KANSAS SECRETARY OF STATE
Professional Solicitor Application

All information must be completed or this document will not be accepted for filing.

1. Name of professional solicitor:

2. Address:  
   Street address  
   City  State  Zip

3. Name of professional fund raiser:

4. Address:  
   Street address  
   City  State  Zip

5. Date of Application:  Month  Day  Year

6. 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;
   (d) that an annual financial report required by K.S.A. 17-1763 for the preceding fiscal year is on file with the secretary of state.

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

Executed on the Day of Month, Year.

Signature of applicant  Signature of professional fund raiser

Instructions
1. Please be sure to enclose the $25 filing fee made payable to the secretary of state with the form. Please do not send cash.
2. 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.
Notice: There is a $25 service fee for all returned checks.