



Camden County Animal Shelter
 Animal Welfare Society of Camden County
 P.O. Box 475 • 125 Barnsboro Road • Blackwood, NJ 08012
 Phone: 1-856-401-1300 • Fax: 1-856-401-1309
 www.ccasnj.org • info@ccasnj.org



All documents are widely available, free of charge, on the web at www.ccasnj.org, under "about us".

Date: _____ Reason For Request: _____

TO RECEIVE REQUESTED DOCUMENTS YOU MUST MAIL THE FOLLOWING TO THE ABOVE ADDRESS:

- This request form filled out in its entirety.
- Payment in full - the sum of the fees for each requested document plus the postage. Payment may be made in the form of a money order payable to Animal Welfare Society of Camden County, cash, Visa, or Mastercard. Checks will NOT be accepted. This payment must be received in its entirety before records will be released. Upon receipt of the full payment and this form, all available records will be sent to you.

Charges are pursuant to Section 6104(d)(1)(B) of the IRS's *Public Disclosure of Material Relating to Tax-Exempt Organizations* regulations which permit an organization to charge a reasonable fee for the cost of copying and mailing documents in response to requests for copies. For each requested document, the 1st page is \$1.00 and each subsequent page is \$0.15. In addition, the cost of postage, based on a flat rate USPS Priority Envelope with Signature Confirmation, must be added to your fee.

We will do our best to process your request in a timely manner. In the event that one of the requested documents has not yet been completed, your entire request will be sent out upon completion of the final document.

To check the status of your request, you may e-mail board@ccasnj.org.

Last Name: _____ First Name: _____

Address: _____ City: _____ State: ____ ZIP: _____

Home Phone: (____) _____ Cell Phone: (____) _____ Email: _____

Please include your phone numbers above so we can contact you about your request if necessary.
 Please check off the forms you are requesting below.

<u>Document</u>	<u># Pgs</u>	<u>Fee</u>	<u>Document</u>	<u># Pgs</u>	<u>Fee</u>	<u>Document</u>	<u># Pgs</u>	<u>Fee</u>
___2007 Federal 990	TBD	TBD	___IRS Form 1023	TBD	TBD	___By-Laws	13	\$2.80
___2006 Federal 990	19	\$3.70	___2006 Audited Financial Statement	8	\$2.05	___Articles of Incorporation	5	\$1.60
___2005 Federal 990	17	\$3.40	___2007 Audited Financial Statement	TBD	TBD	___IRS 501(c)3 Letter	8	\$2.05
Postage (Includes Priority Mail and Signature Confirmation):				\$6.70	Total Fees Owed:		\$_____	

Signature of Requestor: _____ Date: _____

OFFICE USE ONLY: (If a request is denied, you may contact board@ccasnj.org for appeal information)

Documents Fulfilled:	_____	Documents Denied:	_____
Date:	_____	CCAS Rep:	_____
Reason For Denial:		_____	