



Kansas Attorney General

Derek Schmidt

Consumer Protection Division
120 SW 10th Avenue, 2nd Floor
Topeka, KS 66612-1597

PHONE: (785) 296-3751 or (800) 432-2310 (toll free in Kansas)

FAX: (785) 291-3699 • www.InYourCornerKansas.org

Professional Solicitor Application

Filing fee

The filing fee for this document is **\$25**.

Payment

Please enclose a check or money order payable to the Kansas Attorney General. Forms received without the appropriate fee will not be accepted for filing. Please do not send cash.

**Registration/
re-registration**

This registration/re-registration shall be for a period of one year, or a part thereof, expiring on the 30th day of June and may be renewed upon written application for additional one-year periods.



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This form must be complete and accompanied by the correct filing fee or the document will not be accepted for filing.

1. This report covers the contract year of:	Beginning Date:			Ending Date:		
	Month 7	Day 1	Year	Month 6	Day 30	Year
2. Name of professional solicitor						
3. Address of professional solicitor	Address					
	City			State		Zip
4. Name of professional fund raiser						
5. Address of professional fund raiser	Address					
	City			State		Zip
6. Date of application	Month	Day	Year			

7. I agree to abide by the disclosure requirements of Kansas law, specifically, K.S.A. 17-1766, as set forth below:

All solicitations by professional solicitors shall contain the following disclosures at the point of solicitation:

- a. The name, address and telephone number of the charitable organization;
- b. the registration number, obtained pursuant to K.S.A. 17-1763 for the charitable organization;
- c. if the solicitation is made by a person acting as a professional solicitor, the registration number obtained pursuant to K.S.A. 17-1765; and
- d. that an annual financial report required by K.S.A. 17-1763 for the preceding fiscal year is on file with the Attorney General.

8. I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct.

Signature of Applicant X	Month	Day	Year
Signature of Professional Fund Raiser X	Month	Day	Year