

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

COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

VEHICLE DONATION PROGRAM

ANNUAL FINANCIAL REPORT FOR 20 05

(California Government Code section 12599)
(11 Cal. Code Regs. section 308)

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.



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

WEBSITE ADDRESS:

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 for Charitable Purposes:		Name and Address of Charitable Organization:	
CF No. <u>606</u>		CT No. <u>35950</u>	F.E.I.N. <u>94-2598873</u>
<u>Penneys Towing</u>		<u>Community Resources for Independent Living</u>	
Name of commercial fundraiser for charitable purposes		Name of charity	
<u>699 The Alameda</u>		<u>439 'A' Street</u>	
Address of commercial fundraiser for charitable purposes		Address of charity	
<u>San Jose, CA 95126</u>		<u>Hayward, CA 94541</u>	
City, State, and ZIP code of commercial fundraiser for charitable purposes		City, State, and ZIP code of charity	

Figures from (check one): National Campaign California Campaign
Donated Vehicle Sales held (on) (from) 1-1-20 05, to 12-31 20 05
(Type of Activity) (Date or dates must be shown)

1. REVENUE

A. Car/Truck Sales 871- A.

B. Boat Sales _____ B.

C. Other sources: (Specify)

a. _____ Ca.

b. _____ Cb.

c. _____ Cc.

d. _____ Cd.

D. TOTAL REVENUE 871- D.

2. EXPENSES

A. Fees or commissions paid by commercial fundraiser for charitable purposes 211- A.

B. Salaries _____ B.

C. Payroll taxes _____ C.

D. Employee benefits _____ D.

E. Towing 150- E.

F. Vehicle repairs 111- F.

G. Parts 19- G.

H. DMV Fees 16- H.

I. Appraisals 20- I.

J. Detailing _____ J.

K. Advertising _____ K.

L. Telephone _____ L.

M. Other expenses: (Specify)

a. Insurance/Bonds 10- Ma.

b. Postage 1- Mb.

c. Storage Rent 30- Mc.

d. _____ Md.

N. TOTAL EXPENSES 566- N.

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- 3. Distribution or net to charitable organization 305- 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 305- 5. /
- 6. (a) Is any director, officer, or employee of the commercial fundraiser for charitable purposes a director, officer, or employee of the charitable organization listed in this report?

Yes No If "yes," complete the following:

Name and address of director, officer or employee of commercial fundraiser for charitable purposes	Name and address of charitable organization	Relationship of director, officer, or employee to charitable organization

(b) For each affiliation identified in 6(a), attach copy of the contract between the commercial fundraiser for charitable purposes 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.