



## CHECK CASHING ANNUAL REPORT

ORS ch. 697/OAR 441-755  
 As of Dec. 31, 20\_\_.

**Note:** This report is **due by April 1** for the prior calendar year (January through December).

Name of licensee: \_\_\_\_\_ License no.: \_\_\_\_\_

License location: \_\_\_\_\_  

Street
City
State
ZIP

Complete the following information for checks cashed in the past calendar year:

The <i>total number</i> of payment instruments cashed:	
The <i>total dollar</i> amount of all payment instruments cashed:	\$
The <i>total amount of fees</i> charged for all payment instruments cashed:	\$

This report was completed by: \_\_\_\_\_ Date: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_