

Application for Civic Donation

All organizations shall submit the request for donations to the City Council no later than December 31<sup>st</sup> for the next calendar year.

Completed applications must be returned to Kelli Kline, Assistant to the City Manager, at kkline@lebanonohio.gov or mailed to the City Manager's Office (50 S Broadway, Lebanon, OH 45036).

PLEASE PRINT CLEARLY

Organization Name	nization Name		Date of Application	
Primary Contact Name Last		First		
Address Street	City	State	Zip Code	
Telephone Number(s)	Email Address			
Type of Support Requested				
<b>Funding:</b> List specific dollar amount requested in support of your organization's activities.		\$		
<b>City Services:</b> List dollar value of services requested in support of festival or special event.		\$		
Utilities Credit: List amount requested.		\$		
Is your organization incorporated under the general corporation laws of the State of Ohio (Required per City Ordinance No. 8665)?  yes no ls your organization classified as a 501(c)(3) status organization from the US Dept. of Treasury (Required per City Ordinance No. 8665)?  yes no lease attach documentation of 501(c)(3) status.  For the following questions, attach additional documentation if necessary.  1. Provide a detailed description of the program or event that will benefit from the donation.				
2. Provide a description of the positive impact the program or event will have on the quality of life of the community including the number of residents who will be positively impacted.				
<ol> <li>Provide an explanation of the financial impact the donation will have on the organization's ability to execute the program or event. This explanation shall include a summary of the organization's budget and major sources of funding.</li> </ol>				
I certify that answers given herein are true a	ACKNOWLEDGMEN and complete to the best of my			
Signature of Applicant		Date		