

**Print****Tourism Sponsorship application - Submission #146****Date Submitted: 3/31/2018****Title of Project\***

Mask Mania - A mask making competition

**Grant Cycle\***

Spring 2018

**Funds Requested\***

\$600

**Organization Applying\***

Two Rivers Art Gallery, Chiloquin, OR

**Contact Person\***

Christy Dugger / Judy Pate

**Phone Number\***

707-499-1660 / 541-783-2428

**Email address\***

2riversart@gmail.com

**Website (if applicable)****Address**

140 S First Street, PO Box 382

**City**

Chiloquin

**State**

OR

**Zip Code**

97624

Are you or is anyone in your organization an employee of Klamath County Government or a relative or an employee of Klamath County Government?

**yes/no\***

no



If yes, please enter name

**Name**

Are you or is anyone in your organization affiliated with or a relative of the Klamath County Tourism Review Committee?

**yes/no\***

no

If yes, please enter name

**Name**

**Description of project including activities, date, time and location\***

This is a regional competition submitted to multiple art organizations in Oregon and Northern California. The hand-made art masks submitted will be in a month-long show starting with an opening gala party. Sponsored cash prizes will be awarded. The event will end with wearing of the masks in a Halloween parade in Chiloquin. The call to artists will go out in June, July and August 2018. Masks must be delivered by September 24, 2018. Opening gala will be September 30 at 2:00 PM. Parade date will be October 27, 2018.

**Goals\***

This event is designed to integrate Chiloquin's Two Rivers Art Gallery into a larger community of artists and shoppers. Through the arts we hope to help rebrand Chiloquin as a vibrant arts community in the state. This first year, if we can attract 20-50 out of county submitters and their guests, we will meet our goals. We track all visitors to our shows. Participation will depend on our ability to effectively publicize our event.

How many out of county visitors do you expect to attract? How will you track the number of out of county visitors versus the number of locals?

**Team\***

Christy Dugger will be the lead coordinator of this project. Along with our Two Rivers Art Gallery Advisory Team, 70-member artists, and of course Judy Pate, our director. Christy has participated in a similar project in Eureka, California.

Describe your organization/project management team. How are these individuals qualified to lead this project?

**Experience\***

We are being mentored in this endeavor by a team of artist from "The Ink People". They are a successful Humboldt County arts organization that has produced a "Maskibition" since 1985. Ours will be unique from theirs but we will be doing joint publicity to support each other.

Describe your team's experience in operating past or similar projects

**County credit\***

If we are funded, we will attach a statement to all of our publicity materials that Klamath County Tourism is sponsoring our project. \$200 from this grant will be used for awarding a cash prize to a mask chosen from an out-of-county participant

How will you give credit to Klamath County for it's support in your event or project?

**Timeline\***

Beginning in June, posters and materials will be mailed to art organizations and then emailed to a large group of artists. \$400 of the proposed grant will pay for this. We will use all of our publicity channels, at least twice a month, to reinforce our call for artists through August. We will be asking them to make commitments to enter. Through the month of September, we will shift publicity to attracting visitors to our event. They will also be voting for favorite masks to receive cash awards.

Provide a timeline of your marketing efforts leading up to the event or project including out of county marketing.

**Target Market\***

Attract anyone that will come to Chiloquin and Klamath County to attend this event. They are likely to be creative people and family people.

Describe your target market/audience

**Measurability\***

We will track every visitor to our gallery through the show.

How will you measure attendance in drawing out of county visitors to the project? Examples: Hotel Rate code, Ticket Sales, Trail Counts (be specific).

**Sponsors\***

Confirmed: The Ink People, Eureka, CA. Chiloquin Visions in Progress (our parent organization). Dugger Design favorite of show cash award. Potential: Several local Chiloquin merchants; several regional art centers: several Klamath Falls organizations such as MJ Gallery, Ross Ragland Theater. Some will supply us with free publicity. Some will sponsor various mask awards.

List your potential sponsors and partners and how they contribute to the event or project.

**Flexibility\***

Our plans will continue but we would hope that at least the county will sponsor a mask award. We cannot afford to send out mailings with posters and written information documents, brochures, etc. to out of county groups with some funding. We will rely solely on email and social media. We have found this is not as effective with artist.

If your organization is not awarded full funding, how would you modify your plans?

**Required supporting documents\***

Two\_Rivers\_Gallery\_Spring\_2018\_Tourism\_Grant\_request.zip

\*\*\*Proof of federal tax id (if one is issued, do not upload docs for SSN)  
\*\*\*Entity's W-9 form (omit SSN) \*\*\*Grant Budget - Use the grant budget template provided \*\*\*Support letters - All entities are required to obtain support from 3 businesses/organizations \*\*\*If your grant project involves signage of any kind, you are required to gather and submit letters from all required local, regional or state sign authorities involved demonstrating approval to place signage on their land/property during the timeframe of the grant \*\*\*Marketing type projects - If producing collateral you must describe your distribution plan, including budgeted costs \*\*\*If your grant project involves infrastructure development/construction you must include plan drawings and approval from permitting authorities if required locally

**Insurance Requirements**

Insurance Acord 25-S with County required minimums, Klamath County as additional insured, additional insured endorsement, proof of workers comp and auto coverage (if needed). If no employees or autos will be used for grant fulfillment, a document on letterhead stating no employees or autos will be used for grant fulfillment must be submitted.

**Electronic Signature Agreement\***

By checking the "I agree" box below, you agree and acknowledge that 1) your application will not be signed in the sense of a traditional paper document, 2) by signing in this alternate manner, you authorize your electronic signature to be valid and binding upon you to the same force and effect as a handwritten signature, and 3) you may still be required to provide a traditional signature at a later date.

I agree.

**Electronic Signature\***

Christene S Dugger

IRS - tax  
exempt

INTERNAL REVENUE SERVICE  
DISTRICT DIRECTOR  
2 CUPANIA CIRCLE  
MONTEREY PARK, CA 91755-7406

DEPARTMENT OF THE TREASURY

Date:

MAY 13 1996

CHILOQUIN VISIONS IN PROGRESS  
C/O HAUGEN & LOGAN, ATTORNEYS AT  
LAW  
812 S.W. WASHINGTON, SUITE 910  
PORTLAND, OR 97205

Employer Identification Number:

93-1191426

Case Number:

956059026

Contact Person:

GREGORY WOO

Contact Telephone Number:

(213) 725-6619

Accounting Period Ending:

June 30

Foundation Status Classification:

170(b)(1)(A)(vi)

Advance Ruling Period Begins:

June 14, 1995

Advance Ruling Period Ends:

June 30, 1999

Addendum Applies:

No

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make a final determination of your foundation status.

Letter 1045 (DO/CG)

MaskMania Event - Budget from the Klamath County Tourism Grant

\$400 for event publicity and mailing

\$200 for out-of-county mask award (to be used by County Tourism member)

\$600 Total Request.

(We have pledges for \$500 for other prizes).

March 29, 2018

Tyra Dickinson,

I have been helping the Two Rivers Art Gallery for about a year now as a volunteer. I have found them to be an aspiring organization that works hard not only for themselves but for the community through fundraisers and being involved in tourism. Their sales are increasing and their drive to accomplish much only grows as people grow in numbers to volunteer and help. I heartedly endorse them as a great organization to sponsor.

Desi McKissick,  
I Do Taxz  
Owner

03.29.18

City of Chiloquin  
Chiloquin, OR 97624  
Pete: 541-891-9243

Tyra Dickinson,

I have been working with the Two Rivers Art Gallery for a couple of years now. They are an organization that works very hard to accomplish a lot to continue making the Gallery a success through promotions, events, fundraisers, and great quality art items. They are worth investing in. They have my vote of recommendation.

Pete Pate  
Safety and Water Supervisor  
City of Chiloquin

# THE CINCINNATI INSURANCE COMPANY

A Stock Insurance Company

## COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: **ETD 045 86 88**

Named Insured is the same as it appears on the Common Policy Declarations unless otherwise stated here.

Loc. (address)  
REFER TO IA904

COVERAGE PROVIDED					OPTIONAL COVERAGES Applicable only when an entry is made							
Item	Coverage	Limits	Coin- surance	Covered Cause Of Loss	Inflation Guard (%)	Replace- ment Cost (x)	Replace- ment Cost Incl. Stock (x)	Agreed Value (x)	Monthly Limit (fraction)	Maximum Period (X)	Extended Period (Days)	Business Income Indemnity
1-1	BUILDING	2,050,000	90%	SPECIAL								X
1-1	BUSINESS PERSONAL PROPERTY	118,000	90%	SPECIAL								X

DEDUCTIBLE: \$500.00 unless otherwise stated \$ 2,500

### MORTGAGE HOLDER

Item Name and Address

#### FORMS AND / OR ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART:

FM101	05/16	BUILDING AND PERSONAL PROPERTY COVERAGE FORM (INCLUDING SPECIAL CAUSES OF LOSS)
FA217	04/04	LIBRARIES
FA269	05/16	SOCIAL SERVICES COMMERCIAL PROPERTY ENDORSEMENT
FA283	05/16	CRISIS EVENT EXPENSE COVERAGE ENDORSEMENT
FA286	05/16	THE BRIDGE ENDORSEMENT
FA450	05/16	COMMERCIAL PROPERTY CONDITIONS
FA244	05/11	EQUIPMENT BREAKDOWN COVERAGE (EXCLUDING PRODUCTION MACHINERY)

# THE CINCINNATI INSURANCE COMPANY

A Stock Insurance Company

## COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: ETD 045 86 88

Named Insured is the same as it appears in the Common Policy Declarations

**LIMITS OF INSURANCE**

EACH OCCURRENCE LIMIT	\$ 1,000,000	
GENERAL AGGREGATE LIMIT	\$ 3,000,000	
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT	\$ 3,000,000	
PERSONAL & ADVERTISING INJURY LIMIT	\$ 1,000,000	ANY ONE PERSON OR ORGANIZATION
DAMAGE TO PREMISES RENTED TO YOU LIMIT		ANY ONE
\$100,000 limit unless otherwise indicated herein:	\$ SEE GA262	PREMISES
MEDICAL EXPENSE LIMIT		
\$5,000 limit unless otherwise indicated herein:	\$ SEE GA262	ANY ONE PERSON

CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE		ADVANCE PREMIUM	
			Products / Completed Operations	All Other	Products / Completed Operations	All Other
LOC. 1 - OR BUILDINGS OR PREMISES - OFFICE - NFP INCL PROD AND/OR COMP OP	61227 A	11,833		74.014		876
LOC. 2 - OR DAY CARE CENTERS - NFP INCL PROD AND/OR COMP OP	41716 E	60 EACH		6.028		362
SCHOOLS - NFP INCL PROD AND/OR COMP OP	67513 A	1,800		38.271		69
SOCIAL SERVICES GENERAL LIABILITY ENDORSEMENT	20019			3.5%		250 MP
PHYSICAL ABUSE, SEXUAL MISCONDUCT/MOLESTATION	20021					167

The General Liability Coverage Part is subject to an annual minimum premium.

TOTAL ANNUAL PREMIUM \$ 1,724

**FORMS AND / OR ENDORSEMENTS APPLICABLE TO COMMERCIAL GENERAL LIABILITY COVERAGE PART:**

GA101	12/04	COMMERCIAL GENERAL LIABILITY COVERAGE FORM
CG2116	07/98	EXCLUSION - DESIGNATED PROFESSIONAL SERVICES
CG2157	07/98	EXCLUSION - COUNSELING SERVICES
CG2240	01/96	EXCLUSION - MEDICAL PAYMENTS TO CHILDREN DAY CARE CENTERS
GA261	07/12	PHYSICAL ABUSE, SEXUAL MISCONDUCT OR SEXUAL MOLESTATION LIABILITY