

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) 323-5079
WEB SITE ADDRESS: http://aq.ca.gov/charities/

COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

ANNUAL FINANCIAL REPORT FOR 20 03
(California Government Code Section 12599)

Failure to file annual financial report by January 30th annually for each calendar year of solicitation may result in late fees 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.



Name and Address of Commercial Fundraiser: 1379
ROBERT W. JAW, SR.
Name of commercial fundraiser
1776 KIRK MONT DR.
Address of commercial fundraiser
SAN JOSE, CA. 95124
City, State, and ZIP Code

Name and Address of Charitable Organization:
CT No. 3689 F.E.I.N. No. 94-1254641
EMQ: Child and Family Services
Name of charity
232 East GISH RD.
Address of charity
SAN JOSE, CA 95112
City, State, and ZIP code of charity

Figures from (check one): National Campaign California Campaign

ONE-ON-ONE SOLICITATION held (on) (from) 9/1, 20 03, to 12/31, 20 03
(Type of activity) (Date or dates must be shown)

Is the contract between the commercial fundraiser and charity based upon a fee or percent age of revenue? Fee Percent age Other
If other, provide brief explanation _____

1. REVENUE

A. Cash contributions	<u>20,000</u>	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		<u>20,000</u> G.

2. EXPENSES

A. Fees or commissions	_____	A.
B. Salaries	_____	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		<u>-0-</u> N.

RECEIVED

FEB 27 2004

Attorney General's
Registry of Charitable Trusts

413109

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3. Amount to charity (subtract line 2N from line 1G) 20,000 3.

4. Less additional fundraising expenses paid by charity including fee paid to commercial fundraiser (to be completed by charity) 10,320 4.

5. Less fair market value of goods and/or services used for the event which were paid by sponsor(s) -0- 5.

6. Net proceeds realized by charity from the campaign (subtract lines 4 and 5 from line 3) \$ 9,680 6. ✓

7. (a) Does any officer, director, partner or owner of the commercial fundraiser have any affiliation with or control over, directly or indirectly, the charitable organization for which the commercial fundraiser has contracted to solicit?

Yes No If "yes" complete the following:

Name of officer, director, partner or owner of commercial fundraiser	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.

ROBERT W. DAW, SR. PRINCIPAL

Signature of authorized officer (commercial fundraiser) Printed name Title Date

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

SCOTT STAUB VP, Fund Development 1/26/04

Signature of authorized officer/director (charity) Printed name Title Date

Kristine S. Austin Dir, Public Relations

Signature of authorized officer/director (charity) Printed name Title Date

1/26/04