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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: DOUGLAS LAWSON		
Legal Name of Organization: SINCERE2000 FOUNDATION		
Program/ Activity Name: 2ND ANUAL BACK PACK GIVEAWAY		
Requested Amount: \$ 500-1,000		
Briefly describe the Program/Activity below <u>and</u> attach (1) letter of request or a more detailed description of the Program/Activity; (2) non-profit paperwork and (3) w-9 IRS form:		
Mailing Address: 1931 AVE F		
City: RIVIERA BEACH State: FL Zip: 33404		
Contact Person(s): CHERYL MELVIN		
Phone: (561) 385-4469 Fax: ()		
Email Address: SUPPORT@SINCERE2900.ORG		
Name of Authorized Official: SHERMAN MELVIN 7/11/20		
Signature of Authorized Official: SHERWIADVIELVIN Date: 7/1.1/20		
****Return the form to the Elected Official or the Legislative Office for		

Waste Management Community Benefits Request for Donations Approval by Elected Official

SINCERE2000 FOUNDATION Policy. I further certify that: (1) I as employee, subcontractor or agent of the subsidiary and I do not have any contract the organization, its parent organization or associates (as those terms are defined in officers, directors, partners, proprietors, organization, its parent organization or foregoing amount will not inure to my specific my relatives or my business associates;	, hereby certify that the donation to complies with the City's Community Benefits m not an officer, director, partner, proprietor, he organization, its parent organization or ctual relationship with or other obligation to subsidiary; (2) I have no relatives or business in section 112.312, Florida Statutes) who are employees, subcontractors or agents of the subsidiary; (3) The disbursement of the sial gain or loss or to the special gain or loss of and (4) I am not aware of any conflict of amount to the organization will create for the	
Amount Approved by Elected Official: \$		
Chairperson's Signature:	Date:	



To Whom it May Concern

Request Amount: 500+ (Any amount will be greatly appreciated)

Sincere2000 Foundation 501c3 presents, on August 1st 2020 Mental Health Awareness and Suicide Prevention, 2nd Annual Backpack Giveaway.

We are asking that you partner with us to make this community events a success. Your monetary contributions will assist the foundation with purchasing backpacks, educational literature/keepsakes, facemasks, advertising, drinks, and so much more.

Sincere2000 Foundation was founded November 9, 2018 by my husband, Unique Melvin and I after his 17-year-old son, Sincere, completed suicide on July 11, 2018 and passed away on July 12, 2018.

Sincere was a very energetic and fun-loving child that had just graduated from High School with honors and was accepted into college where he began his major in Molecular Biology, Biochemistry and minored in Mathematics.

Our combined efforts will not only assist with education, scholarships and raising awareness but will facilitate the help that is so crucial with our youth, community and our first responders as they journey through life.

With your support we can bridge the gap between what holds people hostage in reaching out to get the help that is so critical in confronting these issues.

If you would like to know more about Sincere2000 Foundation and the different sponsorship levels, please contact me at the information below my name. Thank you in advance for any support you can offer.

Respectfully Submitted,

Sherman Melvin

Sherman Melvin 561-385-4469

Visit: Sincere2000.org / Support@Sincere2000.org

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

Date:

SEP 20 2018

YOUTH EVOLVEMENT SERVICES INC 1931 AVENUE F RIVIERA BÉACH, FL 33404-0000

Employer Identification Number: 83-1844098 DLN: 26053660001498 Contact Person: ID# 31954 CUSTOMER SERVICE Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Public Charity Status: 509(a)(2) Form 990/990-EZ/990-N Required: Effective Date of Exemption: August 27, 2018 Contribution Deductibility: Yes Addendum Applies: No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

REGISTRATION# G19000012131

Fictitious Name to be Registered: SINCERE 2000 FOUNDATION

Mailing Address of Business:

1931 AVENUE F

RIVIERA BEACH, FL 33404

Florida County of Principal Place of Business: MULTIPLE

FEI Number: 83-1844098

FILED Jan 22, 2019 Secretary of State

ζ.,

Owner(s) of Fictitious Name:

YOUTH EVOLVEMENT SERVICES, INC. 1931 AVENUE F RIVIERA BEACH, FL 33404 Florida Document Number: N18000009304 FEI Number: 83-1844098

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in Chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the electronic signature below shall have the same legal effect as if made under oath and I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817,155, Florida Statutes.

SHERMAN MELVIN

01/22/2019

Electronic Signature(s)

Date

Certificate of Status Requested ()

Certified Copy Requested ()