## 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: COUNCIL MEMEBER DR. JULIA BOTEL							
Legal Name of Organization: PALM BEACH STATE COLLEGE							
Program/ Activity Name: RIVIERA BEACH, PALM BEACH STATE COLLEGE COHORT							
Requested Amount: \$ _5,000							
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:  THE RIVIERA BEACH PALM BEACH STATE COLLEGE COHORT ESTABLISHED TO PROVIDE EDUCATION							
ENHANCEMENT OPPORTUNITIES EXCLUSIVE TO CITY OF RIVIERA BEACH RESIDENTS. THE RIVIERA BEACH PALM BEACH							
STATE COLLEGE COHORT IS CURRENTLY OFFERING THE BUSINESS SPECIALIST & LOGISTICS AND TRANSPORTATION SPECIALIST							
COLLEGE CREDIT CERTIFICATE.							
Mailing Address: 3160 PGA BLVD							
City: PALM BEACH GARDENS State: FLORIDA Zip: 334110							
Contact Person(s): Ken badarroco							
Phone: ( 561 ) 207 - 5305 Fax: ( )							
Email Address: badarack@palmbeachstatecollege.edu							
Name of Authorized Official: Ken Badaracco							
Signature of Authorized Official: Date: 09-02-2020							

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

## Waste Management Community Benefits Request for Donations Approval by Elected Official

C	Chairperson's Signature:	Date:						
	☐ Approved	☐ Disapproved						
	City Council Action							
	foregoing amount will not inure to my s my relatives or my business associat	special gain or loss or to the special gain or loss of ates; and (4) I am not aware of any conflict of going amount to the organization will create for the Date:	f f					
	Policy. I further certify that: (1) employee, subcontractor or agent of subsidiary and I do not have any conthe organization, its parent organization associates (as those terms are define officers, directors, partners, proprieto	complies with the City's Community Benefits I am not an officer, director, partner, proprietor, of the organization, its parent organization or ontractual relationship with or other obligation to on or subsidiary; (2) I have no relatives or business ned in section 112.312, Florida Statutes) who are ors, employees, subcontractors or agents of the or subsidiary; (3) The disbursement of the	; ; ;					
		, hereby certify that the donation to						

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Revised March 2017