

Mail to: Licensing Office
Nevada Financial Institutions Division
1830 E. College Parkway, Suite 100
Carson City, NV 89706-7905

Date Received (Stamp)

COLLECTION AGENCY ANNUAL REPORT TO COMMISSIONER

For The Year Ended: December 31, 2016

Due Date

- 1) Pursuant to NRS 649.345(1), the required Annual Report is due January 31 each year.
 - 2) Pursuant to NAC 649.081, the Financial Institutions Division requires a CPA prepared report of financial standing annually and before the renewal of a license or a certificate.
- Therefore, when the two required filings are combined as one submission, the Division will accept the combined submission as timely and without penalty if received on or before APRIL 15, 2017.

Please Note: Annual Report must be mailed as a hard copy to the Division (see address above).
The Division will not accept emailed Annual Reports.

Request for an Extension of Time must be documented by Email to: mmyoung@fid.state.nv.us

Collection Agency Name (dba): _____

Company Name: _____

Address: _____

LIST QUALIFIED MANAGERS

<u>Name</u>	<u>Certificate Number</u>
_____	_____
_____	_____

REQUIRED

1. Pursuant to NRS 649.345(1)(e) and NAC 649.081, provide a *report of the agency's financial standing* for the Annual Report year ended December 31, which must be prepared by a licensed certified public accountant (CPA) in good standing in the state where the Annual Report is prepared. At a minimum, the *report of the agency's financial standing* must include: 1) a signed and dated letter written on letterhead reflecting that a CPA in good standing "prepared" the report of financial standing, 2) a Statement of Assets, Liabilities, & Owners' Equity [balance sheet], and 3) a Statement of Operations [income statement or profit & loss]. A CPA prepared "modified" compilation that is not a full GAAP engagement, i.e., without the cash flow statement, the statement of shareholders' equity, and notes to the financial statements, is certainly acceptable.

If the agency is majority owned by a parent company, then complete audited or reviewed financial statements of the parent may be submitted instead – include verification of the parent/subsidiary relationship. If the agency or its parent is a publicly traded corporation reporting to the SEC whose financial statements can be found online, then a detailed note indicating such is acceptable.

NOTE: Where sufficient space is not provided anywhere on this Annual Report to properly set forth the facts, attach appropriately labeled schedules reflecting the necessary details. If the agency operates more than one licensed office, ***separate Annual Reports for each licensed office must be completed.***

2. Pursuant to NRS 649.345(1)(b), enclose a copy of the bank statement along with a copy of the account reconciliation for the month ended December 31 of the Annual Report year for each trust account established to collect funds for Nevada clients/customers/creditors, whether other client's collected funds are/were included in the trust account, and whether it incurred any Nevada client activity or no activity during the Annual Report year. A computer print-out of each trust account reconciliation is preferred; otherwise, complete the reconciliation schedule below for each trust account. On the schedule below, the **Adjusted bank balance at December 31*, must reasonably agree to the **Adjusted G/L or checkbook balance at December 31*.

Trust Account Reconciliation

Ending cash balance per bank statement	\$ _____
Add total of deposits made by December 31 that are not reflected on bank statement. If no computer reconciliation available, then provide copies of deposits.	\$ _____
Subtract total of checks written as of December 31 that are not reflected on bank statement. If no computer reconciliation available, then list checks on following page.	\$ _____
<i>*Adjusted bank balance at December 31</i>	<u>\$ _____</u>

G/L or checkbook balance	\$ _____
Subtract bank service charges reflected on bank statement	\$ _____
<i>*Adjusted G/L or checkbook balance at December 31</i>	<u>\$ _____</u>
Subtract 'funds due clients at December 31'	\$ _____
Cash Over or (Short)	<u>\$ _____</u>

Note: If the 'funds due clients at December 31' above exceeds (Short) the **Adjusted G/L or checkbook balance at December 31* above, then provide a copy of the applicable bank deposit made to cover the cash shortage (The balance in the trust account must always equal or exceed the funds due clients/customers/creditors).

CHECKS OUTSTANDING

Payee	Check #	\$ Amount	Date

3. Pursuant to NRS 649.345(1)(a), report below the total sum of money due to all Nevada clients/customers/creditors as of the close of the last business day of the report year, which is generally December 31.

Client/Customer/Creditor: _____ \$ _____

Client/Customer/Creditor: _____ \$ _____

Client/Customer/Creditor: _____ \$ _____

Client/Customer/Creditor: _____ \$ _____

Client/Customer/Creditor: _____ \$ _____

Client/Customer/Creditor: _____ \$ _____

Client/Customer/Creditor: _____ \$ _____

Client/Customer/Creditor: _____ \$ _____

Client/Customer/Creditor: _____ \$ _____

Client/Customer/Creditor: _____ \$ _____

4. Pursuant to NRS 649.345(1)(c) and (d), for the annual report year alphabetically list below funds collected for any Nevada clients/customers/creditors which were received/collected prior to November 1 on which settlement had not been made as of the end of the year (i.e., funds that were in the trust/escrow account for more than 60 days at December 31). In addition, provide a short explanation for the non-settlement for each amount. If no applicable unsettled amounts, then please indicate "N/A" in the first Creditor Name field below.

Creditor Name	Date Collected	\$ Amount	Explanation

AFFIDAVIT

I, _____, the undersigned, being the

_____ on behalf of _____
(Owner, officer title, or manager) (Collection agency)

swear and affirm, under penalty of perjury, that to the best of my knowledge and belief the statements contained in this report, including the accompanying supplementals, are true and complete in all respects.

Signature of owner, officer, or manager

ACKNOWLEDGEMENT OF NOTARY PUBLIC

Taken, subscribed and sworn to before the undersigned authority in _____
County, in the State of _____ this _____ day of _____, 20_____.

NOTARY SEAL: _____
Signature of Notary Public

** Retain a copy of this Report for your files. **

** Mail original to the address reflected at the top of the first page of this Report. **

** Nevada Revised Statute requires a fee of \$10.00 per day for a late filing of the Annual Report. **