

## Deborah Courtney

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**From:** Dingee, Christine [REDACTED]  
**Sent:** Thursday, April 09, 2009 9:23 AM  
**To:** Deborah@DACourtney.com  
**Subject:** Charitable Organization Registration Information

**Attachments:** Courtnet FOIA.pdf



Courtnet FOIA.pdf  
(965 KB)

April 9, 2009

Deborah Ann Courtney  
Deborah@DACourtney.com

Dear Ms. Courtney:

This notice is issued in response to your April 1, 2009 e-mail inquiry received in this Department on April 2, 2009, processed as a Freedom of Information Act (FOIA), MCL 15.231 et seq, request. Your request is for Charitable Trust Organization registrations filed with this office regarding Minuteman Project Inc., Hill 174, Jim Gilchrist's Minuteman Project, Inc., and State Department Watch.

Your request is granted as to existing information in the possession of the Department falling within the scope of your request. The Department has identified records on the Minuteman Project, Inc., and copies of these records are attached. The attached documents were submitted to the Department by Minuteman Project, Inc. Please be informed that since the Department determined that they are not a charitable organization, they are not required to be licensed.

Your request is denied for Hill 174, Jim Gilchrist's Minuteman Project, Inc., or State Department Watch records. After a search for records, to the best of the Department's knowledge, information, and belief, the Department does not possess records under those descriptions you have provided, or under other names reasonably known to the Department.

Section 10 of the FOIA provides the following remedies:

1) Appeal this decision in writing to the Attorney General, Department of Attorney General, 525 W. Ottawa, P. O. Box 30212, Lansing, MI 48909. The writing must specifically state the word "appeal" and must identify the reason or reasons you believe the partial denial should be reversed. The head of the Department or designee must respond to your appeal within 10 business days of its receipt. Under unusual circumstances, the time for response to your appeal may be extended by 10 business days. 2) File an action in circuit court within 180 days after the date of the final determination to partially deny the request. If you prevail in such an action, the court is to award reasonable attorney fees, costs and disbursements. Further, if the court finds the denial to be arbitrary and capricious, you may receive punitive damages in the amount of \$500.00.

Sincerely,  
Christine S. Dingee, FOIA Coordinator  
Michigan Department of Attorney General  
State Operations Division  
2nd Floor, G. Mennen Williams Building  
525 W. Ottawa Street  
P.O. Box 30754  
Lansing, Michigan 48909  
Tel: 517-373-1162  
Fax: 517-241-3097

dingeec@michigan.gov

Attachment

\_\_\_\_\_ NOD32 3994 (20090407) Information \_\_\_\_\_

This message was checked by NOD32 antivirus system.  
<http://www.eset.com>

STATE OF MICHIGAN  
DEPARTMENT OF ATTORNEY GENERAL



MIKE COX  
ATTORNEY GENERAL

April 19, 2007

P.O. BOX 30214  
LANSING, MICHIGAN 48909

Law offices of Maureen E Otis PC  
Maureen E Otis  
4850 Wright Rd Ste 168  
Stafford TX 77477

Dear Sir/Madam:

RE: Minuteman Project, Inc.

File: Q 36626

Thank you for submitting the Unified Registration Statement and other information for this organization. We have reviewed the information and have made a final determination regarding the status of the organization under Michigan's laws regulating charities, the Charitable Organizations and Solicitations Act, 1975 PA 169, MCL 400.271 et seq, and the Supervision of Trustees for Charitable Purposes Act, 1961 PA 101, MCL 14.251 et seq.

According to the information you provided, this organization does not have charitable purposes at this time. Therefore licensing under PA 169, as amended, is not required. Likewise, since this organization has no charitable purpose, assets held to carry out its purpose are not considered charitable assets. Therefore, neither is registration under PA 101 required. If, in the future, your organization adopts a charitable purpose or receives 501(c)(3) tax exempt status from the IRS, then you should notify our office, since a license may be required at that time. The Attorney General solicitation license is entirely separate from any licenses required by the Bureau of State Lottery.

This letter will be retained to show that you have been notified of our requirements. If you have any questions, please contact our office. Thank you for submitting the information necessary to make a determination.

Very truly yours,

A handwritten signature in cursive script that reads "Patricia Conley".

Patricia Conley  
Administrator  
Charitable Trust Section  
(517) 373-1152

PAC/db  
c: Jim Gilchrist

**LAW OFFICES OF  
MAUREEN E. OTIS, P.C.**  
4850 Wright Rd., Ste. 168  
Stafford, Texas 77477  
281/242-9800  
281/242-9820 FAX  
Email: [hahn@motislaw.com](mailto:hahn@motislaw.com)

DEPT. OF  
ATTORNEY GENERAL

FEB 15 2007

Charitable Trust Section  
RECEIVED

**FACSIMILE**

**TO:** Tammy Combs - Consumer Protection Division  
**COMPANY:** Office of Attorney General - Michigan  
Charitable Trust Section  
**PHONE:** 517/373-1152  
**FAX:** 517/241-7074

**FROM:** Hahn Le  
**DATE:** 1/12/07  
**PAGES INCLUDING THIS COVER PAGE:** 3  
**COMMENTS:**

**RE:** Minuteman Project, Inc. (TCS 36626)

Tammy - This is in response to the letter of February 7, 2007. Attached please find the following the amended page 2 and 3 of the URS application. Please contact me immediately if you have any questions or need any additional information.

Thank you for your prompt attention to this matter.

*The information contained in this facsimile is confidential and may also be attorney client privileged. The information is intended only for the use of the individual or entity to which it is addressed. If you are not the intended recipient, you are hereby notified that any use, dissemination, distribution or copying of this communication is strictly prohibited. If you have received this facsimile in error, please immediately notify us by telephone, and return the original message to us at the above address via U.S. Postal Service. Thank you.*

NAAO/NASCO Standardized Reporting

DEPT. OF ATTORNEY GENERAL

FEB 15 2007

Charitable Trust Section RECEIVED

9. Has tax exempt status ever been denied, revoked, or modified? Yes  No

10. Indicate all methods of solicitations:

Mail  Telephone  Personal Contact  Radio/TV Appeals   
Special Events  Newspaper/Magazine Ads  Other(s)  (specify) internet solicitations

11. List the NTEI code(s) that best describes your organization Q, R, W

12. Describe the purposes and programs of the organization and those for which funds are solicited (attach separate sheet if necessary).

*Minuteman Project was formed to promote through education, advocacy and activism a nationwide movement endorsing volunteer citizens operations within the law to further the enforcement and reform of our immigration laws.*

13. List the names, titles, addresses, (street & P.O.), and telephone numbers of officers, directors, trustees, and the principal salaried executives of organization (attach separate sheet). *See attachment 2*

14.(A) (1) Are any of the organization's officers, directors, trustees or employees related by blood, marriage, or adoption to: (i) any other officer, director, trustee or employee OR (ii) any officer, agent, or employee of any fundraising professional firm under contract to the organization OR (iii) any officer, agent, or employee of a supplier or vendor firm providing goods or services to the organization? Yes  No

(2) Does the organization or any of its officers, directors, employees, or anyone holding a financial interest in the organization have a financial interest in a business described in (ii) or (iii) above OR serve as an officer, director, partner or employee of a business described in (ii) or (iii) above? Yes  No   
(If yes to any part of 14A, attach sheet which specifies the relationship and provides the names, businesses, and addresses of the related parties).

(B) Have any of the organization's officers, directors, or principal executives been convicted of a misdemeanor or felony? (If yes, attach a complete explanation.) Yes  No

15. Attach separate sheet listing names and addresses (street & P.O.) for all below: *See attachment 3*

Individual(s) responsible for custody of funds. Individual(s) responsible for distribution of funds.  
Individual(s) responsible for fund raising. Individual(s) responsible for custody of financial records.  
Individual(s) authorized to sign checks. Bank(s) in which registrant's funds are deposited (include account number and bank phone number).

16. Name, address (street & P.O.), and telephone number of accountant/auditor.

Name Barrett Garcia, CPA  
Address 32302 Camino Capistrano, Ste. 214  
City San Juan Capistrano State CA Zip Code 92675 Telephone (949) 496-6363  
Method of accounting accrual

17. Name, address (street & P.O.), and telephone number of person authorized to receive service of process. This is a state-specific item. See instructions.

Name The Corporation Company  
Address 30600 Telegraph Rd.  
City Bingham Farms State MI Zip Code 48025 Telephone \_\_\_\_\_

NAAG/NASCO Standardized Reporting

URS - 3.00Pa3

- 18. (A) Does the organization receive financial support from other nonprofit organizations (foundations, public charities, combined campaigns, etc.)? Yes  No
- (B) Does the organization share revenue or governance with any other non-profit organization? Yes  No
- (C) Does any other person or organization own a 10% or greater interest in your organization OR does your organization own a 10% or greater interest in any other organization? Yes  No

(If "yes" to A, B or C, attach an explanation including name of person or organization, address, relationship to your organization, and type of organization.)

- 19. Does the organization use volunteers to solicit directly? Yes  No
- Does the organization use professionals to solicit directly? Yes  No

20. If your organization contracts with or otherwise engages the services of any outside fundraising professional (such as a "professional fundraiser," "paid solicitor," "fund raising counsel," or "commercial co-venturer"), attach list including their names, addresses (street & P.O.), telephone numbers, and location of offices used by them to perform work on behalf of your organization. Each entry must include a simple statement of services provided, description of compensation arrangement, dates of contract, date of campaign/event, whether the professional solicits on your behalf, and whether the professional at any time has custody or control of donations. See attachment 4

21. Amount paid to PFR/PS/FRC during previous year: \$ 0.00

22. (A) Total contributions: \$ 77,273.00

(B) Program service expenses: \$ 53,532.00

(C) Management & general expenses: \$ 17,351.00

(D) Fundraising expenses: \$ 2,486.00

(E) Total expenses: \$ 73,369.06

(F) Fundraising expenses as a percentage of funds raised: 3.19 %

(G) Fundraising expenses plus management and general expenses as a percentage of funds raised: 25.44 %

(H) Program services as a percentage of total expenses: 72.96 %

Under penalty of perjury, we certify that the above information and the information contained in any attachments or supplement is true, correct, and complete.

Sworn to before me on (or signed on) November 6, 2006

Robert M. Fisher  
Notary public (if required)

Jim Gilchrist  
Name (printed)

Jim Gilchrist  
Name (signature)

President  
Title (printed)

Stephan E. Eichen  
Name (printed)

[Signature]  
Name (signature)

C.F.C.  
Title (printed)

Consult the state-by-state appendix to the URS to determine whether supporting documents, supplementary state forms or fees must accompany this form. Before submitting your registration, make sure you have attached or included everything required by each state to the respective copy of the URS.

Attachments may be prepared as one continuous document or as separate pages for each item requiring elaboration. In either case, please number the response to correspond with the URS item number.

COMMUNITY STATE FILER PROJECT

Michigan

STATE OF MICHIGAN  
DEPARTMENT OF ATTORNEY GENERAL



P.O. BOX 30214  
LANSING, MICHIGAN 48909

**NOTICE**

MIKE COX  
ATTORNEY GENERAL

**NOTICE**

February 7, 2007

Law offices of Maureen E Otis PC  
4850 Wright Rd Ste 168  
Stafford TX 77477

Dear Sir/Madam:

Re: Minuteman Project, Inc.  
TCS 36626

We received the Unified Registration Statement, which we accept in lieu of our own solicitation license application form, of the above organization. However, before the solicitation license can be issued, the following additional information will be necessary:

1. Provide the name and address of your resident agent located in Michigan. If you know of no one in Michigan to act as resident agent, contact this office for a list of companies that, for a fee, may agree to do so.
2. The URS and the IRS 990-EZ do not agree. According to URS question 22(B), program services expense equals \$63,155. However, Part III of the Form 990-EZ claims total program services expense of \$53,532. Please formally amend the incorrect form. If the URS is amended, 22(C) and/or (D) must also be amended so that the sum of (B)-(D) equals total expense.

Because of the pending application, please respond within thirty (30) days. Soliciting donations without a required license is a violation of the law. If you have any questions, or need additional time, please contact this office.

Department of Attorney General  
Charitable Trust Section  
(517) 373-1152  
[www.michigan.gov/ag](http://www.michigan.gov/ag)

ar

Department of Attorney General  
Unified Registration Statement (URS) Check List  
New Organizations

T# 36626

Name \_\_\_\_\_

1. If "initial" registration is marked on the URS, complete the following:

Date Created: 5-4-05

FYE: 12/31

Organization's first fiscal period ends:  
(1st fye date after date created)

12-31-05 DE

If first fiscal period has now ended, you may check with organization to see if they can now report on first period.

2. \_\_\_\_\_ Creating Documents: Articles of Incorporation, Trust, Constitution and bylaws.

\_\_\_\_\_ IRS Determination Letter (501(c)(3))

\_\_\_\_\_ Purpose (#12)

\_\_\_\_\_ Certificate of Authority

3. Deficiencies

\_\_\_ Name (must match database)

\_\_\_ Solicitation methods (#10)

\_\_\_ Directors (#13)(must have more than 1)

\_\_\_ Resident agent (#17)(can't be org itself)

Res. agent address (#17)(none/PO Box/not Mich)

\_\_\_ PFR used reported year (#20)

\_\_\_ PFR compensation (#21)

\_\_\_ CFS not attached

\_\_\_ Sol.mat/VScripts

\_\_\_ PFR contracts

\_\_\_ Current PFR is not licensed (show Joe)

\_\_\_ Other deficiencies:

\_\_\_ No signature / Photocopy signature

\_\_\_ IRS return not attached

\_\_\_ Audited financial statements (See FYI)

\_\_\_ Reviewed financial statements (See FYI)

Show Auditor the following:

\_\_\_ URS #7 A-D answered yes

\_\_\_ File is flagged

\_\_\_ Audit opinion not okay

\_\_\_ Joint costs-Prog >50%

\_\_\_ Other changes net assets (IRS 990, line 20)

\_\_\_ Chapters

List deficiencies for letter:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Check total contributions from database FYIs.

• Over \$250,000. Audited financial statements are required.

• \$100,000 - \$250,000. Reviewed financial statements are required

Deficient

Checked by: [Signature]

Approved

Exp Date\* \_\_\_\_\_

Date 12-27-06

P.S.

CC

\*If "New" on URS, add 7 months to first fiscal period date calculated above. If reported on a fiscal period, add 1 yr. And 7 months to period reported.



Law Offices of  
**MAUREEN E. OTIS, P.C.**

*kjones@motislaw.com*

4850 Wright Road, Ste. 168  
Stafford, Texas 77477

Telecopier (281) 242-9820

\_\_\_\_\_  
(281) 242-9800

36626

November 9, 2006

Department of Attorney General  
Charitable Trust Section  
P.O. Box 30214  
Lansing, MI 48909

by certified mail - RRR

**RE: Minuteman Project, Inc.  
Initial Charitable Registration**

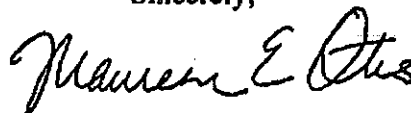
Dear Sir or Madam:

Enclosed please find the following documents for registration of my client:

- 1) Unified Registration Statement for Charitable Organization;
- 2) A copy of the Articles of Incorporation;
- 4) A copy of the IRS Form 990 for the year ending 12/31/05; and
- 5) A copy of the agreement with HSP Direct, LLC.

**Please note: We will supplement the audited financial statements for year ending 12/31/05 and bylaws upon its completion. Also, we applied for exemption from Federal Income Taxes, but have not yet received the tax determination letter. We will supplement. Thank you for your prompt attention to this matter.**

Sincerely,



MAUREEN E. OTIS

MEO/rsc  
Enclosures  
cc: Mr. Jim Gilchrist

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ATTORNEY GENERAL

NOV 20 2006

Charitable Trust Section  
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## Unified Registration Statement (URS) for Charitable Organizations© (v. 3.00)

Initial registration       Renewal/Update

This URS covers the reporting year which ended (day/month/year) 12/31/2005

Filer EIN 20-2807665

State Michigan

State ID \_\_\_\_\_

1. Organization's legal name Minuteman Project, Inc.

If changed since prior filings, previous name used n/a

All other name(s) used none

2.(A) Street address 22 Vista Del Valle

City Aliso Viejo

County \_\_\_\_\_

State CA

Zip Code 92656

(B) Mailing address (if different) Law Offices of Maureen E. Otis, P.C., 4850 Wright Road, Ste. 168

City Stafford

County \_\_\_\_\_

State TX

Zip Code 77477

3. Telephone number(s) (281) 242-9800

Fax number(s) (281) 242-9820

E-mail director@minutemanproject.com

Web site www.minutemanproject.com

4. Names, addresses (street & P.O.), telephone numbers of other offices/chapters/branches/affiliates (*attach list*).

5. Date incorporated 5/4/2005

State of incorporation Delaware

Fiscal year end: day/month 12/31

6. If not incorporated, type of organization, state, and date established n/a

7. Has organization or any of its officers, directors, employees or fund raisers:

A. Been enjoined or otherwise prohibited by a government agency/court from soliciting? Yes  No

B. Had its registration denied or revoked? Yes  No

C. Been the subject of a proceeding regarding any solicitation or registration? Yes  No

D. Entered into a voluntary agreement of compliance with any government agency or in a case before a court or administrative agency? Yes  No

E. Applied for registration or exemption from registration (but not yet completed or obtained)? Yes  No

F. Registered with or obtained exemption from any state or agency? Yes  No

G. Solicited funds in any state? Yes  No

If "yes" to 7A, B, C, D, E, *attach explanation. See attachment 1*

If "yes" to 7F & G, *attach list* of states where registered, exempted, or where it solicited, including registering agency, dates of registration, registration numbers, any other names under which the organization was/is registered, and the dates and type (mail, telephone, door to door, special events, etc.) of the solicitation conducted. *see attachment 1*

8. Has the organization applied for or been granted IRS tax exempt status? Yes  No  *Applied for on 7/17/06*

If yes, date of application 7/17/2006 OR date of determination letter \_\_\_\_\_

If granted, exempt under 501(c) \_\_\_\_\_. Are contributions to the organization tax deductible? Yes  No

9. Has tax exempt status ever been denied, revoked, or modified? Yes  No

10. Indicate all methods of solicitations:

Mail  Telephone  Personal Contact  Radio/TV Appeals   
 Special Events  Newspaper/Magazine Ads  Other(s)  (specify) internet solicitations

11. List the NTEE code(s) that best describes your organization Q, R, W

12. Describe the purposes and programs of the organization and those for which funds are solicited (attach separate sheet if necessary).

*Minuteman Project was formed to promote through education, advocacy and activism a nationwide movement endorsing volunteer citizens operations within the law to further the enforcement and reform of our immigration laws.*

13. List the names, titles, addresses, (street & P.O.), and telephone numbers of officers, directors, trustees, and the principal salaried executives of organization (attach separate sheet). *See attachment 2*

14.(A) (1) Are any of the organization's officers, directors, trustees or employees related by blood, marriage, or adoption to:  
 (i) any other officer, director, trustee or employee OR (ii) any officer, agent, or employee of any fundraising professional firm under contract to the organization OR (iii) any officer, agent, or employee of a supplier or vendor firm providing goods or services to the organization? Yes  No

(2) Does the organization or any of its officers, directors, employees, or anyone holding a financial interest in the organization have a financial interest in a business described in (ii) or (iii) above OR serve as an officer, director, partner or employee of a business described in (ii) or (iii) above? Yes  No   
 (If yes to any part of 14A, attach sheet which specifies the relationship and provides the names, businesses, and addresses of the related parties).

(B) Have any of the organization's officers, directors, or principal executives been convicted of a misdemeanor or felony? (If yes, attach a complete explanation.) Yes  No

15. Attach separate sheet listing names and addresses (street & P.O.) for all below: *See attachment 3*

Individual(s) responsible for custody of funds.	Individual(s) responsible for distribution of funds.
Individual(s) responsible for fund raising.	Individual(s) responsible for custody of financial records.
Individual(s) authorized to sign checks.	Bank(s) in which registrant's funds are deposited (include account number and bank phone number).

16. Name, address (street & P.O.), and telephone number of accountant/auditor.

Name Barrett Garcia, CPA  
 Address 32302 Camino Capistrano, Ste. 214  
 City San Juan Capistrano State CA Zip Code 92675 Telephone (949) 496-6363  
 Method of accounting accrual

17. Name, address (street & P.O.), and telephone number of person authorized to receive service of process. *This is a state-specific item. See instructions.*

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone \_\_\_\_\_

- 18. (A) Does the organization receive financial support from other nonprofit organizations (foundations, public charities, combined campaigns, etc.)? Yes  No
- (B) Does the organization share revenue or governance with any other non-profit organization? Yes  No
- (C) Does any other person or organization own a 10% or greater interest in your organization OR does your organization own a 10% or greater interest in any other organization? Yes  No

(If "yes" to A, B or C, *attach an explanation* including name of person or organization, address, relationship to your organization, and type of organization.)

- 19. Does the organization use volunteers to solicit directly? Yes  No
- Does the organization use professionals to solicit directly? Yes  No

20. If your organization contracts with or otherwise engages the services of any outside fundraising professional (such as a "professional fundraiser," "paid solicitor," "fund raising counsel," or "commercial co-venturer"), *attach list* including their names, addresses (street & P.O.), telephone numbers, and location of offices used by them to perform work on behalf of your organization. Each entry *must include* a simple statement of services provided, description of compensation arrangement, dates of contract, date of campaign/event, whether the professional solicits on your behalf, and whether the professional at any time has custody or control of donations. *See attachment 4*

21. Amount paid to PFR/PS/FRC during previous year: \$ 0.00

22. (A) Total contributions: \$ 77,973.00

(B) Program service expenses: \$ 63,155.00

(C) Management & general expenses: \$ 7,728.00

(D) Fundraising expenses: \$ 2,486.00

(E) Total expenses: \$ 73,369.00

(F) Fundraising expenses as a percentage of funds raised: 3 %

(G) Fundraising expenses plus management and general expenses as a percentage of funds raised: 13 %

(H) Program services as a percentage of total expenses: 86 %

**Under penalty of perjury, we certify that the above information and the information contained in any attachments or supplement is true, correct, and complete.**

Sworn to before me on (or signed on) November 6, 2006

John M. Fidler  
Notary public (if required)

Jim Gilchrist  
Name (printed)

Jim Gilchrist  
Name (signature)

President  
Title (printed)

Stephen Eickler  
Name (printed)

[Signature]  
Name (signature)

CFO  
Title (printed)

Consult the state-by-state appendix to the URS to determine whether supporting documents, supplementary state forms or fees must accompany this form. Before submitting your registration, *make sure you have attached or included everything required by each state to the respective copy of the URS.*

Attachments may be prepared as one continuous document or as separate pages for each item requiring elaboration. In either case, please number the response to correspond with the URS item number.

**ATTACHMENT 1**

**Minuteman Projects, Inc. is in the process of registering to solicit in the following states:**

**Alabama  
Alaska  
Arizona  
Arkansas  
California  
Colorado  
Connecticut  
Florida  
Pinellas County  
Georgia  
Illinois  
Kansas  
Kentucky  
Louisiana  
Los Angeles  
Maine  
Maryland  
Michigan  
Massachusetts  
Minnesota  
Mississippi  
Missouri  
New Hampshire  
New Jersey  
New York  
North Carolina  
North Dakota  
Ohio  
Oklahoma  
Oregon  
Pennsylvania  
Rhode Island  
South Carolina  
Tennessee  
Utah  
Virginia  
Washington  
West Virginia  
Wisconsin**

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ATTORNEY GENERAL  
NOV 20 2006  
Charitable Trust Section  
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**ATTACHMENT 2**

**Officers/Directors of MMP, Inc.**

Jim Gilchrist  
22 Vista del Valle  
Aliso Viejo, CA 92656-6041

President, Chairman of Board

Stephen Eichler  
5761 E. La Palma # 222  
Anaheim, CA 92807

Vice-President/Treasurer  
Board Member

Deborah Courtney  
[REDACTED]  
Tustin, CA 92782

Secretary - Board Member

Tim Bueler  
11065 Alderman  
Tustin, CA 92782

Director

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NOV 20 2006  
Charitable Trust Section  
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**Individuals at MMP who are responsible for various responsibilities are listed below:**

**Custody of Funds**

Stephen Eichler  
5761 E. La Palma # 222  
Anaheim, CA 92807

Vice-President/Treasurer  
Board Member

**Distribution of Funds**

Jim Gilchrist  
22 Vista del Valle  
Aliso Viejo, CA 92656-6041

President, Chairman of Board

Stephen Eichler  
5761 E. La Palma # 222  
Anaheim, CA 92807

Vice-President/Treasurer  
Board Member

**Fund Raising**

Stephen Eichler  
5761 E. La Palma # 222  
Anaheim, CA 92807

Vice-President/Treasurer  
Board Member

**Custody of Financial Records**

Jim Gilchrist  
22 Vista del Valle  
Aliso Viejo, CA 92656-6041

President, Chairman of Board

**Check signing authorization**

Stephen Eichler  
5761 E. La Palma # 222  
Anaheim, CA 92807

Vice-President/Treasurer  
Board Member

**Banks in which funds are deposited:**

Bank of America

Houston, TX

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NOV 20 2006  
Trust Section  
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**ATTACHMENT 4**

**Minuteman Projects, Inc. has retained the services of HSP Direct, LLC to act as professional fund raising counsel:**

**HSP Direct, LLC**

**Statement of services provided: Consulting services for direct mail fund raising.**

**Description of compensation arrangement: See attached contract.**

**Dates of Contract:**

**HSP Direct does not have custody or control over the funds raised.**

DEPT. OF  
ATTORNEY GENERAL  
NOV 20 2006  
Charitable Trust Section  
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