



Community Fund-Raiser Guidelines

Thank you for your interest in Hartford Hospital!

Hartford Hospital is fortunate to benefit from the fund-raising efforts and generosity of the community, enabling us to fulfill our vision to be the regional destination provider of innovative and complex care. Community fund-raising events play a special role in philanthropy at Hartford Hospital as special events help raise funds that directly impact the services that the Hospital provides to the community.

To help you make your fund-raising efforts successful, the enclosed information packet outlines steps that we hope will assist you in managing your special event.

We appreciate your interest in Hartford Hospital.

We look forward to working with you!

Hartford Hospital is a not-for-profit 501 (c) (3) charitable organization that relies on tax-deductible contributions to help support its vision *to be the regional destination provider of innovative and complex care.*

Community Fund-Raising Guidelines

Hartford Hospital accepts Community Fund-Raising Proposals from individuals, corporations, service clubs and organizations that want to raise money for Hartford Hospital and its vital programs.

Contact the Assistant Director of Development, Special Events at least six weeks prior to the event. The event organizer will be asked to complete and submit the Community Fund-Raising Proposal and Agreement Forms for approval. Once approved by Hartford Hospital, you may announce your event. All inquiries should be directed to:

Meghan Bianco
Assistant Director, Special Events
Fund Development
Hartford Hospital
80 Seymour Street, P.O. Box 5037
Hartford, CT 06102-5037

Phone: (860) 972-2116 Fax: (860) 545-2800 Email: meghan.bianco@hhchealth.org

Financial Accounting

Hartford Hospital is unable to open or manage bank accounts for third-party events. We encourage event organizers to protect their proceeds through careful financial management – especially if event supporters' individual checks are not made out to or mailed directly to Hartford Hospital. Hartford Hospital cannot pay for any event expenses in anticipation of funds being raised from the event.

The American Institute of Philanthropy notes that fundraising expenses should not exceed 30% of the income. Hartford Hospital asks that community fundraisers follow these standards. In order to meet this it is important to budget wisely.

Your event costs should be deducted from the funds raised prior to sending the donation to Hartford Hospital. After all of the expenses have been paid, make one check for the amount of your remaining funds payable to Hartford Hospital and mailed to Assistant Director, Special Events at the address indicated above.

Tax Accounting

Community fundraising events must comply with all federal, state and local laws governing charitable fund-raising, gift reporting and special events. Connecticut has regulations addressing raffles and gaming activities. For more information contact the Connecticut Attorney General's Charities Information website at www.ct.gov/ag/site/default.asp and click on Charities.

Liability

Hartford Hospital is not financially or otherwise liable for the promotion and / or staging of fund-raising events by any third-party organization or individual. The sponsoring organization or individual may not incur any financial or other obligations on behalf of Hartford Hospital. Event organizers must provide insurance certificates as required by federal, state or local laws. Hartford Hospital cannot be held responsible in any way for casualties and/or situation that occur at your fund-raising event or promotion.

Hartford Hospital reserves the right to refuse any community fund-raiser affiliation.

Frequently Asked Questions

Can I use the Hartford Hospital name and logo to promote my event?

Yes! If Hartford Hospital's name or logo is used on printed material, please present the proof to the Assistant Director, Special Events, for review and approval before going to print. All invitation copy, advertisements and printed materials must be reviewed by the Fund Development office prior to printing. All publicity and published material must indicate, "Proceeds will benefit Hartford Hospital." If there is more than one beneficiary you must clearly state the percentage of the proceeds that will benefit Hartford Hospital on all promotional materials.

What can Hartford Hospital do to help promote the event?

We can help promote your event on our website and through Hartford Hospital publications. This may include:

- Hartford Hospital's Fund Development Website
- Hartford Hospital's weekly in-house publication - Rextra
- E-Communications to all Hartford Hospital staff
- Press releases recognizing the event and its sponsors

Can you give me lists of supporters or potential event sponsors?

Our mailing lists of donors, patients, physicians, staff and vendors are confidential. Hartford Hospital cannot solicit these groups for your event.

Can Hartford Hospital pay for some of my expenses?

Hartford Hospital is a not-for-profit charity, and cannot assume any responsibility for event expenses. Your event costs should be deducted from the funds raised prior to sending the donation to Hartford Hospital.

Will you provide staff support in the planning of the event or for the day of the event?

Fund Development staff will be able to provide you with event planning guidance. However, due to staff and time constraints we cannot serve on planning committees or manage your event. We suggest that you reach out to family, friends, and committed supporters who identify with your cause. They will be your support throughout the planning process!

Can you provide handouts for the event?

We will do our best to provide you with educational materials with at least 6 weeks advance notice. A request submission does not guarantee that we will have the materials you would like or available quantities. We are not able to incur printing for special requests.

Can Hartford Hospital provide me with a speaker for the day of the event?

We will do our best to provide speakers for every event but this is an especially challenging request to meet given the schedules of our staff. You must provide at least 6 weeks notice for consideration. Submission of a request for a speaker does not guarantee that a representative will be provided.

Will you provide me with staff for the event?

Hartford Hospital cannot guarantee attendance of patients, physicians or staff at the promotion or the event.

Will Hartford Hospital give us brochures or promotional items to hand out at the event?

Hartford Hospital does not maintain a budget to provide events with gift items. We may be able to provide brochures given a 6 week notice.

Can Hartford Hospital provide me letters and receipts for my supporters?

Per regulations of the Internal Revenue Service, we can only acknowledge direct contributions to Hartford Hospital.

Can I use Hartford Hospital's tax exempt number to buy supplies since you will be the beneficiary?

Hartford Hospital cannot provide its tax-exempt number to organizers to make purchases related to your event. Nor can event organizers use the Hospital's Tax Identification number to set up a temporary/custodial bank account in Hartford Hospital's name. However, we will provide the tax identification number to any business that makes a donation to the event and needs the number for tax purposes or to verify the tax status of Hartford Hospital.

What do I do with the money raised?

Please turn over collected funds to Fund Development within 45 days following the event. Complete the Expense/Income Summary, submit with check(s) payable to Hartford Hospital, and mail to:

Assistant Director, Special Events
Fund Development
Hartford Hospital
80 Seymour Street, PO Box 5037
Hartford, CT 06102-5037

Do I need to submit this Proposal Form each year?

Yes, the sponsoring individual / organization must obtain approval from Hartford Hospital each year.

What if I have more questions?

Call us! Our number is 860-972-2116



Community Fund-Raising Proposal Form

Date of Application: _____

Name of Person/Group Sponsoring Fundraiser: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Fax: _____

Phone (Day): _____ Phone (Evening): _____

Name of Event: _____

Date(s) & Time(s) of Event: _____

Rain date (if applicable): _____

Location: _____

Address of Event: _____

Description of the Event: _____

Has this event been done before? No _____ Yes _____ Date _____

Is this event open to the public? Yes _____ No _____

Projected attendance: _____

Which Hartford Hospital Program will this event benefit? _____

Are one or more other charitable organizations benefiting from this event? Yes ____ No ____

If yes, please list names of organizations and describe to what extent they will benefit. Note percentage that will be given to Hartford Hospital _____



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I have read and agree to abide by the Guidelines for Community Fund-Raising as set forth by Hartford Hospital's Fund Development Office. I and/or my volunteers agree that we are responsible for the success of this fundraising event.

Contact Signature: _____ Date: _____

Printed Name: _____

Title: _____ Sponsor/Organization: _____

Please make checks payable to: **Hartford Hospital** and send to:

Hartford Hospital
Fund Development Office, Special Events
80 Seymour Street, P.O. Box 5037
Hartford, CT 06102-5037

Meghan Bianco, Assistant Director of Special Events
Phone: (860) 972-2116 **Fax:** (860) 545-2800
Email: nwoodman@harthosp.org
www.harthosp.org

*Your support means so much to the people we serve.
Thank you.*

For Office Use Only:

Date Received _____ Approved _____ Declined _____

Staff Signature _____ Date _____

Expense / Income Summary

Submit this form with check(s) payable to Hartford Hospital, and mail to:

Assistant Director, Special Events
Fund Development
Hartford Hospital
80 Seymour Street, PO Box 5037
Hartford, CT 06102-5037

Date: _____

Name of Event: _____

Contact Person: _____

E-Mail: _____ Fax: _____

Phone (Day): _____ Phone (Evening): _____

Event Income: \$_____

Event Expenses: \$_____

Net to Hartford Hospital: \$_____

Expense Ratio (Expenses divided by Income times 100): _____%

Signature: _____