

City of Los Angeles

Received _____

Verified _____

Org. # _____

REPORT OF RESULTS OF ACTIVITY

DUE DATE:

Card #: _____

Name of Organization Address and Zip Code

Telephone Kind of Activity

Date held from: _____ to: _____

RECEIPTS:

Cash Contributions _____	\$ _____
Ticket Sales or Admission Charges _____	_____
Sale of Advertising Space _____	_____
Returns from Sales _____	_____
Membership Fees _____	_____
Amounts Received from Other Sources (itemize) _____	_____
Pledges _____	_____
TOTAL _____	_____
Less Federal, State and City taxes (if applicable) _____	_____
TOTAL RECEIPTS	\$

FUND-RAISING EXPENSES:

Salaries, Wages, Commissions (To Whom) _____	\$ _____
Music _____	_____
Rentals or Purchase of Equipment _____	_____
Printing, Postage, Stationery _____	_____
Telephone, Television or Radio Time _____	_____
Advertising/Publicity Costs _____	_____
Decorations Favors, Costumes, Uniforms _____	_____
Costs of Merchandise, Food, etc., for Resale _____	_____
Prizes _____	_____
Reservation Charges _____	_____
Information Card Processing Fee _____	42.00
Other Expenditures (itemize) _____	_____
TOTAL FUND-RAISING EXPENSES	\$
NET REMAINING FOR CHARITABLE PURPOSES	\$

DISTRIBUTION OF FUNDS

To Whom: _____

Date Released: _____ Amount \$ _____

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.

Date Submitted

Signature of Officer Title Address and Zip Code Telephone

Signature of Officer Title Address and Zip Code Telephone