

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

TELEPHONE: (916) 323-5079

WEBSITE ADDRESS:
<http://aq.ca.gov/charities/>

COMMERCIAL FUND-RAISER FOR CHARITABLE PURPOSES
VEHICLE DONATION PROGRAM
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.

<p>Name and Address of Commercial Fund-raiser:</p> <p>513</p> <p>CAR PROGRAM LLC 3755 OMEC CIRCLE # 4 RANCHO CORDOVA, CA 95742</p>	<p>Name and Address of Charitable Organization:</p> <p>CT No. 19394 F.E.I.N. No. 23-7296716</p> <p>Vine Village Name of Charity</p> <p>4059 OLD SONOMA ROAD Address of Charity</p> <p>NAPA, CA 94559 City, State, and ZIP Code of Charity</p>
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Car Donation
(Type of Activity)

held (on) (from)

1/1

20

02

to

12/31

20

02

(Date or dates must be shown)

1.

REVENUE

A. Car/Truck Sales

1500.⁰⁰

A.

B. Boat Sales

B.

C. Real Estate Sales

C.

D. Other sources: (Specify)

a. _____ Da.

b. _____ Db.

c. _____ Dc.

d. _____ Dd.

E. TOTAL REVENUE

1500.⁰⁰

E.

2. EXPENSES

A. Fees or commissions

353.⁷⁰

A.

B. Salaries

B.

C. Payroll taxes

C.

D. Employee benefits

D.

E. Towing

E.

F. Vehicle repairs

F.

G. Parts

G.

H. DMV Fees

H.

I. Appraisals

I.

J. Detailing

59.⁰⁰

J.

K. Advertising

K.

L. Telephone

L.

M. Other expenses: (Specify)

a. Administration

262.⁰⁰

Ma.

b. _____ Mb.

c. _____ Mc.

d. _____ Md.

N. TOTAL EXPENSES

401581

674.⁷⁰

N.

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3. Distribution or net to charitable organization or charitable purposes 825.³⁰ 3.
4. Less additional expenses relating to operation of vehicle donation program paid by charity 4.
5. Total Amount charity realized from operation of vehicle donation program 825.³⁰ 5.
6. (a) Is any officer, director, partner or owner of the Commercial Fund-raiser in any way affiliated with or control, 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 6(a), attach copy of the contract between the commercial fund-raiser 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.

Signature of authorized officer (Commercial Fund-raiser) Taron Reeves Printed Name Member Manager Title 2/14/03 Date

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

Signature of authorized officer/director (Charity) Michael Kerson Printed Name Director Title 2/13/03 Date

Signature of authorized officer/director (Charity) Nancy Kerson Printed Name co-director Title 5-2-03 Date

ct-2VCF (11/2002)

RECEIVED

FEB 18 2003

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MAY 5 2003

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