

Summary of Financial Activities for a Solicitation Campaign



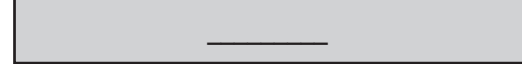
Tre Hargett
Secretary of State

Division of Charitable Solicitations and Gaming

Department of State

State of Tennessee
312 Rosa L. Parks Avenue, 6th Floor
Nashville, Tennessee 37243
Phone: 615-741-2555
Fax: 615-253-5173
sos.tn.gov/charitable

For Office Use Only



INSTRUCTIONS: Professional solicitors must use this form to report financial activities for each individual solicitation campaign conducted for a charitable organization. This financial report shall be filed with the secretary of state no more than ninety (90) days after a solicitation campaign has ended or ninety (90) days after the end of the fiscal year of any solicitation campaign that lasts more than one (1) year. If the solicitation campaign is conducted nationally or regionally and is not confined only to this state, the financial information required to be filed shall be inclusive of the national or regional campaign.

Financial Report (please check one):

- The financial report has been audited by an independent certified public accountant in accordance with generally accepted auditing standards and any documentation is **attached**.
- The financial report has not been audited because, by contractual agreement with the charitable organization, the professional solicitor does not receive donations on behalf of a charitable organization, does not have access to the funds raised, and does not make deposits to, have signature authority with, or any other authority over, a charitable organization's bank accounts.

1. PSID#: _____ COID#: _____ Campaign#: _____

2. Name of professional solicitor: _____

3. Name used during campaign (if different from above): _____

4. Name of charitable organization on whose behalf the campaign was conducted:

5. Campaign period (mm/dd/yyyy):

A. Beginning _____

B. Ending _____

6. Gross Revenue From Campaign:

A. Telemarketing \$ _____

B. Direct Mail \$ _____

C. Door-to-Door \$ _____

D. Thrift Store \$ _____

E. Internet Fundraising \$ _____

F. Collection Receptacles/Donation Bins..... \$ _____
G. Other \$ _____
H. **Total Campaign Receipts** \$ _____

7. Campaign Expenditures:

A. Expenditures (**Attach** an itemized list of all expenses.) \$ _____
B. Receipts paid to/retained by charitable organization \$ _____
C. **Total Expenditures** \$ _____

8. Campaign Balance:

A. **Remainder or deficit, 6H minus (-) 7C (if applicable)** \$ _____

9. If there is a "Remainder or Deficit," **attach** a detailed explanation. The explanation should include: how the remaining funds will be divided; how the debts of the campaign will be settled; and what the responsibility of the charitable organization is regarding campaign payables.

Explanation attached N/A

This report must be signed by an authorized official of the professional solicitor and two (2) authorized officials of the charitable organization.

I/we certify that the information furnished in this financial report and all continuation sheets is true and correct to the best of my/our knowledge.

Authorized Officer of Professional Solicitor

Signature: _____

Salutation: _____ First: _____

MI: _____ Last: _____

Position Title: _____ Date: _____

Notary Public

My Commission Expires _____

State of _____, County of _____

Sworn to before me this _____ day of _____, 20 _____

Signature _____

Authorized Officer of Charitable Organization

Signature: _____

Salutation: ____ First: _____

MI: ____ Last: _____

Position Title: _____ Date: _____

Notary Public

My Commission Expires _____

State of _____, County of _____

Sworn to before me this ____ day of _____, 20 ____

Signature _____

Authorized Officer of Charitable Organization

Signature: _____

Salutation: ____ First: _____

MI: ____ Last: _____

Position Title: _____ Date: _____

Notary Public

My Commission Expires _____

State of _____, County of _____

Sworn to before me this ____ day of _____, 20 ____

Signature _____