



*State of Rhode Island and Providence Plantations*  
*Department of Business Regulation*  
*Securities Division*  
 1511 Pontiac Avenue  
 John O. Pastore Complex – Building 69-1  
 Cranston, RI 02920

**APPLICATION FOR FUNDRAISING COUNSEL**  
**FILINGS MUST BE SUBMITTED ON**  
**CD-ROM. WE NO LONGER ACCEPT PAPER FILINGS**

E-mail Address \_\_\_\_\_  
 EIN #: \_\_\_\_\_

INITIAL APPLICATION

RENEWAL APPLICATION

**ANNUAL EXPIRATION: JUNE 30<sup>TH</sup> ANNUAL FEE: \$200.00**  
 CHECKS PAYABLE TO: GENERAL TREASURER STATE OF RI

1. NAME OF ORGANIZATION: \_\_\_\_\_
2. ADDRESS: \_\_\_\_\_
3. DATE/PLACE OF ORGANIZATION: \_\_\_\_\_
4. FORM OF ORGANIZATION: \_\_\_\_\_
5. SUBMIT COPIES OF ALL CONTRACTS WITH CHARITABLE ORGANIZATIONS.  
 (Must be submitted within ten (10) days after signing, pursuant to R.I.G.L. 5-53.1-9)
6. ATTACH NAMES AND ADDRESSES OF ALL OFFICERS, AGENTS & EMPLOYEES.
7. CONTACT PERSON AND MAILING ADDRESS: \_\_\_\_\_

**I CERTIFY UNDER PENALTY OF PERJURY THAT I HAVE READ THIS APPLICATION AND KNOW THAT ALL STATEMENTS THEREIN ARE TRUE**

\_\_\_\_\_  
 (Signature)

\_\_\_\_\_  
 (Date)

\_\_\_\_\_  
 (Print Name, title and Phone Number)

**NOTARY:**