

ANNUAL FUNDRAISING ACTIVITY REPORT (MAINE)
TO BE FILED NO LATER THAN 9/30 ANNUALLY
BY

CHARITABLE ORGANIZATION

For Calendar Year: January 1, 2008 to December 31, 2008

1. Name of Charitable Organization: _____
- a. License #: CO _____
- b. Mailing Address: _____

- c. Telephone #: _____
- d. E-mail Address #: _____

For each Professional Solicitor, Professional Fund-raising Counsel and/or Commercial Co-venturer with which the Charitable Organization has contracted, complete items 2, 3 and 4, respectively, and then complete item 5. If the Charitable Organization engaged no Professional Solicitor, Professional Fund-raising Counsel or Commercial Co-venturer, then enter "N/A" for items 2, 3 and 4 and complete item 5 a & b. (Copy if additional sheets are necessary):

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2. Name of Professional Solicitor (if applicable): _____
- a. License #: PS _____ *(It is illegal for you to contract with an unlicensed Professional Solicitor.)*
- b. Mailing Address: _____

- c. Telephone #: _____
- d. E-mail Address #: _____
- e. Dates of fundraising campaign: ___/___/___ - ___/___/___
- f. Total dollar amount raised in campaign (within the calendar year): \$ _____
- g. Total dollar amount received by Charitable Organization: \$ _____
- h. Total dollar amount retained by Professional Solicitor: _____
(The sum of "g" and "h" should equal "f.")

3. Name of Professional Fund-raising Counsel (if applicable): _____

a. License #: PFRC _____ *(It is illegal for you to contract with an unlicensed Professional Fund-raising Counsel.)*

b. Mailing Address: _____

c. Telephone #: _____

d. E-mail Address #: _____

e. Dates of fundraising campaign: ___/___/___ - ___/___/___

f. Total dollar amount paid by Charitable Organization to Professional Fundraising Counsel: \$ _____

g. Services Performed: _____

(A person who, in exchange for a fee or other compensation, solicits contributions from the public on behalf of a charitable organization, exercises custody or control over contributions, or employs someone who does so, must become licensed as a Professional Solicitor, and not as a Professional Fund-raising Counsel.)

4. Name of Commercial Co-venturer: (if applicable): _____

a. License #: CCV _____ *(It is illegal for you to contract with an unregistered Commercial Co-venturer.)*

b. Mailing Address: _____

c. Telephone #: _____

d. E-mail Address #: _____

e. Dates of fundraising campaign: ___/___/___ - ___/___/___

f. Total dollar amount raised by CCV for Charitable Organization during campaign: \$ _____

g. Dollar amount and/or percentage of purchase price per item sold received by Charitable Organization: \$ _____ and / or _____ %

5. For the entire year --

a. Total dollar amount raised from contributions from the public (not just in Maine):
\$ _____

b. Total dollar amount (portion) received by Charitable Organization:
\$ _____

Percentage of total dollar amount raised: _____% (*"b" divided by "a"*)

c. Total dollar amount (portion) retained by Professional Solicitors:
\$ _____

Percentage of total amount raised: _____% (*"c" divided by "a"*)

*(Note: The dollar sum of "b" and "c" should equal "a."
The percentage sum of "b" and "c" should equal 100%.)*

Additional Information or Comments

Name (printed or typed)

Title (printed or typed)

Signature

____/____/____
Date

9/20/07