

**SOLICITATION NOTICE**

***INSTRUCTIONS:***

This notice must be filed with the Department of Consumer Protection, Public Charities not less than 20 days prior to the start of the solicitation campaign. All sections should be fully completed or marked N/A if they do not apply. You must provide Connecticut Registration numbers and email addresses for the solicitor and charitable organization. Names in sections 1 and 2 must be as on file with the Public Charities. Email completed Solicitation Notice with attachments to: [DCP.PublicCharities@ct.gov](mailto:DCP.PublicCharities@ct.gov) or mail to: Public Charities, Department of Consumer Protection, 450 Columbus Blvd., Ste 801, Hartford, CT 06103

1. Name and Address of Paid Solicitor

2. Name and Address of Charitable Organization

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Connecticut Paid Solicitor Registration Number: \_\_\_\_\_

Connecticut Charitable Organization Registration

Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

3. Date soliciting will begin: \_\_\_\_\_

Date soliciting will end: \_\_\_\_\_

4. Minimum percentage of gross receipts guaranteed to charitable organization by contract: \_\_\_\_\_%

5. Soliciting will be conducted by: (check all that apply)

Telephone

Electronic media (TV, radio)

Door-to-door

Mail

Print media (magazines, newspapers)

Other (describe) \_\_\_\_\_

6. If soliciting will be conducted by telephone, state the address and telephone number for each location from which calls will be made, and the name of the office manager or other person in charge at each location. If more than two locations, continue on a separate sheet.

Address \_\_\_\_\_

Address \_\_\_\_\_

Phone no. \_\_\_\_\_

Phone no. \_\_\_\_\_

Manager \_\_\_\_\_

Manager \_\_\_\_\_

7. Will the solicitation campaign include the sale of goods or services? Yes  No

If yes, check all of the following that apply:

Tickets to an event or performance

Advertising space in a program book, journal or other publication

Other (describe: \_\_\_\_\_)

8. If tickets to an event or performance will be sold, state: date of event \_\_\_\_\_

location of event \_\_\_\_\_ type of event \_\_\_\_\_

9. For oral solicitations, **attach** a copy of the text or script.

10. **Attach** a complete copy of written solicitation material and the written pledge confirmation mailing including the receipt or invoice.

11. **Attach** a signed copy of the contract between the solicitor and the charitable organization covering the period from the beginning solicitation date to the ending solicitation date shown above.

12. State the account number and location of each bank account where receipts for the solicitation campaign will be deposited. If there are more than two accounts, continue on a separate sheet.

Account Number \_\_\_\_\_

Account Number \_\_\_\_\_

Bank Name \_\_\_\_\_

Bank Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

City, State, Zip \_\_\_\_\_

13. List the names and complete residence addresses of all individuals who will solicit during the campaign. If more space is needed, continue on a separate sheet.

Names:

Addresses:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Have any of the persons listed in response to no. 6 or no. 13 ever been convicted by a court of any state or the United States of any felony, or of any misdemeanor involving dishonesty or arising from the conduct of a solicitation for a charitable organization or charitable purpose? Yes  No

If yes, attach a detailed explanation.

**Any material change to the information provided in this notice must be reported to the Department of Consumer Protection, Public Charities within seven days.**

Certification by Paid Solicitor

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

Before me personally appeared \_\_\_\_\_, the signer of the foregoing Solicitation Notice, who has acknowledged him/herself as such officer of the said organization, and as such officer being authorized to do so, has read the foregoing Solicitation Notice, and has before me deposed and said that the above statements, and all attachments, are true and correct to the best of his/her knowledge and belief.

Signed:

\_\_\_\_\_  
Notary Public

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
(seal)

Certification by Charitable Organization

I,

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Title

of

\_\_\_\_\_, under penalty of false statement,  
Name of charitable organization

hereby certify that I am authorized to sign this certification and that the statements made in the foregoing Solicitation Notice and all attachments, including samples of printed solicitation material and the text or script of any oral solicitation, are true and correct to the best of my knowledge and belief.

Signed: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_