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| **NONPROFIT CLIENT**  **START UP INFORMATION** |
| **Date:** Click here to enter text. |
| **Legal Name of Nonprofit:** Click here to enter text. |
| **Mailing address:** Click here to enter text. |
| **Physical address:** Click here to enter text. |
| **Website:** Click here to enter text. |
| ***Please indicate main contact for attorney.***  **Name:** Click here to enter text.  **Title:** Click here to enter text.  **Phone Number (s):** Click here to enter text.  **E-mail:** Click here to enter text.  **Mailing Address:** Click here to enter text. |
| **Have you submitted Articles of Incorporation?**  **Yes**  **No**  **If Yes, when:** Click here to enter text.  **Have you adopted Bylaws?**  **Yes**  **No**  **Did you apply for an EIN?**  **Yes**  **No**  **If yes, provide the EIN:** Click here to enter text. |
| **Did you register with the Oregon DOJ/Charitable Activities Section?**  **Yes**  **No**  **Is there a board of directors?**  **Yes**  **No**  **List names of board of directors or those currently involved with starting the nonprofit:** Click here to enter text. |
| **Describe the nonprofit’s mission or purpose:** Click here to enter text. |
| **Describe what you have accomplished to date or provide some background on why you are starting a nonprofit:** Click here to enter text. |
| **What is your timeline for starting and operating the nonprofit?** Click here to enter text.    **What are the credentials for the people who will or are operating the nonprofit?**  Click here to enter text. |
| **Estimate the annual revenue on average for the first four years of operation:**  Click here to enter text.  **How will you raise these funds and do you have any experience raising funds?**  Click here to enter text. |
| **Attach Documents (if applicable):**  **Articles of Incorporation**  **Bylaws**  **EIN**  **OR DOJ Registration**  **Budgets or Financial Reports** |
| **Topics of Interest for Training:**  Click here to enter text. |
| **FOR OFFICE USE ONLY** |
| **Fee Agreement:**  **Interview:**  **Registered Agent:**  **Documents Received:**  **Secretary of State Filing:**  **Registry Date:**  **OR DOJ:**    **IRS:**  **Notes:** |