

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

399



**FROM:** Executive Office

**SUBMITTAL DATE:**  
May 27, 2015

**SUBJECT:** Board Policy Manual Update – New Policy A-72 Community Improvement Designation Funds; [\$0]; All Districts

**RECOMMENDED MOTION:** That the Board of Supervisors approve Board Policy A-72 Community Improvement Designation (CID) Funds.

**BACKGROUND:**

**Summary**

The Board Policy Manual is a guide for departments on matters that are not otherwise addressed in state codes, county ordinances, and resolutions by the Board of Supervisors. Policy A-72 is being created to accommodate necessary updates to the guidelines and criteria for distributing Community Improvement Designation (CID) Funds. It does not supersede, but is a compliment to, Policy A-70. Continued on the next page

Departmental Concurrence

*Alex Gann*

Alex Gann  
Deputy County Executive Officer

(Continued on page 2)

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ N/A	\$	\$	\$	Consent <input type="checkbox"/> Policy X
NET COUNTY COST	\$ N/A	\$	\$	\$	
<b>SOURCE OF FUNDS:</b> N/A				<b>Budget Adjustment:</b> No	
				<b>For Fiscal Year:</b> 2014-15	

**C.E.O. RECOMMENDATION:** APPROVE

BY: *Ed Corser*  
Ed Corser

**County Executive Office Signature**

**MINUTES OF THE BOARD OF SUPERVISORS**

- A-30
- Positions Added
- 4/5 Vote
- Change Order

**Prev. Agn. Ref.:** 3-1 6/18/13 & 3-11 7/29/14 | **District:** All | **Agenda Number:**

**3-74**

**SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA  
FORM 11: Board Policy Manual Update – New Policy A-72; [\$0]**

**DATE: May 27, 2015**

**PAGE: 2 of 3**

**BACKGROUND:**

**Summary (continued)**

This policy was prepared in order to provide additional guidance in the use of CID funds. In 2005, the Board of Supervisors established a discretionary-fund program to support programs deemed necessary to meet the county population's social needs, including but not limited to, the areas of health, law enforcement, public safety, rehabilitation, welfare, education and legal services, to assist the needs of physically, mentally, and financially challenged and older adults. Policy A-72 provides the essential elements for enhanced oversight and accountability as requested by the Board and outlined within the county's response to a Grand Jury report (Item 3-11 7/29/14).

Highlights of the policy include:

- 1) Enhanced oversight and accountability within the CID process through better reporting requirements;
- 2) The Form 11 shall include clear details about the purpose for the funding and the amount requested;
- 3) Annual CID funds will not be carried over into subsequent years;
- 4) A uniform application shall be developed;
- 5) Direction for the recognition of the CID funds are in the policy and application;
- 6) The Clerk of the Board shall maintain an online list of all CID awards;
- 7) The application process will require detailed information regarding the applicants background/history, description of project activity, project narrative, project benefit, board objective, project budget and management capacity. Applicants must enter into a written agreement with the county (upon application) that specifies the responsibility of the organization with respect to the use of CID funds, stipulating that the expenses will be documented and that the organization must provide a full accounting for the expenses;
- 8) Each CID recipient shall submit a final written report to the awarding Supervisor(s)' Office at project completion documenting progress and timeline of the project as well as a summary of funds expended based upon the approved project budget. The final written report shall be submitted no later than 60 days following the completion of the project. The final report shall also include a balance sheet and documentation of expenditures. If the award is over \$5,000 and not entirely spent in the year it was awarded, then an annual report is required as well.
- 9) Application requirements for governmental agencies will require less information than community groups whose status is not as well known.

Policy A-72 incorporates, but does not supersede the Community Improvement Designation Funds "Restrictions" from Policy A-70 (M.O. 3-1 of 06-18-2013). However, a language and format change will be made in the future to have certain words or terms match exactly.

The proposed policy is attached along with the current uniform CID applications, which were developed in consultation with supervisorial district staff.

**Impact on Citizens and Businesses**

This policy provides clarification of the intended use of funds by CID recipients and increases transparency and accountability of taxpayer dollars.

**SUPPLEMENTAL:**

**Additional Fiscal Information**

**SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**  
**FORM 11: Board Policy Manual Update – New Policy A-72; [\$0]**

**DATE: May 27, 2015**

**PAGE: 3 of 3**

N/A

**COUNTY OF RIVERSIDE, CALIFORNIA  
BOARD OF SUPERVISORS POLICY**

<b><u>Subject:</u></b>	<b><u>Policy Number</u></b>	<b><u>Page</u></b>
<b>COMMUNITY IMPROVEMENT DESIGNATION FUNDS</b>	<b><u>A-72</u></b>	<b>1 of 4</b>

**Policy:**

This policy provides a statement of guidelines and criteria for distributing Community Improvement Designation (CID) funds. Each member of the Board of Supervisors has an approved CID allocation to be spent during any given fiscal year. CID awards can be made any time during the fiscal year except as noted in the restriction section of this policy. At the end of the fiscal year unobligated CID funds revert to the general fund (fund balance). CID funds are intended to augment the efforts of community organizations, non-profits, county departments, and government agencies to benefit residents, neighborhoods and communities in Riverside County. CID funds are discretionary, derived and spent locally. All awards must be approved by a 4/5 vote of the Board of Supervisors in a public meeting. All funds awarded must serve a public purpose. A standardized CID application form will be made available to the general public by each District. The standard application will be utilized, but each district may establish its own criteria for selecting recipients of CID funding.

**Background:**

Provisions of Government Code §26227 authorize the Board of Supervisors to appropriate and expend the general fund to support programs that serve a public purpose by meeting the social needs of the population of the county. Social needs are broadly defined. They include but are not limited to health, law enforcement, public safety, rehabilitation, human services, education, and legal services. Funds also may be used to meet the needs of the physically, mentally or financially challenged and to provide assistance to older adults.

Funding may also be provided to services such as educational/recreational projects, arts and cultural programs, environmental awareness programs or projects, economic development and other projects which benefit the community and enhance the region's quality of life, or which the county might otherwise provide to benefit its residents. Each Board member can identify their objectives and prioritize those objectives in order to meet the social needs of the constituents they represent.

The determination about whether a particular program serves as a public purpose is a legislative function and will not be disturbed by the courts so as long as the determination has a reasonable basis.

**Procedure:**

All eligible entities shall complete an application for CID funding. Any public or private community group or non-profit agency/organization located in or providing services in the County of Riverside may apply for CID funding. Awards can be used to support programs, capital projects and fundraising for events or activities (subject to the objectives of each Board member). The application must include a full explanation about the proposed use of the money and include a detailed budget. The application shall be used by each district and must be submitted to the staff designee for the appropriate district, who would then review the application for completeness. Applying for funds does not ensure that the request will be granted.

**COUNTY OF RIVERSIDE, CALIFORNIA**  
**BOARD OF SUPERVISORS POLICY**

<b><u>Subject:</u></b>	<b><u>Policy Number</u></b>	<b><u>Page</u></b>
<b>COMMUNITY IMPROVEMENT DESIGNATION FUNDS</b>	<b><u>A-72</u></b>	<b>2 of 4</b>

CID funding is not limited to organizations that have completed the Internal Revenue Service (IRS) process to be designated a 501(c)(3), not-for-profit organization. However, if an organization has formal non-profit status, proof of that status being up-to-date must be submitted with the application. Sectarian organizations and private schools may apply for funding only if the project serves a public purpose and follows the laws governing use of public funds. Funds may not be used for political campaigning, religious or exclusively private purposes.

After the appropriate Board staff reviews an application and deems it complete, the staff will determine whether it meets this policy's minimum requirements. Applicants must be in good standing and disclose previous requests for funding. CID applications are reviewed by each District and are competitive. Funding for the program is limited and some applications while worthy will not be funded due to limited resources. Once an application is approved by the Board member, the Supervisor's office will prepare a Form 11. The Form 11 will provide the name of the requesting entity, clear details about the purpose for the funding and the amount requested.

**Application Process For All Organizations Except For Governmental Agencies:**

A District may establish pre-application requirements, including submittal deadlines. A uniform application shall be developed to include the minimum requirements of submittal. Any District may require additional information. The contents of the uniform application shall (at a minimum) include the following;

- name of organization;
- organizational history;
- a description of project, including a physical address of project/program/event;
- project benefit;
- organization objective;
- project budget;
- areas served;
- population served;
- financial information on the requesting organization;
- disclosure of current requests for funding in another district and any previous awards of CID funding within four years;
- funding recognition requirements;
- a requirement of recipients to document the use of funds and provide a final report within 60 days of utilization of funds or annually until complete if the award is over \$5,000 and not entirely spent in the fiscal year it was awarded; and
- a signed acknowledgement by the recipient of the what is required of them.

**Application Process For Governmental Agencies:**

- name of organization;
- a description of project, including a physical address of project/program/event;

**COUNTY OF RIVERSIDE, CALIFORNIA  
BOARD OF SUPERVISORS POLICY**

<u>Subject:</u>	<u>Policy Number</u>	<u>Page</u>
<b>COMMUNITY IMPROVEMENT DESIGNATION FUNDS</b>	<b><u>A-72</u></b>	<b>3 of 4</b>

- project benefit;
- project budget;
- areas served;
- population served;
- a requirement of recipients to document the use of funds and provide a final report within 60 days of utilization of funds or annually until complete if the award is over \$5,000 and not entirely spent in the fiscal year it was awarded; and
- a signed acknowledgement by the recipient of the what is required of them.

Applicants who sign the application enter into a written agreement with the county that specifies the responsibilities of the organization with respect to the use of CID funds, stipulating that the expenses will be documented and that the organization must provide a full accounting for the expenses. Additional records may be requested by the Board of Supervisors or their designee to ensure the funds were used appropriately.

Once approved by the Board, the CID award will be processed by the Clerk of the Boards office. Requirements for the disbursement of funds shall be up to the individual District.

As follow-up to CID awards, each awarded entity shall submit a written report to the same Board office with which the entity applied for funds. A final report shall be submitted no later than sixty (60) days following the completion of the project or annually until complete if the award is over \$5,000 and not entirely spent in the fiscal year it was awarded. The final and annual written reports shall include a brief narrative regarding the project, balance sheet and documentation of expenditures. The county shall require the recipient to return any funds not spent or documented per the signed agreement.

The recognition of CID funding should accrue to the County of Riverside; however, it is acceptable for a Supervisor to lend their name in support to the cause for which CID funding is provided. It is up to the individual Supervisor to determine what is acceptable and provide this information to the recipient.

The Clerk of the Board will maintain an online list of all CID awards. The Clerk of the Board will notify Board members of their allocations and remaining CID funds on a quarterly basis.

*Community Improvement Designation Fund Restrictions*

Awarding CID funds immediately before an election can create the appearance of an unfair advantage for a Board member seeking re-election or election to another office. It is a Board of Supervisors policy to strive for transparency and higher standards in such an instance. Halting CID awards through the districts of Board members running for election helps avoid even the appearance of using public resources to enhance board members' visibility and name identification with potential voters. Therefore the following restrictions shall apply:

**COUNTY OF RIVERSIDE, CALIFORNIA**  
**BOARD OF SUPERVISORS POLICY**

<b><u>Subject:</u></b>	<b><u>Policy Number</u></b>	<b><u>Page</u></b>
<b>COMMUNITY IMPROVEMENT DESIGNATION FUNDS</b>	<b><u>A-72</u></b>	<b>4 of 4</b>

1) No CID funds will be announced or awarded by any member of the Board during the sixty (60) days prior to a primary, special or general election if the Board member's name is on any ballot as a candidate and has an opponent on that ballot. During this period the Board member:

- a. Shall not place any agenda items on the Board of Supervisors agenda seeking approval to award CID funds.
- b. Shall not announce or participate in any press releases announcing the awarding of any CID funds previously approved by the Board of Supervisors.
- c. Shall not participate in or make a ceremonial presentation awarding previously approved CID funds.

2) The CID budget will be split in half for any Board member in the final year of a term in office, or whose name is on the ballot for re-election or election to another office. One half of the CID budget shall be available from July through December and the other half (plus remaining funds from the first half of the fiscal year) will be available from January through June.

3) The CID fund restrictions stated in this policy shall not apply if a Federal, State, or local emergency, by the county or a city, is declared. The CID request must directly relate to the emergency during a blackout period in order to receive the exemption.

**Reference:**

Minute Order 3-1 of 06-18-2013 [A-70]



# County of Riverside

## Community Improvement Designation (CID) Fund Grant Request Application



### APPLYING FOR CID WITH THE FOLLOWING DISTRICT(S):

- District 1  \$ \_\_\_\_\_
- District 2  \$ \_\_\_\_\_
- District 3  \$ \_\_\_\_\_
- District 4  \$ \_\_\_\_\_
- District 5  \$ \_\_\_\_\_

### Section 1 - APPLICANT INFORMATION

1. Legal Name of Applicant Organization or Sponsoring Organization:		
2. Mailing Address:		
3. City:	4. Zip:	5. Telephone:
6. Website:		7. Fax:
8. Contact Person (name and title) for this Grant Request:		9. Contact Person's Email Address:
10. Number of paid staff:	11. Number of Volunteers:	12. Year Organization founded:
13. Geographic area(s) served:		

### Section 2 – APPLICANT ORGANIZATION CLASSIFICATION (check one box):

14. Type of Organization:	
<input type="checkbox"/>	Non Profit (IRS 501 designated) – Attach IRS Form 990 or fill out the attached Schedule A
<input type="checkbox"/>	For Profit entities – Include Federal Identification Number:
<input type="checkbox"/>	Community Organization- fill out the attached Schedule A
<input type="checkbox"/>	Government Agency
<input type="checkbox"/>	Other – Please explain and fill out the attached Schedule A



**Section 3 – NAME and TYPE of PROJECT or PROGRAM:**

	Y	N
15. Is this a <b>Program</b> request (i.e., a long-term, ongoing service or activity)?		
16. Is this a <b>Project</b> (i.e., a short-term, time limited activity, service or event)?		
17. If a <b>Project</b> - is this grant request for the sponsorship for a special event?		
18. What is the name of this Program or Project?		
19. Would your organization be interested in being spotlighted in a District Newsletter or Website?		

**Section 4 – BUDGET**

Line Items	Revenues	Expenses
20. <b>Amount of money requested</b> from the CID Fund	\$	
21. <b>Cash contributed</b> to Project or Program by Applicant Organization	\$	
22. Other <b>funding already awarded</b> (specify amounts on list provided on Section 5, Item 32. F)	\$	
23. In-Kind Match Amount or Volunteer Credit Hours Amount	\$	
24. <b>Staffing</b> expense for Project/Program		\$
25. <b>Equipment</b> expense for Project/Program		\$
26. <b>Food</b> expense for Project/Program		\$
27. <b>Marketing</b> expense for Project/Program		\$
28. <b>Supplies</b> expense for Project/Program		\$
29. <b>Facilities/Rent</b> expense for Project/Program		\$
30. <b>Other</b> expense for Project/Program		\$
31. <b>TOTAL</b> Note: revenues & expenses should equal or balance	\$	\$

**Section 5 – PROJECT or PROGRAM DESCRIPTION:**

32. Using a **12-point font** and on **no more than two single-spaced typed pages** please elaborate on the following eight considerations in relation to this grant request:

- A. Please describe the **history** and **mission** of applicant organization;
- B. Please provide a **brief description** of the **project** or **program**. Include a physical address of the project or program;

- C. Please describe the **problem or need** that drives this grant request and the **intended outcome(s)** that will result if this grant request is funded;
- D. Please describe the **target population(s)** and **number of people** who would benefit;
- E. If this is an ongoing Program, please describe how **financial sustainability would be achieved** for this service/activity beyond the life of this grant request;
- F. Please describe how you will **evaluate or measure** the impact of this grant request;
- G. Please **list the names and describe the roles** of key organizations or agencies that will collaborate with your organization to implement this Program or Project; and
- H. Has your organization received Community Designation Funds in the past four years? From which district(s)? Amount? Please indicate the specific project name, start/finish dates, and break down of how funds were spent.

**Submit applications to:**

**DISTRICT 1**

Supervisor Kevin Jeffries  
 Riverside County, First District  
 Attn: Robin Reid  
 4080 Lemon Street, 5th Floor  
 P.O. Box 1527  
 Riverside, CA 92502-1527  
 Phone: 951-955-1010  
 Fax: 951-955-1019  
 Email: [District1@rcbos.org](mailto:District1@rcbos.org)

**DISTRICT 2**

Supervisor John Tavaglione  
 Riverside County, Second District  
 Attn: Karen Christensen  
 4080 Lemon Street, 5<sup>th</sup> Floor  
 Riverside, CA 92501  
 Phone: 951-955-1021  
 Fax: 951-955-2362  
 Email: [KChriste@rcbos.org](mailto:KChriste@rcbos.org)

**DISTRICT 3**

Supervisor Chuck Washington  
 Riverside County, Third District  
 Attn: Opal Hellweg  
 37600 Sky Canyon Drive, #505  
 Murrieta, CA 92563  
 Phone: 951-955-8815  
 Fax: 951-677-0669  
 Email: [Opal@rcbos.org](mailto:Opal@rcbos.org)

**DISTRICT 4**

Supervisor John J. Benoit  
 Riverside County, Fourth District  
 Attn: Rita Massie  
 73710 Fred Waring Drive, Ste. 222  
 Palm Desert, CA 92260  
 Phone: 760-863-8211  
 Fax: 760-863-8905  
 Email: [rmassie@rcbos.org](mailto:rmassie@rcbos.org)

**DISTRICT 5**

Supervisor Marion Ashley  
 Riverside County, Fifth District  
 Attn: Jaime Hurtado/Katrina Cline  
 4080 Lemon Street, 5<sup>th</sup> Floor  
 P.O. Box 1645  
 Riverside, CA 92502  
 Phone: 951-955-1050  
 Fax: 951-955-9030  
 Email: [District5@rcbos.org](mailto:District5@rcbos.org)



# County of Riverside

## Community Improvement Designation (CID) Fund



### SCHEDULE A

**COMPLETE THIS FORM UNLESS YOU ARE A NON-PROFIT AND ARE ATTACHING IRS FORM 990**

Registration Number: \_\_\_\_\_ (Non-Profit Only)

**FINANCIAL STATEMENTS:**

**PLEASE ATTACH COPIES OF THE ORGANIZATION'S CURRENT BUDGET, TREASURER'S REPORT, FINANCIAL STATEMENTS AND FOOTNOTES (it does not require a CPA's audit, but please submit if available). However, if financial statements are not available, this page must be completed.**

Balance Sheet as of \_\_\_\_\_

<u>Assets</u>		<u>Liabilities &amp; Fund Balance</u>	
Cash and Investments	\$ _____	Current Payables	\$ _____
Receivables (detail)	_____	Notes Payable	_____
Inventory	_____	Fund Balance	_____
Fixed Assets	_____		
Other Assets	_____		
<b>Total Assets</b>	<b>\$ _____</b>	<b>Total Liabilities &amp; Fund Balance</b>	<b>\$ _____</b>

End of the year income statement for the immediate past year.

<u>Income</u>		<u>Expenses</u>	
Fundraising (Sources)	\$ _____	Salaries	\$ _____
Foundation Grants	_____	Operating Expenses	_____
Government Funds	_____	Community Services	_____
Other Grant	_____	National/Parent Organization Fees	_____
Other Sources	_____	Other Expenses	_____
<b>Total Income</b>	<b>\$ _____</b>	<b>Total Expenses</b>	<b>\$ _____</b>
<b>Net Income (deficit)</b>	<b>\$ _____</b>		



# County of Riverside

## Community Improvement Designation (CID) Fund

### Grant Request Application



### SIGNATURE PAGE

The applicant acknowledges and agrees to the following:

- Please refer to the individual District’s Instructions for information on pre-application requirements, submittal deadlines, and payment disbursement requirements.
- Every CID application is considered individually and on its own merit.
- Preference will be given to organizations and activities that directly benefit the residents of the awarding district.
- Funding is not immediately available to the recipient; please allow time for checks to be processed and refer to the awarding District(s)’ website for disbursement requirements.
- The awarding of CID funds does not constitute an automatic annual allocation.
- The recognition for CID funding should accrue to the County of Riverside. It is acceptable for a Supervisor to lend their name in support to the cause for which CID funding is provided. Please consult the individual District for direction.
- CID funds must be spent as specified on the application and records may be requested by the Board of Supervisors or their designee to ensure the funds were used appropriately.
- CID grants will not be awarded or announced within the 60 days before an election in which the awarding Supervisor is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient must provide a final report within 60 days of the utilization of the funds, or annually until the funds complete if the award is over \$5,000 and not entirely spent in the fiscal year it was awarded. The recipient shall return to the county any funds not spent or documented per the signed agreement.

I/We declare under penalty of perjury that the foregoing is true and correct. I/We also acknowledge, understand, and will abide by the statements listed above.

Prepared by:

Name and Title (Please print or type):

Signature:

President or Authorized Officer:

Signature:

Organization Name:

Mailing Address of Organization:

Telephone number:

Date:



# County of Riverside

## Community Improvement Designation (CID) Fund Grant Request Application-Governmental Organizations



**APPLYING FOR CID WITH THE FOLLOWING DISTRICT(S):**

- District 1  \$ \_\_\_\_\_
- District 2  \$ \_\_\_\_\_
- District 3  \$ \_\_\_\_\_
- District 4  \$ \_\_\_\_\_
- District 5  \$ \_\_\_\_\_

**Section 1 - APPLICANT INFORMATION**

1. Legal Name of Applicant Organization or Sponsoring Organization:		
2. Mailing Address:		
3. City:	4. Zip:	5. Telephone:
6. Website:		7. Fax:
8. Contact Person (name and title) for this Grant Request:		9. Contact Person's Email Address:
10. Number of paid staff:	11. Number of Volunteers:	12. Year Organization founded:
13. Geographic area(s) served:		

**Section 2 – APPLICANT ORGANIZATION CLASSIFICATION (check one box):**

14. Type of Organization:	
	Non Profit (IRS 501 designated) – Attach IRS Form 990 or fill out the attached Schedule A
	For Profit entities – Include Federal Identification Number:
	Community Organization- fill out the attached Schedule A
	Government Agency
	Other – Please explain and fill out the attached Schedule A

### Section 3 – NAME and TYPE of PROJECT or PROGRAM:

	Y	N
15. Is this a <b>Program</b> request (i.e., a long-term, ongoing service or activity)?		
16. Is this a <b>Project</b> (i.e., a short-term, time limited activity, service or event)?		
17. If a <b>Project</b> - is this grant request for the sponsorship for a special event?		
18. What is the name of this Program or Project?		
19. Would your organization be interested in being spotlighted in a District Newsletter or Website?		

### Section 4 – BUDGET

Line Items	Revenues	Expenses
20. <b>Amount of money requested</b> from the CID Fund	\$	
21. <b>Cash contributed</b> to Project or Program by Applicant Organization	\$	
22. Other <b>funding already awarded</b> (specify amounts on list provided on Section 5, Item 32. F)	\$	
23. In-Kind Match Amount or Volunteer Credit Hours Amount	\$	
24. <b>Staffing</b> expense for Project/Program		\$
25. <b>Equipment</b> expense for Project/Program		\$
26. <b>Food</b> expense for Project/Program		\$
27. <b>Marketing</b> expense for Project/Program		\$
28. <b>Supplies</b> expense for Project/Program		\$
29. <b>Facilities/Rent</b> expense for Project/Program		\$
30. <b>Other</b> expense for Project/Program		\$
31. <b>TOTAL</b> Note: revenues & expenses should equal or balance	\$	\$

### Section 5 – PROJECT or PROGRAM DESCRIPTION:

32. Using a **12-point font** and on **no more than two single-spaced typed pages** please elaborate on the following eight considerations in relation to this grant request:

- A. Please describe the **history** and **mission** of applicant organization;
- B. Please provide a **brief description** of the **project or program**. Include a physical address of the project or program;

- C. Please describe the **problem or need** that drives this grant request and the **intended outcome(s)** that will result if this grant request is funded;
- D. Please describe the **target population(s)** and **number of people** who would benefit;
- E. If this is an ongoing Program, please describe how **financial sustainability would be achieved** for this service/activity beyond the life of this grant request;
- F. Please describe how you will **evaluate or measure** the impact of this grant request;
- G. Please **list the names** and **describe the roles** of key organizations or agencies that will collaborate with your organization to implement this Program or Project; and
- H. Has your organization received Community Designation Funds in the past four years? From which district(s)? Amount? Please indicate the specific project name, start/finish dates, and break down of how funds were spent.

**Submit applications to:**

**DISTRICT 1**

Supervisor Kevin Jeffries  
 Riverside County, First District  
 Attn: Robin Reid  
 4080 Lemon Street, 5th Floor  
 P.O. Box 1527  
 Riverside, CA 92502-1527  
 Phone: 951-955-1010  
 Fax: 951-955-1019  
 Email: [District1@rcbos.org](mailto:District1@rcbos.org)

**DISTRICT 2**

Supervisor John Tavaglione  
 Riverside County, Second District  
 Attn: Karen Christensen  
 4080 Lemon Street, 5<sup>th</sup> Floor  
 Riverside, CA 92501  
 Phone: 951-955-1021  
 Fax: 951-955-2362  
 Email: [KChriste@rcbos.org](mailto:KChriste@rcbos.org)

**DISTRICT 3**

Supervisor Chuck Washington  
 Riverside County, Third District  
 Attn: Opal Hellweg  
 37600 Sky Canyon Drive, #505  
 Murrieta, CA 92563  
 Phone: 951-955-8815  
 Fax: 951-677-0669  
 Email: [Opal@rcbos.org](mailto:Opal@rcbos.org)

**DISTRICT 4**

Supervisor John J. Benoit  
 Riverside County, Fourth District  
 Attn: Rita Massie  
 73710 Fred Waring Drive, Ste. 222  
 Palm Desert, CA 92260  
 Phone: 760-863-8211  
 Fax: 760-863-8905  
 Email: [rmassie@rcbos.org](mailto:rmassie@rcbos.org)

**DISTRICT 5**

Supervisor Marion Ashley  
 Riverside County, Fifth District  
 Attn: Jaime Hurtado/Katrina Cline  
 4080 Lemon Street, 5<sup>th</sup> Floor  
 P.O. Box 1645  
 Riverside, CA 92502  
 Phone: 951-955-1050  
 Fax: 951-955-9030  
 Email: [District5@rcbos.org](mailto:District5@rcbos.org)



# County of Riverside

## Community Improvement Designation (CID) Fund

### Grant Request Application



### SIGNATURE PAGE

The applicant acknowledges and agrees to the following:

- Please refer to the individual District’s Instructions for information on pre-application requirements, submittal deadlines, and payment disbursement requirements.
- Every CID application is considered individually and on its own merit.
- Preference will be given to organizations and activities that directly benefit the residents of the awarding district.
- Funding is not immediately available to the recipient; please allow time for checks to be processed and refer to the awarding District(s)’ website for disbursement requirements.
- The awarding of CID funds does not constitute an automatic annual allocation.
- The recognition for CID funding should accrue to the County of Riverside. It is acceptable for a Supervisor to lend their name in support to the cause for which CID funding is provided. Please consult the individual District for direction.
- CID funds must be spent as specified on the application and records may be requested by the Board of Supervisors or their designee to ensure the funds were used appropriately.
- CID grants will not be awarded or announced within the 60 days before an election in which the awarding Supervisor is on the ballot.
- The recipient shall provide a full accounting with documentation on the use of awarded funds. The recipient must provide a final report within 60 days of the utilization of the funds, or annually until the funds complete if the award is over \$5,000 and not entirely spent in the fiscal year it was awarded. The recipient shall return to the county any funds not spent or documented per the signed agreement.

I/We also acknowledge, understand, and will abide by the statements listed above.	
Prepared by:	
Name and Title (Please print or type):	Signature:
President or Authorized Officer:	Signature:
Organization Name:	
Mailing Address of Organization:	
Telephone number:	Date:

Last update: 06/19/15