

COMMERCIAL FUND-RAISER FOR CHARITABLE PURPOSES

2002 ANNUAL FINANCIAL REPORT
(California Government Code Section 12599)

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

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



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

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

<p>Name and Address of Commercial Fund-raiser:</p> <p><u>LVM PAZANTI & ASSOCIATES 357</u></p> <hr/> <p>Name of Commercial Fund-raiser</p> <p><u>9911 WEST PICO BLVD., #1530</u></p> <hr/> <p>Address of Commercial Fund-raiser</p> <p><u>LOS ANGELES, CA 90035</u></p> <hr/> <p>City, State, and ZIP Code of Commercial Fund-raiser</p>	<p>Name and Address of Charitable Organization:</p> <p>CT No. _____ F.E.I.N. No. _____</p> <p><u>CHILDREN'S ACTION NETWORK aka TIDES CENTER</u></p> <hr/> <p>Name of Charity</p> <p><u>10951 W. PICO BLVD., STE 200E</u></p> <hr/> <p>Address of Charity</p> <p><u>LOS ANGELES, CA 90004</u></p> <hr/> <p>City, State, and ZIP Code of Charity</p>
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Figures from (check one): National Campaign California Campaign

FUNDRAISER/SNOWGLOBE OPENING PARTY & MONTH OF TOWERS held (on) (from) APRIL 28, 2002, to JUNE 2, 2002

(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) Fee Percentage Other

If other, provide brief explanation _____

1. REVENUE

A. Cash contributions	<u>183,673</u>			
B. Entertainment sales or admission charges	<u>0</u>			
C. Sales from products	<u>0</u>			
D. Advertisement sales	<u>0</u>			
E. Membership fees	<u>0</u>			
F. Other sources: (Specify)				
a. _____				
b. _____				
c. _____				
d. _____				
G. TOTAL REVENUE			<u>183,673</u>	G.

2. EXPENSES

A. Fees or commissions	<u>0</u>			
B. Salaries	<u>21,989</u>			
C. Payroll taxes	<u>0</u>			
D. Employee benefits	<u>0</u>			
E. Cost of merchandise for resale	<u>0</u>			
F. Cost of entertainment (Food)	<u>18,472</u>			
G. Postage	<u>2,875</u>			
H. Advertising	<u>0</u>			
I. Telephone	<u>0</u>			
J. Rental of equipment	<u>844</u>			
K. Facilities charge	<u>0</u>			
L. Permits				
M. Other expenses: (Specify)				
a. <u>Water</u>	<u>2297</u>			
b. <u>INSURANCE</u>	<u>424</u>			
c. <u>DECORATIONS</u>	<u>950</u>			
d. _____				
N. TOTAL EXPENSES			<u>47,851</u>	N.

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Registry of Charitable Trusts

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3. Amount to Charity (subtract line 2N from line 1G) 3. 135,822
4. Less additional fund-raising expenses paid by charity (to be completed by charity) 4. 0
5. Less fair market value of goods and/or services used for the event which were paid by sponsor(s) 5. 0
6. Net proceeds realized by charity from the campaign (subtract lines 4 and 5 from line 3) 6. 135,822
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
<i>[Signature]</i>		<i>None</i>
<i>[Signature]</i>		

(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

Signature of authorized officer (Commercial Fund-raiser) *[Signature]* Ellen Pazanti OWNER
 Date Printed Name Title

Two officers or directors of the charitable organization for verifying the distribution.

Signature of authorized officer/director (Charity) *[Signature]* Jane Levick Director of Program
 Date Printed Name Title

Signature of authorized officer/director (Charity) *[Signature]* Melanie D. Johnson CFO
 Date Printed Name Title

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Charitable Services Section
Los Angeles Police Commission
Commission Investigation Division
200 N. Spring Street, Room 1513
Los Angeles, CA 90012
(213) 978-1144
(213) 978-1155 (Fax)

CF-357
Levy, Pazanti & Assoc.
City of Los Angeles
9111 W. Pico Blvd. #1530
Los Angeles, CA 90035
REPORT OF RESULTS OF ACTIVITY

Received _____
Verified _____
Org. # _____

Card # Y0417

CHILDREN'S ACTION NETWORK dba TIDES 10951 W. PICO BLVD. #206, L.A. CA 90064
Name of Organization CENTER Address and Zip Code

(310) 470-9599 FUND RAISER // SHOWHOUSE OPENING PARTY and MONTH of TOURS
Telephone Kind of Activity

Date held from: APRIL 28, 2002 to: JUNE 2, 2002

RECEIPTS: (4/4/02 - 6/15/02)

Cash Contributions	_____	\$ <u>183,673.-</u>
Ticket Sales or Admission Charges	_____	<u>0</u>
Sale of Advertising Space	_____	<u>0</u>
Returns from Sales	_____	<u>0</u>
Membership Fees	_____	<u>0</u>
Amounts Received from Other Sources (itemize)	_____	<u>0</u>
Pledges	_____	<u>0</u>
TOTAL	_____	<u>183,673.-</u>
Less Federal, State and City taxes (if applicable)	_____	<u>0</u>
TOTAL RECEIPTS	\$ <u>183,673.-</u>

FUND-RAISING EXPENSES:

Salaries, Wages, Commissions (To Whom)	<u>MGR Prod.</u>	\$ <u>21,989.-</u>
Music	_____	<u>0</u>
Rentals or Purchase of Equipment	<u>ANDY GUMP</u>	<u>844.-</u>
Printing, Postage, Stationery	_____	<u>2875.-</u>
Telephone, Television or Radio Time	_____	<u>0</u>
Advertising/Publicity Costs	_____	<u>0</u>
Decorations Favors, Costumes, Uniforms	_____	<u>950.-</u>
Costs of Merchandise, Food, etc., for Resale	_____	<u>18472.-</u>
Prizes	_____	<u>0</u>
Reservation Charges	_____	<u>0</u>
Other Expenditures (itemize)	<u>VALET</u>	<u>2297.-</u>
	<u>INSURANCE</u>	<u>424.-</u>
TOTAL FUND-RAISING EXPENSES	\$ <u>47,851.-</u>
NET REMAINING FOR CHARITABLE PURPOSES	\$ <u>135,822.-</u>

DISTRIBUTION OF FUNDS

To Whom: CHILDRENS ACTION NETWORK
Date Released: _____ Amount \$ 135,822.-

THIS REPORT MUST BE SIGNED BY TWO OFFICERS OF THE ORGANIZATION AND FILED WITH CHARITABLE SERVICES SECTION, LOS ANGELES POLICE COMMISSION WITHIN 30 DAYS AFTER THE CLOSE OF THE SOLICITATION.

Signature of Officer

E.O. _____
Title Address and Zip Code

OFFICE MANAGER 10951 W. Pico # 206 LA, CA 90064
Title Address and Zip Code

Date Submitted

10951 W. Pico #206 LA 90064 (310) 470 9599
Address and Zip Code Telephone

310 470 9599
Telephone

Registry of Charitable Trusts
Attorney General's

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