

**AMENDED
AGENDA**



**Ad-Hoc Committee
Non-Profit Funding
TOWN OF CAMP VERDE
Parks & Recreation Conference Room
395 S. Main Street
Friday, September 19, 2008
at 9:00 A.M.**

1. **Call to Order**

As a reminder, if you are carrying a cell phone, pager, computer, two-way radio, or other sound device, we ask that you turn it off at this time.

2. **Roll Call**

3. **Approval of Minutes**

a) **September 3, 2008**

4. **Discussion, consideration, and recommendation to Camp Verde Town Council regarding the following applications for funding during fiscal year 2008/09.**

(a) **Performing Arts Studios, Inc.** (Requesting \$5,000 for After-school/Community Education Program)

(b) **Verde Valley Concert Association-Missoula Children's Theatre Project** (Requesting \$1750)

5. **DISCUSSION, CONSIDERATION, AND POSSIBLE RECOMMENDATION TO THE CAMP VERDE TOWN COUNCIL REGARDING SIMPLIFYING THE APPLICATION PROCESS.**

6. **Adjournment**

Posted by: *O Jones*

Date/Time: *7:55 a.m 9-18-08*

Note: Pursuant to A.R.S. §38-431.03.A.2 and A.3, the Council may vote to go into Executive Session for purposes of consultation for legal advice with the Town Attorney on any matter listed on the Agenda, or discussion of records exempt by law from public inspection associated with an agenda item.

The Town of Camp Verde Council Chambers is accessible to the handicapped. Those with special accessibility or accommodation needs, such as large typeface print, may request these at the Office of the Town Clerk.



Town of Camp Verde Guidelines for Non-Profit Funding

The Camp Verde Council developed a Non-Profit Funding Program to support non-profit entities that benefit the Town of Camp Verde and its citizens. In addition, a small amount of funding may be available in the Parks & Recreation budget to assist those organizations that provide a direct benefit for underprivileged youth and/or sports activities (i.e. the Jacob Teague Memorial Fund that provides local tournaments to benefit the Camp Verde Marshal's Office K-9 efforts and/or after school program(s) that benefit the low-income children.)

Organizations may submit an application for funding or use of facilities and/or equipment donations by 4p.m. on August 1 of each year. A committee of usually 3 to 5 people, consisting of at least one council member and one staff member, is formed to evaluate the applications and to make a recommendation to the Town Council. The Town Council has the final authority to make funding decisions.

Deadlines

The deadline to submit an application is 4p.m. on August 1. This date is to allow for the budgeting process. The deadline to expend funds or facilities/equipment use donations is June 30 of the following year. Funds not used by this date must be returned to the Town of Camp Verde. Funds expended in a manner other than represented in the application or required by the Town Council shall be returned to the Town of Camp Verde.

Awards

Awards, if budgeted, will be made following Council's adoption of the current fiscal year budget. This usually takes place in July of every year.

Eligibility

501(c)3 non-profit organizations, government entities and other organizations not organized for profit classified as non-profit by the IRS are eligible to apply. Proof of non-profit status must be included with the application or the application will not be considered. Additionally, late, electronic and faxed applications will not be considered.

Organizations or foundations that provide direct services to the underprivileged or fund raising efforts for the direct benefit of the Town (i.e. K-9 unit, library, parks, etc.) may submit an application for consideration. These organizations must show a direct benefit for the Town and its citizens. Awards are limited to no more than \$500.00.

Use of Facilities and/or Use of Equipment Donations

Town facilities, equipment, surplus, or supplies – applicants interested in requesting the waiver of reimbursement fees for the use of Town facilities should first contact Town Hall and review the policies, rules and requirements of using a Town facility. If a request for waiver of reimbursement fees for the use of facilities is approved, the following requirements will apply:

- A standard Reimbursement Agreement must be signed.
- The refundable cleaning/damage and key deposits must be paid.
- Proof of liability insurance must be provided as outlined in the Reimbursement Agreement.
- Use is subject to facility availability.

Reporting Requirements For Funding

Applicants who receive funding must submit Performance Reports to the Town Manager. The required Report Form is included in this packet. Reports are due within 60 days of the final expenditure. Failure to submit required reports will jeopardize future funding requests.

Ranking Criteria

Applications will be ranked according to the criteria contained in the Ranking Sheet which is included in this packet for your information.

Non-Profit Funding Program Ranking Sheets

Fiscal Year: _____

Applicant Name: _____

Date: _____

Project/Program Title: _____

Cash Award Ranking Sheet

	Criteria	Points Possible	Score
1.	Credibility of organization, philosophy, mission	15	
2.	Capacity of organization to perform project, qualifications, track record	20	
3.	Specific as to how funds will be used	10	
4.	Submitted timely reports from previous funding cycle	50	
5.	Financial statement included, completeness	10	
6.	Project budget include (if applicable), specific, thorough, accurate	10	
7.	Overall completeness of application, concise, clear and specific	5	
8.	Clearly identified benefit to the community and benefit to Camp Verde citizens, number of citizens served	30	
9.	Cost vs. benefit	15	
10.	Demonstrated need and how project or the organization will meet or meets the need, benefit to underserved population, meeting need not being met by another organization	20	
11.	Defined how success will be measured and documented	15	

Total Score: _____ out of 200 possible points.

Facilities/Equipment Award Ranking Sheet

	Criteria	Points Possible	Score
1.	Credibility of organization, philosophy, mission	15	
2.	Qualification of organization, track record	15	
3.	Specific as to how in-kind will be used	10	
4.	Submitted timely report(s) from previous funding cycle	30	
5.	Overall completeness of application, concise, clear and specific	5	
6.	Clearly identified benefit to the community	15	
	Cost vs. benefit	10	

Total Score: _____ out of 100 possible points.

Comments/Recommendation:

Application for Funding

Fiscal Year: _____

Applicant Name: _____ Primary Contact: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone #: (____) _____ Fax #: (____) _____

Email Address: _____ Date Organization Founded: _____

Federal ID #: _____ State ID #: _____

501(c)3 Other Non-Profit Government Agency Other: _____

Proof of non-profit status must be included with your application in order to be eligible for funding.

Project/Program Title: _____

Check all that apply:

Cash Donation, Amount Requested: \$_____ *Specific projects are preferred, however if you are requesting funding for general operating expenses, please complete the remainder of this application to the best of your ability. Your focus should be on how your organization benefits the community and Camp Verde citizens. Be as specific as possible.

Facilities/Equipment Donation

Please attach the following items to your application.

- Most recent financial statement showing income, expenses and funding sources.
- Proof of non-profit status.
- Program budget (if applicable).

You may also attach:

- Organization brochures
- Photos/charts
- Letters of support

Please give a brief summary of your request: _____

Please answer the following questions (attach additional sheets of paper if needed):

Section 1 - About the Organization

1. Please describe the organization's purpose. This may include mission statement or philosophy.

2. Share your organizations experience, capacity and qualifications to successfully complete the project, program or event (if the request is not for a project, program or event, discuss the organizations experience and accomplishments).

3. Please identify any donated services that you currently receive, or have received in the past from the Town of Camp Verde (include dates).

4. Please provide statistics of current (or past) Camp Verde citizens served by your organization if applicable.

Section 2 – Description and Benefit

1. Describe your project, program or event. What are you requesting?

2. How will the Town of Camp Verde's funds or facilities/equipment contributions be used?

3. How will the project, program or events benefit the community? How many Camp Verde residents will the project, program or event benefit?

4. How do you know this project, program or event is needed? Please explain if there other entities providing the same or similar service available to Camp Verde residents and how your organization complements these services, or fills a gap in services.

Section 3 – Tracking and Evaluation

How you will track the number of Camp Verde citizens benefited by your organization, project, program and/or event? Describe how you will evaluate and measure your success.

2. If you have or are currently done/doing this project/program or event, describe results you have experienced and statistics (if applicable).

The information contained herein and attached to this application is true and correct to the best of my knowledge. I hereby acknowledge that any funding received from the Town of Camp Verde must be expended as I have represented in this application and according to any requirements set by the Town Council and according to the Program guidelines. I agree that if funds are not expended accordingly, in the opinion of the Town of Camp Verde, said funds will be returned to the Town of Camp Verde within ten (10) days from the date the Town of Camp Verde demands such.

Authorized Signature for the Applicant
Name Printed or Typed: _____

Date
Title: _____

Return this application to:

Deadline: 4:00 p.m., August 1

Town Manager (Program Contact)
Town of Camp Verde
473 S. Main, Ste. 102
Camp Verde, AZ 86322
(928) 567-6631 ext. 102

Electronic and facsimile submissions will not be considered.

For Town of Camp Verde Use Only

Date Application Received: _____ Proof of Non-Profit Status Attached? Yes No

Eligible for Funding? Yes No If "No", attach letter to applicant.

Committee Meeting Date: _____ Committee Members: _____

Committee Recommendation: _____

Council Meeting Date: _____ Council Decision: _____

Signature

Date

Title

Non-Profit Funding Program Report Form

Date stamp

Fiscal Year: _____

Recipients who have received funds must complete and submit this report to the Town Clerk within 60 days of the expenditure and/or use of the donation.

Organization: _____ Submitted by: _____

Telephone #: (____) _____ Email Address: _____ Date: _____

Project/Program Title: _____

Cash, Amount: \$ _____ Facilities/Equipment Describe: _____

Check one: 1st Report 2nd Report Final Report

Funds expended since start of project: \$ _____ Funds expended in this reporting period: \$ _____

Funds remaining: \$ _____ (Funds not used before June 30 must be returned to the Town of Camp Verde)

Number of Camp Verde residents served this reporting period: _____ Total to date: _____

Please explain how funds were expended and/or how the in-kind donation was used and activities that have occurred during this reporting period, or if this is the last report, for the entire grant cycle:

By signing below, I acknowledge that the information contained herein and attached to this report is true and correct to the best of my knowledge.

Authorized Signature for the Applicant _____

Date _____

Name Printed or Typed: _____

Title: _____