

# 2017 UNAFFILIATED AGENCY APPLICATION INSTRUCTIONS

**APPLICATION DEADLINE IS TUESDAY, MARCH 7, 2017**. Applications may be sent by mail or emailed along with all supporting documents. Applications must be postmarked by, or prior to March 7, 2017. There will be no extensions or exceptions.

Applications sent via mail to: NJECC, PO Box 566, Allentown, NJ 08501. Overnight mail: NJECC, 5 Jennings Drive, Allentown, NJ 08501. Applications emailed to: <a href="mailto:sobrien@njecc.net">sobrien@njecc.net</a>

Before submitting your application, please check to make sure all information is accurate and all attachments and signatures are included. Incomplete applications will not be considered.

The ECC Steering Committee will assess applications for compliance and completeness before making recommendations for approval or decline. Charities Registration/Division of Consumer Affairs will notify all applications within 30 days of the deadline of their campaign status.

#### **Instructions for Completion**

It shall be the responsibility of the Charity to certify you are in compliance with Charities Registration. The NJECC Steering Committee reserves the right to request information at any time from a charity that documents it is in compliance with campaign regulations. Such information shall be provided within 10 days of the notification postmark date. The NJECC Steering Committee may deny eligibility of a charity if you fail to provide the requested information within the stated 10-day period.

#### APPLICANT INFORMATION

#### LEGAL NAME OF ORGANIZATION

The name of the applicant charity as it is listed with Charities Registration/Division of Consumer Affairs

#### MAILING ADDRESS

List the mailing address where communications from the NJECC will be sent.

#### NAME/TITLE OF ORGANIZATION CONTACT

Provide the name, title, telephone, and email address for the Primary Contact Person for communication about the NJECC application.

#### **WEBSITE**

List the complete Internet address to be used in all 2017 campaign materials. If your organization does not have a website, please put N/A in this space.

#### **CHARITIES REGISTRATION #**

Please provide the Charities Registration Number for the Agency.

#### **CERTIFICATIONS**

"Yes" or "No" must be checked for all questions in this section.

The following data must be submitted for each of the TWO fiscal year's preceding this application. Information prior to 2014 WILL NOT BE ACCEPTED. The agency must have raised at least \$15,000 from individual citizens of New Jersey.

Total Amount of funds raised for FYE 2015:	\$
Amount of those funds raised from individual citizens of NJ:	\$
Total Amount of funds raised for FYE 2016: (if 2016 is unavailable, submit 2014):	\$
Amount of those funds raised from individual citizens of NJ:	\$

#### **ATTACHMENTS**

Attachment A List of Names/Address of Board of Directors and Executive Personnel A list of names and addresses of the governing board, officers of the governing board, AND the names and addresses of executive personnel at the time of application submission.

#### Attachment B IRS Determination Letter

Attach copy of Federation's IRS Determination Letter

#### Attachment C Anti-Terrorism Compliance Measures Form

Attached completed and signed official certification that the Agency is in compliance with the USA PATRIOT ACT as well as other counterterrorism laws.

#### Attachment D List of 25-Word Description (Excel Spreadsheet)

Submit a 25-word description of the health, welfare or human care services that your agency provides in New Jersey, along with the Charities Registration number, telephone number and website via email to <a href="mailto:sobrien@njecc.net">sobrien@njecc.net</a> using **ONLY** the database spreadsheet provided on the NJECC website (<a href="www.njecc.net">www.njecc.net</a>). This statement will be included in the published brochure/reference guide and must not exceed 25 words. If submitting a name change, you must provide the Amended Articles of Incorporation Name Change/Amendment Page for the agency. Without this document, the name change will not be made.

#### Attachment E Independent Auditor's Report

Submit most recent Independent Auditor's Report (TWO years if you are a NEW applicant.) Information prior to 2014 will not be accepted. If you are not required to submit an audit to the Division of Consumer Affairs you must submit certified financial statements signed by an authorized officer.

#### Attachment F IRS Form 990

Submit a complete copy of the most recent IRS Form 990. (Two years if you are a NEW applicant.) Information prior to 2014 will not be accepted. Attachment E & F must be for the same time period. Federation officer and preparer must sign IRS Form 990. If the IRS 990 has been submitted electronically, please provide Form 8879EO – IRS eFile Signature Authorization.

# Attachment G Annual Report

Submit a copy of Annual Report for the most recent fiscal year (acceptable substitutes: year end summary, newsletter or flyer which describes the agency's activities and accomplishments and provides the names of chief administrative personnel)

Attachment H Articles of Incorporation (First Time Applicants Only)
Submit a full copy of the Federation's Articles of Incorporation

Attachment I By Laws (First Time Applicants Only)
Submit a full copy of the Federation's ByLaws.

### **SIGNATURE**

The NJ Employees Charitable Campaign requires that all organizations applying for admission certify compliance with the requirements as outlined within the 2017 NJECC application.

Please sign and date your application. The signatory must be an authorized agent of the organization.

Please submit your completed application package including all required attachments to:

Email: sobrien@njecc.net

Mail: New Jersey Employees Charitable Campaign
PO Box 566
Allentown, NJ 08501

Overnight Mail: New Jersey Employees Charitable Campaign 5 Jennings Drive Allentown, NJ 08501

The deadline for receipt of applications is Tuesday, March 7, 2017 Applications must be postmarked no later than March 7, 2017.

We are glad to answer any questions regarding the application procedures.

Susan O'Brien/Campaign Manager 609.477.8306 sobrien@njecc.net

# NEW JERSEY EMPLOYEES CHARITABLE CAMPAIGN PO BOX 566 ALLENTOWN, NJ 08501

# **UNAFFILIATED AGENCY APPLICATION 2017 CAMPAIGN**

## READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING

Each charitable organization accepted into the NJECC must be a registered charity in full compliance with the registration requirements of New Jersey law, unless it is a religious entity or an educational institution. To confirm the registration status of an agency or request the charitable registration number, call the Division of Consumer Affairs Charities Registration Section at 973-504-6215 or visit their website at <a href="https://www.state.nj.us/lps/ca/charfrm.htm">www.state.nj.us/lps/ca/charfrm.htm</a>. If the agency is not in full compliance with the registration requirements, it will not be accepted into the campaign.

PART A APPLICANT INFOR	RMATION			
Application Status:	NEW 🗌	RENEWAL		
Legal Name of Agency: (As Registered with NJ Division	n of Consumer Affa	irs)		
Agency Address:				
Contact Name/Title For Application				
Telephone #:				
Fax #:				
Email Address:				
Web Address:				
Charities Registration #:				
If Exempt, provide Exemption #		Religious   Educational	☐ Library ☐	
PART B CERTIFICATION				
Must Check "Yes" or "No" to A	LL the following qu	estions:		
Is the Agency directed by a gover material conflict of interest in their			YES 🗌	NO 🗌
Has the organization received tax of the Internal Revenue Code? If	•	` ,` ,	YES □ ate.	NO 🗌

Charitable Re	gistration and	as a charitable organization pursuant to the NJd Investigation Act? Your agency must be in he application deadline (3/7/17).	YES NO
		for each of the two fiscal years preceding this age ACCEPTED.	oplication. Information
Total Amount of funds raised FYE 2015			\$
Amount of those funds raised from individual citizens of NJ:			\$
Total Amount of funds raised FYE: 2016 (if 2016 is unavailable, submit 2014)			\$
Amount of the	se funds rais	sed from individual citizens of NJ:	\$
PART C	ATTACHME	NTS	
☐ Attach	ment A	List of Board of Directors AND Executive Person	onnel
☐ Attach	ment B	IRS Determination Letter	
☐ Attach	ment C	Anti-Terrorism Compliance Measures Form	
☐ Attach	ment D	List of 25-Word Description	
☐ Attach	ment E	Independent Auditor's Report (most recent 2 ye	ears if first time applicant)
☐ Attach	ment F	IRS Form 990 (most recent 2 years if first time	applicant)
☐ Attach	ment G	Annual Report (most recent 2 years if first time	applicant)
☐ Attach	ment H	Articles of Incorporation (first time applicant Of	NLY)
☐ Attach	ment I	Bylaws (first time applicant ONLY)	
PART D	SIGNATURE	<b>.</b> <b>.</b>	
I also recogniz	ze that this c	n provided herein is true and correct to the best ampaign is the only vehicle by which State emp rear and we will not reach out through the work	loyees can be solicited for
Print, sign,	and mail	or email your completed application a	nd attachments.
Date:			
Authorized C	official Signa	ture:	
Print Name/T	itle:		



# EMPLOYEES CHARITABLE CAMPAIGN ANTI-TERRORISM COMPLIANCE MEASURES

IN compliance with the spirit and intent of the USA PATRIOT ACT and other Counterterrorism laws, the New Jersey Employees Charitable Campaign requests that each funded agency ("Organization") certify the following:

"I hereby certify on behalf of (Agency Name)
that all New Jersey Employees Charitable Campaign funds and donations will be used in compliance with all applicable anti-terrorist financing and asset control laws, statutes and executive orders."
Signature of Authorized Official (required)
Print Name
Title
Date