



RICHARD CORDRAY
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Charitable Law Section

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FOR OFFICIAL USE

PS # _____
REG. # _____
CAMPAIGN # _____
CAMPAIGN DATES _____
CONTRACT DATES _____
ESTIMATED % _____
FIXED % _____

SOLICITATION NOTICE

**For Charitable Solicitation in the State of Ohio
(Section 1716.07, Ohio Revised Code)**

This notice is to be completed by every professional solicitor prior to commencement of any solicitation of contributions on behalf of a charitable organization. **(Failure to complete all items may delay solicitations of contributions in the State of Ohio.)**

The professional solicitor must obtain the written and signed consent from every charitable organization on whose behalf the professional solicitor will be soliciting contributions or whose name may be mentioned during the solicitation.

1. Liaison Marketing - A Special Event 90-0545374
 (Full name of professional solicitor) (EIN #) **(Ohio Registration No.)**
(Renewals only)

2. A Special Event
 (Name(s) under which business will be conducted in Ohio)

2. (a) If a d/b/a (doing business as) name is used, please attach copies of the Secretary of State filing(s) or other record(s) reflecting registration of this d/b/a.

3. 3012 Glenmore Ave Suite 14
 (Address of principal place of business)

<u>Cincinnati,</u>	<u>Ohio</u>	<u>45238</u>	<u>513-347-4900</u>
(City)	(State)	(Zip)	(Telephone No.)

<u>sheimkreiter@aspeialevent.org</u>	<u></u>
(E-mail address)	(Web address)

4. Provide the name, address, telephone number, EIN, and Ohio registration number for the charitable organization on whose behalf the professional solicitor is acting or soliciting contributions, or whose name may be mentioned during the solicitation. Attach a list and a copy of the consent statement from any other charitable organization whose name may be mentioned during the solicitation campaign.

Teen Response Inc.

(Name of Charitable Organization)

31-1397703

(EIN No.)

(Ohio Registration No.)

2728 Minot Ave

Cincinnati

Ohio

513-641-7498

(Address)

(State)

(Zip)

(Telephone No.)

5. Will the professional solicitor be using a d/b/a of the charity in the course of the solicitation campaign ? Yes No
5. (a) If yes, list the d/b/a name(s) of the charity that will be used in the course of the solicitation campaign.

5. (b) If yes, please attach copies of the Secretary of State filing(s) or other record(s) reflecting registration of this d/b/a.

6. Will the professional solicitor at any time have custody of any contributions? Yes No

7. Provide the name(s), address(es), and telephone number(s) of the person(s) employed by the professional solicitor that will have final responsibility for the custody of contributions received by the professional solicitor:

<u>Name</u>	<u>Address</u>	<u>Telephone No.</u>
Steven Heimkreiter	45 Devils Den Ft Thomas Ky 41075	513-207-4900

8. Please indicate the projected dates when the solicitation will commence and terminate:

02/01/2011 - 12/15/2011

9. Please check each of the applicable fund-raising methods to be used in the solicitation or services to be provided to the charitable organization.

- | | |
|--|--|
| <input checked="" type="checkbox"/> telephone solicitation | <input type="checkbox"/> coupon sales |
| <input checked="" type="checkbox"/> mail solicitation | <input checked="" type="checkbox"/> advertising sales |
| <input type="checkbox"/> door-to-door solicitation | <input type="checkbox"/> other item(s) sold _____ |
| <input type="checkbox"/> consulting | <input checked="" type="checkbox"/> special events _____ |
| <input type="checkbox"/> planning | <input type="checkbox"/> show or performance _____ |
| <input type="checkbox"/> managing solicitors | <input type="checkbox"/> other (explain) |
| <input type="checkbox"/> providing promotional material | |
| <input type="checkbox"/> providing accounting services | |
| <input type="checkbox"/> Internet Solicitation _____ | |

(List URL)

10. Provide the address and the telephone number from where the solicitation will be conducted:

<u>Address</u>	<u>Telephone No.</u>
3012 Glenmore Ave Suite 13 Cincinnati, Ohio 45238	513-347-4900

11. Provide the name and residence address of each person responsible for directing and supervising the conduct of the solicitation campaign:

<u>Name</u>	<u>Address</u>
Steve Heimkreiter	45 Devils Den Ft Thomas, Ky 41075

12. **Summary of Contract Terms**

12. (a) State the percentage of the gross revenue from the solicitation campaign that the charity will receive, as set forth in the attached contract:

10 %

12. (b) The percentage shown above is a (check one) :

- Fixed percentage of the gross revenue.
- Reasonable estimate of the percentage of gross revenue. (If the percentage is estimated, the charity must be guaranteed a percentage of the gross revenue that is not less than 90% of the amount of the reasonable estimate of that percentage.)

12. (c) Term of contract: From 02/01/2011 to 12/15/2011.
(Date) (Date)

12. (d) If the Professional Solicitor will at any time have custody of contributions, list the contract provisions that describe how the contributions will be handled by the Professional Solicitor. [Please refer to R.C. § 1716.07(F).]

Contract Provision

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CONSENT STATEMENT

To be completed by an authorized representative of the charitable organization on whose behalf the professional solicitor will be soliciting contributions or whose name may be mentioned during the solicitation.

I, John R Kueffer, being first duly sworn state that I am
(Name)

the President of Teen Response Inc.
(Title or Office) (Name of charitable organization)

I hereby give permission to Liaison Marketing - A Special Event
(Professional Solicitor)

to plan, conduct, manage, or carry on a drive or campaign to solicit charitable contributions in the manner set forth in the attached Solicitation Notice.

I hereby certify that I have read the foregoing Solicitation Notice and all of the accompanying material, and that the information is true and correct to the best of my knowledge.

(Signature)

Sworn to and subscribed before me this _____ day of _____, 20_____.

(Notary Public)

Seal

