



Mary Karras  
 Foundation Chairperson  
 (678) 689-4978  
[Mdkarras@icloud.com](mailto:Mdkarras@icloud.com)

# Georgia District Civitan Foundation, Inc.

Tax No. 58-6107312  
 Georgiacivitan.org or Civitan.org  
 2454 Monterey Drive, N.E.  
 Marietta, GA 30068-3050



Wayne Howell  
 Committee Chair  
 (678)692-8273  
[hwhowell@me.com](mailto:hwhowell@me.com)

## JOINT SPONSORSHIP APPLICATION

1. Name and type of Joint Event & Applicant: \_\_\_\_\_  
 \_\_\_\_\_
2. Description and purpose of the joint event: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
3. Sponsoring organization(s), club(s) or district: \_\_\_\_\_  
 \_\_\_\_\_
4. Fiscal Agent's Full Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Email: \_\_\_\_\_<sup>1</sup>  
 Will her or she be person filing this report with the Foundation. \_\_\_Y \_\_\_No.  
 If not person responsible for filing form with Foundation: \_\_\_\_\_  
 The Fiscal Agent is responsible for correspondence required by IRS to contribu-  
 tors.
5. Beginning and ending date of the joint event: \_\_\_\_\_
6. Purpose of the joint event: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
7. Net proceeds from the joint event will be distributed to: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<sup>1</sup> Attach a copy of resume describing qualifications for serving as a fiscal agent for this event. A Fiscal Agent Agreement will be required prior to the Foundation accepting this application. See paragraphs 57-68 of the Foundation's policies for the duties required of the Fiscal Agent.

8. Names of other participating organizations: \_\_\_\_\_  
\_\_\_\_\_.
9. Is the Fiscal Agent's resume attached? Yes: [\_\_\_\_\_] No: [\_\_\_\_].
10. Is evidence of liability insurance coverage attached? Yes: [\_\_\_\_\_] No: [\_\_\_\_].
11. Will all requisite permits and governmental approvals necessary for the joint event be obtained? Yes: [\_\_\_\_\_] No: [\_\_\_\_].
12. Is the joint event consistent with the articles of incorporation, bylaws and policies of the Georgia District Civitan Foundation, Inc. ("Foundation") and Civitan International? Yes: [\_\_\_\_\_] No: [\_\_\_\_].
13. Will all contracts, agreements, advertisements, and forms identify the event as being co-sponsored by the Foundation? Yes: [\_\_\_\_\_] No: [\_\_\_\_].
14. Will the applicant keep complete and detailed financial records for the event and, upon request, make such records available to the Foundation for review and/or inspection? Yes: [\_\_\_\_\_] No: [\_\_\_\_].
15. Will the receipts and disbursements for the joint event be separately accounted for and a report provided to the Foundation within 90 days after the event? Yes: [\_\_\_\_\_] No: [\_\_\_\_].
16. Will the net proceeds from the event be distributed only for charitable purposes, which may include but not be limited to, the Foundation, Civitan International, Civitan International Research Center or other IRC §501(c) 3 organization and other charitable organizations exempt federal income tax? Yes: [\_\_\_\_\_] No: [\_\_\_\_]. If no, please attach written explanation regarding the use of the net proceeds from this event.
17. Will any part of the net proceeds from the event inure to the personal benefit of any private individual affiliated in any manner with the club, district or Foundation? Yes: [\_\_\_\_\_] No: [\_\_\_\_].
18. Does the applicant understand that the Foundation is an IRC§501(c) 3 organization and contributions to the event may be deemed charitable contributions for federal income tax purposes and that contributors will be notified to review the contribution with their personal tax advisor to determine if the contribution is in fact deductible? Yes: [\_\_\_\_\_] No: [\_\_\_\_].
19. Does the applicant indemnify and hold harmless the Georgia District Civitan Foundation, Inc. from any loss, damage, claim or liability (including reasonable attorney fees) incurred by reason of the Member's gross negligence or willful misconduct?  
Yes: [\_\_\_\_\_] No: [\_\_\_\_].

20. **IMPORTANT:** A report of receipts & disbursements for the event must be filed with the foundation's treasurer no later than 90 days after the event. Does the applicant acknowledge and accept the responsibility of filing said report? Name of person to fill the form: \_\_\_\_\_ Email Address: \_\_\_\_\_

Yes: [\_\_\_\_\_] No: [\_\_\_\_\_].

**Note: If needed please attach additional remarks or explanations.**

**Georgia Sales Tax Exemption.**

21. The foundation, club, district, or joint event manager may use the attached Letter of Authorization issued to the foundation by the Georgia Department of Revenue to purchase qualified personal property for the joint event, tangible personal property and services in Georgia without payment of Georgia sales and use tax. A copy of the Letter of Authorization must be provided to each supplier of qualifying purchases. The Letter of Authorization may only be utilized for joint event aggregate purchases of \$1,000.00 or more.

**Certification**

22. Applicant certifies that this application is authorized by the sponsoring Civitan Club and that the person(s) signing below are authorized by the Civitan Club to execute and submit this application. The answers to the questions above are true and correct to the best of the knowledge of the persons executing this application. Furthermore, the Civitan Club indemnifies and holds harmless the Georgia District Civitan Foundation, Inc. from any loss, damage, claim or liability (including reasonable attorney fees) incurred by reason of any of its member's gross negligence or willful misconduct in connection with the event.

23. Is your Civitan Club current in all Tax Filings under IRC§ 501(c)4? Yes: ____: No: _____	Last Tax Filing on:	Date:
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24. Is your Civitan Club incorporated and in good standing with the GA Secretary of State's corporate annual Filings? Yes: ____: No: _____	Last annual registration filed on:	Date:
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25. Is your club current in all required Civitan International and Civitan International Georgia District dues and assessments? Yes: \_\_\_\_: No: \_\_\_\_\_

**Required Signatures**

Fiscal Agent

Club President

Print Name:

Print Name:

Signature:	Signature:
Club Treasurer	Club Secretary
Print Name:	Print Name:
Signature:	Signature:
Date submitted:	Date received by Foundation:

**IMPORTANT NOTICE: The Foundation expresses no opinion on whether or not a contributor's or participant's donations or cost will be exempt from federal or state income tax. Interested person should consult with their own individual tax professional before claiming an exemption as a result of participating or contributing to this event. For**

**SEND COMPLETED & SIGNED APPLICATION TO:**

H. Wayne Howell, Trustee  
 715 Tee Box Drive  
 Griffin, GA 30223  
 (678) 692-8273  
 hwhowell@me.com

Mary Karras, Foundation Chairperson  
 100 Bannock Court  
 Roswell GA 30075  
 (678) 689-4978  
 Mdkarras@icloud.com

**Joint Sponsorship applications must be timely filed on the joint sponsorship form provided by the Foundation during the planning stages of the event. The trustees will review the application at its next meeting. If appropriate, the Trustee chairperson may immediately forward the application to the Trustees for their consideration and vote by telephone or email. The Foundation Chair or the Committee Chairperson will promptly notify the applicant when the trustees have made a decision on the application. For more information please refer to Foundation's Policies posted at <https://www.georgiacivitan.org/>**

**FOUNDATION USE ONLY**

Received by Foundation: \_\_\_\_\_ Decision: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution Comments: