



Third Party Donor Event Guidelines for Paoli Hospital

We are extremely grateful to all who wish to organize special events in support of Paoli Hospital's mission. The Foundation accepts donations from events which legitimately benefit the hospital and when the event and its related donations meet the following guidelines. Prior to beginning fundraising efforts, please contact the Paoli Hospital Foundation at 484-565-1385 or e-mail the Foundation at PHFoundation@mlhs.org.

Paoli Hospital Foundation Guidelines for Third Party Fundraising Events:

I. Use of the Paoli Hospital logo and/or name

1. The name "Paoli Hospital" and any related names (for example, Main Line Hospitals, Main Line Health, The Cancer Center at Paoli Hospital etc) may only be used with the permission of the Foundation Office. The name "Paoli Hospital" and related names may only be reproduced on signs, banners, publications, literature, or other printed materials after approval by the Foundation Office.
2. The Foundation must review and approve promotional materials, including the use of the logo, advertising, letters, brochures, flyers and press releases prior to production and distribution associated with the event.
3. "Paoli Hospital" may only be identified as the beneficiary of the event. For example, event organizers should not call an event "The Paoli Hospital Walk-a-thon." The event should be promoted as the "Walk-a-thon to benefit Paoli Hospital".

II. Liability

1. Paoli Hospital/Foundation is not financially or otherwise liable for the promotion or staging of the event or for anything that occurs at, or in connection with the event.
2. Event organizers must carry sufficient liability and other insurance and must provide to the Paoli Hospital Foundation insurance certificates prior to the event. Paoli Hospital/Foundation shall not be held responsible in any way for casualties and/or situations that occur at your event.

III. Receipting and Tax-Deductibility of Charitable Donations to 501 (c) (3) Organizations

1. All donations should be made payable to the Paoli Hospital Foundation.
2. If goods and/or services are received in return for charitable donations (i.e. auction purchases, tokens of appreciation, “give-aways”, meals, beverages, etc.) the fair market value of those goods and services must be determined by you and communicated by you to individuals attending the event, and to the Paoli Hospital Foundation prior to your acceptance of donations on behalf of Paoli Hospital. The value of goods and/or services received by donors will be deducted from the total of each donation amount to determine the tax-deductible portion of the donation.
3. Paoli Hospital Foundation will provide each donor who has made a donation payable to Paoli Hospital Foundation an official receipt for tax purposes. The name appearing on the check received by Paoli Hospital Foundation will be used for receipting purposes and that individual, corporation, foundation, or other business entity will be the only eligible party for tax benefits, if any, received as a result of the donation.
4. Only the individual, organization, or other entity whose name appears on the check will receive the official receipt for tax purposes with respect to the donation. It is the responsibility of the event organizer to notify potential donors so that any donors who seek to make a group donation are aware of this policy and will arrange to give separate donations so that each such donation can be separately receipted. In the absence of such separate donations, any group donation shall only be acknowledged with a receipt to the name of the maker on the check.

IV. How Paoli Hospital Foundation can help:

1. Offer advice on event planning.
2. Provide brochures and/or publications for distribution at the event.

V. What Paoli Hospital Foundation cannot do:

1. Provide insurance and/or liability coverage or indemnification.
2. Provide funding for expenses and/or sponsorship.
3. Provide Paoli Hospital stationary
4. Provide staff support to your event. A Paoli Hospital Foundation/Paoli Hospital representative may be able to attend your fundraising event.

Guidelines for Sponsorships, Silent Auctions, Raffles, and Donations (where goods and/or services are received)

I. Charitable Laws:

1. Events must comply with all federal, state and local laws governing charitable fund raising, gift reporting and special events. It is the responsibility of the event organizer to determine whether compliance with all laws has been met.

II. Sponsorships:

1. Sponsorships with no goods and/or services may be fully tax-deductible. This includes sponsorships that receive advertisement space in a booklet for the event. (These are not considered advertising so long as there is no commercial content such as, “Come in and buy” or “Our product is the best”.)
2. When approaching business and corporations for assistance with events, please remember that many local organizations are already involved in supporting Paoli Hospital and may not wish to make additional donations.
3. Paoli Hospital Foundation does not provide contact information for its corporate sponsors, donors and supporters for solicitation purposes. Paoli Hospital Foundation agrees to promote the event/organization, when appropriate through exposure at existing events, Paoli Hospital Foundation’s internal e-newsletter and Web site.

III. Tax Deductibility of Event Ticket Price:

1. The Internal Revenue Service (“IRS”) requires that all tickets, invitations or entry forms state when a portion of the ticket price is tax-deductible if the price is beyond the fair market value of the event itself. For example: A gala dinner costs \$100 per person for the entertainment, food and drink; the cost of the ticket to attend the gala is \$250; only \$150 of each ticket sold is tax deductible.
2. Tickets and/or promotional flyers which invite people to sign-up or purchase tickets must state the portion which may be tax deductible. (In the case above, it would say, “\$150 of the ticket price may be tax deductible.”) The Foundation can assist in proper wording.

IV. Silent and Live Auctions:

1. Each item of a Silent Auction must be valued at the Fair Market Value. This value must be listed on the Bid Sheet at the auction table, as well as in any printed list of the auction items.
2. Each item of a Live Auction must be valued at the Fair Market Value and that value must be listed on a printed list of auction items.
3. Donors of the items for Silent and Live Auctions should provide the Fair Market Value of their item/service. If the item is a ‘collectible’ reasonable efforts should be made to assess the value (e.g. contact the antique or collectible dealer who has some knowledge of similar items).
4. Only winning bids that are over the stated Fair Market Value will receive receipt information on their charitable gift.
5. If an item is not valued, or valued as priceless, the final auction bid shall constitute establishment of the item’s fair market value, therefore no portion is tax-deductible.

V. Raffles:

1. There is no charitable gift for a raffle ticket, lottery or any game of chance. Generally raffles, lotteries and games of chance are not lawfully permitted in Pennsylvania. We do not accept monies raised in this fashion.

VI. What You Need To Do:

1. Submit a “Fundraising Event Application Form” and signed copy of the “Guidelines for Fundraising Events” to the Foundation for review at least six (6) weeks before your proposed event. Please include any additional materials outlining the proposed event.
2. If a Special Occasion Permit for a Liquor License is needed for your event, it is our understanding that the state process for application must be started sixty (60) days prior to the event date. It is also our understanding that only one special occasion permit may be given to any organization in any given year. Accordingly, the Foundation will not apply for or be the applicant on any such application. It is your responsibility to determine, in consultation with your legal counsel, whether you may apply for such a permit and it is your responsibility to obtain the required permit for any event at which alcoholic beverages are to be served. You must supply us with a copy of the application as filed and a copy of the permit as issued, each prior to the event.
3. The person or entity organizing the event must obtain any necessary permits, licenses and insurance. Please attach completed copies to your application.
4. The event organizers must agree to indemnify and hold harmless Paoli Hospital and/or the Paoli Hospital Foundation and all its officers, directors and employees from any and all claims and liabilities in any way related to the event, and to evidence same, the event organizers must sign and deliver to the Foundation the indemnity form which is attached hereto. Please attach the signed form to your application.
5. The public must be fully informed regarding any net amounts that will actually be donated to Paoli Hospital Foundation. Potential donors must be informed whenever less than 100 percent of the net proceeds will be donated to Paoli Hospital. (For example; “Ninety percent of the proceeds will benefit Paoli Hospital.”)
6. The I.R.S. requires that all tickets, invitations or entry forms state the portion of the contribution that is tax-deductible. If donors will receive a product or service in exchange for their donation, subtract the value (whether or not it is donated) of the product or service from the contribution. The remaining amount is tax-deductible. (For example, the written materials could state: “The portion of the payment for each ticket which is deductible for federal income tax purposes is limited under the federal tax laws to the excess of the payment over the value of the goods or services provided to a person attending this event. We estimate that the value of goods or services provided to each person attending will be \$XXX. Accordingly, the amount of your payment which is deductible for federal tax purposes is \$XXX per ticket.)
7. If your event is held to benefit the hospital’s general services or a special purpose fund, your written materials should state: *“Proceeds raised support Paoli Hospital’s nonprofit programs, services and medical facilities. To learn more, please contact the Paoli Hospital Foundation at (484) 565-1385.*
8. Please advise the Foundation promptly of any changes to your event.

Guidelines for Fundraising Events

Financial Guidelines:

- If event expenses are greater than the total collected, the group holding the event is responsible for payment of these additional expenses.
- Within 45 days after the last day of the fundraising event, please send a final accounting of income and expenses to the Paoli Hospital Foundation. A check made payable to the Paoli Hospital Foundation should be sent to: 255 West Lancaster Avenue, Paoli, PA 19301.

Until written permission is received, the name “Paoli Hospital or Paoli Hospital Foundation” should not be used for any purpose and contributions should not be solicited on its behalf.

Please keep a copy of these Guidelines for your reference. Please return your completed “Fundraising Event Application” to the Paoli Hospital Foundation, 255 West Lancaster Avenue, Paoli, PA 19301 or by fax to: (610) 889-0572. Please call (484) 565-1394 for additional information.

I have read and agree to follow the above guideline;

Sponsoring Organization

Contact Name

_____ Date

Phone

Email

**2012 Third Party Fundraising Event
Application Form**

1. SPONSOR INFORMATION

Name of sponsoring organization/individual: _____

Contact person: _____

Address, City, State, Zip: _____

Phone: _____ Fax: _____

E-mail: _____ Web site: _____

2. EVENT INFORMATION

Name of event: _____

Type of event: _____

Brief description of event: _____

Location: _____

Date(s) and time(s): _____

Method of raising funds, including fees charged: _____

Do you plan to pay an individual or organization to help plan, manage or conduct the event or to solicit contributions? Yes No Contact: _____

Name(s) of any organization with whom you will have any contract or agreement in relation to the event: _____

Will you be advertising or publicizing this event? If so, who will be coordinating? _____

Who is your target audience: _____ Estimated attendance: _____

Is a *Special Event Liquor License* required for your event? Yes No

(Please attach approvals by local authorities and evidence of insurance.)

3. FINANCIAL INFORMATION:

Please estimate:

Total proceeds : A. _____

Expenses (includes costs such as printing, food,
entertainment, equipment rental, promotion, etc.) B. _____

Anticipated net proceeds (A minus B) C. _____

Amount/percentage of net proceeds donated
(Sponsor is not liable for amount): D. _____%

Anticipated date of your donation (within 45 days of event): _____

4. Signature: Until written permission has been granted by the Foundation, contributions may not be solicited in the name of Paoli Hospital, Paoli Hospital Foundation or any of its facilities or programs and “Paoli Hospital” may not be used.

Information provided on this form is correct and accurately describes the proposed event.

Signature Date

Phone

Please submit application to the Paoli Hospital Foundation
Fax: (610) 889-0572