PENNSYLVANIA CHECK CASHER VOLUME INFORMATION

NMLS Company Unique ID Number: _________________

Applicant Legal Name: ______________________________________________________________________

Provide the following data for the 2013 calendar year:

A. List the total number of checks cashed for a fee in Pennsylvania by licensee: _____________.
   If reporting zero please provide an explanation.

B. List the total dollar value of the checks cashed for a fee in Pennsylvania by the licensee: $________.  
   If reporting zero please provide an explanation.

C. List the total dollar value of the check cashing fees collected for the number of checks cashed for a fee in 
   Pennsylvania by the licensee.$_________________.  (Note: Do not include New Customer Fees to cover the 
   cost of investigating the customer’s credit).  If reporting zero please provide an explanation.

D. Do you collect New Customer Fees to cover the cost of investigating the customer’s credit?  YES or  NO 
   (see Check Casher Licensing Act, 63 P.S. 2323 (b) Fees and Charges)
   
   If the answer is YES, list the total dollar value of the New Customer Fees collected in Pennsylvania:
   $__________________________

Please upload the completed form into the NMLS under the “Document Uploads” section, under “Business Plan.”