

**APPLICATION FOR REGISTRATION
NONPROFIT RAFFLE PROGRAM
(California Penal Code section 320.5)**



The registration period is September 1 to August 31.
After August 31, a new registration is required.

**A CHECK IN THE AMOUNT OF \$20 MADE PAYABLE TO
DEPARTMENT OF JUSTICE MUST ACCOMPANY THIS
REGISTRATION FORM**

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
(916) 210-6400

WEBSITE ADDRESS:
www.ag.ca.gov/charities

Proof of California Franchise Tax Board exempt status must be attached to this registration application. This application will otherwise be deemed deficient and returned to the organization.

(For Registry Use Only)

Raffle Registration Number: _____

Name of Organization

Provide at least one of the following:

Address of Organization

Federal Employer Identification Number (FEIN):

City or Town, State and ZIP Code

E-mail Address

Corporate Number: _____

Telephone Number

Organization Number: _____

Fax Number

State Charity Registration Number: _____

Specify the organization's tax - exempt status pursuant to California Revenue and Taxation Code section:

23701a Labor, agricultural, or horticultural organizations

23701g Nonprofit pleasure and recreation clubs

23701b Fraternal beneficiary societies, orders or associations

23701k Religious or apostolic corporations having common or

23701d Religious, charitable, scientific, testing for public safety, literary, educational, amateur sports or prevention of cruelty to children or animals organization

23701l Domestic fraternal societies, orders or associations

23701e Business leagues, chambers of commerce, real estate boards, and boards of trade

23701t Homeowners and associations

23701f Civic leagues, social welfare organizations and local employee organizations

23701w Veterans organizations

Proposed date(s) of raffle(s) [REQUIRED] _____
(month/day/year)

By signing this application for registration, I hereby certify all of the following:

1. Applicant is a private, nonprofit organization, 2. Applicant has been qualified to conduct business in the State of California for at least one year prior to the raffle first held and 3. all information provided on this application is true and correct.

Signature of Authorized Officer or Director Who Prepared This Form

Date

Printed Name of Authorized Officer or Director

Title of Authorized Officer or Director