

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

PO Box 1163 - Richmond, VA 23218
Phone: 804-786-1343 • FAX: 804-225-2666 • www.vdacs.virginia.gov

OCRP-120 Revised 08/13

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 anniversary date of the signed contract for any continuous fundraising campaign. Incomplete forms and attachments shall not be considered as filed.

Professional solicitors shall submit, upon cancellation 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

- _____
Name of charitable or civic organization sponsoring the campaign
- _____
Address of charitable or civic organization sponsoring the campaign

City State Zip Code
- _____
Name of contact person Telephone number

PROFESSIONAL SOLICITOR INFORMATION

- _____
Name of professional solicitor Solicitor's telephone number
- Do you or your company hire one or more subcontractors? ___Y ___N
If yes, attach a list of their company (or proprietors') names, addresses, and telephone numbers.

EVENT INFORMATION

****If any of the dates listed below change, you must file an amended Solicitation Notice within 7 days of the change****

- Dates of solicitation: From ____ / ____ / ____ to ____ / ____ / ____
mo. day yr. mo. day yr.
- Date of special event, if any: ____ / ____ / ____
mo day yr.
- Description of solicitation (e.g., special event, Internet, donor renewal, donated goods, etc.):

TELEPHONE ROOM INFORMATION

9. Name of telephone room or call center director: _____

Director's telephone number: _____

10. 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.

11. 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 or No) _____. If "Yes," attach a copy of the court Order that states the reasons for the conviction, or a copy of any applicable pardon.

12. Are any of the persons conducting this solicitation currently enjoined by any court or otherwise prohibited from soliciting in any jurisdiction?

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

SPONSOR'S CONSENT TO SOLICIT AND CERTIFICATION

Pursuant to subsection F of §57-57 (Prohibited acts), Code of Virginia (1950), as amended, 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.

This authorization shall be valid from (one year or less): _____ / _____ / _____ to: _____ / _____ / _____
mo. day yr. mo. day yr.

We also hereby certify 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: _____

(Officer's signature)

(Officer's printed name)

(2) By: _____

(Officer's signature)

(Officer's printed name)

Title: _____

Title: _____

Date _____ / _____ / _____
mo. day yr.

Date: _____ / _____ / _____
mo. day yr.

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
of Professional Solicitor

Print name

Date: / /
 mo. day yr.

REQUIRED ATTACHMENTS

I (We) have attached the following required attachments ("X" all that apply):

"√"	ITEM
	A list of each subcontractor's company (or proprietors') name, address, and telephone number.
	A listing of each professional solicitor's own phone rooms.
	A listing of each agent(s) or subcontractor(s) phone room(s).
	Copies of any applicable Court Orders.
	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 or civic organization.
	Copy of signed contract(s) between the professional solicitor and any agent(s) or subcontractor(s).