



STATE OF KANSAS  
**OFFICE OF THE STATE BANK COMMISSIONER**  
**CONSUMER AND MORTGAGE LENDING DIVISION**  
700 SW Jackson St., Suite 300  
Topeka, Kansas 66603-3796  
785-296-2266 Fax: 785-296-6037

**FINGERPRINT CARD REQUEST FORM**

Any applicant who files an application for a Kansas Credit Services Organization Registration must provide completed fingerprint cards with their application and pay to the Office of the State Bank Commissioner processing fees required by the bureaus of investigation to scan the cards.

Fingerprint cards must be completed for every owner of 10% or more interest in the applicant, and every director, member, partner and executive officer of the applicant (Question #9 of an original application).

**To request fingerprint cards, complete this form and fax it to the Office of the State Bank Commissioner at 785-296-6037.**

Number of Fingerprint Cards Requested: \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Name of Credit Services Organization Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip Code)

Phone Number of Contact Person: \_\_\_\_\_

**The number of fingerprint cards requested will be mailed to the contact person listed above with instructions for completing the cards. Completed fingerprint cards and correct processing fee must be mailed with your application for a Kansas Credit Services Organization registration to the Office of the State Bank Commissioner as directed in the application. Any deviation from this procedure will delay the processing of your application.**

Please contact us at 785-296-2266 should you have questions.

If a new owner, officer, director, member or partner is being added to an already approved Kansas Credit Services Organization Registration, each new individual must submit a completed Confidential Background Information Consent Form (Form CSO-1) and Fingerprint Card with a check for \$49 made payable to the Office of the State Bank Commissioner.