

Form OR-TLT-V

Oregon Transient Lodging Tax Payment Voucher

Oregon Department of Revenue

Page 1 of 1 • Use UPPERCASE letters. • Use blue or black ink. • Print actual size (100%). • Don't submit photocopies or use staples.

Tax period begins (MM/DD/YYYY)

Tax period ends (MM/DD/YYYY)

First name

Initial

Last name

Social Security number (SSN) (if no FEIN)

DBA/ABN

Federal employer identification number (FEIN)

Mailing address

City

State

ZIP code

Contact phone

Payment type (check one)

Original return

Amended return

Enter payment amount

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150-604-173
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