



Waste Management Community Benefits Request for Donations

The City of Riviera Beach, in conjunction with Waste Management Inc. of Florida, has established a Community Benefits Policy. Under the Policy each elected official shall be entitled to designate funds to support approved public projects for public purposes. Public purposes include, but are not limited to, charitable events, not-for-profit organizational events or programs and City functions or projects (which may include contributions to the City's Scholarship Fund or the City's Housing Trust Fund). All requests for donations must be presented to the City Council and approved by a majority of the City Council. The City will attempt to process all requests within fourteen (14) days of City Council approval.

Ineligible uses include the purchase of tables at events, campaign contributions, or payment for salaries or operational expenses. Funds cannot be used to cover an elected official's travel, meals, or for his or her personal benefit or gain or for the personal gain of relatives as defined by City Code, the Palm Beach County Code of Ethics or State Statutes, as applicable. Funds cannot be given to an entity/agency/organization for which the elected official is a director or officer.

Name of Elected Official Sponsoring Donation: _____

Legal Name of Organization: Neils Health and Wellness Foundation Inc

Program/ Activity Name: Health and wellness with school age children

Requested Amount: \$ \$2,500

Briefly describe the Program/Activity below **and** attach (1) letter of request or a more detailed description of the Program/Activity; (2) non-profit paperwork and (3) w-9 IRS form:

This program is designed to help children between the ages of 10-15 to get healthy
We will teach them good healthy eating habits and how to properly workout.

Mailing Address: 2223 Palm Beach Lakes Blvd

City: West Palm Beach State: Fl Zip: 33409

Contact Person(s): Jason Neil

Phone: (561) 909-4339 Fax: ()

Email Address: Rockfitnesssingerisland@gmail.com

Name of Authorized Official: Jason Neils

Signature of Authorized Official: Jason Neils Date: 9/2/2020

******Return the form to the Elected Official or the Legislative Office for processing.**

Waste Management Community Benefits Request for Donations Approval by Elected Official

I, Ronnie Felder, hereby certify that the donation to Neils Health and Wellness Foundation complies with the City's Community Benefits Policy. I further certify that: (1) I am not an officer, director, partner, proprietor, employee, subcontractor or agent of the organization, its parent organization or subsidiary and I do not have any contractual relationship with or other obligation to the organization, its parent organization or subsidiary; (2) I have no relatives or business associates (as those terms are defined in section 112.312, Florida Statutes) who are officers, directors, partners, proprietors, employees, subcontractors or agents of the organization, its parent organization or subsidiary; (3) The disbursement of the foregoing amount will not inure to my special gain or loss or to the special gain or loss of my relatives or my business associates; and (4) I am not aware of any conflict of interest the disbursement of the foregoing amount to the organization will create for the City of Riviera Beach or myself.

Signature of Elected Official: Ronnie L. Felder Date: _____

Amount Approved by Elected Official: \$ \$2,500

City Council Action

Approved

Disapproved

Chairperson's Signature: _____ Date: _____

Riviera Beach- "Best Waterfront City In Which To Live, Work and Play"

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Revised March 2017