CITY OF CROSSVILLE, TENNESSEE SOLICITATION PERMIT APPLICATION

•		remm, .
1. Name of pe	rson or organization	P/Community Mediation Conter In
Address	s of headquarters of application:	mailing Address PO, Bax 522
Plea	sant Hill, TN 38578	- Street Address 584 Highway TO BA
Cros	ssille To	
2. Name of ap	plicant's principal officers and man	agers (if any):
Preside	ent Joe Gillings	Address
Vice-Pre	es. <u>Ken Steadman</u>	Address
Secreta	ary <u>levoy Hammon</u>	Address
Manage	er Rith Young	Address
Director	rs: Andrea Von Reck	Address
	Best Adams	Address
	In Goodwin	Address
Other:	(Name)	
 		Address
· · · · · · · · · · · · · · · · · · ·		Address
3. Have you	attached to this application a true	e and correct copy of the resolution (if any) authorizing the
applicant to un	dertake the proposed solicitation co	overed by the application? Yes No
4. The purpose	e for which the solicitation is to be r	made is the following: Raise Funds for
VORP/	Commundy Mediation	on Center, Inc. a 501(c)3
Servine	a Crossville & Cun	uberland County
(Attach	J a statement if more space is need	ed.)
	•	
5. The total am	nount of funds to be raised is estim	ated to be: 5,000
The receipts	e from the colitation will be used or	r disposed of as follows: (Attach a statement if more space is
	provide Tree AC	
C		Conflict.
Der vice	5 TON TRYONCE IN	<u> </u>
7 The need fo	or the contributions to be solicited	is as follows: (This statement must be specific, supported by
		atement can be used.) <u>United Fund</u>
oasons, and n	aranapis, iigaios an amasiisa sii	

18. The following is additional information believed by applicant to be diserted to the board in determining the
kind and character of the proposed solitation: VORP has several the people of Crossiv
for over 20 years. Our goal is to restore victimis And hold
Offenders personally accountable for their actions; saving tax payers
19. Is applicant a non-profit exempt organization under 501(c)(3) of the Internal Revenue Code (26 U.S.C.
§501(c))? Yes 🗌 No
REQUIRED ATTACHMENTS:
A statement giving the terms and contents of all agreements, both oral and written, with all agents,
solicitors, promoters, managers, or conductors in connection with the proposed solicitation covered in this
applications. Not Applicable
A financial statement for the last preceding fiscal year of all funds collected for charitable purposes by the
applicant, giving the amount of money raised, together with the cost of raising it and the final distribution
thereof.
THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.
(This application must be signed by the individual/owner, or by a partner, or by an officer of the corporation.)
BY: Ritalbus 9/27/13
Signature of representative Date
Rita Young, Director 74 Westway Crossville, TW
Typed or written name, address, and title
Sworn and subscribed to before me, this 27 day of September, 2013.
Sworn and subscribed to before me, misk- day or
1/000 Ale le
Notary Public
My Commission Expires:

Mail/deliver to: Sally Oglesby, City Clerk, City of Crossville, 392 N. Main, Crossville, TN 38555



Forms 990 / 990-EZ Return Summary

For calendar year 2011, or tax year beginning 07/01/11 , and ending 06/30/12

**************************************		2-1402856	
VORP/Community	Mediation Center, Inc		
Net Asset / Fund Balance at Beginning of Yea		80,511	
Revenue			
Contributions	<u>84,296</u>		
Program service revenue	193		
Investment income	15		
Capital gain / loss			
Special events:			
Gross revenue	-		
Direct expenses	_	·	
Net income			
Other income			
Total revenue	84	4,504	
Expenses			
Program services	4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	•	
Management and general			
Fundraising			
Total expenses	92	2,329	
Excess / (deficit)		-7,825	
Other changes			
Net Asset / Fund Balance at Er	d of Year	72,686	
Reconciliation of Revenue		onciliation of Expenses	
otal revenue per financial statements	Total expenses per fin	ancial statements	
ess:	Less:		
Unrealized gains	Donated services		
Donated services	Prior year adjustm	Prior year adjustments	
Recoveries	Losses		
Other	Other	<u></u>	
us:	Plus:		
Investment expenses	Investment expens	ses	
Other	Other		
Total revenue per return	Total expense	es per return	
	Balance Sheet		
Begin		Differences	
	3,851 76,887		
Liabilities	3,340 4,201		
	0,511 72,686	-7,825	
1151 00000			
	discellaneous Information		
Amended	return		
Return / e	tended due date <u>11/15/12</u>		
	le penalty		