STATE OF COLORADO Department of State

1700 Broadway, Suite 550 Denver, CO 80290



Jena Griswold Secretary of State

Mike Hardin Director, Business & Licensing Division

Dear Consumer;

Thank you for contacting the Colorado Secretary of State's Charities Program. The Secretary of State has jurisdiction to investigate complaints for possible violations of the Colorado Charitable Solicitations Act. Information that citizens bring to us through complaints is very valuable.

This memo provides some guidelines regarding the complaint-handling process. These guidelines are meant to help you understand what we will be doing with your complaint.

- 1. **We do not represent you.** Any action that we take is on behalf of citizens in general. By accepting your complaint, we have not agreed to represent you in any capacity.
- 2. **Our investigation may help to resolve your problem.** Our investigations are not designed to resolve individual disagreements. Disagreements might need to be resolved in civil proceedings between the parties involved. We investigate to determine whether or not we can prove that a charity or paid solicitor has violated a law. However, an investigation often causes the charity or paid solicitor to reconsider its position in the individual case.
- 3. **How you can help us to evaluate your complaint:** In order to help us accurately evaluate your claim, it is important that copies of all relevant documents be included with your complaint form.

Don't send original documents; keep the originals for your own records. Depending on the nature of your complaint, you might want to include copies of checks written for donations (both front and back), receipts, correspondence, advertisements, bank statements, or any other document that helps explain your complaint.

4. What we might ask you to do: In order to take legal action against the charity or paid solicitor, we will need your full cooperation. Although the great majority of cases are settled without a trial, you might be asked to be a witness. If you are unable or unwilling to testify about your complaint, please let us know on the complaint form. Refusing to testify won't prevent us from addressing systemic issues raised by the complaint or concern.

The Colorado Secretary of State's office and the Colorado Attorney General's office work cooperatively to protect public charitable assets and resolve complaints accusing charities of violating the Colorado Charitable Solicitations Act. The information that you provide in your complaint may be shared by staff at both of these state agencies.

This office can't provide legal advice to you. To preserve any legal rights you may have, you may wish to seek a private attorney. Although you may feel that the charity or paid solicitor in question has treated you badly, this does not necessarily mean that they are engaged in unlawful activity.

Thank you for your time, and we appreciate your bringing this situation to our attention.

Charities Program Complaint Form

Colorado Secretary of State Charities Program 1700 Broadway, Ste. 550 Denver, CO 80290 Phone: 303-894-2200, option 2 Fax: 303-869-4871 Email: charitable@coloradosos.gov Form can be mailed, faxed, or emailed.

For	office	use o	only		

Your information						
Last name	First name					
Street address						
City	State	ZIP Code				
Dhono number	Alternate phone number (if	anyl				
Phone number	Alternate phone number (if	any)				
Email address						
Charity or paid solicitor information						
Name of the charity that your complaint is about						
Name of the paid solicitor that your complaint is about						
Street address (if known)						
City	State	ZIP Code				
	Otato					
Phone number Email address	R	egistration number (if known)				
Contact						
Select one: Contact me using the information enter	ed above, or Contact the	person named below:				
ame Phone number						
Address						

Complaint information						
If this complaint involves an at-risk adult or an adult over age 60, please mark this box:						
What was the name of the person with whom you dealt?						
What was the date?						
Did you make a donation? Yes No If yes, enter the amount: \$						
How did you pay?						
Describe any relationship you have or had with the organization—for example, if you are a current or former						
employee, volunteer, member, director, family member, contractor, etc.						
Complaint						
Include as many specific details as you can. Include additional pages if necessary.						

Complain	t Review		
evidence supp	y your complaint to determine if a violation of the Colorado Charitable sports a probable violation, we will process your complaint. We may remay be asked to provide additional information.	· ·	
	that you filed the complaint against will be given a summary of the con that you submitted. He or she is required to respond to the complain		
Can we disc	close your name and address to the person or organization t	hat is the subject of this complaint?	
Yes	No		
Are you willi	ng to testify about this complaint in an enforcement proceed	ling?	
Yes	No		
Can we disc	close your name, address and the content of this complaint t	o another government agency?	
Yes	No		
Acknowle	edgement		
I have read	the preceding information and it is true to the best of my kno	owledge and belief.	
Sign o	r type your name	Date	

Please attach a copy of any correspondence or documentation relating to the complaint.

If submitting by email, please attach documentation in PDF format.

If you have documents on legal sized paper (8" X 14"), please submit hard copies in the original size.