

## Confirmation

Please keep a record of your Confirmation Number, or [print this page](#) for your records.

Confirmation Number **OSJOSJ000091939**

### Payment Details

**Description** Department of Justice  
ODOJ Charities Annual Filing Fee  
[www.doj.state.or.us/charigroup](http://www.doj.state.or.us/charigroup)

**Payment Amount** \$20.00

**Payment Date** 04/08/2026

**Status** PROCESSED

**Registration Number** 67945

**Session ID** 0b3dahcgl5hnjhnf2qyu4535

**Report Year** 2025

**Charity Name** Real Recovery Podcast Inc.

**Report ID** 598278

### Payment Method

**Payer Name** PETER DOWELL

**Card Number** \*9225

**Card Type** Visa

**Approval Code** 003621

**Confirmation Email** PETER@REALRECOVERYPODCAST.COM

### Billing Address

**Address 1** 17733 SE HAIG DRIVE

**City** PORTLAND

**State** OR

**Zip Code** 97236