



**MEETING MINUTES**  
**SESSION OF THE PARKS AND RECREATION ADVISORY BOARD**  
**CITY OF KISSIMMEE**  
**CITY HALL, COMMISSION CHAMBERS**  
**101 CHURCH STREET, KISSIMMEE, FLORIDA 34741-5054**  
**WEDNESDAY, OCTOBER 8, 2025 AT 6:00 PM**

**1. MEETING CALLED TO ORDER**

**Members Present:** Board Member Albert Dorsey, Board Co-Chair Edward Kilroy, Board Chair M. Hannan Khan, Board Member Robin Wright, Board Member Seewdat "David" Anderson, Board Member Hamza Godil, Board Member Manuel Gomez, Board Member Amarilis Olivo Williams

**Staff Present:** Parks & Recreation Director Steve Lackey, Assistant City Attorney Curtis McGhee, Events Manager Veronica Frink, Financial Analyst Andrea Campbell, Administrative Assistant III Anna Miller

**Members Absent:** Board Member Vanessa Alvarez

**2. MINUTES**

- 2.A Approval of meeting minutes from August 13, 2025 Parks & Recreation Advisory Board.  
 Board Co-Chair Edward Kilroy made a motion to approve the minutes from the August 13th meeting as presented. Board member Amarilis Olivo Williams seconded the motion.

AYE: Board Member Albert Dorsey, Board Co-Chair Edward Kilroy, Board Chair M. Hannan Khan, Board Member Manuel Gomez, Board Member David Anderson, Board Member Hamza Godil, Board Member Robin Wright, Board Member Amarilis Olivo Williams

NAY: None

Motion 8 - 0

3. **HEAR AUDIENCE** No one was present for Hear the Audience

**4. DISCUSSION**

- 4.A Director's Report

Parks & Recreation Director Steve Lackey gave an update on projects within the department.

- Lancaster Ranch phase IB will begin construction soon.
- Lancaster Ranch phase II is planned to begin in 2028.
- Shingle Creek bike trail with a connection through Lancaster Ranch (Lancaster Loop) is under construction.
- Mark Durbin Community Center is currently in the evaluation phase.
- Civic Center/Hotel — Demolition is expected for early 2026.
- Berlinsky Community House will be rebuilt on the same footprint.
- The Board was reminded of upcoming events and invited to participate in the Parks & Recreation State of the Department as well as Santa Calling and the Festival of Lights.

## 5. NEW BUSINESS

### 5.A Voting of Chair and Co-Chair for 2025/26 Fiscal Year

Board Co-Chair Edward Kilroy nominated Board Chair M. Hannan Khan to remain as chairperson for another year. Board Member Albert Dorsey nominated Board Member Robin Wright as the new Chairperson. Board Chair M. Hannan Khan received 5 votes and Robin Wright received 3 votes. Board Chair M. Hannan Khan made a motion to accept Board Chair M. Hannan Khan for Board Chair and Board Co-chair Edward Kilroy seconded.

AYE: Board Chair M. Hannan Khan, Board Co-Chair Edward Kilroy, Board Member Albert Dorsey, Board Member Robin Wright, Board Member Seewdat "David" Anderson, Board Member Manuel Gomez, Board Member Amarlis Olivo Williams, Board Member Hamza Godil

Motion Carried: 8-0

Board Co-Chair Edward Kilroy nominated Board Member Robin Wright as Co-Chair. Board Member Robin Wright declined the nomination. Board Member Robin Wright nominated Edward Kilroy to remain as Co-chair. Board Member M. Hannan Khan made a motion to accept Board Co-chair Edward Kilroy as Board Co-chair and Board Co-Chair Edward Kilroy seconded the motion.

AYE: Board Chair M. Hannan Khan, Board Co-Chair Edward Kilroy, Board Member Albert Dorsey, Board Member Robin Wright, Board Member Seewdat "David" Anderson, Board Member Manuel Gomez, Board Member Amarlis Olivo Williams, Board Member Hamza Godil

Motion Carried: 8-0

### 5.B Board meeting dates for the 2025/26 Fiscal Year

Board members were provided meeting dates for fiscal year 2025-2026 (EXHIBIT F). Parks & Recreation Director Steve Lackey discussed the December 10th meeting and plans to host a holiday get together at the lakefront park following the meeting. It was noticed that the October 14th meeting read 2025. That date is October 14, 2026. Board co-chair Edward Kilroy made a motion to accept the meeting dates as amended for fiscal year 2025-2026. Board Member Robin Wright seconded the motion.

AYE: Board Chair M. Hannan Khan, Board Co-Chair Edward Kilroy, Board Member Albert Dorsey, Board Member Robin Wright, Board Member Seewdat "David" Anderson, Board Member Manuel Gomez, Board Member Amarlis Olivo Williams, Board Member Hamza Godil

Motion Carried 8-0

### 5.C Community Benefit Grant

Parks & Recreation Director Steve Lackey shared that this is the first Community Benefit Grant of the fiscal year. There is \$25,000 allocated to this fund. The amount of the award decreases each year for participants with consecutive years of funding. After the fourth year award, the participant is no longer permitted to apply for a Community Benefit Grant. Board Chair Hannan M. Khan opened the floor for discussion regarding the KCX Elite Fall Festival. Board Member Robin Wright had a question regarding the actual event. The paperwork was not clear in regard to the actual event. Director Steve Lackey provided and read an email (Exhibit A) from KCS stating that it was a Fall Festival and the community was invited. There were no further questions or discussion. Each Board Member read their scores (Exhibit B) for KCX Elite Fall Festival as staff

recorded scores on the spreadsheet. (Exhibit C). Board Chair M. Hannan Khan presented the motion to award KCX Elite Fall Festival \$1,413.00. Board Chair M. Hannan Khan seconded the motion.

AYE: Board Chair M. Hannan Khan, Board Co-Chair Edward Kilroy, Board Member Albert Dorsey, Board Member Robin Wright, Board Member Seewdat "David" Anderson, Board Member Manuel Gomez, Board Member Amarlis Olivo Williams, Board Member Hamza Godil

Motion Carried 8-0

Board Chair M. Hannan Khan opened the floor for discussion regarding the Fund for Hope Gala. There was no discussion.

Each Board Member read their scores (Exhibit B) for Fund for Hope Gala as staff recorded scores on the spreadsheet. (Exhibit C). Board Co-Chair Edward Kilroy made a motion to award Fund for Hope Gala \$1,238. Board Chair M. Hannan Khan seconded the motion.

AYE: Board Chair M. Hannan Khan, Board Co-Chair Edward Kilroy, Board Member Albert Dorsey, Board Member Robin Wright, Board Member Seewdat "David" Anderson, Board Member Manuel Gomez, Board Member Amarlis Olivo Williams, Board Member Hamza Godil

Motion Carried 8-0

#### 5.D Fee Waiver Grants - Period II

Parks & Recreation Director Steve Lackey shared that Dine with the Departed will not be eligible for the Fee Waiver Grant. This event has received four full years of funding, and it is a ticketed event. The Fee Waiver policy was recently amended to read that Fee Waiver Grants cannot be ticketed events. The Historical Society has been notified of their ineligibility, and they will continue with the event. This event will not be scored.

Parks & Recreation Director Steve Lackey also shared that Kissimmee 5k, March 4 Meals, Hop on Downtown, according to policy, will continue to be awarded in the year 4 category. They are permitted because they are an organization for which the city provides funding. Year four will be 40% of requested services. Signature events must always go through this process, but their award is the amount of public safety.

Board Co-chair Edward Kilroy clarified that the events estimated expenses were all greater than what they asked for. The requested amount is the basis for the 40%.

Each board member read their scores (EXHIBIT D) For the Kissimmee 5K fee waiver grant as staff recorded the scores into the spreadsheet (EXHIBIT E). Board Co-Chair Edward Kilroy made a motion to award Kissimmee 5K \$1,200.00 and Board Chair M. Hannan Khan seconded the motion.

AYE: Board Member Albert Dorsey, Board Co-Chair Edward Kilroy, Board Chair M., Hannan Khan, Board Member Manuel Gomez, Board Member David Anderson, Board Member Hamza Godil, Board Member Robin Wright, Board Member Amarilis Olivo Williams

NAY: None

Motion 8 - 0

Each board member read their scores (EXHIBIT D) for the March for Meals 5K fee waiver grant as staff recorded the scores into the spreadsheet (EXHIBIT E). Board Co-Chair Edward Kilroy made a motion to award March for Meals \$1,200.00 and Board Member Albert Dorsey seconded the motion.

AYE: Board Member Albert Dorsey, Board Co-Chair Edward Kilroy, Board Chair M.Hannan Khan, Board Member Manuel Gomez, Board Member David Anderson, Board Member Hamza Godil, Board Member Robin Wright, Board Member Amarilis Olivo Williams  
 NAY: None  
 Motion 8 - 0

Each board member read their scores (EXHIBIT D) for Hop on Downtown fee waiver grant as staff recorded the scores into the spreadsheet (EXHIBIT E). Board Co-Chair Edward Kilroy made a motion to award Hop on Downtown \$1,200.00 and Board member Albert Dorsey seconded the motion.

AYE: Board Member Albert Dorsey, Board Co-Chair Edward Kilroy, Board Chair M. Hannan Khan, Board Member Manuel Gomez, Board Member David Anderson, Board Member Hamza Godil, Board Member Robin Wright, Board Member Amarilis Olivo Williams  
 NAY: None  
 Motion 8 - 0

Each board member read their scores (EXHIBIT D) for the Caribbean Fusion Festival fee waiver grant as staff recorded the scores into the spreadsheet (EXHIBIT E). Board Co-Chair Edward Kilroy made a motion to award Public Safety fees in the amount of \$9,427.08 to the Caribbean Fusion Festival and Board Member Amarilis Olivo Williams seconded the motion.

AYE: Board Member Albert Dorsey, Board Co-Chair Edward Kilroy, Board Chair M.Hannan Khan, Board Member Manuel Gomez, Board Member David Anderson, Board Member Hamza Godil, Board Member Robin Wright, Board Member Amarilis Olivo Williams  
 NAY: None  
 Motion 8 - 0

6. **HEAR CHAIRMAN AND BOARD MEMBERS** Board Members shared positive remarks regarding the recent Fandom event.
7. **ADJOURNMENT** There being no further business to come before the Parks & Recreation Advisory Board, Chair Hannan Khan adjourned the meeting at 6:50p.m.

  
 Board Chairman

ATTEST:  
  
 Board Secretary

# EXHIBIT A

## Anna Miller

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**From:** Veronica Frink  
**Sent:** Tuesday, October 14, 2025 10:35 AM  
**To:** Anna Miller  
**Subject:** FW: KCX fall festival

**Veronica Frink**  
Events & Venues Manager  
City of Kissimmee

101 Church Street  
Kissimmee, FL 34741  
407.518.2335 Desk  
407.270.2585 Cell  
[Veronica.Frink@Kissimmee.gov](mailto:Veronica.Frink@Kissimmee.gov)



**From:** Darlene Beecher <darleneabeecher@gmail.com>  
**Sent:** Saturday, September 27, 2025 7:47 PM  
**To:** Veronica Frink <Veronica.Frink@kissimmee.gov>  
**Subject:** KCX fall festival

**EXTERNAL EMAIL:** This email originated from outside of the organization. DO NOT REPLY, CLICK LINKS, or OPEN ATTACHMENTS unless you recognize the sender and know the content is safe

Good day Veronica,

I am reaching out because our gym will be hosting a Fall Festival that will be open to the community. I recently submitted a grant request to help offset the event costs. Each team will have a table selling snow cones or cotton candy will go directly toward supporting our athletes by covering competition fees for those working the event.

Please let me know if there is anything further we need to provide or submit as part of the request.

Thank you for your time and support.

Best regards,

Darlene Beecher

# EXHIBIT B



### COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/29/2025 Evaluated by: Steve Lackey

Event Name: KCX Elite Event Date: 10/25/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

| Eligibility Determination                                                                                                                          |                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| <i>Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.</i> |                                     |
| Does the request meet or exceed policy requirements?                                                                                               | <input checked="" type="checkbox"/> |

| Evaluator's Comments                   |
|----------------------------------------|
| Request \$2500<br>Year 2 - \$2,000 max |
|                                        |



### COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/25/2025 Evaluated by: Steve Lackey

Event Name: 12th Annual Fund for Hope Gala Event Date: 11/8/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status, Sexual orientation, or national origin?                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

|                                                                                                                                                    |                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| <b>Eligibility Determination</b>                                                                                                                   |                                     |
| <i>Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.</i> |                                     |
| Does the request meet or exceed policy requirements?                                                                                               | <input checked="" type="checkbox"/> |

|                                                                                                                    |
|--------------------------------------------------------------------------------------------------------------------|
| <b>Evaluator's Comments</b><br>Request \$2,500<br>Year 3 - \$1,500 max<br><div style="text-align: center;"> </div> |
|--------------------------------------------------------------------------------------------------------------------|



## COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/29/2025 Evaluated by: Steve LackeyEvent Name: KCX Elite Event Date: 10/25/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status, Sexual orientation, or national origin?                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**Eligibility Determination**

*Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.*

Does the request meet or exceed policy requirements?

☒
**Evaluator's Comments**

Request \$2500

Year 2 - \$2,000 max

\$1400



### COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/25/2025 Evaluated by: Steve Lackey

Event Name: 12th Annual Fund for Hope Gala Event Date: 11/8/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

#### Eligibility Determination

*Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.*

Does the request meet or exceed policy requirements? ☒ Yes ☐ No

#### Evaluator's Comments

Request \$2,500

Year 3 - \$1,500 max

\$1500



### COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/25/2025 Evaluated by: Steve Lackey

Event Name: 12th Annual Fund for Hope Gala Event Date: 11/8/2025

|                                                                                                                                                                    | Meets Policy Requirements           |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                                                    | Yes                                 | No                       |
| <b>Applicant Eligibility</b><br>Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b><br>Meets incorporation, tax, budget, and audit requirements?                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b><br>Will result in positive impact to the City of Kissimmee?                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

#### Eligibility Determination

*Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.*

Does the request meet or exceed policy requirements? ☒ Yes ☐ No

#### Evaluator's Comments

Request \$2,500

Year 3 - \$1,500 max



## COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/29/2025 Evaluated by: Steve Lackey

Event Name: KCX Elite Event Date: 10/25/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**Eligibility Determination**

*Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.*

Does the request meet or exceed policy requirements?

☒

**Evaluator's Comments**

Request \$2500  
Year 2 - \$2,000 max



### COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/29/2025 Evaluated by: Steve Lackey

Event Name: KCX Elite Event Date: 10/25/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

#### Eligibility Determination

*Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.*

Does the request meet or exceed policy requirements?

|                                     |                          |
|-------------------------------------|--------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|-------------------------------------|--------------------------|

#### Evaluator's Comments

Request \$2500  
Year 2 - \$2,000 max

\$2000  
Edward A. Kellogg



### COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/25/2025 Evaluated by: Steve Lackey

Event Name: 12th Annual Fund for Hope Gala Event Date: 11/8/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

#### Eligibility Determination

*Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.*

Does the request meet or exceed policy requirements? ☒ Yes ☐ No

#### Evaluator's Comments

Request \$2,500

Year 3 - \$1,500 max

\$ 1500

*Edward A. Lackey*



## COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/29/2025 Evaluated by: Steve LackeyEvent Name: KCX Elite Event Date: 10/25/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**Eligibility Determination**

Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.

Does the request meet or exceed policy requirements?

☒
**Evaluator's Comments**

Request \$2500  
Year 2 - \$2,000 max

2060 ✓



## COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/25/2025 Evaluated by: Steve Lackey

Event Name: 12th Annual Fund for Hope Gala Event Date: 11/8/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**Eligibility Determination**

*Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.*

Does the request meet or exceed policy requirements? ☒

**Evaluator's Comments**

Request \$2,500  
year 3 - \$1,500 max







## COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/29/2025 Evaluated by: Steve LackeyEvent Name: KCX Elite Event Date: 10/25/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

| Eligibility Determination                                                                                                                          |                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| <i>Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.</i> |                                     |
| Does the request meet or exceed policy requirements?                                                                                               | <input checked="" type="checkbox"/> |

| Evaluator's Comments                   |
|----------------------------------------|
| Request \$2500<br>Year 2 - \$2,000 max |



## COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/25/2025 Evaluated by: Steve LackeyEvent Name: 12th Annual Fund for Hope Gala Event Date: 11/8/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**Eligibility Determination**

*Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.*

Does the request meet or exceed policy requirements?

|                                     |                          |
|-------------------------------------|--------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|-------------------------------------|--------------------------|

**Evaluator's Comments**

Request \$2,500

Year 3 - \$1,500 max



## COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/29/2025 Evaluated by: Steve LackeyEvent Name: KCX Elite Event Date: 10/25/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**Eligibility Determination**

Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.

Does the request meet or exceed policy requirements?

☒
**Evaluator's Comments**

Request \$2500  
Year 2 - \$2,000 max

\$800<sup>00</sup>

*Robin Wright*



## COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/25/2025 Evaluated by: Steve LackeyEvent Name: 12th Annual Fund for Hope Gala Event Date: 11/8/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status, Sexual orientation, or national origin?                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

| Eligibility Determination                                                                                                                          |                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| <i>Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.</i> |                                     |
| Does the request meet or exceed policy requirements?                                                                                               | <input checked="" type="checkbox"/> |

| Evaluator's Comments |                |
|----------------------|----------------|
| Request \$2,500      |                |
| Year 3 - \$1,500 max | <u>\$1,000</u> |



## COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/29/2025 Evaluated by: Steve LackeyEvent Name: KCX Elite Event Date: 10/25/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**Eligibility Determination**

*Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.*

Does the request meet or exceed policy requirements?

☒
**Evaluator's Comments**

Request \$2500

Year 2 - \$2,000 max



### COMMUNITY BENEFIT EVALUATION FORM

Application Received: 9/25/2025 Evaluated by: Steve Lackey

Event Name: 12th Annual Fund for Hope Gala Event Date: 11/8/2025

| Applicant Eligibility                                                                                                              | Meets Policy Requirements           |                          |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
|                                                                                                                                    | Yes                                 | No                       |
| Resident of Osceola County OR 501(c)3, 501(c)4 organization?<br>(if resident, move to next section once eligibility is determined) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Organization Eligibility (continued)</b>                                                                                        |                                     |                          |
| Meets incorporation, tax, budget, and audit requirements?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT discriminate based on age, race, sex, marital status,<br>Sexual orientation, or national origin?                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Does NOT receive funds from any other City program?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meets reporting requirements? (previously funded organizations)                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>Request / Use Eligibility</b>                                                                                                   |                                     |                          |
| Will result in positive impact to the City of Kissimmee?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used for event/activity in any City-owned facility?                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote commercial/private business?                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote/support political party/activity?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT be used to promote tobacco or VICE activities?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT support or benefit a single individual?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will NOT fund or support direct programming?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

#### Eligibility Determination

*Note, a "no" to any question or criteria automatically makes the request ineligible for funding consideration pursuant to City Policy 1605.*

Does the request meet or exceed policy requirements?

☒ Yes ☐ No

#### Evaluator's Comments

Request \$2,500

year 3 - \$1,500 max

*[Signature]* \$1,500

# EXHIBIT C



# EXHIBIT D

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Kissimmee Main Street  
**Event Name:** Kissimmee 5K

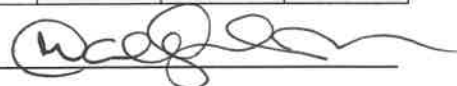
**Event Date:** 2/14/2026

**Year of fee waiver award:** 4+

|                                                                                                                                                                                                                                                                                                                                                  |                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                                                                                                                                                                                 | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points) ✓                                                                                                                                                                                                                                                           | 50                     |
| Has this specific event been produced previously? (10 points) ✓                                                                                                                                                                                                                                                                                  |                        |
| What is the uniqueness of the proposed event? (10 points) ✓                                                                                                                                                                                                                                                                                      |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                                                                                                                                                                                |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                                                                                                                                                                                           | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points) ✓                                                                                                                                                                                                                                                           | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points) ✓                                                                                                                                                                                                                                                          |                        |
| <b>MARKETING</b>                                                                                                                                                                                                                                                                                                                                 | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points) ✓                                                                                                                                                                                                                                                               | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points) ✓                                                                                                                                                                                                                                         |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points) ✓                                                                                                                                                                                                                                                         |                        |
| <b>COLLABORATION</b>                                                                                                                                                                                                                                                                                                                             | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points) X                                                                                                                                                                                                                                                       | 0                      |
| Has the sponsoring organization solicited local vendors to support the event? (5 points) X                                                                                                                                                                                                                                                       |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                                                                                                                                                                                     | 90                     |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                                                                                                                                                                                     | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?<br><ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                                                                                                                                                                                      | 90                     |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:**

M. Gomez 

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$1,200

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Osceola Council on Aging

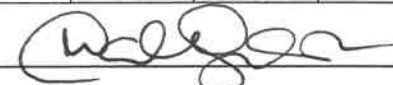
**Event Name:** March for Meals 5K

**Event Date:** 3/14/2025

**Year of fee waiver award:** 4+

|                                                                                                                                                                                   |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points) ✓                                                                                            | 50                     |
| Has this specific event been produced previously? (10 points) ✓                                                                                                                   |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points) ✓                                                                                            | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points) ✓                                                                                           |                        |
| <b>MARKETING</b>                                                                                                                                                                  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points) ✓                                                                                                | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points) ✓                                                                                          |                        |
| <b>COLLABORATION</b>                                                                                                                                                              | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points) X                                                                                        |                        |
| Has the sponsoring organization solicited local vendors to support the event? (5 points) X                                                                                        |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       | 90                     |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |                        |
|                                                                                                                                                                                   |                        |
|                                                                                                                                                                                   |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:** M. Gomez 

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$1,200

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Kissimmee Main Street

**Event Name:** Hop on Downtown

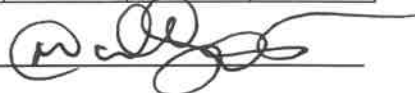
**Event Date:** 4/4/2026

**Year of fee waiver award:** 4+

|                                                                                                                                                                                   |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points) ✓                                                                                            | 50                     |
| Has this specific event been produced previously? (10 points) ✓                                                                                                                   |                        |
| What is the uniqueness of the proposed event? (10 points) ✓                                                                                                                       |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points) ✓                                                                               |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points) ✓                                                                                            | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points) ✓                                                                                           |                        |
| <b>MARKETING</b>                                                                                                                                                                  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points) ✓                                                                                                | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points) ✓                                                                          |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points) ✓                                                                                          |                        |
| <b>COLLABORATION</b>                                                                                                                                                              | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points) ✓                                                                                        | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points) ✓                                                                                        |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       | 100                    |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |                        |
|                                                                                                                                                                                   |                        |
|                                                                                                                                                                                   |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:**

*M. Gomez* 

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$1,800

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Caribbean and Floridian Association

**Event Name:** Caribbean Fusion Festival

**Event Date:** 4/26/2026

**Year of fee waiver award:** Signature Event

|                                                                                                                                                             |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                            | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points) ✓                                                                      | 50                     |
| Has this specific event been produced previously? (10 points) ✓                                                                                             |                        |
| What is the uniqueness of the proposed event? (10 points) ✓                                                                                                 |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points) ✓                                                         |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                      | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points) ✓                                                                      | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points) ✓                                                                     |                        |
| <b>MARKETING</b>                                                                                                                                            | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points) ✓                                                                          | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points) ✓                                                    |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points) ✓                                                                    |                        |
| <b>COLLABORATION</b>                                                                                                                                        | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points) ✓                                                                  | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points) ✓                                                                  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? | 100                    |
| • Was a final budget submitted?                                                                                                                             |                        |
| • Was a list of vendors submitted?                                                                                                                          |                        |
| • Were samples of marketing materials submitted?                                                                                                            |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                 |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:** M. Gomez

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$9,288

**PS:** \$9,427.08

Hamza Godil

**FEE WAIVER GRANT RANKING FORM****Organization Name:** Kissimmee Main Street**Event Name:** Kissimmee 5K**Event Date:** 2/14/2026**Year of fee waiver award:** 4+

|                                                                                                                                                             |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                            | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                        | 45                     |
| Has this specific event been produced previously? (10 points)                                                                                               |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                   |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                           |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                      | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                        | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                       |                        |
| <b>MARKETING</b>                                                                                                                                            | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                            | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                      |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                      |                        |
| <b>COLLABORATION</b>                                                                                                                                        | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                    | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                    |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? | 95                     |
| • Was a final budget submitted?                                                                                                                             |                        |
| • Was a list of vendors submitted?                                                                                                                          |                        |
| • Were samples of marketing materials submitted?                                                                                                            |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                 |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:** Hamza Godil**Fee Waiver Amount Requested:** \$3,000**Previous Year's Fee Waiver Award:** \$1,200

Hamza Godil

## FEE WAIVER GRANT RANKING FORM

Organization Name: Osceola Council on Aging

Event Name: March for Meals 5K

Event Date: 3/14/2025

Year of fee waiver award: 4+

|                                                                                                                                                             |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                            | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                        | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                               |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                   |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                           |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                      | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                        | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                       |                        |
| <b>MARKETING</b>                                                                                                                                            | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                            | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                      |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                      |                        |
| <b>COLLABORATION</b>                                                                                                                                        | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                    | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                    |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? | 100                    |
| • Was a final budget submitted?                                                                                                                             |                        |
| • Was a list of vendors submitted?                                                                                                                          |                        |
| • Were samples of marketing materials submitted?                                                                                                            |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                 |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: Hamza Godil

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,200

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Kissimmee Main Street

**Event Name:** Hop on Downtown

**Event Date:** 4/4/2026

**Year of fee waiver award:** 4+

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 20                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 12                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 8                      |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  | 90                     |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
|                                                                                                                                                                                   |  |                        |
|                                                                                                                                                                                   |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:** Hamza Modic

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$1,800

# FEE WAIVER GRANT RANKING FORM

Organization Name: Caribbean and Floridian Association

Event Name: Caribbean Fusion Festival

Event Date: 4/26/2026

Year of fee waiver award: Signature Event

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  | 100                    |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: Hamza Godil

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$9,288

PS: \$9,427.08

# FEE WAIVER GRANT RANKING FORM

Organization Name: Caribbean and Floridian Association

Event Name: Caribbean Fusion Festival

Event Date: 4/26/2026

Year of fee waiver award: Signature Event

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  |                        |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  |                        |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  |                        |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  |                        |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  |                        |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
|                                                                                                                                                                                   |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  | <i>100</i>             |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: 

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$9,288

PS: \$9,427.08

# FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street

Event Name: Hop on Downtown

Event Date: 4/4/2026

Year of fee waiver award: 4+

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  |                        |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  |                        |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  |                        |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  |                        |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  |                        |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
|                                                                                                                                                                                   |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  | <b>81</b>              |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: 

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,800

# FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street

Event Name: Kissimmee 5K

Event Date: 2/14/2026

Year of fee waiver award: 4+

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 40                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 20                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 10                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  | 98                     |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: 

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,200

# FEE WAIVER GRANT RANKING FORM

Organization Name: Osceola Council on Aging

Event Name: March for Meals 5K

Event Date: 3/14/2025

Year of fee waiver award: 4+

|                                                                                                                                                                                   |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |                        |
| Has this specific event been produced previously? (10 points)                                                                                                                     |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |                        |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |                        |
| <b>MARKETING</b>                                                                                                                                                                  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |                        |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |                        |
| <b>COLLABORATION</b>                                                                                                                                                              | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |                        |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |                        |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |                        |
|                                                                                                                                                                                   |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       | <b>96</b>              |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: 

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,200

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Caribbean and Floridian Association

**Event Name:** Caribbean Fusion Festival

**Event Date:** 4/26/2026

**Year of fee waiver award:** Signature Event

|                                                                                                                                                                                   |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |                        |
| Has this specific event been produced previously? (10 points)                                                                                                                     |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 | 50                     |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |                        |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             | 25                     |
| <b>MARKETING</b>                                                                                                                                                                  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |                        |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            | 15                     |
| <b>COLLABORATION</b>                                                                                                                                                              | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |                        |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          | 10                     |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      | 100                    |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |                        |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |                        |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> | <b>-5 /0/+5 POINTS</b> |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       | 100                    |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:**

*Edward A. Kuley*

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$9,288

**PS:** \$9,427.08

*Signature!*  
?

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Kissimmee Main Street

**Event Name:** Kissimmee 5K

**Event Date:** 2/14/2026

**Year of fee waiver award:** 4+

|                                                                                                                                                                                   |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |                        |
| Has this specific event been produced previously? (10 points)                                                                                                                     |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 | 50                     |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |                        |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             | 25                     |
| <b>MARKETING</b>                                                                                                                                                                  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |                        |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            | 15                     |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |                        |
| <b>COLLABORATION</b>                                                                                                                                                              | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |                        |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          | 0                      |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      | 90                     |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |                        |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |                        |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> | <b>-5 /0/+5 POINTS</b> |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       | 90                     |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:**

*Edward A. Kelsey*

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$1,200

\$1200

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Osceola Council on Aging

**Event Name:** March for Meals 5K

**Event Date:** 3/14/2025

**Year of fee waiver award:** 4+

|                                                                                                                                                                                   |                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  | <b>50 POINTS</b>      |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              | 50                    |
| Has this specific event been produced previously? (10 points)                                                                                                                     |                       |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |                       |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |                       |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            | <b>25 POINTS</b>      |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              | 25                    |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |                       |
| <b>MARKETING</b>                                                                                                                                                                  | <b>15 POINTS</b>      |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  | 15                    |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |                       |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |                       |
| <b>COLLABORATION</b>                                                                                                                                                              | <b>10 POINTS</b>      |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          | 0                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |                       |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      | 90                    |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      | -5 / 0 / +5<br>POINTS |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |                       |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |                       |
|                                                                                                                                                                                   |                       |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       | 90                    |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:**

*Edward A. Kelley*

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$1,200

## FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street

Event Name: Hop on Downtown

Event Date: 4/4/2026

Year of fee waiver award: 4+

|                                                                                                                                                                                   |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |                        |
| Has this specific event been produced previously? (10 points)                                                                                                                     |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 | 50                     |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |                        |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             | 25                     |
| <b>MARKETING</b>                                                                                                                                                                  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |                        |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            | 10                     |
| <b>COLLABORATION</b>                                                                                                                                                              | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |                        |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          | 10                     |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      | 95                     |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |                        |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |                        |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> | <b>-5 /0/+5 POINTS</b> |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       | 95                     |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: Edward A. Kelly

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,800

\$1200

# FEE WAIVER GRANT RANKING FORM

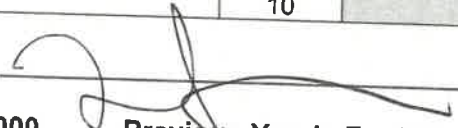
Organization Name: Osceola Council on Aging  
Event Name: March for Meals 5K

Event Date: 3/14/2025

Year of fee waiver award: 4+

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 5                      |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  | 95                     |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: 

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,200

# FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street

Event Name: Hop on Downtown

Event Date: 4/4/2026

Year of fee waiver award: 4+

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  | 100                    |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: 

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,800

# FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street

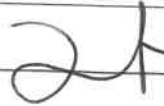
Event Name: Kissimmee 5K

Event Date: 2/14/2026

Year of fee waiver award: 4+

|                                                                                                                                                                                   |  |                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>   |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 50                 |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                    |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                    |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                    |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>   |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 25                 |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                    |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>   |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 15                 |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                    |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                    |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>   |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 5                  |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                    |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  |                    |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  |                    |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  | -5 /0/+5<br>POINTS |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                    |
|                                                                                                                                                                                   |  |                    |
|                                                                                                                                                                                   |  |                    |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  | 95                 |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: 

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,200

# FEE WAIVER GRANT RANKING FORM

Organization Name: Caribbean and Floridian Association

Event Name: Caribbean Fusion Festival

Event Date: 4/26/2026

Year of fee waiver award: Signature Event

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 25                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  | 10                     |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: \_\_\_\_\_

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$9,288

PS: \$9,427.08

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Kissimmee Main Street

**Event Name:** Kissimmee 5K

**Event Date:** 2/14/2026

**Year of fee waiver award:** 4+

|                                                                                                                                                             |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                            | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                        | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                               |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                   |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                           |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                      | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                        | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                       |                        |
| <b>MARKETING</b>                                                                                                                                            | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                            | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                      |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                      |                        |
| <b>COLLABORATION</b>                                                                                                                                        | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                    | 0                      |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                    |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                | 90                     |
| <b>POST EVENT EVALUATION</b>                                                                                                                                | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? |                        |
| • Was a final budget submitted?                                                                                                                             |                        |
| • Was a list of vendors submitted?                                                                                                                          |                        |
| • Were samples of marketing materials submitted?                                                                                                            |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                 | 90                     |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:** Albert Dorsey

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$1,200

## FEE WAIVER GRANT RANKING FORM

Organization Name: Osceola Council on Aging

Event Name: March for Meals 5K

Event Date: 3/14/2025

Year of fee waiver award: 4+

|                                                                                                                                                             |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                            | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                        | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                               |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                   |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                           |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                      | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                        | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                       |                        |
| <b>MARKETING</b>                                                                                                                                            | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                            | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                      |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                      |                        |
| <b>COLLABORATION</b>                                                                                                                                        | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                    | 0                      |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                    |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                | 90                     |
| <b>POST EVENT EVALUATION</b>                                                                                                                                | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? | -5 /0/+5               |
| • Was a final budget submitted?                                                                                                                             |                        |
| • Was a list of vendors submitted?                                                                                                                          |                        |
| • Were samples of marketing materials submitted?                                                                                                            |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                 | 90                     |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: Albert Dorsey

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,200

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Caribbean and Floridian Association

**Event Name:** Caribbean Fusion Festival

**Event Date:** 4/26/2026

**Year of fee waiver award:** Signature Event

|                                                                                                                                                             |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                            | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                        | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                               |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                   |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                           |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                      | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                        | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                       |                        |
| <b>MARKETING</b>                                                                                                                                            | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                            | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                      |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                      |                        |
| <b>COLLABORATION</b>                                                                                                                                        | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                    | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                    |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                | 100                    |
| <b>POST EVENT EVALUATION</b>                                                                                                                                | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? |                        |
| • Was a final budget submitted?                                                                                                                             |                        |
| • Was a list of vendors submitted?                                                                                                                          |                        |
| • Were samples of marketing materials submitted?                                                                                                            |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                 | 100                    |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:** Alto Dorsey

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$9,288

**PS:** \$9,427.08

## FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street

Event Name: Hop on Downtown

Event Date: 4/4/2026

Year of fee waiver award: 4+

|                                                                                                                                                             |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                            | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                        | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                               |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                   |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                           |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                      | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                        | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                       |                        |
| <b>MARKETING</b>                                                                                                                                            | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                            | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                      |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                      |                        |
| <b>COLLABORATION</b>                                                                                                                                        | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                    | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                    |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                | 100                    |
| <b>POST EVENT EVALUATION</b>                                                                                                                                | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? | -5 /0/+5<br>POINTS     |
| • Was a final budget submitted?                                                                                                                             |                        |
| • Was a list of vendors submitted?                                                                                                                          |                        |
| • Were samples of marketing materials submitted?                                                                                                            |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                 | 100                    |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: allist Dony

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,800

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Kissimmee Main Street

**Event Name:** Kissimmee 5K

**Event Date:** 2/14/2026

**Year of fee waiver award:** 4+

|                                                                                                                                                                                   |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |                        |
| <b>MARKETING</b>                                                                                                                                                                  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |                        |
| <b>COLLABORATION</b>                                                                                                                                                              | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          | 0                      |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       | 90                     |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |                        |
|                                                                                                                                                                                   |                        |
|                                                                                                                                                                                   |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:** Robin Wright

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$1,200

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Osceola Council on Aging

**Event Name:** March for Meals 5K

**Event Date:** 3/14/2025

**Year of fee waiver award:** 4+

|                                                                                                                                                             |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                            | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                        | 45                     |
| Has this specific event been produced previously? (10 points)                                                                                               |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                   |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                           |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                      | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                        | 20                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                       |                        |
| <b>MARKETING</b>                                                                                                                                            | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                            | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                      |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                      |                        |
| <b>COLLABORATION</b>                                                                                                                                        | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                    | 0                      |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                    |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? | 80                     |
| • Was a final budget submitted?                                                                                                                             |                        |
| • Was a list of vendors submitted?                                                                                                                          |                        |
| • Were samples of marketing materials submitted?                                                                                                            |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                 |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:** Robin Wright

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$1,200

## FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street

Event Name: Hop on Downtown

Event Date: 4/4/2026

Year of fee waiver award: 4+

|                                                                                                                                                             |                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                            | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                        | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                               |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                   |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                           |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                      | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                        | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                       |                        |
| <b>MARKETING</b>                                                                                                                                            | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                            | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                      |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                      |                        |
| <b>COLLABORATION</b>                                                                                                                                        | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                    | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                    |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report? |                        |
| • Was a final budget submitted?                                                                                                                             |                        |
| • Was a list of vendors submitted?                                                                                                                          |                        |
| • Were samples of marketing materials submitted?                                                                                                            |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                 | 100                    |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: Robin Wright

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,800

## FEE WAIVER GRANT RANKING FORM

**Organization Name:** Caribbean and Floridian Association

**Event Name:** Caribbean Fusion Festival

**Event Date:** 4/26/2026

**Year of fee waiver award:** Signature Event

|                                                                                                                                                                                   |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |                        |
| <b>MARKETING</b>                                                                                                                                                                  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |                        |
| <b>COLLABORATION</b>                                                                                                                                                              | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |                        |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       | 100                    |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |                        |
|                                                                                                                                                                                   |                        |
|                                                                                                                                                                                   |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

**FEE WAIVER GRANT RANKED BY:**

*Robin Wright*

**Fee Waiver Amount Requested:** \$3,000

**Previous Year's Fee Waiver Award:** \$9,288

**PS:** \$9,427.08

# FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street

Event Name: Kissimmee 5K

Event Date: 2/14/2026

Year of fee waiver award: 4+

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  | 100                    |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  |                        |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: \_\_\_\_\_

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,200

# FEE WAIVER GRANT RANKING FORM

Organization Name: Osceola Council on Aging  
Event Name: March for Meals 5K

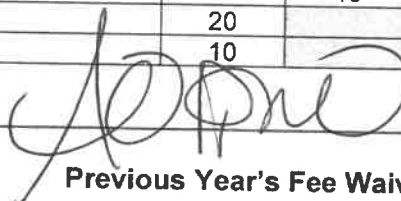
Event Date: 3/14/2025

Year of fee waiver award: 4+

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  | 100                    |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  |                        |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
|                                                                                                                                                                                   |  |                        |
|                                                                                                                                                                                   |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY:



Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,200

# FEE WAIVER GRANT RANKING FORM

Organization Name: Kissimmee Main Street

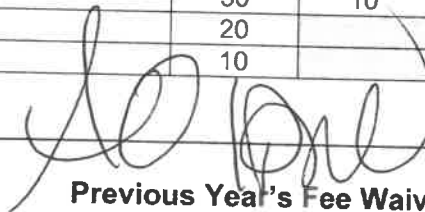
Event Name: Hop on Downtown

Event Date: 4/4/2026

Year of fee waiver award: 4+

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  | 100                    |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  |                        |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
|                                                                                                                                                                                   |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: 

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$1,800

# FEE WAIVER GRANT RANKING FORM

Organization Name: Caribbean and Floridian Association

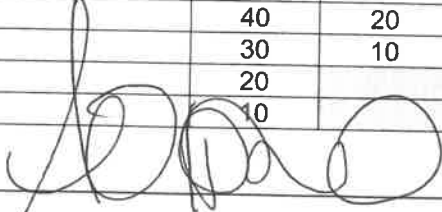
Event Name: Caribbean Fusion Festival

Event Date: 4/26/2026

Year of fee waiver award: Signature Event

|                                                                                                                                                                                   |  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|
| <b>ORGANIZATION / EXPERIENCE</b>                                                                                                                                                  |  | <b>50 POINTS</b>       |
| Has the sponsoring organization previously produced events in Kissimmee? (20 points)                                                                                              |  | 50                     |
| Has this specific event been produced previously? (10 points)                                                                                                                     |  |                        |
| What is the uniqueness of the proposed event? (10 points)                                                                                                                         |  |                        |
| How does the proposed event support the organization's mission and benefit residents? (10 points)                                                                                 |  |                        |
| <b>EVENT REVENUE / ECONOMIC IMPACT</b>                                                                                                                                            |  | <b>25 POINTS</b>       |
| Will the proposed event impact local businesses? If so, please describe. (15 points)                                                                                              |  | 25                     |
| Evaluation of itemized event budget submitted by sponsoring organization. (10 points)                                                                                             |  |                        |
| <b>MARKETING</b>                                                                                                                                                                  |  | <b>15 POINTS</b>       |
| How does the proposed event benefit the image/reputation of the City? (5 points)                                                                                                  |  | 15                     |
| Evaluation of the marketing plan, including types of advertisement and a timeline provided? (5 points)                                                                            |  |                        |
| How much money will the sponsoring organization commit towards advertising? (5 points)                                                                                            |  |                        |
| <b>COLLABORATION</b>                                                                                                                                                              |  | <b>10 POINTS</b>       |
| Is the sponsoring organization collaborating with any other non-profit group? (5 points)                                                                                          |  | 10                     |
| Has the sponsoring organization solicited local vendors to support the event? (5 points)                                                                                          |  |                        |
| <b>Sub Total Points (Possible Score 100)</b>                                                                                                                                      |  | 100                    |
| <b>POST EVENT EVALUATION</b>                                                                                                                                                      |  | <b>-5 /0/+5 POINTS</b> |
| For those sponsoring organizations that have previously received a fee waiver, did the organization meet all commitments and complete a Final Grant Report?                       |  |                        |
| <ul style="list-style-type: none"> <li>Was a final budget submitted?</li> <li>Was a list of vendors submitted?</li> <li>Were samples of marketing materials submitted?</li> </ul> |  |                        |
|                                                                                                                                                                                   |  |                        |
|                                                                                                                                                                                   |  |                        |
| <b>TOTAL POINTS AWARDED</b>                                                                                                                                                       |  |                        |

| PARAB Score (Points) | Percentage of Maximum of Award |        |        |        |
|----------------------|--------------------------------|--------|--------|--------|
|                      | Year 1                         | Year 2 | Year 3 | Year 4 |
| 90-100               | 100                            | 80     | 60     | 40     |
| 80-89                | 90                             | 70     | 50     | 30     |
| 70-79                | 80                             | 60     | 40     | 20     |
| 60-69                | 70                             | 50     | 30     | 10     |
| 50-59                | 60                             | 40     | 20     |        |
| 40-49                | 50                             | 30     | 10     |        |
| 30-39                | 40                             | 20     |        |        |
| 20-29                | 30                             | 10     |        |        |
| 10-19                | 20                             |        |        |        |
| 0-9                  | 10                             |        |        |        |

FEE WAIVER GRANT RANKED BY: 

Fee Waiver Amount Requested: \$3,000

Previous Year's Fee Waiver Award: \$9,288

PS: \$9,427.08

# EXHIBIT E

**2025/2026 Fee Grant Request**  
**Period 2, Events occurring February 1 - May 31, 2026**

| <b>EVENT</b>              | <b>Requested Date</b> | <b>24/25 Amount</b> | <b>Requested Amount</b> | <b>Year of award / Sunset year</b> | <b>Est. City Expenses</b> | <b>AWARDED</b> | <b>Scored</b> | <b>Ed</b> | <b>Al</b> | <b>Robin</b> | <b>Hannan</b> | <b>David</b> | <b>Manny</b> | <b>Hamza</b> | <b>Vanessa</b> | <b>Amarillis</b> | <b>Total</b> |
|---------------------------|-----------------------|---------------------|-------------------------|------------------------------------|---------------------------|----------------|---------------|-----------|-----------|--------------|---------------|--------------|--------------|--------------|----------------|------------------|--------------|
| Kissimmee 5K              | 2/14/2026             | \$ 1,200.00         | \$ 3,000.00             | 4+                                 | \$7,118.00                | \$ 1,200.00    | 91.875        | 90        | 90        | 90           | 95            | 85           | 90           | 95           |                | 100              | 735          |
| Dine with the Departed    | 3/7/2026              | \$378.00            | \$4,500.00              | 4+                                 | \$1,228.00                | \$0.00         | 0             |           |           |              |               |              |              |              |                |                  | 0            |
| March for Meals 5K        | 3/14/2026             | \$ 1,200.00         | \$ 3,000.00             | 4+                                 | \$7,118.00                | \$ 1,200.00    | 93.75         | 90        | 100       | 80           | 95            | 95           | 90           | 100          |                | 100              | 750          |
| Hop on Downtown           | 4/4/2026              | \$ 1,800.00         | \$3,000.00              | 4+                                 | \$13,397.50               | \$ 1,200.00    | 97.5          | 95        | 100       | 100          | 100           | 95           | 100          | 90           |                | 100              | 780          |
| Caribbean Fusion Festival | 4/26/2026             | PS \$9,288          | \$3,000.00              | Signature Event                    | \$45,070.58               | \$ 9,427.00    | 100           | 100       | 100       | 100          | 100           | 100          | 100          | 100          |                | 100              | 800          |
|                           |                       |                     |                         |                                    | PS \$9,427.08             |                | 0             |           |           |              |               |              |              |              |                |                  | 0            |
|                           |                       |                     |                         |                                    |                           | \$ -           | 0             |           |           |              |               |              |              |              |                |                  | 0            |
|                           |                       |                     |                         |                                    |                           | \$ -           | 0             |           |           |              |               |              |              |              |                |                  | 0            |
|                           |                       |                     |                         |                                    |                           | \$ -           | 0             |           |           |              |               |              |              |              |                |                  | 0            |
|                           |                       |                     |                         |                                    |                           | \$0            | 0             |           |           |              |               |              |              |              |                |                  | 0            |
|                           |                       |                     |                         | \$13,500                           | \$48,932.08               | \$13,027.00    |               |           |           |              |               |              |              |              |                |                  |              |

PS: = Public Safety Cost

Total amount awarded for Period 2 February 1 - May 31, 2026

\$13,027.00

# EXHIBIT F



PARKS & RECREATION ADVISORY BOARD  
MEETING SCHEDULE  
2025/2026

All meetings will be held at the City Hall Commission Chambers unless noted otherwise. Meetings start at 6:00 p.m. Please remember to contact the Parks and Recreation Administration Office at 407-518-2501 or 407-518-2331 if you will not be attending a particular meeting.

- December 10, 2025
- February 11, 2026
  - April 8, 2026
  - June 10, 2026
  - August 12, 2026
  - October 14, 2026