

TOURISM PROMOTION PROGRAM • APPLICATION FOR FUNDING

APPLICANT INFORMATION

Project Title: Greater Kingston Community Chamber of Commerce LTAC
 Project Dates: Beginning: 1/1/2021 Ending: 12/31/2022
 Name of Organization: Greater Kingston ^{CCOC} Web Site: www.kingstonchamber.com
 Mailing Address: PO Box 78 Kingston, WA 98346
 Contact Person: MiaCate Kennedy I E-Mail: director@kingstonchamber.com Phone: 360-860-2239
 Amount Requested: \$ 36,500.00 Total Project Cost: \$ 56,500.00
 Portion of Total Project Cost Requested: 44.65 ^{nu} (%)
 Signature of Authorized Representative: MiaCate Kennedy I

 Tourism Infrastructure:

Support tourism-related facilities, which is defined as real or tangible personal property with a usable life of three or more years or constructed with volunteer labor and used to support tourism, performing arts, or to accommodate tourist activities.

 Tourism Marketing Activities:

Activities and expenditures designed to increase tourism, including but not limited to advertising, publicizing or otherwise distributing information for the purpose of attracting and welcoming tourists; developing strategies to expand tourism; operating tourism promotion agencies; and funding marketing of special events and festivals designed to attract tourists (*not a current funding priority*).

APPLICANTS MUST SUBMIT THE FOLLOWING:

1. A one-page budget including all income and expenses for the entire project (including matching funds and in-kind contributions) and clearly showing expenses for which County lodging tax dollars will be used.
2. Documentation of non-profit status.
3. Your organization's **most recent tax return** or most recent annual financial statement created by an independent source should a tax return not be available. Other documentation showing financial viability may be considered if agency is newly created and the documentation is prepared by an independent source.
4. A two-page document including a description of the proposed project with an explanation of how it will assist in building tourism and/or promoting events or activities that will bring tourists to Kitsap County. Include marketing plans and examples of performance indicators and well as plans for future sustainability. For more information see the included template.
5. No additional materials will be accepted.
6. If these basic criteria are not met, the application will not be reviewed
7. Certificate of Insurance evidencing that any required insurance coverages are, or will be, in effect through the 2021 calendar year.

Send Completed Application and Required Documentation to:

Please submit by mail to: OR

MAILING ADDRESS

Vicki Martin, Buyer
 Kitsap County Purchasing Office
 614 Division Street, MS-7
 Port Orchard, WA 98366

Hand deliver to:

PHYSICAL ADDRESS

Vicki Martin, Buyer
 Kitsap County Administration Building
 Purchasing Office – Fourth Floor
 619 Division Street
 Port Orchard, WA 98366

SUBMISSION REQUIREMENTS

All documentation must be received by deadline and contain ALL submission requirements to be considered for funding. Please provide (7) copies of submission package without staples.

Questions? Call Vicki Martin at 360.337.4788 or e-mail vmartin@co.kitsap.wa.us

	2019	2020	2021
Income for Events			
Fundraising/Ticket Sales	\$47,844.34	\$0.00	\$20,000.00
LTAC Grant	\$18,437.50	\$20,000.00	\$36,500.00
			2020 LTAC was from
Total Income	\$66,281.84	\$20,000.00	\$56,500.00

Project 1

Print Advertising/Other Marketing	\$15,191.92	\$15,000.00	\$10,000.00
Digital Marketing Campaign	\$0.00	\$0.00	\$15,000.00
Total Expenses	\$15,191.92	\$15,000.00	\$25,000.00

Project 2

Fourth of July	\$431.00	\$0.00	\$500.00
Kingston Cove Christmas	\$134.29	\$0.00	\$2,000.00
Summer Concerts	\$4,694.72	\$0.00	\$6,000.00
Oktoberfest	\$0.00	\$0.00	\$8,000.00
Other-Event Supplies/Equipment	\$272.74	\$0.00	\$15,000.00
Total Expenses	\$5,532.75	\$0.00	\$31,500.00

Total Expenses for all projects	\$20,724.67	\$15,000.00	\$56,500.00
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9-1655808



STATE of WASHINGTON SECRETARY of STATE

I, **Ralph Munro**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF INCORPORATION

to

GREATER KINGSTON COMMUNITY CHAMBER OF COMMERCE

a Washington Non Profit corporation. Articles of Incorporation were filed for record in this office on the date indicated below:

U.B.I. Number: 601 580 968

Date: October 6, 1994



Given under my hand and the seal of the State of Washington, at Olympia, the State Capitol

Ralph Munro, Secretary of State

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
 (except private foundations)

2019

Department of the Treasury
 Internal Revenue Service

- ▶ Do not enter social security numbers on this form, as it may be made public.
- ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning _____, 2019, and ending _____, 2019, and ending _____

<p>B Check if applicable:</p> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<p>C</p> <p>Greater Kingston Community Chamber of Commerce PO Box 78 Kingston, WA 98346</p>	<p>D Employer identification number 91-1655808</p> <p>E Telephone number (360) 297-4500</p> <p>F Group Exemption Number</p>
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G Accounting Method: Cash Accrual Other (specify) _____

I Website: ▶ www.kingstonchamber.com

J Tax-exempt status (check only one) — 501(c)(3) 501(c) (6) ◀(insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **104,073.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	79,146.
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	24,927.
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events:		
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
6b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
6c	Less: direct expenses from gaming and fundraising events	6c		
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	104,073.	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	42,188.
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O) See Schedule O	16	64,815.
17	Total expenses. Add lines 10 through 16	17	107,003.	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	-2,930.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	16,979.
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	14,049.

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	21,846.	16,655.
23 Land and buildings		
24 Other assets (describe in Schedule O)		
25 Total assets	21,846.	16,655.
26 Total liabilities (describe in Schedule O) See Schedule O	4,867.	2,606.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	16,979.	14,049.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28 See Schedule O		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28 a	45,100.
29		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29 a	
30		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30 a	
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31 a	
32 Total program service expenses (add lines 28a through 31a)	32	45,100.

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
MiaCate Kennedy Executive Dir.	20	22,482.	0.	0.
Mickey Munro President	0	0.	0.	0.
Nancy Martin Past {President	0	0.	0.	0.
Linda Fyfe Vice President	0	0.	0.	0.
Shana Ramirez Vice President	0	0.	0.	0.
Dennis Bryan Treasurer	0	0.	0.	0.
Methia Gordon Secretary	0	0.	0.	0.
Bim Prince Director	0	0.	0.	0.
Kate Moglia Director	0	0.	0.	0.
Debi Tanner Director	0	0.	0.	0.
Lisa Maxwell Director	0	0.	0.	0.
Blair Anderson Director	0	0.	0.	0.
Greg Englin Director	0	0.	0.	0.

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O.		X
34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions.		X
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b If 'Yes' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O.		
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III.		X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N.		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37 a 0.		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b If 'Yes,' complete Schedule L, Part II, and enter the total amount involved. 38 b 0.		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9. 39 a 0.		
b Gross receipts, included on line 9, for public use of club facilities. 39 b 0.		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: N/A section 4911 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0.		
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.		
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. ▶ 0.		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. ▶ 0.		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T.		X
41 List the states with which a copy of this return is filed ▶ <u>WA</u>		

42a The organization's books are in care of ▶ Parker, Mooers & Cens PS Telephone no. ▶ (360) 692-8808
 Located at ▶ 9222 Bay Shore Dr NW Suite 150 Silverdale WA ZIP + 4 ▶ 98383

	Yes	No
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country ▶ _____		X
c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country ▶ _____		X

See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here N/A
 and enter the amount of tax-exempt interest received or accrued during the tax year. ▶ **43** N/A

	Yes	No
44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.		X
b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.		X
c Did the organization receive any payments for indoor tanning services during the year?		X
d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.		
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions.		X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I Yes No
 46 X

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II Yes No
 47

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Yes No
 48

49a Did the organization make any transfers to an exempt non-charitable related organization? Yes No
 49a

b If 'Yes,' was the related organization a section 527 organization? Yes No
 49b

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

COPY

d Total number of other independent contractors each receiving over \$100,000 ▶

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ▶ Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer Date
MiaCate Kennedy Executive Dir.
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name <u>Dennis Bryan CPA</u>	Preparer's signature <u>Dennis Bryan CPA</u>	Date <u>6-24-20</u>	Check <input type="checkbox"/> if self-employed	PTIN <u>P00314405</u>
Firm's name ▶ <u>Parker Mooers & Cena PS, CPA's</u>	Firm's EIN ▶ <u>91-1702384</u>		Phone no. <u>(360) 692-8808</u>	
Firm's address ▶ <u>9222 Bay Shore Dr NW Ste 150</u>	<u>Silverdale, WA 98383</u>			

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

2019

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization Greater Kingston Community Chamber of Commerce	Employer identification number 91-1655808
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**Form 990-EZ, Part I, Line 16
Other Expenses**

Advertising and Promotion	\$	3,323.
Bank Fees		601.
Contract Labor		240.
Dues & Subscriptions		40.
Fundraising Costs		23,701.
Insurance		1,547.
Meals		40.
Member Luncheons		5,409.
Nonprofit Filing Fee		20.
Office Expenses		4,360.
Rounding Adjustment		-2.
Royalties		11,875.
Tourism & Events		13,661.
Total	\$	64,815.

**Form 990-EZ, Part II, Line 26
Total Liabilities**

	<u>Beginning</u>	<u>Ending</u>
Accounts Payable and Accrued Expenses	\$ 4,867.	\$ 2,606.
Total	\$ 4,867.	\$ 2,606.

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Maintain and operate visitor center, support local businesses with advertising, promotion, committees, education, government relations, networking events, newsletters forums, other business support activities.

Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

Maintain and operate visitor center, support local businesses with advertising, promotion, committees, education, government relations, networking events, newsletters forums, other business support activities.

Lodging Tax Request: Organization/Event Description

Final length may not exceed two pages

Project Title: Greater Kingston Community Chamber of Commerce LTAC

Name of Organization: Greater Kingston Community Chamber of Commerce

Size of staff and board: 1 FTE, 12 board members

Geographic Area Served: I-5 Corridor from Marysville to Tacoma, Kitsap and Olympic Peninsulas

Type of Service Provided: Tourism Marketing Activities

Description of Proposed Project: Digital marketing campaign/Festivals and events

Size of Volunteer Base: TBD

Demographic Served: Families with young children, adults 21+, and retirees

The Greater Kingston Community Chamber of Commerce will develop a digital marketing campaign plan targeted at raising awareness for the Chamber and services provided by the businesses in Kingston and North Kitsap. Currently 4 million visitors use Kingston as a gateway to the Olympic Peninsula. A digital marketing campaign would target these travelers with advertisements for local hotels, restaurants, banks, outdoor activities, festivals and other services. This targeted advertising would include all social media and mobile advertising, website optimization, and reach more than 2500 people with each weekly campaign.

Anticipating that continued COVID restrictions may still be in place in Q1 and potentially Q2 of 2021, the GKCCoC (Greater Kingston Community Chamber of Commerce) will instead focus on tourism events in Q3 and Q4. As in previous years, GKCCoC will promote Summer Concerts on the Cove, Fourth of July, and Christmas on the Cove events, requiring local marketing and targeted advertising with the new digital marketing tool. In addition to these events which have a documented track record for bringing visitors to Kingston, the GKCCoC will develop and execute an Oktoberfest style event in the September/October 2021 timeframe. This new community event will incorporate elements of the Kingston Wine Walk, Summer Concerts and Kingston Art Festival – specifically, a wine and beer garden, live music, craft vendor booths, and activities for families with young children. The event could run through the entire month of September's weekends, so that visitors could potentially attend several times throughout the event.

COVID-19 restrictions on public events may determine the feasibility of a large festival even in Q3/Q4, however if this event were to take place in several smaller venues rather than a single large location it could potentially benefit more local businesses and still abide by any social distancing regulations. Downtown businesses with parking lots could set up tents that maintain a six-foot distance between vendors and mark off 6-foot increments to encourage queues to keep distance between non-family participants. Because this event is targeted at a broad demographic, barring COVID-19 restrictions, we anticipate it would bring a similar number of tourists as past events, resulting in comparable numbers of people who opt to stay overnight.

Marketing would be targeted via social media and awareness advertising to surrounding communities throughout the Kitsap and Olympic Peninsulas and I-5 corridor. Additionally, we could also target boaters sailing into Appletree Cove. Posters and flyers could be distributed to local businesses and the Port of Kingston and posted on the Washington State Ferry.

Success of the event would be measured via polling individual attendees for information regarding zip code and whether their visit resulted in an overnight stay. This information could be collected as in past using a bead count method (i.e. participants can place a bead in one of three jars labeled "local," "out of town," "staying overnight.") or using volunteers to collect information from attendees. Additional data could be mined using pay per click ads and social media metrics.

History of Organization/Event:

The Greater Kingston Community Chamber of Commerce has a long history of producing events that bring visitors to the area. The success of the Kingston Wine Walk, Almost Summer Fest, Summer Concerts, Kingston Art Festival, Fourth of July, and Christmas on the Cove has been documented and will serve as a template for executing a new event. Ideally, as COVID restrictions are lifted, these historical events will resume, bringing visitors to the area throughout the year. With a digital marketing campaign and targeted pay per click awareness advertising on social and mobile media, we will have even more success.

Scope of Work/Timeline:

Weekly throughout 2021: The GKCCoC would develop targeted advertising campaigns for social and mobile media.

Q1 2021: In addition to targeted digital ads, the GKCCoC would place advertisements in festival magazines announcing the existing and new events and begin accepting vendor registrations and booth fees. Musicians would be vetted and signed to a contract. The GKCCoC would work with the Port of Kingston and local business owners to determine the location(s) of this event based on County COVID-regulations. Documentation will be sent to the LTAC committee for review.

Q2 2021: The GKCCoC would solicit sponsorships from local businesses and would work with non-profits such as Rotary and Kiwanis to garner volunteers for the event. Appropriate licenses, insurance and other considerations would be addressed at this time. Documentation will be sent to the LTAC committee for review.

Q3 2021: Targeted social media would begin for Summer Concerts and Oktoberfest events. Advertisements would be placed in local publications, and posters/flyers (and event tickets for Oktoberfest) would be printed. Purchase event t-shirts, souvenirs, and tasting glassware for Oktoberfest, and finalize vendor layout(s) and locations. Ticket sales would begin in July and continue up to the day(s) of the event. Develop list of tasks to be completed on event days and organize volunteer staff. Documentation will be sent to the LTAC committee for review.

September 2021: Layout event spaces and obtain fire marshal approval for festival layout. Ensure all vendors and businesses have the appropriate licensing.

Q4 2021: The GKCCoC will host a meeting with key organizations and individuals to determine success of the festival based on attendance and pay per click advertising/social media engagement metrics. Documentation will be finalized and sent to the LTAC committee for review.

State Farm



State Farm
Specialty Products

Telephone: (866) 737-6877
Facsimile: (847) 572-6262

BINDER OF INSURANCE

Page: 1

PER THE TERMS OF THIS DOCUMENT – COVERAGE IS IN FORCE AND PREMIUM IS BEING EARNED

1. Delivered To: David Lee
 DAVID LEE STATE FARM AGENCY
 10868 NW Myhre Pl Ste 101
 Silverdale, WA 98383-7618

Producer Code #: 472798 **Producer Facsimile:** (360) 613-5551

Coverage is bound pursuant to the following terms and conditions:

2. Parent Organization: GREATER KINGSTON COMMUNITY CHAMBER OF COMMERCE
 25864 Washington Boulevard NE
 Kingston, WA 98346

Client Code #: 210441

3. Binder Period: This binder expires automatically on the date stated unless extended in writing by State Farm Specialty Products or unless superseded by the Policy or Renewal Declarations.

Binder Effective Date: May 24, 2020 Binder Expiration Date: Until replaced by Policy
 12:01 A.M. standard time at the address of the **Parent Organization** as shown above.

4. Policy Provisions: The Policy or Renewal Declarations will be issued to incorporate the following provisions, provided all conditions of this binder have been met.

Policy #: PS0000003458911

Policy Period: From: May 24, 2020 To: May 24, 2021
 12:01 A.M. standard time at the address of the Parent Organization as shown above.

Insurer: State Farm Fire and Casualty Company
 Program: Not-For-Profit Organization Liability including Employment Practices Liability Coverage
 Coverage Type: Claims – Made Defense Costs: Defense Costs Outside Limits

Limit of Liability In the Aggregate	Retention Each Claim
<u>\$1,000,000</u>	<u>\$5,000</u>

5. Premium Payment & Terms: (Invoice to Follow Under Separate Cover)

Premium Payment Plan: Quarterly
 Policy Period Premium: \$995.00

Total Premium: \$995.00

State Farm



**State Farm
Specialty Products**

Telephone: (866) 737-6877

Facsimile: (847) 572-6262

BINDER OF INSURANCE

Page: 2

6. Applicable Forms & Endorsements:

PSNP1001(01/01)	Not-For-Profit Organization Liability Policy Including Employment Practices Liability Coverage
PS1039-01(01/15)	Certified Acts of Terrorism Endorsement
PS1041 (01/15)	Policyholder Disclosure Notice of Terrorism Insurance Coverage
PSNP1014(01/01)	Insurance Operations Exclusion
PSNP1026WA(03/02)	Washington Amendatory Endorsement

7. Special Conditions:

Not Applicable

8. Subjectivities:

Subject to our receipt & approval of the following requirements:

Not Applicable

This binder requires payment of premium to State Farm Specialty Products, at the location listed on the invoice, on the premium due date shown in the invoice. This binder may be cancelled if payment is not received by the premium due date on the invoice.

In the event of cancellation or expiration of this binder without a Policy or Renewal Declarations Page being issued, the Insurer shall be entitled to an earned premium for the time in force as calculated by the Insurer in accordance with the provisions of the applicable specimen policy or expiring policy.

Date of Issue: July 17, 2020

By:


Authorized Representative