485-43

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
Telephone: (916) 323-5079

WEB SITE ADDRESS:
http://ag.ca.gov/charities/

COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

ANNUAL FINANCIAL REPORT FOR 20 04

(California Government Code Section 12599)

Failure to file annual financial report by January 30th annually for each calendar year of solicitation may result in late fees as defined in Government Code Section 12586.1

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.

Name and Address of Commercial Fundraiser: 485	Name and Address of Charitable Organization:
MDS COMMUNICATIONS CORPORATION	CT No. _____ F.E.I.N. No. _____
545 W. Juanita Avenue	Union Rescue Mission (Name of charity)
Mesa AZ 85210	545 S. San Pedro St. (Address of charity)
	Los Angeles CA 90013 (City, State, and ZIP code of charity)

Figures from (check one): National Campaign ☐ California Campaign ☑

Telemarketing (Type of activity) held (on) (from) 1/1/2004, 20____ to 2/16/2004, 20____ (Date or dates must be shown)

Is the contract between the commercial fundraiser and charity based upon a fee or percentage of revenue? Fee ☑ Percentage ☐ Other ☐
If other, provide brief explanation _____

1. REVENUE

A. Cash contributions		A.
B. Entertainment sales or admission charges		B.
C. Sales from products		C.
D. Advertisement sales		D.
E. Membership fees		E.
F. Other sources: (Specify)		
a.		Fa.
b.		Fb.
c.		Fc.
d.		Fd.
G. TOTAL REVENUE		G. Ø

2. EXPENSES

A. Fees or commissions		A.
B. Salaries		B.
C. Payroll taxes		C.
D. Employee benefits		D.
E. Cost of merchandise for resale		E.
F. Cost of entertainment		F.
G. Postage		G.
H. Advertising		H.
I. Telephone		I.
J. Rental of equipment		J.
K. Facilities charge		K.
L. Permits		L.
M. Other expenses: (Specify)		
a.		Ma.
b.		Mb.
c.		Mc.
d.		Md.
N. TOTAL EXPENSES		N. Ø

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3.	Amount to charity (subtract line 2N from line 1G)	N/A 3.
4.	Less additional fundraising expenses paid by charity including fee paid to commercial fundraiser (to be completed by charity)	N/A 4.
5.	Less fair market value of goods and/or services used for the event which were paid by sponsor(s)	N/A 5.
6.	Net proceeds realized by charity from the campaign (subtract lines 4 and 5 from line 3)	N/A 6.

7. (a) Does any officer, director, partner or owner of the commercial fundraiser have any affiliation with or control over, directly or indirectly, the charitable organization for which the commercial fundraiser has contracted to solicit?

☐ Yes ☑ No If "yes" complete the following:

Name of officer, director, partner or owner of commercial fundraiser	Name and address of charitable organization	Relationship of officer, etc. to charitable organization

(b) For each affiliation identified in 7(a), attach copy of the contract between the commercial fundraiser and the charity.

Under penalties of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

Jonathan Moore Pres. 4/1/04
Printed name Title Date

charitable organization for verification.

ROBERT S. HOBBS Vice President 4/12/04
Printed name Title Date

RICHARD SYKES CFO 4/21/04
Signature of authorized officer/director (charity) Printed name Title Date

(b) For each affiliation identified in 7(a), attach copy of the contract between the commercial fundraiser and the charity.

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