

# RECOVERY SPECIALIST CERTIFICATION EXAM

Alabama, Arizona, Arkansas, California, Colorado, Florida\*, Georgia, Illinois, Kentucky, Louisiana, Mississippi, Missouri, North Carolina, Oregon, South Carolina, Texas, Washington



RSIG has been working to revise the course, already accepted by most lenders and states, so that it could be more easily available to you on-demand - when you need it. This a home study guide version and in conjunction with the Allied meeting this April there will be a review and a proctored exam. Allied is sponsoring this educational opportunity by providing the space for the review and exam. For this opportunity only, the registration fee has been discounted to \$75 per person.

If you're not currently an Allied member, information will be made available for those interested in joining. They offer additional opportunities for networking with lenders and other repossessors.

Those of you that do business in any of these states can receive your certification **April 13, 2011 in conjunction with Allied's 75<sup>th</sup> Anniversary Annual Conference.** Don't miss this unique opportunity! We strongly encourage you to read the text, in full, prior to attending the review and taking the exam. Until 04/11/11, Mike Howk will be available at 615-789-0330 from 9am to 5pm Central Time, Monday-Friday for questions.

**There will be a review and proctored exam with Mike Howk on Wednesday the 13<sup>th</sup> of April 2011 at 12:30pm. The course will be held at the Hyatt Regency St. Louis at the Arch, 315 Chestnut St., St. Louis, MO 63102.**

What is covered:

- ü *State Laws*
- ü *State Case Law*
- ü *Breach of the Peace*
- ü *Bankruptcies*
- ü *The UCC and its affect on the recovery agent and the lender*
- ü *The Fair Debt Collections Practices Act*
- ü *Indian Reservations and Military Bases*
- ü *Much, much more...*

**Those wanting to attend the exam must place their orders by April 1, 2011.** The cost for the course book is usually \$125 per person but currently we are offering a discounted price of \$75 per person. Once the exams have been graded, certificates of completion will be sent out to the person at the address as listed below. Please fill out the information below and fax back to: 703-365-0636 no later than April 1, 2011 along with your method of payment. For your convenience, we are including a credit card authorization form with this notice should you choose to pay with a Visa or MasterCard. Each attendee needs to be registered. Questions? Please contact our office at 1-800-997-7224.

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*If purchasing multiple books, each person registering must supply full name, shipping address, and contact numbers. All registration forms must be sent with your payment. Call 1-800-997-7224 for additional registration forms, if needed. Please be sure that all information is filled in, to ensure that your order is filled promptly.*

*\*Florida Course being offered is NOT a licensing course.*

*If you wish to be taken off of future mailings, please email your request to: [rsig@rsig.com](mailto:rsig@rsig.com) or call 1-800-997-7224 to be removed. We will need the name of the company, state and fax number in order to remove you. Thank you!*

# RECOVERY SPECIALIST INSURANCE GROUP

"REMOVE THE LIABILITY BEFORE REMOVING THE VEHICLE"

PO BOX 2707 • MANASSAS, VIRGINIA 20108  
PHONE: 703-365-0199 • FAX: 703-365-0636 • WEB: WWW.RSIG.COM

## PAYMENT AND CREDIT CARD CHARGE AUTHORIZATION FORM

Company Code: \_\_\_\_\_

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

### Certification Course Registration Fee – April 13, 2011

# of Attendees: \_\_\_\_\_ x \$75 / Attendee Total Amount to be charged: \$ \_\_\_\_\_

Name As it Appears on Card: \_\_\_\_\_

**We MUST have your complete address below and this MUST match the billing address for the Credit Card being used.**

Cardholder Billing Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Type of Card:  Visa  MasterCard

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Verification Code: \_\_\_\_\_

(Verification Code is the 3 or 4 digit code listed on the back of your card.)

Cardholder Signature: \_\_\_\_\_

**Signing this form authorizes IG., Inc./RSIG to charge above listed credit card for total amount shown.  
RSIG will use this card for this transaction only.**

#### Internal Office Use Only:

Date Processed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Initials of Person Processing Pmt: \_\_\_\_\_

Authorization Code: \_\_\_\_\_

# RECOVERY SPECIALIST CERTIFICATION EXAM REGISTRATION FORM -

Attendee's Name: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

RSIG Company Code \_\_\_\_\_ Are you a member of Allied Finance Adjusters (Y/N)? \_\_\_\_\_

Please list the state you are testing for: \_\_\_\_\_

Attendee's Name: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

RSIG Company Code \_\_\_\_\_ Are you a member of Allied Finance Adjusters (Y/N)? \_\_\_\_\_

Please list the state you are testing for: \_\_\_\_\_

Attendee's Name: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

RSIG Company Code \_\_\_\_\_ Are you a member of Allied Finance Adjusters (Y/N)? \_\_\_\_\_

Please list the state you are testing for: \_\_\_\_\_