CITY OF CROSSVILLE, TENNESSEE SOLICITATION PERMIT APPLICATION

For Department Use Only:
Date Received:
Date Issued:
Permit #:

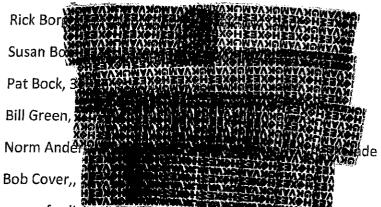
						Permit #:
1. Name	of persor	or organization	FAIRFIEL	O GLADE LIO.	NS CLUE	3 CHARITIES
				O Box 1475		
				AIRFIELD GL	ADE TA	38558
2. Name o	of applica	nt's principal off	icers and manag	ers (if any):	YOU VANOUS	WATER AND KAY HOKAY HOKAY
Pre	sident	CLARK ZE	DRIC	Address	AH EXCHE	XXII ELCH EXXII ET GALLE
Vice	e-Pres.		LELLAND		erie de la companya d	The second secon
Sec	retary	LINDA ANDER	RSON/MARY GI	হৈছ৵ Address_		
Man	nager			_ Address_	WKVAM MSXEE!	AMOUNTAIN A GLIALANT
Directors:	ctors:	SEF ATTA	CHED	Address		
				_ Address		
				_ Address		
Other:						
Othe	er:	(Name)				
Othe	er: 	(Name)		_ Address		
			cation a true ar	Address		lution (if any) authorizing th
Have you	u attach	ed to this applice the proposed s	solicitation cover	Address	of the resortion? \(\sum_Y	lution (if any) authorizing th
Have you policant to u	u attache undertake ese for wi	ed to this applice the proposed s	solicitation cover	Address	of the resortion? \(\sum_Y	lution (if any) authorizing th
Have you policant to use The purpo	u attachoundertake	ed to this applice the proposed so	solicitation cover	Address	of the resortion? Y	lution (if any) authorizing thes ⊠ No A/A 4 TTACNED
. Have you oplicant to u The purpo (Attack	u attache undertake ese for wi	ed to this applice the proposed so the solicitate ment if more spanning funds to be raise	solicitation cover ion is to be mad ace is needed.) sed is estimated	Address	of the resortion? [] Y SEE /	lution (if any) authorizing the Solution (if any) authorizing the second
. Have you oplicant to use The purpo (Attack) The total as	u attachoundertake	ed to this applice the proposed something the solicitate ment if more spansed to be raise solicitation will	solicitation cover ion is to be mad ace is needed.) sed is estimated be used or disp	Address	of the resolution? \(\text{Y} \) \[\sum_{\text{SEE}} \end{Arrowset} \] SEE (Attach)	lution (if any) authorizing the No N/A TTACHED
. Have you policant to use The purpo (Attack	u attachoundertake	ed to this applice the proposed something the solicitate ment if more spansed to be raise solicitation will	solicitation cover ion is to be mad ace is needed.) sed is estimated be used or disp	Address	of the resolution? \(\text{Y} \) \[\sum_{\text{SEE}} \end{Arrowset} \] SEE (Attach)	lution (if any) authorizing thes ⊠ No N/A 4 TTACNED

8. The following person(s) will disburse the receipts of this policitation. (Give name, add	dress, and title)
9. The following person(s) will be in direct charge of conducting the solicitation: (Give name title)	address, and
10. The following promoters are connected, or will be connected with the solicitations: (Give n and title)	name, address,
11. The method or methods to be used in conducting the solicitations are as follows: (Explain sheet, if necessary) MANNED STATIONS AT THE ENTRANCES TO WALMART AND A	n on attached
12. The proposed dates for the beginning and ending of the solicitations are: Beginning Date	
13. The estimated total cost of the entire solicitation campaign is	
14. The wages, fees, commissions, expenses or emoluments to be expended or paid to an connection with such solicitation, and the name and addresses of all such persons are the following	
15. A full statement of the character and extent of the charitable work being done by the applicant of Crossville is as follows: (explain on attached sheet if more space is தெச சாகப்பத	•
16. Will the actual cost of the solicitation exceed 25% of the total amount to be raised? ☐ Yes 🄀] No
17. Does applicant certify that if a permit is granted, it will not be used or represented in any endorsement of the City of Crossville or by any department or officer thereof? ⊠ Yes □ No	way as an

		14 (1) (1) (1) (1) (1) (1) (1) (1	
		The first of the second of the	
19. Is applicar	nt a non-profit	exempt organization ur	nder 501(c)(3) of the Internal Revenue Code (26 U.S.C.
§501(c))?	X Yes	☐ No	(
REQUIRED AT	TACHMENTS:		
☐ A statement	giving the te	erms and contents of a	all agreements, both oral and written, with all agents,
solicitors, promo	oters, manage	rs, or conductors in co	nnection with the proposed solicitation covered in this
applications.		Appligable	prepased constant covered in this
🔀 A financial st		A.3.354	rear of all funds collected for charitable purposes by the
applicant, giving	the amount of	of money raised, togeth	ner with the cost of raising it and the final distribution
thereof.		, ,	The state of the s
1101001.			
	S MADE IN THI	S ADDITION ADDITE	
THE STATEMENTS	S MADE IN THI ust be signed by	S APPLICATION ARE TR y the individual/owner, or b	UE TO THE BEST OF MY KNOWLEDGE AND BELIEF. by a partner, or by an officer of the corporation.)
THE STATEMENT: This application me	usi be signed by	y the individual/owner, or b حما	UE TO THE BEST OF MY KNOWLEDGE AND BELIEF. by a partner, or by an officer of the corporation.)
THE STATEMENT: This application me	ust be signed by	y the individual/owner, or b حما	UE TO THE BEST OF MY KNOWLEDGE AND BELIEF. by a partner, or by an officer of the corporation.) 3/12/19 Date
THE STATEMENTS This application me Y:	of representativ	y the individual/owner, or b	UE TO THE BEST OF MY KNOWLEDGE AND BELIEF. by a partner, or by an officer of the corporation.) 3/12/19 Date CAMOKYANGKYANGKYANGKYANGKYANGKYANGKYANGKYANG
THE STATEMENTS This application me Y:	usi be signed by	y the individual/owner, or b	UE TO THE BEST OF MY KNOWLEDGE AND BELIEF. by a partner, or by an officer of the corporation.) 3/12/19 Date Date JAMOKYAMOKYAMOKYAMOKYAMOKYAMOKYAMOKYAMOKY
THE STATEMENT: This application means Signature CAROL Typed or v	of representative Ponrius	y the individual/owner, or b	UE TO THE BEST OF MY KNOWLEDGE AND BELIEF. by a partner, or by an officer of the corporation.) 3//2//9 Date LAMOK VAMOK VA
THE STATEMENT: This application means Signature CAROL Typed or v	of representative Ponrius	y the individual/owner, or b	UE TO THE BEST OF MY KNOWLEDGE AND BELIEF. by a partner, or by an officer of the corporation.) 3//2//9 Date LAMOK VAMOK VA
THE STATEMENT: This application means Signature CAROL Typed or v	of representative Ponrius	y the individual/owner, or b	UE TO THE BEST OF MY KNOWLEDGE AND BELIEF. By a partner, or by an officer of the corporation.) 3/12/19 Date Da
THE STATEMENTS This application measure Signature CAROL Typed or v	of representative Powrivs vritten name, a bed to before 1	y the individual/owner, or b	UE TO THE BEST OF MY KNOWLEDGE AND BELIEF. By a partner, or by an officer of the corporation.) 3/12/19 Date Date VAMOKYAMOKVAMOKVAMOKVAMOKVAMOKVAMOKVAMOKVAMOKV

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

#2. Directors:



- #4. Purpose of solicitation: to raise funds for our White Cane program which together with other Lions Clubs throughout the country helps to support various charities which provide assistance to the blind or visually impaired.
- #5. Total amount of funds to be raised is estimated to be: \$2,500 \$3,000.
- #6. Receipts from the solicitation will be donated to the charities indicated on attachment #1.
- #7. All of the organizations supported by White Cane are 501©(3) entities which depend on public support. In our fiscal year ending June 30, 2018, the Fairfield Glade Lions Club contributed \$7,717 towards White Cane, \$2,972 of which was raised from direct solicitation on White Cane Day. Without these contributions from Lions Clubs throughout the country many of these organizations would cease to exist.
- #15. Scholarships for High School graduates, vision and hearing testing in all Cumberland County elementary schools, eye exams, glasses and hearing aids provided for adults and children who cannot afford them. See also attachment #2.

WHITE CANE DAY 2019

Endeavors Supported By White Cane Day

Leader Dogs For The Blind
Tennessee School For The Blind
Tennessee School For The Deaf
TN District 12-O Sight Restorations
World Services For The Blind
TN District 12-O Low Vision Program
Learning Ally
Tennessee Lions Charities
TN Camp For Diabetic Children

Charitable Endeavors Fiscal Year June 30 2018

Scholarships \$13,000.00

Eye Exams, Eyeglasses, hearing aids for Adults & Children \$10,289.00

New Vision Testing Equipment \$2,460.00

Various Charities including:

Lions Club International Foundation Tennessee Lions Charities Lions Diabetes Camp Scholarships

Diabetes Research & Awareness \$10,990.00