

Mailing Address (ALL USPS): PO Box 40234 Olympia, WA 98504-0234

See website for overnight address by commercial carrier

Tel: 360.725.0377 | Website: www.sos.wa.gov/corporations-charities

This Box For Office Use Only			
Office U			
3ox For			
This E			

COMMERCIAL FUNDRAISER SUPPLEMENTAL AMENDMENT

This is to be used to upload to a Re-Registration if there has been a change in accounting year or if the previous years financial information needs to be amended

All fields REQUIRED unless otherwise specified						
(1) CURRENT ORGANIZATION INFORMATION						
Registration Number:	FEIN:					
Organization Name:						
(2A/B/C) ORGANIZATION'S ACCOU	UNTING AND FINANCIAL FIGURE INFO	ORMATION				
2. A Does the organization need to chan	ge the First Accounting Year End Date that wa	as reported on the initial				
Registration form? (Check one) Yes	☐ No If No , please continue to 2.B					
•	page 2 and included with this page in the uplo					
	rear changed? (Check one) ☐ Yes ☐ No If					
is required when changing the accounting		, ,				
2. C Does the organization need to amer	nd any previously recorded financial figures? Page 3 and included with this page in the uplo	(Check one) □ Yes □ No				
(3) SIGNATURE						
By executing this document, the applican	t certifies the following:					
• He/she is authorized to represent the	above named organization.					
• The organization's governing body of where applicable.	committee has reviewed and accepted the fin	nancial information provided				
• The information contained herein is a	ccurate and true to the best of the applicant's	knowledge.				
	etary of State to receive process (notice of law onditions set out in RCW 19.09.305; and	rsuit) in non-criminal cases				
	s officers, directors, and principals have been ect to a permanent injunction or administrative 0.86 RCW) in the past 10 years.					
Signature of Applicant	Printed Name / Title	Date				
Contact phone number:						

Registration Number:					
2.A/B Continued					
2. A Continued: If Yes was checked on page 1 for question	1.A please provide the new Accounting year end date.				
First Full Accounting Year End Date:	(mm/dd/yyyy)				
If No, continue to 2.B below					
2. B Continued NEW ACCOUNTING YEAR	R FOR THE ORGANIZATION				
If changing the accounting year, please provide the new accounting a fiscal short report, showing the organization's final information should show figures from the previous accounting to ensure there are no financial gaps on record.	ncial information from the short accounting year. Financial				
If no change, $\underline{DO\ NOT}$ complete the below fields and conti	nue to the next page.				
New Accounting Year Beginning Date:	(mm/dd/yyyy)				
New Accounting Year Ending Date:(mm/dd/yyyy)					
Effective date of fiscal year change:	(mm/dd/yyyy)				
Example for New accounting year and short report:					
If the short report is $1/1/2022$ — $6/30/2022$ then the new accounting year would be reflected as $7/1/2022$ — $6/30/2023$.					
2) If the short report is $4/1/2022$ — $12/31/2022$ then the new account year would be reflected as $1/1/2023$ — $12/31/2023$.					
SOLICITATION REPORT FOR THE ORGA	NIZATION'S SHORT ACCOUNTING YEAR				
<u>ALL</u> financial fields must be completed, enter zero if the org for a specific line. <u>Do Not</u> enclose a copy of the organization rounded to the nearest dollar; net figures or estimates will no	n's IRS Form 990. Gross financial information is required;				
If you have any questions regarding the short report plo	ease contact us at 360-725-0378 or charities@sos.wa.gov				
Organization's Short Report Beginning Date	Organization's Short Report Ending Date				
(mm/dd/yyyy)	(mm/dd/yyyy)				
1. Revenue: All contributions received \$					
Total dollar value of contributions received, via the comme as a result of services provided.	ercial fundraiser service contract or the charities directly,				
2. Expenses: Amount of funds \$					
Total dollar value of funds, retained by or returned to, the	charities for which services were provided.				

Registration Number:					
2.C Continued					
AMENDED FINANCIAL INFORMATION FOR ORGANIZATION					
Provide the fiscal year dates and <u>all</u> financial figures from the fiscal year, whether the information is amended or not. If					
he organization wishes to amend multiple years, additional sheets <u>must</u> be enclosed. Please make multiple copies of this					
page or follow the same structure as shown below. This will ensure that no errors are made when amending your					
financial figures.					
ALL financial fields must be completed, enter zero if the organization does not have any financial information to report					
for a specific line. Do Not enclose a copy of the organization's IRS Form 990. Gross financial information is required;					
rounded to the nearest dollar; net figures or estimates will not be accepted.					
An amended accounting year <u>must</u> be financial information that has previously been recorded with our office					
AMENDED ACCOUNTING YEAR					
Organization's Accounting Year Begin Date and End Date for financial figures to be amended					
Beginning Year Date Ending Year Date					
Beginning Year Date Ending Year Date (mm/dd/yyyy) (mm/dd/yyyy)					
1. Revenue: All contributions received \$					
Total dollar value of contributions received, via the commercial fundraiser service contract or the charities directly,					
as a result of services provided.					
2. Expenses: Amount of funds \$					
Total dollar value of funds, retained by or returned to, the charities for which services were provided.					
Does the Organization need to make changes to another previous year's reported financial information?					
(Check one) □ Yes □ No If Yes, attach additional pages in the same format as above.					