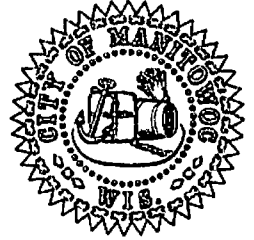




CITY OF MANITOWOC

WISCONSIN, USA
www.manitowoc.org



July 29, 2020

Kimberly Brockman
American Red Cross
2131 Deckner Ave.
Green Bay, WI 54302

RE: *American Red Cross Blood Drive – Lincoln Park Cabin 1 – September 9, 2020*

Dear Ms. Brockman:

Your request to hold your Blood Drive event at Lincoln Park Cabin 1 on September 9, 2020 was acted upon by the Special Events Committee at the meeting of July 22, 2020.

At said meeting the Committee approved your request.

Please encourage social distancing and proper handwashing and sanitizing.

When listing sponsors for your event, we ask that you consider listing the City of Manitowoc since some or all fees have been waived for the event.

If you have any questions, please contact me at 686-6950.

Very truly yours,

Deborah Neuser
City Clerk

DN:mrk

Enclosure

cc: Special Events Approval Group

Deborah Neuser, CMC, City Clerk
CITY HALL · 900 Quay Street · Manitowoc, WI 54220-4543
Phone (920) 686-6950 · Fax (920) 686-6959 · dneuser@manitowoc.org

SPECIAL EVENT COMMITTEE APPROVAL FORM

MEETING DATE: 7/22/2020

EVENT NAME: WAIVER OF FEES: Blood Drive

ORGANIZER: American Red Cross - Kimberly Brockman

E-MAIL ADDRESS: kimberlyb@aol.com

EVENT DATE: 9/9/2020

NEW OR RECURRING: Recurring

LOCATION/DESCRIPTION: Use of cabin 1 for a blood drive

*Per Red Cross
phone call
7/29/20, 35 people
total*

COMMITTEE CONCERNS:

COMMITTEE DECISION:

APPROVE

DENY

<i>Kim Todel Jim Subart</i>	
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COUNCIL ACTION REQUIRED:

ITEMS TO INCLUDE IN LETTER:

Please encourage social distancing + proper hand washing / sanitizing.

When listing sponsors for your event, we ask that you consider listing the City of Manitowoc since some or all fees have been waived for the event.

Sandy Ronski

From: Katelin Dorow
Sent: Monday, July 20, 2020 11:52 AM
To: Sandy Ronski
Cc: 'Kimberly Brockman'
Subject: FW: Waiver of Fees.doc
Attachments: Waiver of Fees.doc; ATT00001.htm

From: Kimberly Brockman [mailto:kimberlyb@aol.com]
Sent: Monday, July 20, 2020 11:52 AM
To: Katelin Dorow
Subject: Waiver of Fees.doc

FOR USE OF CITY FACILITIES OR EQUIPMENT

Groups or organizations requesting special consideration for waiver of all or partial fees ordinarily charged to groups for the use of City-owned facilities or equipment must fill out this form completely, at least 30 days in advance of the event. The request will be reviewed by the Special Event Committee and/or the Public Infrastructure Committee and the group or organization will be notified by e-mail or letter of their decision(s). A financial report for the previous two (2) years indicating all expenses and all revenues of the group/organization may be requested by the committee. Groups or organizations must be current on all financial accounts with the City of Manitowoc.

ALL QUESTIONS MUST BE ANSWERED

Name of event: _____ Blood
drive _____

1. Name of club/organization making request _____ American Red
Cross _____

Address _____ 2131 Deckner Ave Green Bay WI
54302 _____ Telephone _____ 920-241-
5949 _____

2. Names of club officers: NameAddressTelephone

schedule Supervisor Jessica Babrant 920-241-
5949 _____

Secretary _____ Kimberly Brockman 920-309-2052 _____

Treasurer _____

3. Facility requested: _____ Lincoln Park Cabin
1 _____

Equipment requested:

4. Specific dates and hours facility/equipment will be used: Date(s) _____ Sept. 9,
2020 _____ Hrs. _____ 9:30-5:30 _____

5. Please explain your request, as to what fees you desire waived or reduced and reasons. _____ All
rental fees _____

6. Which do you consider your group to be?
A. Community service _____ B. Non-profit _____ X _____ C. Private business _____
D. Club or organization _____ E. Other, please explain _____

7. Will money be collected, tickets sold, concessions sold or money raised in conjunction with the
event?
Yes _____ No _____ X _____

8. If #7 is "yes," explain and list specific charges _____

9. What will revenues be used for?

10. Do you wish to meet personally with the Committee to discuss this request? Yes _____ No X

If "yes," please provide the following information of individual to contact:

Name _____ Address _____

Telephone _____

Signed Kimberly Brockman CVL, LDA _____

Date 7/20/2020 _____

Please attach any additional information which you feel will assist the committee in evaluating your request.

When completed, return this form to the City of Manitowoc – Dept. of Public Infrastructure

900 Quay St., Manitowoc, WI 54220 · Phone 920-686-3580 · Fax 920-686-