

[Date]

[Contact name]
[Licensee Name]
[Address]
[City, State, Zip]

On Behalf of the Identified Joint States

Dear [Contact name]:

The states of [insert individual states] (hereinafter referred to as the “Examination States”) are conducting a coordinated examination of [Licensee name] together with the Consumer Finance Protection Bureau (“CFPB”), relative to the Licensee’s debt collection activities in the Examination States. The examination will take place at the [City, State] offices of [Licensee name]. The scope of the Examination States’ review will be all inclusive.

The primary purpose of this coordinated supervisory effort is to minimize regulatory burden, and foster consistency, coordination and communication among the regulators. Rather than subject the institution and its management to multiple, simultaneous examination requests and duplicative reviews of similar issues, the Examination states are conducting this examination under a single Examiner-In-Charge (“EIC”) and a coordinated request for information and documents. I will be the EIC and primary point of contact for the Examination States throughout the examination. This agreed coordination does not preempt an individual Participating Examination States’ authority. Also, each Examination State will provide a separate examination billing.

The examination is scheduled to begin on-site on [Date]. A detailed Information Request to begin the initial off-site portion of the examination is enclosed. Prompt attention to the Information Request will allow the Participating Examination States to accomplish a significant amount of review prior to on-site arrival. We believe this approach will reduce on-site review time thereby significantly reducing the examination burden on the [Licensee name].

Following the receipt and review of your response to the initial IR, the Examination States will make a follow-up request for clarification and additional specific information.

Licensee

Date

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Instructions for the Information Request:

- 1) Please provide the names and email addresses of all parties responsible for the information request.
- 2) Please provide IR 62 no later than [Date] (which should be 30 days prior to the onsite portion), so the Examination States can review and make additional requests to be ready for on-site review.
- 3) Please provide all other information requested no later than [Date] (at least 3 weeks prior to onsite portion).
- 4) When records are ready for delivery, please contact [EIC name], State EIC at [insert EIC phone number] or via email at [insert EIC email address].
- 5) A ShareFile upload link will be created for data delivery purposes. Please provide the email address of all [Licensee name] representatives authorized to have upload access to the ShareFile.

My contact information is shown below. You are welcome to reach me at any time with questions or clarifications.

Yours truly,

[EIC name]

[Name of State Agency]

Examination States, Examiner-in-Charge

[EIC phone number]

[EIC email address]

Enclosure