

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

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
Telephone: (916) 323-0070

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

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 12588.1

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: 678 ADVANCED BUSINESS TECHNOLOGIES, INC. PO BOX 338 TALENT. OR 97540	Name and Address of Charitable Organization: CT No. <u>NIR</u> F.E.I.N. No. <u>13-1836366</u> <u>MARCH OF DIMES</u> Name of Charity <u>1050 SANSONME</u> Address of Charity <u>SAN FRANCISCO CA 94111</u> City, State, and ZIP Code of Charity
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National Campaign California Campaign

JAIL BAIL EVENT held (on) (from) SEP, 20 02 to NOV, 20 02
(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 470,005. A. —
- B. Entertainment sales or admission charges _____ B.
- C. Sales from products _____ C.
- D. Advertisement sales _____ D.
- E. Membership fees _____ E.
- F. Other sources: (Specify) _____ Fa.
- a. _____ Fb.
- b. _____ Fc.
- c. _____ Fd.
- d. _____

G. TOTAL REVENUE

470,005. (G)

2. EXPENSES

- A. Fees or commissions 81,223. A.
- B. Salaries 78,222.64 B.
- C. Payroll taxes _____ C.
- D. Employee benefits _____ D.
- E. Cost of merchandise for resale _____ E.
- F. Cost of entertainment _____ F.
- G. Postage _____ G.
- H. Advertising _____ H.
- I. Telephone _____ I.
- J. Rental of equipment _____ J.
- K. Facilities charge _____ K.
- L. Permits _____ L.
- M. Other expenses: (Specify) _____ Ma.
- a. _____ Mb.
- b. _____ Mc.
- c. _____ Md.
- d. _____

N. TOTAL EXPENSES

81,223. N.

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Page 2

3. Amount to Charity 388,782. 3.
- 4.) Less additional fund-raising expenses paid by charity (to be completed by charity) Kristin 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) 388,782. 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.

 Signature of authorized officer (Commercial Fund-raiser) Deanna L Rife president/pomer 4-28-03
 Printed Name Title Date

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

 Signature of authorized officer/director (Charity) ANDRE MATSUDA DIR of OPS 1/29/03
 Printed Name Title Date

 Signature of authorized officer/director (Charity) Dani Montague State Director 1/29/03
 Printed Name Title Date

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