

E. J. FACE, JR.
COMMISSIONER OF
FINANCIAL INSTITUTIONS



1300 EAST MAIN STREET
SUITE EIGHT HUNDRED
P.O. BOX 640
RICHMOND, VIRGINIA 23218-0640
(804) 371-9657
FAX (804) 371-9416
TDD (804) 371-9206
www.scc.virginia.gov

**STATE CORPORATION COMMISSION
BUREAU OF FINANCIAL INSTITUTIONS**

December 19, 2008

TO THE CONSUMER FINANCE LICENSEE ADDRESSED

The Virginia Consumer Finance Act requires each licensee to file an annual report with the State Corporation Commission no later than April 1, covering operations during the preceding calendar year. The Statute **DOES NOT** provide for an extension of the filing period and a penalty may be imposed for late filing. In fact, it will be helpful if you complete and file this report well ahead of the deadline, preferably by mid-February. We enclose the annual report form and instructions for your convenience. The same form may also be downloaded from our web site at www.scc.virginia.gov/bfi.

You are encouraged to file this report as soon as possible. If you have any questions, please feel free to contact Ms. Karen Heede at (804) 371-9372.

Very truly yours,

Nicholas C. Kyrus
Deputy Commissioner

Attachment

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION
BUREAU OF FINANCIAL INSTITUTIONS

ANNUAL REPORT OF A CONSUMER FINANCE COMPANY
FOR THE YEAR ENDING DECEMBER 31, 2008

GENERAL INSTRUCTIONS

Pursuant to § 6.1-301 of the Code of Virginia, every Consumer Finance licensee must file an annual report under oath with the State Corporation Commission. Reports covering operations during the preceding calendar year are to be filed no later than April 1, by mailing or delivering them to the Bureau of Financial Institutions, 1300 East Main Street, Suite 800, Post Office Box 640, Richmond, Virginia 23218-0640. The statute does not provide for an extension of the filing period. **A penalty for late filing may be imposed.**

***Please attach a copy of an audited annual report of the parent company, if any, as well as an audited financial report of the licensee.** If audited reports are not available, internal reports may be submitted. All financial reports should include an income statement and balance sheet. If audited annual reports are not available by the April 1 deadline, they may be filed under a separate cover as soon as they become available.

Many licensees conduct other businesses in their consumer finance offices, either directly or through an affiliate. **Unless otherwise noted, all information requested pertains to Virginia consumer finance business only and does not include any other businesses conducted.**

Please do not underline, change captions, or otherwise modify the report form. Figures should be rounded to the nearest dollar. If insufficient space is provided in a Schedule, continuations on plain paper may be added. Additional information must be submitted on 8-1/2" X 11" paper. Please indicate where such additions are made. If you have any questions concerning these forms, please call (804) 371-9372.

AFFIDAVIT

State of _____)

City or County of _____)

I, _____, being the _____
(Name of Officer of Licensee) (Title)

of _____
(Name of Licensee)

swear or affirm that, to the best of my information and belief, the facts in this report, including any accompanying schedules and statements, are true.

Signature

Subscribed and sworn to before me this _____ day of _____, 20_____.

Notary Public

Registration Number of Notary: _____
My commission expires: _____

**ANNUAL REPORT OF A CONSUMER FINANCE COMPANY
FOR THE YEAR ENDING DECEMBER 31, 2008**

GENERAL INFORMATION

Name And Address Of Consumer Finance Company
Licensed In Virginia:

Web Site Address Of Licensee, If Any:

Name, Title And Business Address (If Different Than
Above) Of Chief Executive Officer:

Name And Address Of Parent Company, If Any:

E-Mail Address Of Licensee, If Any:

Is Other Business Conducted In Any Licensed Consumer Finance Office In Virginia? Yes No

If "YES", Check The Type Of Other Businesses Conducted Below, Adding To The Itemized Businesses If Necessary:

- | | | | | |
|---|--|--|---|--|
| <input type="checkbox"/> Mortgage Lending | <input type="checkbox"/> Sales Finance | <input type="checkbox"/> Open-End Credit | <input type="checkbox"/> Mortgage Brokering | <input type="checkbox"/> Title Insurance |
| <input type="checkbox"/> Non-Credit Life
Insurance Sales | <input type="checkbox"/> Sale of
Property Insurance | _____ | _____ | _____ |
| | | (Other) | (Other) | (Other) |
| _____ | _____ | _____ | _____ | _____ |
| (Other) | (Other) | (Other) | (Other) | (Other) |
| _____ | _____ | _____ | _____ | _____ |
| (Other) | (Other) | (Other) | (Other) | (Other) |

Is The Licensee, Parent Or Affiliate Engaged In Consumer Finance Business In Other States? YES NO

Individual To Be Contacted With Respect To Questions Arising From This Report (Name, Title, Address, Telephone Number, And E-Mail Address):

Individual To Be Contacted With Respect to Consumer Complaints (Name, Title, Address, Telephone Number, Fax Number And E-Mail Address):

SCHEDULE A
STATEMENT OF CONSUMER FINANCE INCOME FOR THE CALENDAR YEAR 2008
IN VIRGINIA LICENSED CONSUMER FINANCE OFFICES

INSTRUCTIONS: This schedule reports total income and expenses related **only** to the conduct of consumer finance business and the sale of loan related insurance products in Virginia licensed offices, whether attributable to the consumer finance licensee or to its affiliates and/or subsidiaries.

INCOME EARNED IN VIRGINIA CONSUMER FINANCE OFFICES:	
1. Interest Earned on Consumer Finance Loans.....	
2. Insurance Income Earned by the Consumer Finance Licensee (Schedule B, Item 2e)..	
3. Insurance Income Earned by Affiliates and/or Subsidiaries (Schedule B, Item 7).....	
4. Fee Income.....	
5. Other Income.....	
6. Total Income From Consumer Finance Lending and Loan-Related Insurance Sales in Licensed Consumer Finance Offices (Sum of Items 1 through 5).....	
EXPENSES ATTRIBUTABLE TO VIRGINIA CONSUMER FINANCE BUSINESS CONDUCTED IN LICENSED OFFICES:	
7. Advertising.....	
8. Auditing.....	
9. Provision for Possible Loan Losses.....	
10. Depreciation and Amortization.....	
11. Insurance and Fidelity Bonds.....	
12. Legal Fees	
13. Postage, Printing, Stationary and Supplies.....	
14. Rent, Janitorial Services and Utilities.....	
15. Salaries of Officers, Owners and Partners.....	
16. Salaries of All Other Employees.....	
17. Taxes (Other than Income).....	
18. License Fee.....	
19. Telephone and Telegraph.....	
20. Travel, Auto Expense and Allowance.....	
21. Supervision and Administration.....	
22. Other Expenses.....	
23. Total Non-Interest Expense (Sum of Items 7 through 22).....	
24. Interest Paid on Borrowed Funds.....	
25. Total Expenses Before Income Taxes (Sum of Items 23 and 24).....	
26. Income Taxes on Consumer Finance Earnings:	
(a) State.....	
(b) Federal.....	
(c) Total Income Taxes.....	
27. Total Expenses Incurred by the Conduct of Consumer Finance Business and Related Insurance Sales in Virginia Licensed Offices (Sum of Items 25 and 26c).....	
28. Net Income From Consumer Finance Lending and Loan-Related Insurance Sales in Virginia Licensed Offices (Item 6 minus Item 27).....	

**SCHEDULE B
RESTATEMENT OF INCOME**

INSTRUCTIONS: The purpose of this schedule is to derive all insurance income earned in conjunction with consumer finance loans only made in licensed consumer finance offices in Virginia. Part A is to be completed by licensees which act as agents in the sale of insurance and recognize insurance income. Part B is to be completed by licensees who do not recognize insurance income and operate as a branch or affiliate of a parent corporation with all income related to the sale of insurance recognized by the parent corporation, or its insurance affiliate. Licensees who in some instances recognize insurance income and in other instances do not, should complete both schedules. **CAUTION:** Do not include insurance income which is generated in offices not licensed to conduct consumer finance business or which is not sold in conjunction with a Virginia consumer finance loan.

PART A RECOGNITION OF INSURANCE INCOME BY LICENSEE	
1. Net Premiums (gross minus refunds)	
2. Insurance Income:	
(a) Commissions Collected or Earned	
(b) Plus Expense Reimbursement... ..	
(c) Plus Experience Dividends	
(d) Plus Other Amounts Received.. ..	
(e) Insurance Income Before Income Taxes (Sum of Item 1 and Items 2a through 2d) (Should Agree with Schedule A, Item 2).....	
PART B RECOGNITION OF INSURANCE INCOME BY INSURANCE SUBSIDIARY OR AFFILIATE	
3. Net Premiums (collected or earned).....	
4. Total Expenses (if unable to compute assume that total expenses are 60 percent of net premiums, Item 3).....	
5. Insurance Income of Affiliate or Subsidiary Before Taxes (Item 3 minus Item 4).. ..	
6. Provision for State and Federal Income Taxes.....	
7. Insurance Income of Affiliate or Subsidiary After Taxes (Item 5 minus Item 6) (Should Agree with Schedule A, Item 3).....	

Schedules C through G on the following pages apply only to Virginia loans and assets

**SCHEDULE C
CONSUMER FINANCE AND OTHER BUSINESS ASSETS
AT THE END OF THE CALENDAR YEAR**

	AMOUNT
Consumer Finance Assets at Year-End	
Other Business Assets at Year-End	
Total Consumer Finance and Other Business Assets at Year-End	

**SCHEDULE D
ANALYSIS OF CONSUMER FINANCE LOANS BY SIZE**

RANGE OF CONSUMER FINANCE LOANS	CONSUMER FINANCE LOANS MADE DURING THE YEAR*		CONSUMER FINANCE LOANS END OF CALENDAR YEAR*	
	Number	Net Loans Receivable	Number	Net Loans Receivable
\$2,500.00 or Less				
\$2,500.01 - \$6,000.00				
\$6,000.01 - \$10,000.00				
\$10,000.01 to \$20,000.00				
Over \$20,000.00.....				
TOTAL				

*Classify the loans according to their size at the time made and show the outstanding principal balance of all loans at the end of the calendar year.

**SCHEDULE E
INTEREST RATES CHARGED ON CONSUMER FINANCE LOANS
MADE DURING THE CALENDAR YEAR**

	Number of Loans	Amount of Loans	Interest Rate Range	
			Lowest	Highest
Loans up to \$2,500				
Loans over \$2,500				

**SCHEDULE F
ANALYSIS OF DELINQUENT ACCOUNTS FOR CONSUMER FINANCE LOANS**

	Number	Net Loans Receivable
Accounts with No Payment (Either of Principal or Charges) for a period of:		
(a) Two Months		
(b) Three Months or More		
(c) TOTAL.....		

