

**LOUISIANA DEPARTMENT OF JUSTICE
CONSUMER PROTECTION SECTION**

**Send completed application and \$150.00 check to:
Louisiana Department of Justice
Consumer Protection Section
P.O. Box 94005
Baton Rouge, LA 70804-9005**

REGISTRATION—PROFESSIONAL SOLICITOR

Any person intending to solicit contributions on behalf of any charitable organization or sponsor within this state must, prior to acting as a professional solicitor, register with this division. Registration is valid for one year. Registration may be renewed on or before expiration date of initial registration.

Attach additional pages if necessary.

1. Full name and business address of solicitor (Include city, state, zip and telephone number). _____

Name under which business will operate in Louisiana. _____

2. If above address is not in Louisiana, state the street address of primary office or affiliates in Louisiana. _____

3. Type of company _____(Corporation, partnership, individual, other)

4. If other than individual, state where company was legally established.

_____ State _____ Date _____

5. Are you a partnership or corporation filing on behalf of your partners, members, officers, directors, agents and employees? _____Yes_____No. If so, attach a list of names, titles and street addresses of all persons contracted to work for the solicitor or provide the information to the Division within 5 days after the date of employment or contractual agreement.

6. On a separate sheet, list the names and residence addresses of all officers, directors, trustees and executive personnel of the professional solicitor.

7. Has the applicant or any of its directors, officers, persons with controlling interest in the applicant, employees or agents been convicted within the last 5 years of any felony or of a misdemeanor arising from the conduct of a solicitation for any charitable organization or sponsor or a charitable or sponsor purpose; or has the applicant or any of its directors, officers, persons with controlling interest in the applicant, employees or agents been enjoined from violating a charitable solicitation law in this or any other state? _____
 Yes _____ No Describe convicting or injunction, including jurisdiction and case number. _____

8. Attach a separate sheet listing the names and addresses of all persons hi charge of any solicitation activity.

9. Does the applicant maintain custody or control of contributions made to a charitable organization _____ Yes _____ No If yes, attach the bond as required by La. R.S. 51:1901.1.

NOTICE: ALL PROFESSIONAL SOLICITORS MUST PROVIDE A NOTICE OF COMMENCEMENT OF SOLICITATION TO THE SECTION AT LEAST 10 DAYS BEFORE COMMENCING EACH SOLICITATION CAMPAIGN OR EVENT, ON A FORM PRESCRIBED BY THE SECTION.

ANY MATERIAL CHANGE IN ANY INFORMATION FILED MUST BE REPORTED, IN WRITING, TO THE SECTION WITHIN 7 DAYS AFTER THE CHANGE OCCURS.

**LOUISIANA DEPARTMENT OF JUSTICE
AND CONSUMER PROTECTION**

Bond # _____

**PROFESSIONAL SOLICITOR
SURETY BOND FORM**

_____, _____,
(Name of Professional Solicitor) (Address, including state and zip code)

_____ as Principal, and _____
(Name of Surety Company)

_____, a surety authorized to do business in the

State of Louisiana, are held and firmly bound to the State of Louisiana and any person who may have a cause of action against the principal obligor arising out of a violation of any provision of La.R.S. 51:1901 et seq., or any rule adopted pursuant thereto in the amount of twenty five thousand dollars (\$25,000.00), lawful money of the United States for payment of which well and truly to be made, we, and each of us, bind ourselves, our heirs, executors, administrators, successors, and assigns insolido, firmly by this document.

WHEREAS, the above names principal has applied to the Louisiana Department of Justice and Consumer Protection to register as a professional solicitor for the period ending _____, in accordance with the provisions of R.S. 51:1901 et seq., and is required to furnish a surety bond with such registration.

AND, if the Principal shall fully and faithfully observe all provisions of La. R.S. 51: 1901, then this obligation shall be void; otherwise to remain in full force and effect.

The surety may cancel this bond at any time by providing the Department thirty (30) days notice in writing by certified mail of its intent to cancel or terminate this bond. The surety shall not be discharged from any liability already accrued under this bond, or which shall accrue hereunder before the expiration of the thirty day period. In addition, the surety shall not be discharged from any liability which accrues under this bond during the period said bond is in effect.

This bond shall not become void upon the first recovery thereon but demand may be made from time to time until the full amount thereof shall have been exhausted.

Signed and sealed this _____ day of _____, 20____.

Principal (Name of Entity)

(Surety)

Signature of Officer/Title

Signature of Officer/Title

Address

Address

Business Telephone

Business Telephone

Attach agent's power of attorney and mail original to:
Louisiana Department of Justice
Consumer Protection Section
P.O. Box 94005
Baton Rouge, LA 70804-9005

AFFIDAVIT

State of _____

Parish/County of _____

I, _____, being first duly sworn say that I am the
(Name)

_____ of _____
(Title or office) (Name of Professional Solicitor)

AND further state as follows:

1. I am the individual who has completed the foregoing Registration Form for a Professional Solicitor;
2. I have read the foregoing registration form and know the contents thereof;
3. The same is true to the best of my knowledge and belief; and
4. This registration form is made for the purpose of complying with the provision of La. R.S. 51:1903 and 1904;
5. I agree to conform to all applicable Louisiana Statutes, ordinances and guidelines.

Signature

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who is personally known to me or has produced _____ as identification and who did (did not) take an oath.

Notary Public

**STATE OF LOUISIANA
NOTICE OF COMMENCEMENT OF SOLICITATION**

1. Name of professional solicitor: _____
2. Is professional solicitor currently registered with this office? _____ Yes _____ No
3. Full name and business address of charitable organization:

4. Describe the specific charitable purpose for which the solicitation is being conducted.

5. Percentage of funds solicited which are designated for the charitable organization:
_____ %
6. Percentage of funds solicited which are designated for the for profit fund raising firm:
_____ %
7. Percentage of funds to the charitable organization that are used for a charitable purpose:
_____ %
8. Please attach a copy of the solicitation contract.
9. Specific dates of charitable solicitation. Beginning mo/day/yr _____ until
Ending mo/day/yr _____.

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