# C:\Users\Ian\OneDrive - Charities Review Council\Branding\Logos\Council Logo Transparent.png*SAMPLE*

# POLICY ON DISCONTINUING CONTACT UPON REQUEST

1. Policy: It is the policy of [Full name of Organization] (“[Organization]”) to discontinue contacting any person upon that person’s oral or written request directed to the organization, its professional fundraiser, or other agent.

[Organization] shall maintain a record of all requests by persons who indicate to [Organization], its professional fundraiser, and other agents, that they do not wish to be contacted by or on behalf of [Organization].

2. Limitation: This policy does not prohibit contact by [Organization] that is solicited by a person or a person’s representative, even if the person or his/her representative have requested to be placed on the "do not contact list." Contact by [Organization] that is solicited by a person whose name appears on "do not contact" list shall be limited to providing a direct response to the person’s inquiry and shall not cause the person’s name to be removed from the "do not contact" list.

3. Procedure: Upon a person’s (or a person’s authorized representative’s) request that [Organization] discontinue further contacts, the person’s name and address will be promptly removed from [Organization]’s database or modified to insure that no further contact is made with the person. [Organization] will also take steps to insure that the person’s name is removed from any external databases or records under [Organization]’s control.

4. Permanent Record: [Organization] will maintain a record of all requests for discontinuance of contacts, effective with the adoption of this policy by [Organization]’s board of directors. Oral requests will be recorded in writing by the staff of [Organization] and maintained with the written requests. The records of persons who have made such a request will be maintained by [Organization] to the extent necessary for legal or liability purposes.

Adopted by majority of the board of directors of [Organization] this [\_\_ day of \_\_\_\_\_\_, 20\_\_].

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_], Secretary

[Full name of Organization]

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