STATE OF CALIFORNIA CT-NRP-2 (Rev. 09/2017)

NONPROFIT RAFFLE REPORT



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

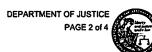
STREET ADDRESS: 1300 | Street Sacramento, CA 95814 A report must be completed for each year in which a raffle was conducted (September 1 through August 31).

... 0-4-1----4

	210-6400	(California Penal Code section 320.5)			
	SITE ADDRESS: oag.ca.gov/charities	(For Registry Use Only)			
PAR	T A: General Organization	Reporting Information			
Name of Organization:		Provide at least one of the following:			
AAU\	N Citrus Heights American River	Branch State Charity Registration Number: CT0269774			
Address of Organization:		Raffle Registration Number: RF00009489			
P.O.	Box 1555				
	r Town, State and ZIP Code:	Federal Employee Identification Number (FEIN):			
Fair Oaks, CA 95628		84-3730820			
	il Address:	SOS Corneration Number or ETP Organization Number			
of Off	ficer who prepared report	SOS Corporation Number or FTB Organization Number: 4528185			
-	hone Number:				
of Off	ficer who prepared report				
Fax N	lumber:				
Part	B: Raffle Information				
1.	Raffle year ending August 31				
		(Year)			
2.	Aggregate gross receipts from the operation of raffle(s): \$ 705				
3.	Aggregate direct costs incurred by the organization from the operation of raffle(s): \$ 30				
4.	At least 90% of the gross receipts received from ticket sales must be used for the beneficial or charitable purpose of the eligible organization or for the benefit of another eligible organization. Did direct costs exceed 10% of gross receipts and did your organization use funds from sources <i>other</i> than from ticket sales to offset costs?				
	If yes,				
	4(A) Total funds from sources raffle(s)?	other than ticket sales used for the administration or other costs of conducting the			
	\$				
	4(B) What was the source of t	ese funds?			
5.	Describe the charitable or ber for which the raffle proceeds w				

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Title of Authorized Officer or Director

6.	Were some or all of the raffle proceeds used for the ber	_	Yes 🗹	
	If the answer is yes, provide the following informations used. Attach additional sheets of paper, if necessary	tion below for each organization for which the proceed ary.	ls were	•
Recip	ient Organization	Dollar Amount of Raffle Proceeds to Recipient O	rganiza	ation
Address of Recipient Organization Contact Person for Recipient Organ		Contact Person for Recipient Organization		
City, S	State, and ZIP Code	Telephone Number of Recipient Organization		
Part	C: Certification by Authorized Officer or Dire	ctor of Reporting Organization		
l he	ereby certify that:			
			True	False
1)	At least 90% of the gross receipts (total dollar amount prior to deduction of expenses) received from the sale of raffle tickets was used for the beneficial or charitable purposes of the eligible organization conducting the raffle or for the benefit of another eligible organization.			
2)	None of the funds required to be used for beneficial or charitable purposes were provided to an officer, director or member (as defined by Corporations Code section 5056) of the organization which conducted the raffle(s).			
3)	No person involved in or connected with the conduct of the raffle(s) was compensated by the organization conducting the raffle(s) from raffle proceeds required to be used for beneficial or charitable purposes.			
4)	No gaming machine, apparatus or device, including but machine as described in California Penal Code sections raffle(s).		~	
5)	No individual corporation, partnership or other legal entithe raffle(s) other than the organization conducting the rwhich received funds from the raffle(s).		~	
6)	No raffle was conducted, and no raffle tickets were sold, traded, or redeemed, within an operating racetrack enclosure, satellite wagering facility, or gambling establishment.			
7)	Tickets were not sold, traded or redeemed over the Inte	rnet.	1	
8)	Raffle funds were not used for any purpose outside of C	California.	1	
the an in Par	answer to any question in Part C, Items 1 through 8, waswer. Use additional sheets of paper, if necessary, for the community of the community	or the explanation. If the answer to more than one to each explanation.	questi	on
Si	gnature of Authorized Officer or Director Who Prepared to Report	he Date		_
		Treasurer		

Printed Name of Authorized Officer or Director