VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES OFFICE OF CHARITABLE AND REGULATORY PROGRAMS

PO Box 526 • Richmond, VA 23218-0526 (804) 786-1343 • www.vdacs.virginia.gov

OCRP-120 Revised 05/2023

SOLICITATION NOTICE FORM 120

| "√" | This Solicitation Notice is: |
|-----|---|
| | New |
| | An amended version of a form previously filed |

Pursuant to §57-61(D) of the Code of Virginia (1950), as amended, professional solicitors shall complete this Solicitation Notice in its entirety. Any changes to this information must be filed, within 7 days of the change(s), on an amended Solicitation Notice.

Professional solicitors shall submit a properly completed Solicitation Notice for every fundraising campaign, as well as on the <u>anniversary date</u> of the signed contract for any continuous fundraising campaign. Incomplete forms and attachments shall not be considered as filed.

Professional solicitors shall submit, <u>upon cancellation</u> of a fund-raising campaign prior to solicitations, a copy of page 1 of this Solicitation Notice as previously filed, with a statement indicating that the campaign has been canceled.

CHARITABLE OR CIVIC ORGANIZATION INFORMATION

| State | Zip Code | |
|-------------------------------|--|--|
| Telephone number | | |
| Totophone number | | |
| | | |
| | | |
| Solicitor's telephone number | | |
| | | |
| bcontractors' names, addresse | | |
| | | |
| mended Solicitation Notic | e within 7 days | |
| | | |
| | | |
| | Telephone number Solicitor's telephone becontractors' names, addresse eted Form 121 Consent To So | |

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| | Percent of gross contributions the charitable or civic organization will receive OR | | | | | | | |
|-----|---|--|--|--|--|--|--|--|
| | se state the terms upon which a determination will be made as to the amount of the gross revenue from the tation campaign the charitable or civic organization will receive: | | | | | | | |
| | | | | | | | | |
| | Description of solicitation (e.g., telephone, direct mail, email, special event, Internet, national media, donor renewa donated goods, etc.): | | | | | | | |
| | | | | | | | | |
| ΤΕ | LEPHONE ROOM INFORMATION | | | | | | | |
| 11. | Name of telephone room or call center director: | | | | | | | |
| | Director's telephone number: | | | | | | | |
| 12. | Physical Address of telephone room or call center: | | | | | | | |
| | Street | | | | | | | |
| | City State Zip Code | | | | | | | |
| | If more than one phone room is used, attach a listing and indicate for each if it is the professional solicitor's | | | | | | | |
| | own phone room or that of an agent or subcontractor. | | | | | | | |
| 13. | Pursuant to the requirements under the Virginia Solicitation of Contributions Law (Law), every professional solicitor who solicits contributions from a prospective contributor in the Commonwealth: (i) shall identify himself and his employer; (ii) shall disclose that he is a paid solicitor; and (iii) shall further disclose, in writing, the fact that, for Virginia residents, a financial statement for the last fiscal year is available from the Department of Agriculture and Consumer Services. Has this information been included in all scripts/materials provided to donors? | | | | | | | |
| | Yes No If "No," attach an explanation as to why the disclosures are not used in the scripts/materials provided to donors. | | | | | | | |
| 14. | Has any of the persons conducting these solicitations ever been convicted in any jurisdiction of embezzlement, larceny or other crimes involving the obtaining of money under false pretenses, or the misapplication of funds impressed with a trust? | | | | | | | |
| | Yes No If "Yes," attach a copy of the court Order that states the reasons for the conviction, or a copy of any applicable pardon. | | | | | | | |
| 15. | Are any of the persons conducting this solicitation <u>currently</u> enjoined by any court or otherwise prohibited from soliciting in any jurisdiction? | | | | | | | |

Yes No **If "Yes,"** attach a copy of the Order that states the reasons and time period for the injunction or prohibition.

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SPONSOR'S CONSENT TO SOLICIT AND CERTIFICATION

Pursuant to §57-57(F) of the Code of Virginia, the two undersigned officers hereby give consent for one year or less to the professional solicitor named above to solicit charitable contributions for the organization named on line 1. NOTE: Signatures must be original/wet signatures. Digital signatures and copies will not be accepted. This authorization shall be valid from (one year or less): to: We also hereby <u>certify</u> that: a) the charitable or civic organization named on this form is currently registered, or exempt from annual registration, with the Virginia Office of Charitable and Regulatory Programs; b) the Solicitation Notice and accompanying materials are true and complete; c) the bank account for the deposit of funds raised during this campaign includes the name of the organization named on line 1; and d) that, if the professional solicitor receives or collects the donations, s/he has promised to provide us with copies of the bank statements on a monthly basis. (1) By:_ (2) By: Officer's signature Officer's signature Officer's printed name Officer's printed name Date: Date: OATH OR AFFIRMATION - PROFESSIONAL SOLICITOR I hereby certify, under penalty of perjury, that all information contained in this notice and all accompanying materials is true and complete. I further affirm that I accept responsibility for all actions by any agent or subcontractors that may be used in conducting this campaign, including, but not limited to, all required disclosures, any misrepresentations, or other unprofessional actions, in accordance with §§ 57-55.2 and 57-57 of the Code and Sections 2VAC 5-610-70 and 80 of the Rules Governing the Solicitation of Contributions. I further affirm that the professional solicitor filing this form has fully complied with registration requirements in the Commonwealth of Virginia. Signature of authorized representative Print name of Professional Solicitor Date:

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REQUIRED ATTACHMENTS

I (We) have attached the following required attachments (" $\sqrt{}$ " all that apply):

| "√ " | Attachment | | | | |
|------|--|--|--|--|--|
| | List of subcontractor's company (or proprietors') name, address, and telephone number. (Question 5) | | | | |
| | List of additional phone rooms/call centers used, indicating whether the room is the professional solicitor's phone room or the agent/subcontractor's. (Question 10) | | | | |
| | Copies of any applicable court orders. (Questions 11 & 12) | | | | |
| | Name and address of the bank where deposits from this campaign will be deposited. | | | | |
| | Copy of signed contract between the professional solicitor and the charitable/civic organization. | | | | |
| | Copy of signed contract(s) between the professional solicitor and any agent(s) or subcontractor(s). | | | | |
| | Copy of completed Form 121 (Consent to Solicit) for each subcontractor used for this campaign. | | | | |