



CITY OF LOS ANGELES

NOTICE OF INTENTION CHECKLIST

(In accordance to LAMC, Section 44.10)

Organization Name: _____

The application will be considered incomplete if any questions and/or fields are left blank or unanswered. All fields requiring signatures, initials, dates and fees must be completed or the application will not be accepted. All incomplete applications will be returned. The cost of the Information Card is \$60.

Forms & Supplementary Documents Needed to Complete the Notice of Intention Application		Complete	
		Yes	N/A
1	All fields of the Notice of Intention (NOI) Application must be complete		
2	The application must be signed by two officers of the organization		
3	Copy of the Articles of Incorporation, constitution or other rules of operation <i>(All amendments must be included.)</i>		
4	Copy of Bylaws		
5	Copy of Internal Revenue Service Exemption Letter		
6	Copy of State Franchise Tax Exemption Letter		
7	California Charitable Trust Number		
8	A written statement/letter of authority from the organization, if the solicitation is on behalf of any other organization. The provided document must be authorized and signed by two officers and must state "granting permission to use the organization's name."		
9	Information Card processing fee of \$60 must be paid and made payable to "City of Los Angeles." <i>(Payments must be in the form of checks or money orders only)</i>		
10	Detailed proposed budget		
11	Name and address of the bank where the account is held		
12	Name of all authorized signers		
13	Name(s) of person(s) or any current agent or employee engaging in solicitation of funds		
14	Statement of Accomplishment for the prior calendar year <i>(Upon request of the Charitable Services Section investigator)</i>		

Once the Notice of Intention form is complete, please email it to:

pccharity@lapd.online

or Mail to:

***Charitable Services Section
Los Angeles Police Commission
100 W. 1st St., Room 147
Los Angeles, CA 90012***



CITY OF LOS ANGELES
NOTICE OF INTENTION
TO SOLICIT CHARITABLE CONTRIBUTIONS

Please review and completely fill out this form leaving no fields blank. Once completed, file the form with the Charitable Services Section at least fifteen (15) business days prior to the solicitation which is not to be started until an information card is issued. Please review the Important Information on Page 2. Non-compliance with or violation of the Los Angeles Municipal Code, Chapter IV, Article 4 is a misdemeanor.

Organization Name (Complete name as registered with the IRS):
California Trust Number: Contact Number:
Address:
City: State: Zip:
Type of Appeal, Entertainment, or Activity:
Type of Donation To Be Solicited:
Location of Activity:
Solicitation Dates From: To:
Dates To Be Held:
Indicate Goal Set:
Specify Purpose and Use To Which The Proceeds Will Apply:
Name of The Organization Benefiting From The Solicitation:
Address of The Organization Benefiting From The Solicitation:
City: State: Zip:

Solicitation by (Check all that are applicable):
Box Office Sales Internet Mail Paid Solicitors Radio/TV
Storefronts/Door-to-Door Telemarketing Volunteer Solicitors Other (Specify):
Will percentages, commissions, salaries, or other compensations be payable to commercial/professional fundraisers? Yes No
Will percentages, commissions, salaries, or other compensations be payable to solicitors? Yes No

Itemize all anticipated expenditures connected with this solicitation or activity:

Table with 5 columns: Item, Amount (\$), Item, Amount (\$), Item, Amount (\$). Rows include Advertising/Publicity Costs, Music (Band, Orchestra, etc.), Stationary, Costumes, Permits/License Fees, Telephone, Decorations/Favors, Postage, Transportation, Entertainers, Printing, Uniforms, Food (Lunch, Dinner, etc.), Prizes, Additional Expenditures (Specify), Information Card Processing Fee, Purchase of Equipment, Items for Resale, Rental of Equipment, Merchandise, Reservation Charges (\$ per person), Total \$

For Charitable Services Section Only

Date Received: Investigator Assigned to:
Organization No: Check No:



CITY OF LOS ANGELES
NOTICE OF INTENTION
TO SOLICIT CHARITABLE CONTRIBUTIONS

IMPORTANT INFORMATION

1. Attach the following with the completed form (Page 1):

- a. Copy of articles of incorporations, constitution or other rules of operations (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 the solicitation is on behalf of any other organization, a written statement (letter of authority) from the said organization signed by two of its officers granting permission to use its name.
- g. The Information Card Processing Fee of **\$60.00** via check or money order made payable to: **City of Los Angeles**.

If any of the items above are not attached, please check the box “NONE” or “ALREADY ON FILE.” Be advised that failure to provide the requested information above will delay the processing of the Notice of Intention.

2. The following items below may be required upon request:

- a. Statement of accomplishments for the last calendar year.
- b. Detailed proposed budget.
- c. The name and location of the bank account.
- d. The name(s) and title(s) of all person(s) authorized to sign checks.
- e. The name(s) of person(s) or any current agent(s) or employee(s) engaging in the solicitation of funds.

We, the undersigned, have read, understand and agree with the Los Angeles Municipal Code, Chapter IV, Article 4; and before authorizing persons to solicit for the purposes named above, we will require them to be familiar with Article 4 prior to making any such solicitation.

We, the undersigned, have **not**, read the Los Angeles Municipal Code, Chapter IV, Article 4; and require a copy of the aforementioned Article.

We, the undersigned, agree to submit a completed Report of Results Activity form itemizing all receipts and expenditures within 30 days after completion of the solicitation.

Signatures of two board members of the organization are required to execute this form

_____ Type or Print Name	_____ Signature	_____ Date	_____ Contact Number	_____ Email Address
_____ Type or Print Name	_____ Signature	_____ Date	_____ Contact Number	_____ Email Address
_____ Person In Charge - Print Name	_____ Signature	_____ Date	_____ Contact Number	_____ Email Address

THE INFORMATION CARD WILL BE E-MAILED TO THE PERSON IN CHARGE OF THE APPEAL UNLESS OTHERWISE NOTIFIED.



CITY OF LOS ANGELES *REPORT OF RESULTS CHECKLIST*

Organization Name: _____

*In accordance to the LAMC Section 44.10, the Report of Results Activity form must be filed within **30 days** of the termination date of the solicitation. All receipts, expenses and distribution of proceeds for events identified in the INFORMATION CARD must be provided and must furnish all details related to the event. In addition, the form must be signed by two officers of the organization; however if signature from two officers is unavailable, natural persons authorized by the organization or the person filing the report will be accepted.*

Forms & Supplementary Documents Needed to Complete the Report of Results Form		Complete	
		Yes	N/A
1	All Receipts (If requested by Charitable Services Section staff)		
2	Fundraising Expenses (If requested by Charitable Services Section staff)		
3	Proof of Distribution of funds which shall include the amount(s) and the date(s)		
4	The Report of Results Form requires original signatures from TWO officers from the organization		

Once the Report of Results form is complete, please email it to:

pccharity@lapd.online

or Mail to:

***Charitable Services Section
Los Angeles Police Commission
100 W. 1st St., Room 147
Los Angeles, CA 90012***



CITY OF LOS ANGELES REPORT OF RESULTS OF ACTIVITY

Due Date: _____

Date Received: _____
Verified By: _____
Organization No: _____
Card No: _____

Name of Organization: _____

Address of Organization: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____ Contact No: _____

Type of Activity: _____ Date held from: _____ To: _____

RECEIPTS:

Admission Sales _____	Returns From Sales _____	TOTAL RECEIPTS _____
Cash Contributions _____	Sale of Advertising _____	LESS APPLICABLE TAXES _____
Membership Fees _____	Ticket Sales _____	GRAND TOTAL RECEIPTS _____
Pledges _____	Other Sources (Itemized) _____	

FUND-RAISING EXPENSES:

Salaries, Wages, Commissions (To Whom) _____	Music _____
Rentals/Purchase of Equipment _____	Prizes _____
Printing, Postage, Stationery _____	Other (list & itemize below) _____
Telephone, Television or Radio Time _____	_____
Advertising/Publicity Costs _____	_____
Decorations, Favors, Costumes, Uniforms _____	_____
Cost of Merchandise, Food, etc. for Resale _____	
Information Card Processing Fee _____	
Reservation Charges _____	FUND-RAISING EXPENSES TOTAL _____

NET AMOUNT REMAINING FOR CHARITABLE PURPOSES _____

DISTRIBUTION OF FUNDS:

Funds Distributed To: _____

Amount Released: _____ Date Released: _____

This report must be signed by TWO Officers of the organization and filed with Charitable Services Section, Los Angeles Police Commission, within 30 days after the close of the solicitation.

_____	_____	_____	_____
Type or Print Name	Signature of Officer	Date	Contact Number

_____	_____	_____	_____
Type or Print Name	Signature of Officer	Date	Contact Number