Include and check off the following:

- NH Paid Solicitor Registration No. ________ (If none, Form NHCT-20, Application for Registration must be submitted and approved first)
- NH Charitable Organization Registration No. _______ or
  - Police, law enforcement, firefighting association not otherwise required to register as a charity
- $200.00 filing fee payable to State of New Hampshire
- Solicitation contract

**PARTIES’ NAMES AND CONTACT INFORMATION**

<table>
<thead>
<tr>
<th>1. Paid Solicitor registration #:</th>
<th>2. Charitable organization registration #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and address of paid solicitor:</td>
<td>Name and address of organization on whose behalf the solicitation will be conducted:</td>
</tr>
</tbody>
</table>

**Paid Solicitor Contact**
Name: ____________________________
Telephone #: ______________________
Email address: _____________________

**Charitable Organization Contact**
Name: ____________________________
Telephone #: ______________________
Email address: _____________________

**TERMS OF SOLICITATION**

3. Date of the solicitation contract between the parties: _________________________
   
   Attach a copy to this form

4. Time period of solicitation: Start Date: _______________  End Date: ____________
5. Solicitation methods (select all that apply):
   - Telephone ☐  Mail ☐  Television ☐  Print media ☐  Email/text message ☐
   - Social media ☐  Web based platform ☐  Other ☐ ________________________________

6. If the solicitation will include more than one method, how will the initial contact be made:
   - Telephone ☐  Mail ☐  Television ☐  Print media ☐  Email/text message ☐
   - Social media ☐  Web based platform ☐  Other ☐ ________________________________

7. Will the solicitation campaign include the sale of goods or services? Yes ☐  No ☐
   If yes, check one or more of the following that apply:
   - tickets to an event or performance
   - advertising space in a program book or other publication
   - other (describe: ________________________________)

   If tickets to an event or performance will be offered, state:
   - date of event: ___________  nature of event: ________________________________
   - location of event (street/city/state): ______________________________________

   If tickets may be donated for use by another, state the names and addresses of the
   charitable organizations that have agreed in writing to accept the donated tickets:
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

8. Describe the nature of the program to benefit from the solicitation campaign
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

9. If the campaign will include written communications to be conveyed either by printed matter or by
   electronic communications, attach a sample of each communications piece.

10. If the campaign will include telephonic communications, attach the script of the language to be
    used, including language describing the program, requesting a donation, and disclosing the paid
    solicitor’s status as a fundraiser.

    **INDIVIDUALS INVOLVED WITH SOLICITATION**

11. Attach a list providing the name and residential address and telephone number of each individual
    who may solicit during the campaign.

12. Will any telephonic solicitation take place from a physical call center or phone room?
    - Yes ☐  No ☐  Not telephonic ☐
If yes, provide the following for each location:

<table>
<thead>
<tr>
<th>Phone Room:</th>
<th>Manager:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>Name</td>
</tr>
<tr>
<td>City, state, zip</td>
<td>Address</td>
</tr>
<tr>
<td>Telephone Numbers</td>
<td>City, state, zip</td>
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</tr>
</tbody>
</table>

13. Are any of the directors, officers or management employees of the paid solicitor a director, officer, or management employee of the organization for which the solicitation is being conducted?
   - Yes ☐  No ☐
   If yes, attach a list of the name and residential address of each such person, with an explanation of each person’s role with each entity.

14. Have any of the persons listed in response to #11, #12 or #13 been convicted by any state or federal court of any felony, or of any misdemeanor involving dishonesty or arising from the conduct of a solicitation for a charitable organization or purpose?
   - Yes ☐  No ☐
   If yes, attach a detailed explanation as to each such person.

**CONTROL OF FUNDS**

15. The solicitation contract describes the process for receipt and control of funds in section
   ________________.

16. Does the solicitation contract permit the paid solicitor to deposit funds for any period of time into a bank account controlled by the paid solicitor?
   - Yes ☐  No ☐
   (a) If yes, provide the following:
      - account holder name:__________________  account holder name:__________________
      - account number:_____________________  account number:_____________________
      - bank name:_____________________   bank name:_________________________
      - bank address:_____________________  bank address:_______________________
(b) Persons authorized to withdraw funds from the above account(s):

<table>
<thead>
<tr>
<th>Name</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

ACKNOWLEDGEMENTS

Paid Solicitor

I declare under the penalty for making a false written statement to the director of charitable trusts (RSA 641:3 and 8) that I am authorized to sign this certification on behalf of the paid solicitor and that the statements made in the foregoing notice and all attachments are true and accurate to the best of my knowledge.

Signature of paid solicitor officer  Title  Date

Printed Name: ________________________________

Charitable Organization, Police, Law Enforcement or Firefighters Association

I declare under the penalty for making a false written statement to the director of charitable trusts (RSA 641:3 and 8) that I am authorized to sign this certification on behalf of the entity to receive donations from the solicitation and that the statements made in the foregoing notice and all attachments are true and accurate to the best of my knowledge.

Signature of Organization Officer  Title  Date

Printed Name of Officer: ________________________________

NOTE: The solicitation campaign may begin no earlier than the 11th business day after receipt of this notice by the Charitable Trusts Unit. Any subsequent changes to the information provided in this notice must be reported in writing to the Charitable Trusts Unit within seven days of the change.