

REVENUE SHARING FUNDS
APPLICATION FOR FUNDING

The Placer County Board of Supervisors has actively promoted revenue sharing funding as a means to provide financial support for local events, fundraising, programs, supplies, improvements, and equipment needed to help non-profit and community based organizations. In approving the revenue sharing contributions, the Placer County Board of Supervisors finds that each and every approved contribution serves a public purpose by promoting the general welfare of the County and its inhabitants therefore a benefit results to the County.

Please complete, print and sign the application and include it with your letter of request.

Organization	<input type="text" value="EveryONE Matters Ministries"/>	Telephone:	<input type="text" value="916-412-0032"/>
Address Line 1	<input type="text" value="3031 Stanford Ranch Rd"/>	Fax Number:	<input type="text"/>
Address Line 2	<input type="text" value="#2-420, Rocklin, CA 95765"/>	Email:	<input type="text" value="steve@everyonemattersministries"/>
Website	<input type="text" value="www.everyonemattersministries.com"/>		

Briefly describe the community benefit the organization, event, program or project provides:

Community Benefit	<input type="text" value="We provide transitional housing in the form of recreational vehicles and mentoring to those that are experiencing homelessness. We are a 12 month program wherein our clients must follow program rules including following a budget to help them get into permanent housing (87% success rate). Instead of being a drain on government financial resources they are given a hand up to be able to provide for themselves thru financial accountability and career"/>
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Briefly describe how funding will be utilized by listing what items will be purchased:

Funding utilized	<input type="text" value="1. Purchasing of more recreational vehicles
2. Securing RV spaces for trailers/clients in existing RV parks"/>
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Has this organization received Revenue Sharing Funds in the past? Yes No

If yes, specify year(s), event and amount:

Years/Amounts	<input type="text"/>
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I swear under penalty of perjury that the information supplied herein is true and correct.

APPLICANT NAME Steve Lindner	<input type="text" value="Steve Lindner for EveryONE Matters Ministries"/>	DATE 6/16/2020
APPLICANT'S SIGNATURE <i>Steve Lindner</i>		

Office Use Only

Date Received	<input type="text"/>	BOS Agenda Meeting Date	<input type="text"/>
Date Posted to Web	<input type="text"/>	Amount Received	<input type="text"/>
Date Removed From	<input type="text"/>	Date funding check mailed	<input type="text"/>
Prior Contributions	<input type="text"/>		