



CITY OF HOUSTON

Administration & Regulatory Affairs Department

Solicitation of Funds for Charitable Purposes Closing Statement

CHECK ONE:

PRELIMINARY CLOSING _____

FINAL CLOSING _____

CHECK ONE:

FILING THIS FORM, SWORN TO; _____

CERTIFIED FINANCIAL STATEMENT
(AUDITED BY CPA) _____

IRS FORM 990 _____

NAME OF PERSON ISSUED CERTIFICATE OF REGISTRATION (Registrant)

E-Mail Address _____

Certificate of Registration Number _____

Date the Solicitation Period Began _____

Date the Solicitation Period Ended _____

- I. List the total funds collected \$ _____ and pledged \$ _____ from the solicitation of funds.
- II. State the purpose or purposes (with amount of funds for each purpose) for which such funds have been or will be disbursed by the registrant. The total funds represented by food may be stated either by estimating the monetary value of the food to the nearest multiple of \$100.00 or in the case of bulk items the weight of the food by total pounds.

Purpose	Amount
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL _____

- III. List any incurred expenses resulting from the solicitation of funds paid, and unpaid:

	Paid	Unpaid
1. Personnel Services	\$	\$
a. Salaries	_____	_____
b. Wages	_____	_____
c. Commissions	_____	_____
d. Other	_____	_____
2. Housing		
a. Rent	_____	_____
b. Interest on mortgage	_____	_____
c. Utilities	_____	_____
d. Other	_____	_____
3. Business overhead		
a. Telephone	_____	_____
b. Postage and supplies	_____	_____
c. Equipment	_____	_____
d. Transportation	_____	_____
e. Insurance	_____	_____
f. Material used in solicitation	_____	_____
g. Professional services	_____	_____
h. Other	_____	_____
TOTAL	\$ _____	\$ _____

IV. List all other anticipated disbursement of collected or pledged funds

Disbursement of Funds	Projected Date of Disbursement	Amount
_____	_____	\$ _____
_____	_____	_____
_____	_____	_____
_____	_____	_____
TOTAL		\$ _____

V. If the funds have been or will be kept by the Registrant for more than thirty (30) days before disbursement, give the name of the financial institution, if any, where the funds have been or will be deposited.

I prepared and have carefully read this Application for Certificate of Registration. I hereby swear or affirm that every statement made herein is true and correct and that I am authorized to sign this application on behalf of the registrant.

_____ Registrant

By (signature) _____

Name (type or print) _____

Title (if any) _____

STATE OF TEXAS X

COUNTY OF HARRIS X

BEFORE ME, the undersigned authority, on this day personally appeared _____
Who being by me first duly sworn, upon his oath stated that all of the information given above and all of the answers made to the forgoing questions are within the knowledge of Affiant and are true and correct.

WITNESS my hand and seal of office this _____ day of _____
_____ AD., 20 _____

**NOTARY PUBLIC IN AND FOR THE
STATE OF TEXAS**

My Commission Expires: _____

PRINTED NAME OF NOTARY

Each Registrant shall file a **preliminary** closing statement no later than thirty (30) days from the expiration of its Certificate of Registration. It need not be sworn to and any amount stated thereon may be estimated based upon whatever information is reasonably available to the person registering at the time it is filed. A Final closing statement shall be filed with the Administration & Regulatory Affairs Department no later than one hundred twenty (120) days from the expiration of the Certificate of Registration.

Read and Acknowledged: _____
Registrant