Oregon Department of Justice-Charitable Activities Section Solicitation Complaint Form

Mail completed form to Oregon Department of Justice, 10	0 SW Market Street, Portland, Ore	gon 97201		
1. Your name and address:		Telephone number:		
2. Name of nonprofit organization:	Date called:	Time called:		
3. Form of solicitation(e.g. telephone, door-to-door, mail):				
4. How can the soliciting organization be reached?				
Address	Phone Number(s)			
5. Was the solicitation made by a professional fund-raiser on	behalf of the nonprofit or	ganization?		
\Box Yes(write fund-raiser name, address, and telephone)	number) 🗆 No	□ Do not know		
6. How is your donation to be used by the nonprofit organization?				
7. Did the solicitor represent what percentage of your donation	on would be used for the a	ctivity stated above?		
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\Box Yes% or \$ \Box No				
8. Was the solicitor seeking a donation only or was he/she se	lling a product or service?			
1	Advertising □ Other			
Only				
9. Were there any representations made by the solicitor that	you question? (use reverse	if needed)		
		,		
Places attach conject of all material received or othe	r information relevant	to your complaint		
Please attach copies of all material received or othe This complaint may be sent to the company or person ident				
this office. If for any reason you do not want a copy of this co	mplaint to be sent to the b	ousiness identified, please		
so state. Please be advised that, in any event, this complaint	will become part of the put	blic record.		

Additional information	
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