VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
OFFICE OF CHARITABLE AND REGULATORY PROGRAMS
PO Box 526 - Richmond, VA 23218-0526
Phone: 804-786-1343 • FAX: 804-225-2666 • www.vdacs.virginia.gov

REMITTANCE FORM
PROFESSIONAL SOLICITOR'S FINAL ACCOUNTING REPORT LATE FEES
FORM 130

YOU MUST USE THIS FORM TO RECEIVE PROPER CREDIT OF YOUR FEE(S)

Organization name: _____

Address: _____

_____

Federal Employer Identification Number: _____

(If you do not have an FEIN, please enter the Social Security Number of the person who has signed this form).

Campaign Solicitation Dates: From: _____ To _____

Name of charitable or civic organization on whose behalf this campaign was conducted:

_____

Late Final Accounting Report Fees ($25 per month or portion thereof)

$_____ (910-02799)

Check Number _____

MAKE CHECKS PAYABLE TO "TREASURER OF VIRGINIA"

The Code of Virginia authorizes state agencies to assess interest, administrative charges and penalty fees for returned checks and past-due accounts in accordance with guidelines promulgated by the Department of Accounts.

PLEASE ATTACH COMPLETED REMITTANCE FORM TO FRONT OF REGISTRATION FORM WITH CHECK ATTACHED AND MAIL TO:

Virginia Department of Agriculture and Consumer Services
P.O. Box 526
Richmond, VA 23218-0526

VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
OFFICE OF CHARITABLE AND REGULATORY PROGRAMS
PO Box 526 - Richmond, VA 23218-0526
Phone: 804-786-1343 • FAX: 804-225-2666 • www.vdacs.virginia.gov

FINAL ACCOUNTING REPORT
FORM 130

The professional solicitor shall submit the final accounting report no later than 90 days after the completion date of the solicitation campaign in Virginia, or in accordance with any extensions granted, in compliance with subsection E of §57-61 (Registration of professional fund-raising counsels and solicitors), Code of Virginia (1950), as amended. Any subsequent changes in the information submitted shall be reported every 90 days thereafter, for a fund-raising campaign of finite duration; and on an annual basis, no later than 90 days after the anniversary of the contract date, for a continuous fund-raising campaign. Untimely filing of this report shall result in the assessment of late fees provided by law.

1. Primary name of professional solicitor: _____

2. Name of charitable or civic organization: _____

3. Actual dates of solicitation in Virginia: From: _____ To: _____

4. Attach a copy of the first page of the original or amended Solicitation Notice filed for this campaign.

5. Were written scripts used for the solicitation?
   ☐ Y ☐ N If "Yes," attach copies of all written scripts used.

6. Attach a copy of the actual written request for a contribution, or written receipt made in response to an oral request for a contribution, including a copy of any return envelope.

7. Financial summary for this campaign:

   Total funds collected for the entire campaign _____

   Total funds collected in Virginia _____

   Total received or retained by the charitable or civic organization after all solicitor's fees and expenses were paid. _____

8. For an advertising campaign, provide the number of publications/copies distributed: _____

9. VERIFICATION BY CHARITABLE OR CIVIC ORGANIZATION:

I, the Executive Officer of the charitable or civic organization:

a) Have reviewed this report at the conclusion of the fundraising campaign,
b) Verify that all requests for information in this form are properly completed,
c) Verify that the amount listed as the "Amount received or retained by charitable or civic organization" ☐ **IS** ☐ **is NOT** the actual amount received or retained by the charitable or civic organization. If the amount listed is not the actual amount received or retained, I have attached a full explanation for the discrepancy, and
d) If the donations were collected or received by the solicitor, I verify that I ☐ **HAVE** ☐ **have NOT** received copies of the bank statements for this campaign account from the professional solicitor on a monthly basis.

_____ _____
Signature of Executive Officer Print name

_____ _____ _____
Title Telephone number Date:

10. ATTESTATION BY THE PROFESSIONAL SOLICITOR

I attest that this accounting is true and accurate and includes all required attachments.

Signature of professional solicitor's authorized representative

Print name

Title

Telephone number

Date:

Professional Solicitor's Checklist:

"X"	**ITEM**
☐	Have you filled in every blank? The form will **not** be considered as **filed** if there are any omissions. Any late fees will continue to accumulate until the complete form is filed.
☐	Have you signed the form? The form with ORIGINAL signatures (no photocopies) must be submitted to the Virginia Office of Charitable and Regulatory Programs.
☐	Have you obtained the charity's authorized signature?
☐	Have you attached a copy of the first page of the original or amended Solicitation Notice you filed?
☐	Have you attached copies of scripts?
☐	Have you attached copies of all materials that were sent or given to donors?