

OEC Quarterly Report

CASH ACCOUNTING METHOD

DATE SUBMITTED _____

Send report and remittance to:
Oregon Employer Council
PO Box 7661
Salem, OR 97303

Local council name _____
Contact (treasurer) _____
Phone _____
Email _____

Quarter ending date: **9/30** (due 10/15) **12/31** (due 1/15)
Check one only **3/31** (due 4/15) **6/30** (due 7/15)

Income this quarter _____
Expenses this quarter _____
Net income from all activities _____
net income x .10

10% remittance due to State OEC _____ *(Send check, if above \$0.00)*

SUBMITTED BY _____

PHONE _____

Report income when received and expenses when paid, regardless of when events occurred.

Speaker name, amount paid (attach W9 form): _____
List speaker fee separately from travel, printing and other expenses.

Please give a description of your council's activities this quarter. Include type of event(s), number of participants, partners involved, etc.