## City of Los Angeles

## NOTICE of INTENTION TO SOLICIT CHARITABLE CONTRIBUTIONS

Commission Investigation Division 100 West First Street, Room 147 Los Angeles, CA 90012 (213) 996-1260 (213) 996-1279 (Fax) Email: PCCharity@lapd.online

Charitable Services Section
Los Angeles Police Commission



For Charitable Services use

Date Received					
Assigned to:					
Org. No.					
Check No.					

Please review and complete this form **in detail.** File with the Charitable Services Section at least **fifteen (15) business days prior** to solicitation which is not to be started until an information card is issued. Please review the **important information on page 2.** Noncompliance with or violation of Article 4, Chapter IV, Los Angeles Municipal Code is a misdemeanor.

1 a. ORGANIZATION (Complete name as re-	gistered with IRS)			b. California Charitable Trust Number
2. ADDRESS (Street)	(City)	(State)	(Zip Code)	Phone
2 a State kind of Annual Entertainment Act	ivity or Sala	h Indicato ki	ind of donation that will be so	sligited
3 a. State kind of Appeal, Entertainment, Acti	ivity or Sale	b. Indicate ki	ind of donation that will be so	DICITED
c. Location of activity (venue name or addres	ss)	d. Inclusive of From:	dates of solicitation	То:
e. Dates to be held		f. Indicate Go	oal Set	
4. State specific purpose and use to which pr	roceeds will be applied.			
5. Name and address of organization benefit	ing from solicitation.			
6. Solicitation by: (Check applicable categorie	es)			
☐ Box Office Sales ☐ Radio/TV	☐ Paid Solicitors	☐ Mail	☐ Volunteer Solicitors	☐ Newspaper ☐ Internet
☐ Telemarketing ☐ Storefronts/	/Door-to-Door	☐ Other (Sp	pecify)	
7. Will percentages, commissions, salar To solicitors? ☐ Yes ☐ No	ies, or other compensation	ons be payable to	commercial/professional	fundraisers?
If yes, what is the name of the Commercia	al Fundraiser?			
B.Itemize anticipated expenditures connec	cted with this solicitation of	or activity:		
Printing Postage Stationery Telephone Rental – Storeroom, Hall, etc. Rental or Purchase of Equipment Reservation Charges (\$ per persod (Luncheon, Dinner, etc.) Items for Resale Food Merchandise Decorations, Favors	son)	Adverti- Permits Transp Music ( Enterta Salarie: Informa		
			TOTAL	 \$

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Organization:	
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## IMPORTANT INFORMATION

	1.	Attach	the	following	with the	com	pleted	form:
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- (a) Copy of articles of incorporation, constitution or other rules of operation (including amendments).
- (b) Copy of bylaws.
- (c) Copy of Internal Revenue Service exemption letter.
- (d) Copy of State Franchise Tax exemption letter.
- (e) California Charitable Trust Number.
- (f) If solicitation is on behalf of any other organization, a written statement (letter of authority) from said organization signed by two of its officers, granting permission to use its name.
- (g) Information Card Processing Fee of \$62.00 made payable to: "City of Los Angeles" (check or money order).

	If information is not attached, indicate after each item Failure to provide the requested information will delay		
2.	The following additional information may be requ  (a) Statement of accomplishments for last calendar y  (c) Name and location of bank account.  (e) Name(s) of persons or any current agent or emp	year. (b) Proposed (d) Names ar	budget (in detail).  Indicate the detail of
	We the undersigned have read and understand Articl persons to solicit for the purposes named above we visolicitation.		
	We the undersigned have <b>not</b> read Article 4, Chapter	r IV, Los Angeles Muni	cipal Code. Please provide a copy of said Article.
	e the undersigned agree to <b>submit within 30 days</b> afte tivity form itemizing all receipts and expenditures.	er the completion of the	e solicitation, a completed Report of Results of
	Signatures of two boar	rd members of the or	ganization are required.
	a Type or Print Name, Title and Address of Board Member		Business Phone No.
		Signature	Home Phone No.
	b. Type or Print Name, Title and Address of Board Member		Business Phone No.
		Signature	Home Phone No.
	c. Type or Print Name, Title and Address of Person in Charge of Appeal / Event		Business Phone No.
	(Name will appear on Information Card)		Home Phone No.
		Signature	Email