

MAIL TO:
Office of the Attorney General
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

COMMERCIAL FUND-RAISER FOR CHARITABLE PURPOSES

2002 ANNUAL FINANCIAL REPORT
(California Government Code Section 12599)



STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
Telephone: (916) 323-5079

Failure to file annual financial report by January 30 annually for each calendar year of solicitation may result in fines or filing penalties as defined in Government Code Section 12586.1

WEB SITE ADDRESS:
<http://ag.ca.gov/charities/>

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.

Name and Address of Commercial Fund-raiser:

126

EVENTS UNLIMITED, INC.
1950 SAWTELLE BLVD., SUITE# 288
LOS ANGELES, CA 90025

Name and Address of Charitable Organization:

CT No. 5031 F.E.I.N. No. 95-2030208

The Brandeis- Bardin Institute

Name of Charity
1101 Peppertree Lane

Address of Charity
Brandeis, CA 93604
City, State, and ZIP Code of Charity

National Campaign California Campaign

Dinner held (on) (from) May 7, 2002, to _____, 20____.
(Type of Activity) (Date or dates must be shown)

Is the contract between the commercial fund-raiser and charity based upon a fee or percentage of revenue? (check one)
If other, provide brief explanation _____

Fee Percentage
Other

1. REVENUE

| | | | |
|---|-------------------|-----|----------------------|
| A. Cash contributions | <u>66,068.47</u> | A. | |
| B. Entertainment sales or admission charges | <u>292,130.00</u> | B. | |
| C. Sales from products | _____ | C. | |
| D. Advertisement sales | <u>86,172.75</u> | D. | |
| E. Membership fees | _____ | E. | |
| F. Other sources: (Specify) | | | |
| a. <u>Pledges</u> | <u>44,486.25</u> | Fa. | |
| b. _____ | _____ | Fb. | |
| c. _____ | _____ | Fc. | |
| d. _____ | _____ | Fd. | |
| G. TOTAL REVENUE | | | <u>488,857.47</u> G. |

2. EXPENSES

| | | | |
|-----------------------------------|------------------|-----|----------------------|
| A. Fees or commissions | _____ | A. | |
| B. Salaries | <u>18,000.00</u> | B. | |
| C. Payroll taxes | _____ | C. | |
| D. Employee benefits | _____ | D. | |
| E. Cost of merchandise for resale | <u>44,795.19</u> | E. | |
| F. Cost of entertainment | <u>4,733.65</u> | F. | |
| G. Postage / Printing | <u>39,750.46</u> | G. | |
| H. Advertising | <u>564.49</u> | H. | |
| I. Telephone | <u>1,949.36</u> | I. | |
| J. Rental of equipment | _____ | J. | |
| K. Facilities charge | _____ | K. | |
| L. Permits | _____ | L. | |
| M. Other expenses: (Specify) | | | |
| a. <u>Decorations</u> | <u>4,858.58</u> | Ma. | |
| b. <u>Awards</u> | <u>205.31</u> | Mb. | |
| c. <u>Photography</u> | <u>1,677.85</u> | Mc. | |
| d. _____ | _____ | Md. | |
| N. TOTAL EXPENSES | | | <u>116,534.89</u> N. |

3. Amount to Charity 372,322.58 3.
4. Less additional fund-raising expenses paid by charity (to be completed by charity) _____ 4.
5. Less fair market value of goods and/or services used for the event which were paid by sponsor(s) _____ 5.
6. Net proceeds realized by charity from the campaign (subtract lines 4 and 5 from line 3) _____ 6.
7. (a) Does any officer, director, partner or owner of the Commercial Fund-raiser have any affiliation with or control over, directly or indirectly, the charitable organization for which the Commercial Fund-raiser has contracted to solicit?
 Yes No If "yes," complete the following:

| Name of officer, director, partner or owner of Commercial Fund-raiser | Name and address of charitable organization | Relationship of officer, etc. To charitable organization |
|---|---|--|
| | | |
| | | |
| | | |

(b) For each affiliation identified in 7 (a), attach copy of the contract between the commercial fundraiser and the charity.

Under penalties of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

X _____ LESLEE TARLOW PRESIDENT 12/17/02
 Signature of authorized officer (Commercial Fund-raiser) Printed Name Title Date

This report must be signed by two officers or directors of the charitable organization for verifying the distribution.

DEBORAH A. DOLDER ASST. SECY 1/13/03
 Sig Printed Name Title Date

Lee Bycel President 1/13/02
 Signature of authorized officer/director (Charity) Printed Name Title Date