

# **PUBLIC SAFETY ORGANIZATION REGISTRATION INFORMATION**

## **WHO MUST REGISTER**

Before soliciting contributions, or receiving contributions solicited on its behalf, a public safety organization must register with the Attorney General. A public safety organization is any group or organization, association, union, or conference of current or former law enforcement officers, fire fighters, correctional officers, employees thereof or any other entity that represents itself to be affiliated or associated with such organizations that meet both of the following:

1. The voting membership is comprised of at least 75% of individuals who are currently or formerly law enforcement officers, fire fighters or correctional officers.
2. The voting membership consists of at least 25% of all of the individuals the organization claims to represent.

There are three exceptions: 1) All solicitations will be solely to aid a family of a public safety officer who died or was injured in the line of duty; 2) all solicitations are to benefit a separate charitable organization; or 3) the organization is in compliance with the Michigan Campaign Finance Act. See the Act for the specific requirements of these exceptions.

## **REGISTRATION PERIOD**

Your registration is effective immediately upon receipt by the Charitable Trust Section of the completed registration form and a \$25 check payable to "State of Michigan." A notification of registration will be mailed. However, if the form is not completed properly or all required documents are not provided, you will be notified of any deficiencies, and your registration will not be effective until they are corrected. Your registration will expire 6 months after the close of your current fiscal period.

## **REGISTRATION RENEWAL**

A blank registration form will be enclosed with your registration notification. To renew your registration, complete the registration form and submit it with the \$25 registration fee to the Charitable Trust Section before your registration expires.

## **USE OF FILE NUMBER**

All organizations will be assigned a file number that must be used on all correspondence with the Charitable Trust Section.

## **PROFESSIONAL FUND RAISERS**

All professional fundraisers are required to register with the Attorney General. Professional fund raisers are required to post a bond in an amount ranging from \$25,000 to \$100,000 depending on the amount of contributions collected. You are urged, for your own protection, to use only registered professional fund raisers. Any unregistered professional fund raisers you hire must not solicit in Michigan.

## **TOLL FREE TELEPHONE NUMBER**

The Attorney General has established a toll free telephone number that may only be used by the public to obtain information about, or file a complaint against, anyone soliciting contributions under the Public Safety Solicitation Act. The telephone number is (800) 769-4515. Pursuant to section 15 of the Act, all public safety organizations and professional fund raisers are required to print this number, along with certain other disclosures required by sections 12 and 13, on all invoices, pledge cards, or other written requests for payment. Please refer to the Act for details. All other questions, including those of the organization about its registration, must use the telephone number (517) 335-7571

STATE OF MICHIGAN  
 DEPARTMENT OF ATTORNEY GENERAL

PUBLIC SAFETY ORGANIZATION REGISTRATION FORM

FULL OFFICIAL NAME OF ORGANIZATION	ATTY GEN FILE # (T/PS)	
ADDRESS OF ORGANIZATION	EMPLOYER IDENTIFICATION NUMBER	
ADDRESS OF ORGANIZATION	TELEPHONE NUMBER	
LIST ALL OTHER NAMES UNDER WHICH YOU SOLICIT OR RECEIVE CONTRIBUTIONS	FOR OFFICE USE ONLY AMOUNT REC'D	INITIALS

The Public Safety Solicitation Act requires all public safety organizations and their affiliates and associates that solicit funds to first register with the Attorney General. To determine if your organization should register, refer to the attached information sheet or the Public Safety Solicitation Act for the definition of a public safety organization.

To register, complete the form and submit it to the Charitable Trust Section with all attachments required by the form and a \$25 check payable to "State of Michigan." Your registration is effective immediately upon receipt by the Charitable Trust Section. However, if the form is not completed properly or all required documents are not attached, you will be notified of any deficiencies and your registration will not be effective until they are corrected.

You are urged to keep a copy of the Public Safety Solicitation Act available for reference. The public safety organization, its members, affiliates and associates, professional fund raisers, and all solicitors should be aware of the specific requirements of the law, particularly those regarding solicitations, disclosures, prohibited acts, and potential penalties for violations. If you do not have a copy of the Act, please contact the Charitable Trust Section.

1. Mark the appropriate box with regard to this registration form: Initial          Renewal

If initial, answer A, B, and C; if renewal, go to question 2.

A. Where and when were you established? State \_\_\_\_\_

Date \_\_\_\_\_

B. Is the organization incorporated? YES          NO

If no, indicate the form of organization. \_\_\_\_\_

C. Has the organization received tax exempt status from the IRS? YES          NO

If yes, under what section of the Internal Revenue Code: 501(c) \_\_\_\_\_

2. Do you have offices in Michigan, other than that which may be listed above? YES          NO

If yes, attach a listing of all other Michigan offices.

3. Attach a listing of the names and business address of all officers, directors, trustees and the principal executive officer.

4. If your principal office is not located in Michigan, you must designate a resident agent.

Provide name and business address.

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

5. Is the name of any unaffiliated person or organization used in solicitations either by the organization or on its behalf? YES NO

If yes, written consents of the person or organization must be obtained. Copies of all such consents must be attached.

6. Complete the following financial report to show how gross contributions solicited by you, or on your behalf, were used during your most recently completed fiscal year. If the organization is new and has not completed its first fiscal period, indicate "new" below and provide the date the organization will complete its first accounting period.

**FINANCIAL REPORT**

For the period beginning \_\_\_\_\_ and ending \_\_\_\_\_

Gross contributions (before fundraising fees and costs were deducted): \$ \_\_\_\_\_

Mark one space for each expense category to indicate the portion of gross contributions used for that category. Fund raising costs and fees are to be included under "administrative."

	0-10%	11-25%	26-50%	51-75%	76-100%
Administrative	_____	_____	_____	_____	_____
Political purposes & campaign contributions	_____	_____	_____	_____	_____
Membership services	_____	_____	_____	_____	_____
Charitable contributions (attach schedule)	_____	_____	_____	_____	_____
Education & training	_____	_____	_____	_____	_____

7. Complete the following to show how current and anticipated contributions will be used. Use gross contribution amounts. Any fundraising costs and fees deducted from gross contributions before receiving the proceeds of any campaign should be considered "administrative". The total of the percentage column must equal 100%.

Administrative	_____ %
Political purposes & campaign contributions	_____ %
Membership services	_____ %
Charitable contributions	_____ %
Education & training	_____ %
Total	<u>100</u> %

Under penalties of perjury, I certify that I am authorized to sign this document for the organization and that, to the best of my knowledge and belief, the information provided, including all attachments, is true, correct, and complete. I further understand that the Attorney General, Charitable Trust Section, is to be notified within 15 days of any change in the information provided in this registration form and attachments.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

THIS IS A PUBLIC RECORD, COPIES OF WHICH ARE SENT, UPON REQUEST, TO ANY INTERESTED PERSON.

Return the completed registration form along with a \$25 check payable to "State of Michigan" to:

DEPARTMENT OF ATTORNEY GENERAL  
 Charitable Trust Section  
 PO Box 30214  
 Lansing MI 48909  
 (517) 335-7571