

## SPECIAL EVENTS FUNDING/DONATION REQUEST PROGRAM INFORMATION GUIDE

Organizations or individuals seeking funding from the City of Margate must complete the Special Events Funding/Donation Request Application for Organizations or the Special Events Funding/Donation Request Application for Individuals. The amount requested cannot exceed \$1,000 per organization or \$500 per individual. Organizations or individuals must submit said application and necessary documentation to:

City of Margate City Clerk's Office 5790 Margate Boulevard Margate, FL 33063

For requests by both organizations and individuals, the funding request must provide a public benefit (educational, economic, health, etc.) to the City of Margate and its citizens. If the requestor is an individual, the individual must be a City of Margate resident. For individual requests, registration fees associated with a school, program, or event shall be paid directly to the sponsoring entity, if possible. If the requestor is an organization, the organization must:

- Be a non-profit organization, either with Articles of Incorporation filed with the Florida Department of State, or for those non-profits organized within another state, be registered with the State of Florida as a foreign corporation.
- Be in existence and operating within the State of Florida for at least twelve (12) months prior to the date of application to the City for a donation.
- Submit in addition to their application: (1) a copy of their 501(c)3, 501(c)4, or 501(c)6 notification letter; (2) a copy of their current Form 990 (if your organization is required to file this document); (3) a copy of their last completed audit; and (4) annual budget.

After receipt of the application, all applications shall be presented to the City Commission at the next regularly-scheduled City Commission meeting. The City Commission, at its sole discretion, shall determine which organizations or individuals are awarded funding. All decisions of the City Commission are final and binding. Once funding has been approved, the approved amount will be provided to the organization or individual. Please note that an affidavit will be prepared by the City and must be completed by the organization or individual recipient within two weeks of the event/expenditure. In addition, reports of service delivery/expenditures of any funds and/or receipts may be required. Furthermore, all individual recipients are requested to provide/present photographs/details following the event/expenditure at a public meeting. If an organization or individual is awarded a donation for a particular purpose/event, and the event is canceled, a full reimbursement to the City is required. Organizations and individuals may apply for one donation per fiscal year. Organizations or individuals that have failed to meet a reimbursement obligation in previous years or additional conditions of approval will not be eligible for future consideration until all prior obligations have been fulfilled.



## SPECIAL EVENTS FUNDING/DONATION **REQUEST APPLICATION FOR INDIVIDUALS**

Please attach pertinent background information to this application. You may attach additional pages, if needed.					
INDIVIDUAL PROFILE					
Requestor Name:			Today's Date:		
Mailing Address:	City:		State:	Zip:	
Phone Number:		Email Address:			
ABOUT THE FUNDING REQUEST					
Funding Request:		Total Cost to Individu	ual for Special Ex	vent:	
Please describe the intended use of requested funds and indicate the time period you are requesting these funds for (please attach letters of community support if applicable):					
Please provide a needs statement (Why do you nee	d the requ	rested funds?):			
Explain the public benefit (educational, economic, health, etc.) to the City of Margate and its citizens from the City funds received:					
Please provide an outcome statement (What will be obtaining funding from the City:	e accompli	shed with the money?)	explaining the i	impact as a result of	



## SPECIAL EVENTS FUNDING/DONATION REQUEST APPLICATION FOR INDIVIDUALS

Please list other sources and amounts being requested from other agencies:	
Have you received funding from the City of Margate in the past?  \( \subseteq \text{Yes} \subseteq \text{No} \)	
If yes, please indicate the amount and the year:	
This application must be signed by the individual requesting funding (or parent/lega signing this application, the requestor (or parent/legal guardian) certifies that he/sh their stated purpose. Please note that receipts may be required.	
I certify that the above information is true and accurate	
Individual Requestor (Printed):	Date:
Individual Requestor (Signature):	Date:
This application and its content are considered a public record	in accordance with

Florida Statutes Chapter 119. If you believe any information on this application is exempt from public records in accordance with Florida Statutes Chapter 119, please provide an explanation and attach to this application.

OFFICIAL USE ONLY					
Date Received:		Application Reviewed By	<i>r</i> :		
Amount Approved by City Commission:	Date Approved:		Account #		