

FIS 0550 (07/08) Office of Financial and Insurance Regulation
Debt Management Fee Processing Card

Instructions:

Complete the Debt Management Fee Processing Card below and include it with your check. Failure to properly complete or return this card with your fees may result in a processing delay.

Enter the name and Federal Employer ID Number (FEIN) or Social Security Number (SSN) of the Debt Management Firm or Debt Management Counselor on the Fee Processing Card.

Include a money order, or check made payable to the State of Michigan. Do not send cash.

Fees are non-transferable and non-refundable.

PA 148 of 1975, as amended, requires submission of this form with payment for various fees associated with debt management companies licensed or applying for a license in Michigan. Failure to file this form may result in processing delays that could delay issuance, renewal or continuation of a debt management company license in Michigan, and subject licensee or applicant to additional fees or penalties.

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Please check the fees that apply to you. Attach a check made payable to the State of Michigan. Send all other fees to Office of Financial & Insurance Regulation, P.O. Box 30224, Lansing MI 48909.

Examinee name →	Social Security Number (SSN) _____
Firm name → <i>If firm is an individual and has no FEIN, enter SSN</i>	Firm's Tax ID number (FEIN) _____

Fee Type-Check all that apply	Fee Code	Amount Due	Number of Offices	Subtotal
<input type="checkbox"/> Debt Management License Fee	35	\$50.00 per office	_____	\$ _____
<input type="checkbox"/> Debt Management Investigation Fee	35	\$50.00 per office	_____	\$ _____
<input type="checkbox"/> Debt Management Renewal Fee	35	\$50.00 per office	_____	\$ _____

Total amount enclosed



Michigan Department of Labor & Economic Growth

The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, sexual orientation, religion, age, national origin, color, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

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