



MEMORANDUM
BOARD OF SUPERVISORS
County of Placer

TO: Honorable Board of Supervisors
DATE: September 27, 2022
FROM: Teri Ivaldi, Principal Management Analyst
BY: Jennifer Grappasonno, Board Support Services Coordinator
SUBJECT: Revenue Sharing – The Forgotten Soldier Program, 12th Annual 111-Mile Fallen Heroes Motorcycle Ride

ACTION REQUESTED

Approve appropriation of \$1,250.00 in Revenue Sharing monies to The Forgotten Soldier Program, 12th Annual 111-Mile Fallen Heroes Motorcycle Ride as requested by Supervisor Weygandt (\$500.00), Supervisor Holmes (\$250.00), Supervisor Jones (\$250.00), and Supervisor Gustafson (\$250.00).

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 support The Forgotten Soldier Program, an organization that helps veterans settle back into civilian life. For more than 12 years the Forgotten Soldier Program has helped 17,000 veterans and their family members by providing assistance to veterans who are referred by the Veterans Association and the Wounded Warrior program. The 12th Annual 111-Mile Fallen Heroes Motorcycle Ride is a fundraiser that invites participants to help honor fallen United States military personnel and raise awareness of issues faced by returning service members. In addition to the ride the event will also include breakfast, lunch, live music and a raffle. Revenue Share contributions will be used to help offset the cost of the event, including the purchase of food and supplies.

FISCAL IMPACT

The total cost of this action is \$1,250.00. Funding for this contribution is available in the FY 2022-23 budget for CC10018 – Community and Agency Support. There is no additional impact to the general fund.

ATTACHMENTS

Attachment A - Revenue Sharing application received on 08/24/2022



Form Center

By signing in or creating an account, some fields will auto-populate with your information and your submitted forms will be saved and accessible to you.

Revenue Sharing Fund Application

Sign in to Save Progress

Organization Name*

The Forgotten Soldier Program

Address Line 1*

991 Lincoln Way

Address Line 2

City*

Auburn

State*

CA

Zip Code*

95603

Applicant Name*

Donna Arz

Select Language ▼

Phone Number*

5308522249

Email Address*

soul2soulart@yahoo.com

Website Address

www.forgottensoldierprogram.com

Describe the organization's purpose and/or mission and the people served. *

FSP is dedicated to providing integrative health services to Veterans, First responders and their family members at no charge to them. Those that seek holistic healing to help overcome trauma, PTSD/PTSI

Briefly describe the program or the event for which you are requesting funds. *

2th annual 111 mile motorcycle ride- never forget Fallen Heroes will be held at Rocklin Harley, Rocklin, Ca- Placer County on October 8th 2022- We are requesting \$1500.00 for helping with the ride

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.)*

plates, cups and utensils for 400 lunch & appetizers - cases of water- sodas- breakfast food for riders and coffee also - porta potty with wash station, plastic table clothes for tables. Dessert for lunch time to serve.

Has this organization received Revenue Sharing Funds in the past?*

- Yes
- No

Specify year(s), event and amount received:

we had an event in June 2022 that we partnered with the first responder group "Forget Me Not" I believe that was funds of 2300\$ to help with the event.

Are you a non-profit organization?*

- Yes
- No

Please enter your Tax Identification Number*

#27-2305344

Please attach your most recent W9 form*

Choose File No file chosen

Please attach your most recent 590 form*

Choose File No file chosen

Please attach additional documents

Choose File No file chosen

Please attach additional documents

Choose File No file chosen

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

By checking the "I agree" box below, you agree and acknowledge that 1) your application will not be signed in the sense of a traditional paper document, 2) by signing in this alternate manner, you authorize your electronic signature to be valid and binding upon you to the same force and effect as a handwritten signature, and 3) you may still be required to provide a traditional signature at a later date.

I agree.

Electronic Signature*

First M. Last

Donna Jo King

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Receive an email copy of this form.

Email address

soul2soulart@yahoo.com

This field is not part of the form submission.

Submit

Submit and Print

* indicates a required field

Select Language ▼