

SPECIAL EVENT COMMITTEE APPROVAL FORM

MEETING DATE: 5/24/2023

EVENT NAME: Waiver of Fees - School Supply Giveaway

ORGANIZER: KAN Cool for School - Jeff Dvorachek

E-MAIL ADDRESS: jtdvorachek@yahoo.com

EVENT DATE: 8/18 - 8/21/23

NEW OR RECURRING: recurring

LOCATION/DESCRIPTION: School supply giveaway at Roncalli requesting use of traffic cones to control lineup

COMMITTEE CONCERNS:

COMMITTEE DECISION:

APPROVE	DENY
Courtney Hansen /ec Eric Nycz /ec Jason Freiboth /ec Brock Wetenkamp /ec Shawn Alfred /ec Todd Blaser /ec	

COUNCIL ACTION REQUIRED:

ITEMS TO INCLUDE IN LETTER:



**CITY OF MANITOWOC – DEPARTMENT OF TOURISM
SPECIAL CONSIDERATION FOR WAIVER OF PART OR ALL FEES
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: School Supply Giveaway

1. Name of club/organization making request Kan Cool for School Inc

Address PO Box 2254, Manitowoc, WI 54220 Telephone 920-645-1079
Email jtdvorachek@yahoo.com

2. Names of club officers: Name Address Telephone

President Debbie Rhein 88363 Aarow Road, Manitowoc, WI 54220 920-860-1890

Secretary Jeff Dvorachek 942 Sarah Miles Lane, Manitowoc, WI 54220 920-645-1079

Treasurer Mary Burckle 2240 Mirro Drive, Apt 18, Manitowoc, WI 54220 920-805-9690

3. Facility requested: N/A # of people N/A

Equipment requested: 45 - 28" reflective cones and 5 - 12' rail type barricades

4. Specific dates and hours facility/equipment will be used: Date(s) 8/18/23-8/21/23 Hrs. _____

5. Please explain your request, as to what fees you desire waived or reduced and reasons _____
Used for traffic control on private property and we are a tax exempt organization

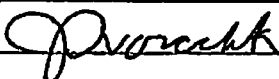
6. Which do you consider your group to be?
A. Community service _____ B. Non-profit _____ C. Private business _____
D. Club or organization _____ E. Other, please explain _____

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

8. If #7 is "yes," explain and list specific charges N/A

9. What will revenues be used for? N/A

10. Do you wish to meet personally with the Committee to discuss this request? Yes _____ No _____
If "yes," please provide the following information of individual to contact:
Name _____ Address _____ Telephone _____

Signed  Date 5/24/23

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 – Tourism Department
900 Quay St., Manitowoc, WI 54220 · Phone 920-686-3508 · Fax 920-686-6525 · E-mail echristel@manitowoc.org