Statistical Overview
Fiscal Year 2014

REGULATION OF COLLECTION AGENCIES

July 2014

DIVISION OF CORPORATIONS, BUSINESS AND PROFESSIONAL LICENSING

This Annual Performance Report is presented in accordance with Alaska Statute 08.01.070(1) and Alaska Statute 37.07.080(b). Its purpose is to report the accomplishments, activities, and the past and present needs of the licensing program.

FISCAL YEAR 2014
STATISTICAL OVERVIEW

Program: Collection Agency

AS 08. 24

12 AAC _____

Name of Individual Completing Report: Sher Zinn

Date: 7/30/14

FY14 LICENSEES	NEW-ISSUED FY 2014	TOTAL AS OF 6/30/14
	107	742

A. Current Active Licenses, Endorsements, Permits
List type and if issued by examination or credential, as applicable.

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	NEW-ISSUED FY 2014	TOTAL AS OF 6/30/14	LICENSURE BASIS
Example: Civil Engineer - AEL	C	AA	10	250	Exam: 6 Credentials: 4
1. Collection Agency Operator	O	AA	61	346	
2. Collection Agency Branch	B	AA	16	97	
3. Collection Agency	A	AA	25	208	
4. Collection Agency Op-Returned	O	RT	2	35	
5. Collection Agency Branch-Return	B	RT	2	34	
6. Collection Agency-Returned	A	RT	1	22	
7.					
8.					
9.					
10.					
11.					
12.					
13.					
		TOTAL	**107**	**742**	

B. Temporary Licenses

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	NEW-ISSUED FY 2014	TOTAL AS OF 6/30/14	NOTES
Example: Physical Therapist - PHY	R	AA	4	24	
1. N/A					
2.					
3.					
4.					
		TOTAL			

OL-001 (Rev. 06/13/12)

C. Current Licenses Issued as Inactive (not lapsed licenses)
(Only Medical, Chiropractic, CPA, and Real Estate)

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	TOTAL AS OF 6/30/___
Example: Salesperson - REC	S	II	64
1. N/A			
2.			
3.			
4.			
		TOTAL	

D. Retired Licenses

CATEGORY & PROGRAM CODE	Lic. Type Code	Status Code	RETIRED DURING FY 20____	TOTAL AS OF 6/30/____	NOTES
Example: Osteopath - MED	O	RR	1	8	
1. N/A					
2.					
3.					
		TOTAL			

E. Examination Detail
(List each examination administration separately. Write “See Attached” and attach a separate sheet if necessary.)

EXAM TYPE	LOCATION	DATE	CANDIDATES	NO. PASSED	NO. FAILED
N/A					

Number of Postponed Exams	
Number of Exam Reviews	

F. Miscellaneous Program Activity

List all instances of fee-related work performed under Centralized Regulations per 12 AAC 02.105 (tracked by each program's fee ticker)

DESCRIPTION	TOTAL
Example: License Verification	62
Wall Certificate/License Verification	0
Duplicate License	21

G. Miscellaneous Program Activity

List all instances of fee-related work performed under the licensing program's regulations that is not included above

DECSRIPTION	TOTAL
Example: Course Approval	16
Application fee	103

H. Board Meetings and Teleconferences

DATE	LOCATION *(indicate if teleconference)*
N/A	