



**MEMORANDUM
BOARD OF SUPERVISORS**
County of Placer

TO: Honorable Board of Supervisors **DATE:** October 12, 2021
FROM: Leah Rosasco, Senior Administrative Aide
BY: Leah Rosasco, Senior Administrative Aide
SUBJECT: Revenue Sharing – Placer Breast Cancer Foundation

ACTION REQUESTED

Approve appropriation of \$700 in Revenue Sharing monies to Placer Breast Cancer Foundation, Paint Placer Pink as requested by Supervisor Weygandt (\$250), Supervisor Jones (\$250) and Supervisor Gustafson (\$200).

BACKGROUND

In approving the following 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.

The Board of Supervisors is being asked to approve appropriations to help fund the Placer Breast Cancer Foundation, Paint Placer Pink. The Breast Cancer Foundation works to raise funds to fight breast cancer and promote education and outreach. Paint Placer Pink is a month-long outreach effort that is focused on increasing community involvement and education. The month will include fundraising events at locally owned restaurants and service and retail businesses, as well support from local community leaders and partners. The event will also include partnerships with local non-profit organizations and health providers to share information on local resources and health tips. Revenue Sharing funds will be used to help offset the cost of marketing and outreach for the event.

FISCAL IMPACT

Funding is available in the FY 2021-22 budget (Revenue Sharing)

ATTACHMENTS

Application Received 08/31/2021

Placer County Revenue Sharing

From: noreply@civicplus.com
Sent: Tuesday, August 31, 2021 12:22 PM
To: Placer County Revenue Sharing
Subject: [EXTERNAL] Online Form Submittal: Revenue Sharing Fund Application

Follow Up Flag: Follow up
Flag Status: Flagged

Revenue Sharing Fund Application

Organization Name	Placer Breast Cancer Foundation
Address Line 1	PO Box 513
Address Line 2	<i>Field not completed.</i>
City	Roseville
State	CA
Zip Code	95661
Applicant Name	Carol Garcia/Stephanie Hill
Phone Number	9169105769
Email Address	info@wethinkpink.org
Website Address	www.placerbreastcancerfoundation.org
Describe the organization's purpose and/or mission and the people served.	The Placer Breast Cancer Foundation currently works to raise funds to fight breast cancer and promote education and outreach throughout the Placer and Sacramento County area. We raise these funds through individual donations, Foundation sponsored events, and through private organizations that host fundraisers in the Foundation's name.
Briefly describe the program or the event for which you are requesting funds.	Paint Placer Pink is an opportunity for us to reach out to our community and for others to join in our fight. The month will include fundraising events at locally owned restaurants (and specifically those who joined with us to give back to our community), service and retail businesses, and support from our local community leaders and partners. In addition, we will be working with our local non-profit partners and health providers to share information on local resources and health tips.

The Placer Breast Cancer Foundation requests a \$2,000 sponsorship of our Paint Placer Pink! Campaign.

This campaign will serve the community in three important ways:

- 1) The Campaign will bring our community out to local restaurants, gyms, retail shops, and non-profits, generating revenue for some of our local businesses that could use a boost.
- 2) The Campaign will raise awareness of health issues related to breast cancer as well as health tips for cancer prevention.

Briefly describe how Revenue Sharing funding would be utilized. (Please list items and activities to be funded with any Revenue Sharing funds allotted. Funding cannot be used for core budget needs or program or event staffing such as security, instructors, cleanup crews, etc.)

These funds will be used to offset our marketing and outreach costs and allow us to reach more community members with our information.

Has this organization received Revenue Sharing Funds in the past?

Yes

Specify year(s), event and amount received:

2021, \$2100

Are you a non-profit organization?

Yes

Please enter your Tax Identification Number

27-0690037

Please attach your most recent W9 form

[2021 PBCF W9.pdf](#)

Please attach your most recent 590 form

[PBCF 590 Form.pdf](#)

Please attach additional documents

Field not completed.

Please attach additional documents

Field not completed.

Additional documents may be emailed to revenuesharing@placer.ca.gov.

I swear under penalty of perjury that the information supplied herein is true and correct

I agree.

Electronic Signature Agreement

I agree.

Electronic Signature

Stephanie A Hill

Email not displaying correctly? [View it in your browser.](#)