

Sale of Checks and Funds Transmission License Biographical Questionnaire

Nebraska Department of Banking and Finance
<http://www.ndbf.ne.gov/>

Commerce Court, Suite 400
 1230 "O" Street
 PO Box 95006
 Lincoln, NE 68509-5006
 402-471-2171

A biographical form must be completed for each person, listed in response to Questions #5 and #6 of the *Application for Sale of Checks and Funds Transmission License* form or Question #4 of the *Application to Renew Sale of Checks and Funds Transmission License* form. All answers must be typewritten or legibly printed. **All questions must be answered.** Incomplete questionnaires will be returned to the Applicant. If additional space is needed on any question(s), attach extra sheets, and reference them accordingly. **For purposes of this form, the definitions listed in the Instructions to the Sale of Checks and Funds Transmission License Application form shall apply.**

(1) Name: (First, Middle, Last)	(2) Date of Birth: (MM/DD/YYYY)
(3) Place of Birth: (City, State, Country)	(4) Social Security Number:
(5) Work & Home Telephone Numbers: (Area code + number)	(6) Occupation or Profession:
(7) Complete Business Address:	(8) Complete Home Address:

9. Complete a *Sale of Checks and Funds Transmission Financial Statement (Individual)* and attach it to this application.
10. Attach a sheet giving a detailed statement of your work experience for the past ten (10) years. Information must include dates of employment, name and addresses of employer, position(s) held, responsibilities, and reason(s) for leaving.
11. Are you currently or have you ever been involved with a Sale of Checks or Funds Transmission business or similar business prior to this application in either this or any other state or jurisdiction? Yes No

If "yes," briefly describe the involvement, including names, addresses, and if no longer involved, the reason(s) why you are no longer involved (use additional sheet if necessary).

12. Has any State or federal regulatory agency ever found you to have made a false statement or omission or been dishonest, unfair, or unethical? Yes No

If "yes," give full details (use additional sheet if necessary).

13. Has any State or federal regulatory agency ever found you to have been involved in a violation of a financial services-related business regulation(s) or statute(s)? Yes No

If "yes," give full details (use additional sheet if necessary).

14. Has any State or federal regulatory agency ever found you to have been a cause of a financial services-related business having its authorization to do business denied, suspended, revoked, or restricted? Yes No

If "yes," give full details (use additional sheet if necessary).

15. Has any State or federal regulatory agency ever entered an order against you in connection with a financial services-related activity? Yes No

If "yes," give full details (use additional sheet if necessary).

16. Has any State or federal regulatory agency ever revoked your registration or license? Yes No

If "yes," give full details (use additional sheet if necessary).

17. Has any State or federal regulatory agency ever denied or suspended your registration or license, disciplined you, or otherwise by order, prevented you from associating with a financial services-related business or restricted your activities? Yes No

If "yes," give full details (use additional sheet if necessary).

18. Has any State or federal regulatory agency ever barred you from association with an entity regulated by such commissions, authority, agency, or officer, or from engaging in a financial services-related business? Yes No

If "yes," give full details (use additional sheet if necessary).

19. Are you now the subject of any regulatory action or proceeding that could result in a "yes" answer to Questions #12 through #18 above? Yes No

If "yes," give full details (use additional sheet if necessary).

20. Have you ever been convicted of or pled guilty or nolo contendere (“no contest”) in a domestic, foreign, or military court to committing or conspiring to commit a *misdemeanor involving*:
 (i) *financial services* or a *financial services-related* business, (ii) any fraud, (iii) false statements or omissions, (iv) theft or wrongful taking of property, (v) bribery (vi) perjury, (vii) forgery, (viii) counterfeiting, or (ix) extortion? Yes No

If “yes,” give full details (use additional sheet if necessary).	
Court: (County, State, Country)	Title of case and docket number:
Disposition - date and details:	

21. Are there pending charges against you for a misdemeanor as specified in Question #20? Yes No

If “yes,” give full details (use additional sheet if necessary).
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22. Have you ever been convicted of or pled guilty or nolo contendere (“no contest”) in a domestic, foreign, or military court to any felony? Yes No

If “yes” give full details (use additional sheet if necessary).	
Court: (County, State, Country)	Title of case and docket number:
Disposition - date and details:	

23. Are there pending charges against you for any felony? Yes No

If "yes," give full details (use additional sheet if necessary).

24. Have you ever been involved in material litigation involving a financial services-related business? Yes No

If "yes," give full details, including disposition and date (use additional sheet if necessary).

25. Within the past ten (10) years have you filed a personal bankruptcy petition or been the subject of an involuntary bankruptcy petition? Yes No

If "yes," give full details (use additional sheet if necessary).

26. Do you have any unsatisfied judgments or liens against you? Yes No

If "yes," give full details (use additional sheet if necessary).

27. How much time do you expect to devote to the daily operations of this licensee?

I REPRESENT THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND COMPLETE, TO THE BEST OF MY KNOWLEDGE AND BELIEF.

_____ Date

_____ Signature

_____ Typed Name and Title

ACKNOWLEDGMENT

State of: _____

County of: _____

On this _____ day of _____, 20_____, personally appeared before me _____ whose identity is personally known to me, or proved to me on the basis of satisfactory evidence, and acknowledged that he or she signed the foregoing document on behalf of said business.

(seal)

_____ Notary Public