## Fundraising Disclosure Form
for charitable or sponsor organizations

Form ______ of ______ filed with this application

### 1. Applicant Name:

### 2. Contractor Name:

### 3. Contractor Street Address:

### 4. Contractor Telephone Number:

### 5. Contractor Type:
- ☐ Coventurer
- ☐ Fund-raising Consultant
- ☐ Solicitor

### 6. Contract Signing/Execution Date:

### 7. Contract services Begin Date:

### 8. Contract services End Date:

### 9. Is this a continuing or multiyear contract?
- ☐ YES
- ☐ NO

### 10. Are North Carolina residents solicited for contributions as a direct or indirect result of this contract?
- ☐ YES
- ☐ NO

### 11. Does contract contain salary, rate, or fee terms?
- ☐ YES
- ☐ NO

If YES, state terms and conditions below:

### 12. Does contract contain bonus terms?
- ☐ YES
- ☐ NO

If YES, state terms and conditions below:

### 13. Does contract contain commission terms?
- ☐ YES
- ☐ NO

If YES, state terms and conditions below:

### 14. Does contract contain expenses terms?
- ☐ YES
- ☐ NO

If YES, state terms and conditions below:

### 15. Does contract contain other compensation terms?
- ☐ YES
- ☐ NO

If YES, state terms and conditions below:

### 16. Amount of funds received resulting from contract since your last license application filing:

(For initial applicants: amount of funds received within past fiscal year or past 12 months):

Answer either or both line items:

<table>
<thead>
<tr>
<th>Gross Amount Received: $</th>
<th>Net Amount Received: $</th>
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<tbody>
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**CSL Contact Information:**
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Page 1 of 1