

CITY OF CROSSVILLE, TENNESSEE
SOLICITATION PERMIT APPLICATION

For Department Use Only:

Date Received: 3/17/14

Date Issued: _____

Permit #: _____

1. Name of person or organization CROSSVILLE & FAIRFIELD LIONS CLUBS
Address of headquarters of application: P.O. BOX 3277
CROSSVILLE, TN. 38557

2. Name of applicant's principal officers and managers (if any):

President	<u>GARY LAURA</u>	Address	<u>76 MYRA DR. CROSSVILLE TN 38572</u>
Vice-Pres.	_____	Address	_____
Secretary	_____	Address	_____
Manager	<u>EILEEN LAURA</u>	Address	<u>(SAME AS ABOVE)</u>
Directors:	<u>931-788-6924</u>	Address	_____
	_____	Address	_____
	_____	Address	_____
Other:	(Name)		
_____	_____	Address	_____
_____	_____	Address	_____

3. Have you attached to this application a true and correct copy of the resolution (if any) authorizing the applicant to undertake the proposed solicitation covered by the application? Yes No

4. The purpose for which the solicitation is to be made is the following: LIONS WHITE CAKE SOLICITATION

(Attach a statement if more space is needed.)

5. The total amount of funds to be raised is estimated to be: \$3,000 - \$5,000

6. The receipts from the solicitation will be used or disposed of as follows: (Attach a statement if more space is needed.) LIONS WHITE CAKE PROJECT WHICH CONSISTS SCHOOL FOR BLIND, SCHOOL FOR DEAF, ERLANGER EYE BANK

7. The need for the contributions to be solicited is as follows: (This statement must be specific, supported by reasons, and if available, figures---an attached statement can be used.) TO KEEP THE PROJECT GOING AS LISTED IN NO 6.

8. The following person(s) will disburse the receipts of this solicitation. (Give name, address, and title)
EILEEN LAUKA (CROSSVILLE ^{LIONS} TREAS) 76 MYRA DR.
CROSSVILLE, TN 38572

9. The following person(s) will be in direct charge of conducting the solicitation: (Give name, address, and title)
EILEEN LAUKA (CROSSVILLE LIONS TREAS)
76 MYRA DR. CROSSVILLE, TN 38572

10. The following promoters are connected, or will be connected with the solicitations: (Give name, address, and title)
Various Lions Club members (Fairfield & Crossville)

11. The method or methods to be used in conducting the solicitations are as follows: (Explain on attached sheet, if necessary)
DONATION JARS AT THE DOORS OF THE
GROCERY STORES

12. The proposed dates for the beginning and ending of the solicitations are:
Beginning Date MAY 2, 2014 Ending Date MAY 3, 2014

13. The estimated total cost of the entire solicitation campaign is -0-

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: -0-

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.)

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: _____

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: Eileen Laura 3-17-14
Signature of representative Date

EILEEN LAURA, 76 MYKA DR, CROSSVILLE, TN 38572
Typed or written name, address, and title TREAS. CROSSVILLE TIONS CLUB

Sworn and subscribed to before me, this 17th day of March, 2014.

Valerie Hale
Notary Public

My Commission Expires: 6/4/16

Mail/deliver to: Sally Oglesby, City Clerk, City of Crossville, 99 Municipal Avenue, Crossville, TN 38555

