: Provide complete employment history for the past 10 years. Account for all time including full & part-time employments, self-employment, military service, and homemaking. Also include periods such as unemployed, full-time student, extended travel, etc. Indicate by "YES" or "NO" whether this employment was *financial service-related* business. (Attach additional sheets as needed.)

From (MM/YYYY)	To (MM/YYYY)	Employer (company name)	Position Held	City	State or Province	Country	YES or NO?

<p>6. Other Business: Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent or otherwise? (Please exclude non-<i>financial services-related</i> activity that is exclusively charitable, civic, religious, or fraternal and is recognized as tax exempt.) If YES, provide the following details: the name of the other business; whether the business is <i>financial services-related</i>; the address of the other business; the nature of the other business; your position, title, or relationship with the other business; the start date of your relationship; the approximate number of hours per month you devote to the other business; and briefly describe your duties relating to the other business. (Attach additional sheets as needed.)</p> <p>Details:</p>	<p>YES</p> <p><input type="checkbox"/></p>	<p>NO</p> <p><input type="checkbox"/></p>
<p>7. Disclosures: If the answer to any of the following is "YES", provide complete details of all events or proceedings in an attachment.</p>		
<p style="text-align: center;">Financial Disclosure</p> <p>(A) Within the past ten years:</p> <p>(1) have you filed a personal bankruptcy petition or been the subject of an involuntary bankruptcy petition?</p> <p>(2) based upon events that occurred while you exercised <i>control</i> over any organization, have any filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?</p> <p>(B) Has a bonding company ever denied, paid out on, or revoked a bond for you?</p> <p>(C) Do you have any unsatisfied judgments or liens against you?</p>	<p>YES</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>NO</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
<p style="text-align: center;">Criminal Disclosure</p> <p>(D) Have you ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any felony?</p> <p>(2) been <i>charged</i> with any felony?</p> <p>(E) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any felony?</p> <p>(2) been charged with any <i>felony</i>?</p> <p>(F)</p> <p>(1) Have you ever been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor involving: financial services</i> or a <i>financial services-related</i> business; any fraud, false statements, or omissions; any theft or wrongful taking of property; bribery; perjury; forgery; counterfeiting; extortion; or a conspiracy to commit any of these offenses?</p> <p>(2) Are there pending charges against you for a misdemeanor as <i>described</i> in 7(F)(1)?</p> <p>(G) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a misdemeanor specified in 7(F)(1)?</p> <p>(2) been <i>charged</i> with a <i>misdemeanor</i> specified in 7(F)(1)?</p>	<p><input type="checkbox"/></p>	<p><input type="checkbox"/></p>

Regulatory Action Disclosure	YES	NO
(H) Has any State or federal regulatory agency or <i>foreign financial regulatory authority</i> ever: (1) <i>found</i> you to have made a false statement or omission or been dishonest, unfair or unethical? (2) <i>found</i> you to have been <i>involved</i> in a violation of a <i>financial services-related</i> regulation(s) or statute(s)? (3) <i>found</i> you to have been a cause of a <i>financial services-related</i> business having its authorization to do business denied, suspended, revoked or restricted? (4) entered an <i>order</i> against you in connection with a <i>financial services-related</i> activity? (5) denied, suspended, or revoked your registration or license, disciplined you, or otherwise by <i>order</i> , prevented you from associating with a <i>financial services-related</i> business or restricted your activities? (6) barred you from association with an entity regulated by such commission, authority, agency, or officer, or from engaging in a <i>financial services-related</i> business? (7) issued a final <i>order</i> based on violations of any law or regulations that prohibit fraudulent, manipulative, or deceptive conduct? (I) Have you ever had an authorization to act as an attorney, accountant, or State or federal contractor that was revoked or suspended? (J) Are you now the subject of any regulatory <i>proceeding</i> that could result in a "yes" answer to any part of 7(H) or 7(I)?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Civil Judicial Disclosure		
(K) (1) Has any domestic or foreign court ever: (a) <i>enjoined</i> you in connection with any <i>financial services-related</i> activity? (b) <i>found</i> that you were <i>involved</i> in a violation of any <i>financial services-related</i> statute(s) or regulation(s)? (c) dismissed, pursuant to a settlement agreement, a <i>financial services-related</i> civil action brought against you by a State, federal, or <i>foreign financial regulatory authority</i> ? (2) Are you named in any pending <i>financial services-related</i> civil action that could result in a "yes" answer to any part of 7K(1)?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Customer Arbitration/Civil Litigation Disclosure		
(L) Have you ever been named as a respondent/defendant in a <i>financial services-related</i> consumer-initiated arbitration or civil litigation which: (1) is still pending; or (2) resulted in an arbitration award or civil judgment against you, regardless of amount, or that required corrective action; or (3) was settled for any amount?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Termination Disclosure		
(M) Have you ever voluntarily resigned, been discharged, or permitted to resign after allegations were made that accused you of: (1) violating statute(s), regulation(s), rule(s), or industry standards of conduct? (2) fraud, dishonesty, theft, or the wrongful taking of property?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Statutory Authority

Sec. 06.55.105. Issuance of license. (a) When an application is filed under AS 06.55.102, the department shall investigate the applicant's financial condition and responsibility, financial and business experience, character, and general fitness. The department may conduct an on-site investigation of the applicant, the reasonable cost of which the applicant shall pay. The department shall issue a license to an applicant under AS 06.55.102 if the department finds that all of the following conditions have been fulfilled:

- (1) the applicant has complied with AS 06.55.102, 06.55.104, and 06.55.107; and
- (2) the financial condition and responsibility, financial and business experience, character, and general fitness of the applicant, and the competence, experience, character, and general fitness of the executive officers, managers, directors, and persons in control of the applicant indicate that it is in the interest of the public to permit the applicant to engage in money transmission.

3 AAC 13.020. APPROVAL TO ENGAGE IN SERVICES UNDER AS 06.55 WITH A LICENSE FROM ANOTHER STATE.

(b) The department will deny approval to offer money transmission or currency exchange services under AS 06.55.103 if

- (4) the department finds that the person would not qualify for a money transmission license under AS 06.55.105(a)(2) or this chapter if the person applied for one;

Definitions

Sec. 06.55.990. Definitions. In this chapter, unless the context indicates otherwise,

(3) "control" means

(A) the ownership of, or the power to vote, directly or indirectly, at least 25 percent of a class of voting securities or voting interests of a money services licensee or person in control of a money services licensee; (B) the power to elect a majority of executive officers, managers, directors, trustees, or other persons exercising managerial authority of a money services licensee or person in control of a money services licensee; or (C) the power to exercise directly or indirectly, a controlling influence over the management or policies of a money services licensee or person in control of a money services licensee;

(8) "executive officer" means a president, a chair of the executive committee, a chief financial officer, a responsible individual, or another individual who performs similar functions; in this paragraph, "responsible individual" means an individual who is employed by a money services licensee and has principal managerial authority over the provision of money services by the money services licensee in this state;

(20) "person" means an individual, a corporation, a business trust, an estate, a trust, a partnership, a limited liability company, an association, a joint venture, a government, a governmental subdivision, an agency, or an instrumentality, a public corporation, or any other legal or commercial entity;