EXHIBIT "A"

COMMUNITY SUPPORT FUNDS REQUEST FORM

Part I - Summary of Request (to be completed by City Clerk)

Date of Request: Requested by Mayor/Commissioner: Amount Requested: Recipient/Payee: Description of project, program, or activity to be funded beach mental HEALTH Commissioner: SUPPOSE: NOTE: HEALTH Commissioner:	Mayor Steven B. Grant S. 1,000.00 March Rayon Promise od: [B.B.m.H.C.] BOYNTO mission [B.B.m.H.C.]
Part II - Availability of funds	
The annual appropriation of funds available to the requesting Member of the Commission listed above is \$2100.	
The balance of funds available for the requesting Member of the Commission is \$\frac{A_1 + A_2 + A_3}{A_3 + A_3} = 0.	
Accordingly:	
There are funds available as requested There are insufficient funds available as requested	
Dated: 10/8/18 By:	Gity Clerk & Ryk
Part III-Eligibility Evaluation	
Public funds will not be used to improve private property unless there is a clear public need, purpose and benefit The recipient/payee provides services within the City The public purpose is beneficial to the entire community served by such donation Dated: 10/10/18 By: Requesting Member of the City Commission	