



CITY OF PERRIS

Finance Department
Business License Division
101 North "D" Street, Perris, CA 92570
TEL: 951-943-4610 FAX: 951-943-5065

REGISTRATION FOR CHARITABLE, RELIGIOUS AND NONPROFIT ORGANIZATIONS

Perris Municipal Code Section 5.06 Ordinance Number 1030
(Please type or print)

Name of Organization _____ Phone Number _____

Type or General Description
Of Organization _____

Organization Address _____
Street City State Zip Code

Duration of Activity _____

Approximate scope of the solicitation in terms of location within the city that will be solicited _____

Approximate number of solicitors to be used during campaign _____

Application Name _____ Residence Phone _____

Residence Address _____
Street City State Zip Code

Date State Tax-Exempt Status Granted _____ Copy of Exemption Attached _____

Date of Federal Tax-Exempt Status Granted _____ Copy of Exemption Attached _____

*** Attach copy of current "Exempt Letter of Good Standing"*

PLEASE COMPLETE: I declare under penalty of perjury that the above is true and correct this _____ day of _____, 20 _____, in _____ County.

Signature of Applicant on behalf of Organization _____

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For Official Use Only:

Issued License Number: _____ \$ Exempt From: _____ To: _____ Date: _____

Applicant provided with a copy of Ordinance 1030 _____

Applicant has provided a 2x2 color passport photograph _____