



## Searcy A & P Commission

2221 Benton Street; Searcy, AR 72143

P: 501-278-4393

APCommission@cityofsearcy.org

### Advertising and Promotion Commission Application for Funding

**This Application must be completed in full and submitted with all applicable documents and information. If this documentation and information is not provided, it will be deemed incomplete and will not be considered.**

The Searcy Advertising and Promotion Commission (A&P Commission) has a funding program where entities may apply for grant monies from the A&P Commission to help offset the cost of their event or program. The primary purpose of this program is to promote the City of Searcy and attract visitors from outside the Searcy area. Entities awarded funds must follow all A&P Commission guidelines and requirements to receive allocated dollars.

**Recognition:** Entities receiving funding from the A&P Commission are required to include the "Searcy Advertising & Promotion Commission" logo on all printed material. Any other use of the logo shall not be used without express consent from the A&P Commission.

**Availability:** Funding is subject to availability of funds.

**Year-to-Year Support:** Past support does not obligate the A&P Commission to continue support in subsequent years. Entities should not assume nor budget A&P support annually.

**Self-Sufficiency:** The A&P Commission funding program is not designed to fund programs or events over a long period of time. The A&P Commission hopes programs or events that are funded to be self-sufficient after three (3) years. The A&P Commission may fund entities or events beyond three (3) years on a case-by-case basis.

**Economic Impact:** The purpose of the A&P Commission is to promote the City of Searcy. It is important for the applicant to provide insight to the proposed event's economic impact to the City of Searcy.

**Debts:** It is the sole responsibility of the requesting organization to properly plan their event or project and manage their funds in a manner that demonstrates both fiscal accountability and management responsibility. The A&P Commission will not "bail out" events that incur losses.

**Indemnification:** Organizations agree in writing to indemnify the A&P Commission of any liability associated with the organization or event.

**Freedom of Information Act:** The applicant must acknowledge understanding that any support from the A&P Commission is subject to the Freedom of Information Laws as stated in The Arkansas Freedom of Information Act.

**Written Application and Supporting Documents:** All requests must be submitted using this Application. Additional documentation and information is required as stated in this Application. If this Application is incomplete, the funding request will not be considered.



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## REQUEST FOR FUNDING

DATE SUBMITTED: \_\_\_\_\_

AMOUNT REQUESTED: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Alternate Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Is this a non-profit organization? \_\_\_\_\_ Non-profit Tax ID#: \_\_\_\_\_

Is this group incorporated? \_\_\_\_\_ Legal Name: \_\_\_\_\_

Number of years of Organization in existence: \_\_\_\_\_

Current Officers: \_\_\_\_\_

### Event/Project Information

Event/Program Title: \_\_\_\_\_

Amount Requested: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Location of Event or Program: \_\_\_\_\_

Projected Attendance: \_\_\_\_\_ Is this a first-time event? \_\_\_\_\_ yes \_\_\_\_\_ no

Number of years the event or program has occurred? \_\_\_\_\_

Projected Economic Impact of Event/Program on Community: \_\_\_\_\_

### Project Summary

Please describe your event or program on a separate sheet. The summary must include the following:

- Background of your organization and include its purpose.
- A Summary of the event or program and its target audience.
- An explanation of how the funding will directly promote tourism and economic development in Searcy, Arkansas.
- If the event or program is not funded or partially funded, describe the impact this will have on the event or program.

(cont.)



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### **Documents and other Information to be Provided**

Each applicant must provide the following documentation and information:

- A financial statement as of the most recent fiscal year-end.
- A five-year history of the amounts and uses of funds received from the A&P Commission, including results and benefits.
- Status of any unspent Advertising and Promotion funds.
- A Budget Summary form, as attached, to include additional/matching fund sources and sponsors.

I acknowledge I am responsible for providing the Advertising and Promotion Commission a budget recap and verifiable invoices within 30 days of the event if I am funded.

\_\_\_\_\_Initial Here

Approved by A&P Commission:\_\_\_\_\_Amount Funded:\_\_\_\_\_Date Received:\_\_\_\_\_



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Check Number: \_\_\_\_\_ Recap/Verification of Expenditures Provided After Event: \_\_\_\_\_

## Requesting Organizations Agreement

It is agreed that, if this Application is granted in full or in part, our organization will adhere to the following:

- Provide a written summation of the event or attraction within 30 days of completion which shall include an attendance and a financial report. This information is subject to the Freedom of Information Act.
- Provide additional information as required by the Searcy, Arkansas Advertising and Promotion Commission.

We, \_\_\_\_\_ (requesting organization) agree to release the Searcy, Arkansas Advertising and Promotion Commission, its commissioners, and associates, from any liability related with the organization and/or event for which funds are being requested.

It is agreed that no entity or organization is entitled to funding. The decision of the Advertising and Promotion Commission is final and cannot be appealed.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Requesting organization president/chair/official

Print name: \_\_\_\_\_ Title: \_\_\_\_\_

**Incomplete applications for funding will not be considered. Please submit all supporting documentation with this application.**

Application and requests should be submitted online or to:

Searcy A & P Commission  
2221 Benton Street  
Searcy, AR 72143  
E: APCommission@cityofsearcy.org  
F: 501-508-6461



# Searcy A & P Commission

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## Requested Budget Planning Form

DATE SUBMITTED: \_\_\_\_\_

AMOUNT REQUESTED: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### REQUESTED BUDGET SUMMARY

\*If additional space is needed – please follow format on additional pages.

Project/Event Name: \_\_\_\_\_

Total Estimated Project Budget: \_\_\_\_\_

Income: \_\_\_\_\_ Source: \_\_\_\_\_

Income: \_\_\_\_\_ Source: \_\_\_\_\_

Income: \_\_\_\_\_ Source: \_\_\_\_\_

Income: \_\_\_\_\_ Source: \_\_\_\_\_

Income: \_\_\_\_\_ Source: \_\_\_\_\_

Expense: \_\_\_\_\_ Source: \_\_\_\_\_

Expense: \_\_\_\_\_ Source: \_\_\_\_\_

Expense: \_\_\_\_\_ Source: \_\_\_\_\_

Expense: \_\_\_\_\_ Source: \_\_\_\_\_

Total Estimated Expected Revenue: \_\_\_\_\_

\*Include a SPECIFIC description of how A&P Funds will be used: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approved by A&P Commission: \_\_\_\_\_ Amount Funded: \_\_\_\_\_ Date Received: \_\_\_\_\_

Check Number: \_\_\_\_\_ Recap/Verification of Expenditures Provided After Event: \_\_\_\_\_



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## Searcy Advertising & Promotion Commission

### Requested Funding Recap Form

DATE SUBMITTED: \_\_\_\_\_

AMOUNT RECEIVED: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### **FUNDING SUMMARY**

\*If additional space is needed – please follow format on additional pages.

Project/Event Name: \_\_\_\_\_

Total Project Budget: \_\_\_\_\_

Income: \_\_\_\_\_ Source: \_\_\_\_\_

Income: \_\_\_\_\_ Source: \_\_\_\_\_

Income: \_\_\_\_\_ Source: \_\_\_\_\_

Income: \_\_\_\_\_ Source: \_\_\_\_\_

Income: \_\_\_\_\_ Source: \_\_\_\_\_

Expense: \_\_\_\_\_ Source: \_\_\_\_\_

Expense: \_\_\_\_\_ Source: \_\_\_\_\_

Expense: \_\_\_\_\_ Source: \_\_\_\_\_

Expense: \_\_\_\_\_ Source: \_\_\_\_\_

Total Project Revenue: \_\_\_\_\_

\*Specifically, how were A&P funds used on this project: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved by A&P Commission: \_\_\_\_\_ Amount Funded: \_\_\_\_\_ Date Received: \_\_\_\_\_

Check Number: \_\_\_\_\_ Recap/Verification of Expenditures Provided After Event: \_\_\_\_\_