

Charitable Services Section  
Los Angeles Police Commission  
100 West First Street, Room 147  
Los Angeles, CA 90012  
(213) 996-1260  
(213) 996-1279 (Fax)

# 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 _____	_____
<b>TOTAL</b> _____	_____
Less Federal, State and City taxes (if applicable) _____	_____
<b>TOTAL RECEIPTS</b> .....	<b>\$</b> .....

### 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 _____	62.00
Other Expenditures (itemize) _____	_____
<b>TOTAL FUND-RAISING EXPENSES</b> .....	<b>\$</b> .....
<b>NET REMAINING FOR CHARITABLE PURPOSES</b> .....	<b>\$</b> .....

### 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