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|   | ANNUAL FILINGBUREAU OFCONSUMER CREDIT PROTECTION35 STATE HOUSE STATIONAUGUSTA ME 04333-0035(207) 624-8527 |  |
| SALES FINANCE COMPANY |  | **DUE: Jan 31, 2025** |
| Name and Address: | **FOR OFFICE USE ONLY Do not write in this box.** |
| CK # | CN |
| AMT | DATE |
|  |  |
| **PAYMENT OPTIONS: 1) Check or Money Order Payable to “Treasurer, State of Maine”. Write license number on check; or 2) Credit Card: MasterCard or VISA only. Complete the following: I authorize the State of Maine, Bureau of Consumer Credit Protection to charge my MasterCard /VISA** \_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_ **Exp Date \_\_\_\_\_\_/\_\_\_\_\_\_\_ in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_ for the purpose of this Annual Filing and reporting requirement.** |

In accordance with the provisions of the Maine Consumer Credit Code, this notification is hereby filed with the Bureau of Consumer Credit.

1. Enter the total amount of loans made by you, or sales and leases assigned to you in 2024.

|  |  |
| --- | --- |
| A. Total loan $ amount |  |
| B. Total $ amount of leases |  |
| C. Total $ amount of assigned credit (list the total $ amount of sales, leases, and loans) |  |
|  |  |
| FEES DUE: |  |
| 1. Volume fee (See schedule on Reverse) |  |
| 2. Annual notification fee (Main Office) | 20.00 |
| 3. Branch fee ( $10 each additional location) |  |
| TOTAL FEES DUE (Sum of 1, 2, & 3) |  |

1. Number of Maine repossessions during 2024 (Motor Vehicles, Boats, Snowmobiles, etc.) \_\_\_\_\_\_\_\_\_\_

ON A SEPARATE SHEET OF PAPER, PROVIDE THE FOLLOWING:

1. If applicable: for **assigned credit**, the names and addresses of businesses (assignors) that assign Maine contracts to you and the dollar amounts assigned to you in calendar year 2024.
2. Any change in business structure or address;
3. Contact persons for compliance examination, and consumer complaints (name and address, telephone and fax numbers);
4. If the company has more than one location that serves Maine consumers, please attach a list of locations and indicated the corporate or main location; and
5. Location of records of credit transactions.

I hereby certify that the statements in the foregoing report are true and correct to the best of my knowledge and belief.

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| **Signature of Preparer** | **Name typed or printed legibly** | **Date** |

This is the Year 2024 MCCC-1 notification form to be completed under the requirements of 9-A, M.R.S. § 6-202 of the Maine Consumer Credit Code**.** The statutory deadline for filing notification is January 31, 2025. Late filings will be subject to penalty charges.

When completing this form, be sure to include the dollar volume of consumer credit transactions for calendar year 2024 for your branch locations as well as your main office on this MCCC-1 form.

If you are no longer regularly entering into consumer credit transactions subject to the Code, please notify us ON OR BEFORE THE JANUARY 31ST DEADLINE. Remember, if you changed locations in 2024, you are required, pursuant to Section 6-202 of the Code, to notify our office in writing of the change.

If you have any questions about completing this form, call the Bureau at (207) 624-8527.

**SCHEDULE OF FEES**

Use total volume from page 1

|  |  |
| --- | --- |
| **Volume Amount** | **Fee** |
| $1 to $100,000 | $25 |
| $100,001 to $200,000 | $50 |
| $200,001 to $300,000 | $75 |
| $300,001 to $400,000 | $100 |
| $400,001 to $500,000 | $125 |

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| **Volume Amount** | **Fee** |
| $500,001 to $600,000 | $150 |
| $600,001 to $700,000 | $175 |
| $700,001 to $800,000 | $200 |
| $800,001 to $900,000 | $225 |
| $900,001 to $1,000,000 | $250 |

If your volume was in excess of $1,000,000 you can readily calculate the fee by extending the schedule.