

APPLICATION FOR PENSACOLA POLICE DEPARTMENT

LAW ENFORCEMENT TRUST FUND MONIES

ALL INFORMATION IS REQUIRED

Agency Name:

Agency Address:

Point of Contact:

Amount Requested:

Phone:

Email:

Type of Agency:

School

Charity

Other

Check Payable To:

Mailing Address:

Usage:

Crime Prevention

Safe Neighborhood

Drug Abuse Education

School Resource Officer

Drug Prevention

Drug Treatment

FUNDING JUSTIFICATION (REQUIRED)

*PROVIDE CERTIFICATION THAT FUNDS WILL BE USED FOR AUTHORIZED PURPOSES ONLY.
(ATTACH ADDITIONAL DOCUMENTATION, AS NEEDED, TO SUPPORT JUSTIFICATION)*

**NOTE: BE SURE TO INCLUDE AND IDENTIFY ANY ANTICIPATED RECURRING PENSACOLA
POLICE DEPARTMENT COSTS.**

**** APPLICATION WILL NOT BE PROCESSED WITHOUT THIS INFORMATION.**

CERTIFICATION (REQUIRED)

*I AGREE TO COMPLY WITH THE REQUIREMENTS AND TO USE THE APPROVED LOGO AND STATEMENT
PROVIDED WITH THIS APPLICATION.* Initial Here: _____

Name of Certifying Official:

Title of Certifying Official:

1. As required by Florida Law, Statute 932.7055 5(C), the requested funds will be used for the purpose specified above, and no other purpose.
2. My agency shall, as required by Florida Law, Statute 932.7055, provide accounting for these funds and shall provide such reports to the Pensacola Police.
3. I have the appropriate authority on behalf of the requesting agency to submit this application and to ensure funds are used for the purposes specified herein to provide the required accounting and reporting of these funds.

All representations in this application are true, to the best of my knowledge and belief.

Signature: _____ Date: _____

TICKETS/RESERVATIONS/TABLES/GUESTS

of Tickets: # of Tables: # of Guests: RSVP Required Date:

CONTACT INFORMATION

For Tickets, Reservations, Confirmations, or Questions, please contact:

Tara Spencer, (850) 435 – 1855, email: letf@cityofpensacola.com

FOR INTERNAL USE ONLY

Chief Signature: _____ Date: _____ Approve Disapprove

Legal Signature: _____ Date: _____ Approve Disapprove

Mail to: P O Box 1750 Pensacola, FL 32591-1750
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Drop Off at: 711 N. Hayne Street Pensacola, FL 32501
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Send Signed and Scanned Application to: letf@cityofpensacola.com
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APPROVED LOGO AND STATEMENT

Pensacola Police Department will attach a PDF Copy of the Approved Statement and Logo.