CITY OF CROSSVILLE, TENNESSEE SOLICITATION PERMIT APPLICATION

For Department Use Only:
Date Received: 7/18/17
Date Issued:
Permit #:

			Date Issued:	·····
			Permit#:	
Name of person (or organization <u>Fair Field</u>	Glade Lion	Les Club	
-		a. Box 1675		
, , , , , , , , , , , , , , , , , , , ,	Fairfiel	1 Glade TN	38558	<u> </u>
		,		
2. Name of applicar	nt's principal officers and managers (i	f any):	ı	
President	Paul Horman	Address 47 King	asbridge La.	38558
Vice-Pres.	Clark Zedric	Address <u>4み8 B</u>	eachwood DR.	38558
Secretary	Linda Anderson	Address 152 M	jountain View De	R. 38558
Manager	_ N A	Address		
Directors:	SteveMcCelland	Address /18 G	reenwood Rd.	38558
	Margo Wilson	Address <u> 337 Ke</u>	ating hp.	38555?
	Pat Bock	Address 307 Ki	ingsdown DR.	38558
Other:	(Name)			
Treasurer	Duane West	Address <u>//3 Hur</u>	itington DR.	38558
		Address		
3. Have you attach	ned to this application a true and c	orrect copy of the res	olution (if any) authorizi	ng the
applicant to undertal	ke the proposed solicitation covered b	by the application?	Yes 🔯 No	
		6.	4 1	
	which the solicitation is to be made is			
15ion, heari	ng and scholarship fr	ojects through	h the sale o	<u> </u>
	neese to an establis	shed Custon	ner base	
(Attach a stat	tement if more space is needed.)			
		4. 1	00	
5. The total amount	of funds to be raised is estimated to	be: 44,000,00/1	7,500,00	
	the solitation will be used or dispose			
needed.) Yrosite	Board of Director	15/ 11 buted a	s devermined	<u>px</u>
the Clubs	poard of Wireclor	<u>5.</u>		
7 The weed for the	annining to be activitied to a fell	louro: /This statement	must be enseifie	tod by
	contributions to be solicited is as fol		must be specific, suppor ee #4.	tea by
reasons, and if availa	able, figuresan attached statement	can be used.)	<u> </u>	

8. The following person(s) will disburse the receipts of this solicitation. (Give name, address, and title) Duane West, Treasurer, 113 Huntington DR, FFG TN. 38558
9. The following person(s) will be in direct charge of conducting the solicitation: (Give name, address, and title) Rob++ Genie Chruber, 175 Meadow View DR. FFG, TN 38538 Chairmen, CheeseSale (981-484-2369)
10. The following promoters are connected, or will be connected with the solicitations: (Give name, address, and title) Registered Club Mem Vers
11. The method or methods to be used in conducting the solicitations are as follows: (Explain on attached sheet, if necessary) (lub members pass out order forms then deliver also, members sell daily@the Village Green Mall in FF-
12. The proposed dates for the beginning and ending of the solicitations are: Beginning Date October 2, 2017 Ending Date Nov. 30, 2017
13. The estimated total cost of the entire solicitation campaign is no expenses other than Cost.
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: <u>None</u>
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 thearing screening in the Cumberland County Schools, Scholarship frogram for Sr. Students, Kid Sight for young Children, Sent 6 Children to Diabeties Camp this 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 solitation: Aside From Vision, Hearing, Kidsight The Scholarships Diabetis Camp, we also provide alasses to needy students for Adults. 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: Gusping Sphalar Lieu Date
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BY: Eugenica S. Gruber (Menie) 7/18/2017 Signature of representative Date
Signature of representative Date
Eugenia S. Gruber (GENIE) Chairman 175 Meadowview DR. Typed or written name, address, and title 776, TN 38558
Typed or written name, address, and title 776, TN 38558
Sworn and subscribed to before me, this 18 day of 1214, 2017.
COPEL TIMES COPE TIMES CO
STATE OF A CONTROL
Notary Public TENNESSEE
My Commission Expires: 6-04-2020 Notary Public NOTARY PUBLIC
Mail/deliver to: Sally Oglesby, City Clerk, City of Crossville, 392 N. Main, Crossville, TN 38555, RLAND CONTROL OF THE CONTRO