



Department of Commerce

Division of Securities
77 South High Street, 22nd Floor
Columbus, Ohio 43215-6131
Telephone (614) 644-7381

\$ _____
For Division Use Only

Bureau of Worker's Compensation Chief Investment Officer (BWCCIO) Renewal Form June 30, 2015

DATE: _____

1. BWCCIO License Number: _____
2. Applicant's Name: _____
3. Work Phone Number: _____ Work Fax Number: _____
Work Email: _____
4. Applicant's Address: _____

5. Is the applicant's Form BWCCIO on file with the Division current with all updated information? Yes No (If the response is no, an amended Form BWCCIO with all current information must be attached.)
6. A \$50.00 check payable to the Ohio Division of Securities must be enclosed.
Note: The license of every state retirement system investment officer licensed under section 1707.165 of the Revised Code shall expire on the thirtieth day of June of each year, if the state retirement system investment officer does not file with the Division an application for renewal.

SIGNATURE

7. Applicant states that the information on this application is accurate and complete to the best of his/her knowledge after reasonable and diligent inquiry, and is furnished for the purpose of procuring for the applicant an state retirement system investment officer license pursuant to R.C. §§ 1707.01 to 1707.45, inclusive.

Applicant's Name

Signature