CITY OF CROSSVILLE, TENNESSEE SOLICITATION PERMIT APPLICATION

For Department Use Only:	
Date Received: 7/15/2020	
Date Issued:	
Permit #:	
L.,	

		Permit #:
Name of person of the contract of the con	or organization FAIRFIELD	GLAVE LIONS CLUB
•	eadquarters of application:	
		ILADE, TN 38558
	t's principal officers and managers (i	
President	RICK BORGHI	Address 58 INWOODTER 38558
Vice-Pres.	Jot FITZGERALO	Address 123 TRENTWOOD DR 38558
Secretary	LINDA HNDERSON	Address 152 MOUNTAIN VIEW DR 38558
Manager	10/19	Address 21 AMBSBURY CT 38555
Directors:	JUM HARRIS	/\ddic36
	JACK WILSON	Address 237 KEATING LP 38555
	Susin Borgiti	Address 58 /www.ren 38558
Other:	(Name)	1
TAEASUREA-	DUANE WEST	Address 113 HUNTINGTON DR 3855
·		Address
applicant to undertak 4. The purpose for w	e the proposed solicitation covered the high solicitation is to be made is	the following: To RAISE FUNDS FOR THE
		IP PROJECTS THROUGH THE SALE OF
	EESE TO AN ESTABLISHED	BASE OF CHSTOMERS.
(Attach a stat	ement if more space is needed.)	
5. The total amount	of funds to be raised is estimated to	be: 4,000 £5,000
6. The receipts from	the solicitation will be used or dispos	sed of as follows: (Attach a statement if more space is
		MIBUTED AS DETERMINED BY
	BUARD DE DIRECTORS	
7. The need for the		llows: (This statement must be specific, supported by can be used.)SEE_AF_4.

8. The following person(s) will disburse the receipts of this solicitation. (Give name, address, and title)
9. The following person(s) will be in direct charge of conducting the solicitation: (Give name, address, and title) Norm of LINDA ANDERSON 152 MOUNTAIN VIEW DA, FFG, \$8558 CHAIR PERSONS, CHEESE SALE
10. The following promoters are connected, or will be connected with the solicitations: (Give name, address, and title)
11. The method or methods to be used in conducting the solicitations are as follows: (Explain on attached sheet, if necessary) OCUB MEMBERS PASS OUT ORDER FORMS, TAEN DELIVER, ACSO, MEMBERS SELL DAILY AT THE VILLAGE GREEN MALL IN FFG.
12. The proposed dates for the beginning and ending of the solicitations are: Beginning Date <u>SEPT 1, 2020</u> Ending Date <u>DCTOBER 31, 2020</u>
13. The estimated total cost of the entire solicitation campaign is No Expense orner THAN COST OF CHEESE.
14. The wages, fees, commissions, expenses or emoluments to be expended or paid to any person in connection with such solicitation, and the name and addresses of all such persons are the following: NoNE
15. A full statement of the character and extent of the charitable work being done by the applicant with the City of Crossville is as follows: (explain on attached sheet if more space is needed.) THE CLUB DOES VISION AND HEARING SEREENING IN THE CLIMBERCAND COUNTY SCHOOLS, HAS SCHOLARSHIP PROGRAM FOR SR. STUDENTS, KID SIGHT FOR YOUNG CHILDREN, AND USUACCY SEND & CHILDREN TO DIABETIES CAMP EACH SUMMER. 16. Will the actual cost of the solicitation exceed 25% of the total amount to be raised? Yes No
17. Does applicant certify that if a permit is granted, it will not be used or represented in any way as an endorsement of the City of Crossville or by any department or officer thereof? ☑ Yes ☐ No

18. The following is additional information believed by applicant to be useful to the Board in determining the
kind and character of the proposed solicitation: IN ADDITION TO THE DISION HEARING,
KIDSAHT AND THE SCHOLARSHIPS AND DIABETIS CAMP, WE ALSO PAULDE GLASSES
10 NEEDY STUDENTS AND/OR ADULTS.
19. Is applicant a non-profit exempt organization under 501(c)(3) of the Internal Revenue Code (26 U.S.C.
§501(t))?
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
application. 🔀 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: Jonna (J. J. 15/20 Signature of representative Date
Signature of representative Date
NORMAN A. ANDERSON
Typed or written name, address, and title
Sworn and subscribed to before me, this 15th day of 1000, 2000, 2000
Table 1
WHITE MANDERSON
Senda M Onderson Ed STATE 2
Notary Public
My Commission Evniros: AD ADA 3 205 Ex NOTARY / ES
My Commission Expires:

Return to: Valerie Hale, City Clerk, City of Crossville, 392 N. Main, Crossville, TN 38555 Or email to: malena.fisher@crossvilletn.gov