



Application for Designation as a Small Donor Organization



ORGANIZATION	1	Name: _____ Address: _____ Contact Name: _____ Title: _____ Phone: _____ Email: _____ Type: <input type="checkbox"/> 501(c)(4) <input type="checkbox"/> 501(c)(5) <input type="checkbox"/> 501(c)(6) <input type="checkbox"/> Political Committee
NOTICE OF REQUIREMENT TO SEND REQUESTED ATTACHMENTS	2	After submitting this form, the program will request attachments necessary to demonstrate that your organization fits the requirements to be designated a Small Donor Organization, such as: <ul style="list-style-type: none">• Bank statements that show the organization's balance at various points in time,• All contributions received from the first day of this election cycle to present, and• The names, addresses, and contribution amounts of all contributors. <p>This application is not complete until all requested attachments are submitted.</p>
HOW TO SUBMIT THIS FORM	3	Option 1: Email this form to SmallDonorElections@portlandoregon.gov . Option 2: Mail form to Small Donor Elections, 1120 SW 5 th Ave, Suite 901, Portland, OR 97204. Option 3: Drop off form to 1120 SW 5 th Ave during City business hours and tell the front desk it is for the Small Donor Elections program.
HOW TO SUBMIT REQUESTED ATTACHMENTS	4	Option 1: Submit the requested attachments <i>via the <u>secure link we will email you</u></i> . <u>Do not email attachments; they may contain financially sensitive information.</u> Option 2: Mail requested attachments to Small Donor Elections, 1120 SW 5 th Ave, Suite 901, Portland, OR 97204. Option 3: Drop off requested attachments to 1120 SW 5 th Ave during City business hours and tell the front desk it is for the Small Donor Elections program.
MAINTAINING SMALL DONOR ORGANIZATION STATUS	5	In order to maintain Small Donor Organization status, your organization must ensure that even after this application is complete, 90% of its funds come from contributors who contribute \$250 or less per calendar year.