

# Request For City Commission Contingency Funds Outside Entity

070999

Name of Individual Requesting Funds: Rosa B Williams  
Address: P.O. Box 2607  
Telephone: (352) 955-5958

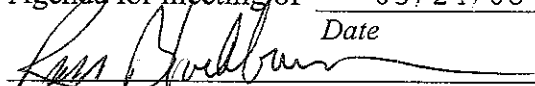
Date of Request: 2 /20/2008

Name of Organization Requesting Funds	Black on Black Crime Task Force
Amount Requested (not to exceed \$10,000)	\$5,000.00
Expected Date of Expenditure of Funds	June 1, 2008
Public Purpose <i>(use of funds must classify as a public purpose – please explain)</i>	The funds will be used to cover operating expenses for summer to include: <ul style="list-style-type: none"> <li>▪ The Reichert House</li> <li>▪ Pine Forest Summer program</li> <li>▪ Youth Forums and activities</li> </ul>

Category of Request: <i>(please check one and provide name of event, program, etc and explanation)</i>		
Special Event <i>(include name and date of event)</i>	<input type="checkbox"/>	
Special Project or Pilot Program <i>(include name and explanation of program)</i>	<input checked="" type="checkbox"/>	The funds will be used to cover operating expenses for summer to include: <ul style="list-style-type: none"> <li>▪ The Reichert House</li> <li>▪ Pine Forest Summer program</li> <li>▪ Youth Forums and activities</li> </ul>
Grant Match <i>(include name of grant, grant agency and % of matching funds needed)</i>	<input type="checkbox"/>	
Capital Donation for Non-profit organization <i>(include name of organization &amp; description of capital improvement)</i>	<input type="checkbox"/>	
Co-Sponsorship of fund-raising event <i>(include name &amp; date of event)</i>	<input type="checkbox"/>	
Other <i>(please explain)</i>	<input type="checkbox"/>	

City Manager has reviewed and accepted this request for inclusion on City Commission

Agenda for meeting of 03/24/08

  
City Manager Signature

3-14-08  
Date