



**Ashley Robinson**

220 Sunrise Avenue Suite 215  
Palm Beach, FL 33480  
Phone: 561.843.4383

► **Kelly Churney**  
**Deputy Town Clerk**

360 South County Road  
P.O. Box 2029  
Palm Beach, FL 33480  
Phone: 561.838.5416

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**Dear Town of Palm Beach Council Members,**

I am the Director of Events at MorseLife Health System and I am writing to you today to see if you would consider waiving the restriction of having only two charitable events in the Town of Palm Beach in one calendar year. We would be requesting this as a one-time exception for this year only.

We historically have two events each year in Palm Beach. The first event is our Dinner Dance Gala at The Breakers which is always held in December. With the pandemic, we had to change our 2021 date from December to March of 2022 but we are now back to our historical December date that we have had for over 20 years. Our second event in Palm Beach is either our Ladies Luncheon which was historically held in February but discontinued because of the pandemic or our Golf Tournament at The Breakers which is traditionally held the last Monday in March. Due to these unusual circumstances resulting from the Pandemic, we technically have three events falling into this calendar year but as mentioned one was supposed to be in December 2021. We are back to our December date for the Gala – which is slated for December 17th so with that, we kindly ask that you waive this provision for this year only.

Thank you for your time and we greatly appreciate your consideration to grant us this one-time exception.

Sincerely,

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**Ashley Robinson**  
Director of Events  
MorseLife Health System  
10/17/2022

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## Town of Palm Beach • Office of the Town Clerk

### APPLICATION FOR PERMIT TO SOLICIT FUNDS FOR CHARITABLE PURPOSES

ORDINANCE 11-73 AS AMENDED BY ORDINANCE 11-81, 4-86, 6-91, 15-92, 4-95, 12-97, 27-02, 6-08, 25-08, and 28-10: TOWN OF PALM BEACH CODE OF ORDINANCES

1	<b>Applicant Given Name:</b> <small>*the person filling out this form</small>	Joan Bever	
	<b>Date of Birth:</b>	08 / 07 / 1957	<b>Phone #:</b> ( 561 ) 242 - 4661
	<b>Address:</b>	4847 David S. Mack Drive, West Palm Beach, FL 33417	
	<b>Email:</b>	events@morselife.org	

2	<b>Organization Name:</b>	MorseLife Foundation, Inc.	
	<b>Phone #:</b>	( 561 ) 242 - 4661	
	<b>Address:</b>	4847 David S. Mack Drive, West Palm Beach, FL 33417	
	<b>State Registration Number:</b> <small>*click this link to lookup</small>	CH 289	<b>Educational or Religious Exemption:</b> <input type="checkbox"/> Yes

3	<b>Applicant's principal officers and managers:</b> <small>*attach a list if necessary</small>	
	<b>Name:</b>	<b>Address:</b>
	Keith A Meyers, President CEO	4847 David S. Mack Drive, West Palm Beach, FL 33417

4	<b>Methods of Solicitation</b> <small>*One application per event</small>		
	<b>Event Name:</b>	MorseLife Dinner Dance	
	<b>Location Name:</b>	The Breakers Palm Beach	
	<b>Address:</b>	1 South County Road, West Palm Beach, FL 33480	
	<b>Start Date:</b> 12 / 17 / 2022	<b>End Date:</b> 12 / 17 / 2022	<small>*use only with mailers and drives</small>
	<b>Check all methods that apply:</b>	<input checked="" type="checkbox"/> ticket sales <input checked="" type="checkbox"/> mailings <input type="checkbox"/> percentage of sales <input type="checkbox"/> auction (live) <input checked="" type="checkbox"/> sponsorship <input checked="" type="checkbox"/> request donations <input type="checkbox"/> auction (silent) <input type="checkbox"/> raffle  Other: Other:	
	<b>Check all that apply:</b>	<input checked="" type="checkbox"/> Food will be served (additional requirements/licenses may be required) <input checked="" type="checkbox"/> Alcohol will be served (copy of liquor license will be required unless at a private residence) <input type="checkbox"/> Event includes animals (Temporary Animal Permit may be required) <input type="checkbox"/> Temporary signs will be utilized (only allowed between April 1-October 31)	

5	<b>Methods of Solicitation (continued)</b>	
If the event is held at a private club, the sponsoring member's name:		
Approx. number of attendees:		300
Will the event be indoors or outdoors?		<input checked="" type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> Not Applicable
If any portion of the event will be outdoors, please check all that apply:		<input type="checkbox"/> Tents will be utilized (Tent Permit may be required) <input type="checkbox"/> There will be a generator <input type="checkbox"/> There will be outdoor lighting <input type="checkbox"/> There will be fireworks (Pyrotechnic Display Permit will be required)
Valet Services?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <span style="float: right;">*If yes, a valet permit is required</span>

<b>Where will attendees park?</b> *Note that offsite parking on private property is currently prohibited	
The Breakers will be providing valet parking.	

6	<b>Persons in direct charge of conducting the solicitation:</b>	
<small>*attach a list if necessary</small>		
Legal, Given Name:		Date of Birth:
Joan Bever		08 / 07 / 1957
		/ /

7	<b>Name of Person(s) who will disburse proceeds from solicitation:</b>		
<small>*attach if necessary</small>			
Name:	Hong Chae		
Date of Birth:	10 / 26 / 1953	Phone #:	( 561 ) 471 - 5111
Address:	4847 David S. Mack Drive, West Palm Beach, FL 33417		
Email:	hchae@morselife.org		

8	<b>Chairman of event</b>	Name:	Terri Sriberg and Don Ephraim
	Phone #:	( 561 ) 242 - 4661	
	Address:	4847 David S. Mack Drive, West Palm Beach, FL 33417	

9	<b>Purpose of Solicitation:</b>
*attach if necessary	
Raise funds for programs and capital needs for the seniors served.	

10	<b>Donation / Cost Estimates:</b>
Estimation of total funds to be raised:	\$ 1,000,000
Estimation of in kind donations:	\$
Estimation of cost of the solicitation:	\$ 400,000

11	<b>A specific statement, with reasons, that shows need for the funds to be solicited. Support with figures, if available.</b>
*attach if necessary	
To raise funds to provide care for the seniors served. Many who are on Medicaid and are infirm.	

12	<b>Disposition of funds to be raised:</b>
*attach if necessary	
All net revenue to MorseLife Foundation Endowment Fund.	

13	<b>Will you use a professional promoter or solicitor for your event?</b>
<input checked="" type="checkbox"/> No   / <input type="checkbox"/> Yes	
If your answer was yes, fill out section 13 below.	

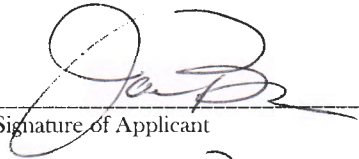

14	<b>Promoter/Solicitor Name:</b>	
*attach list if necessary		
Date of Birth:	/   /	A copy of their contract has been included? <input type="checkbox"/> Yes   / <input type="checkbox"/> No
Address:		
Statement of amount of wages, fees, commission, expenses or emoluments to be paid to this individual:		



15	If an applicant cannot furnish some of the information required by the preceding paragraphs, a detailed statement on a separate sheet shall be given why such information cannot be furnished.	
Have you included this sheet?		<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No

16	Schedule of last season's events in the Town of Palm Beach			
Total value of donations collected under all events:		\$ 1,086,000	Date of Last Event Held in Palm Beach:	3/17/22
Total cost of all events:		\$ 465,124	*This includes wages, fees, commissions, expenses, and cost of any publication	
Net Proceeds Distributed:		\$ 620,876		

17	Schedule of last season's events in the Town of Palm Beach (continued)		
AMOUNT OF MONIES AND PERCENTAGE OF NET PROCEEDS APPLIED DIRECTLY TO FUNCTIONS AND ACTIVITIES WITHIN:			
Town of Palm Beach:	\$		%
Palm Beach County:	\$	620,876	% 100
State of Florida:	\$		%
Elsewhere:	\$		%
*Percentage of all categories combined should equal 100%			
SPECIFIC STATEMENT AS TO WHERE FUNDS WERE DISTRIBUTED:			
Proceeds and capital needs of the seniors we serve.			

18	The applicant from section 1 by endorsement, agrees to the following statement:	
"That if the permit is granted, it will not be used or represented in any way as an endorsement by the Town of Palm Beach or by the Town Council of the solicitation conducted thereunder."		
I, Joan Bever due hereby solemnly swear (or affirm) that I am a duly authorized agent of MorseLife Foundation, Inc., and that all of the information contained herein this application is true and correct.		

  
 Signature of Applicant  
  
 Print Name

WITNESS:  
  
 Signature  
  
 Print Name



# TOWN OF PALM BEACH

Office of the Town Clerk

## CHARITABLE SOLICITATION APPLICATION CHECK LIST HAVE YOU SUBMITTED THE FOLLOWING DOCUMENTS FROM PAGE 1?

- \_\_\_ Board resolution, minutes or a letter on official organization letterhead giving authority for fundraising event (must include the date and location of the event)
- \_\_\_ A copy of your current State of Florida Registration (Not required if organization is determined to be exempt from registration pursuant to F.S. Ch. 496)
- \_\_\_ Schedule of last year's fund-raising activity in the Town of Palm Beach completed on page 4 of the application
- \_\_\_ If a drawing/raffle will be held, a copy of your organization's Form 501(c)(3) filed with the IRS
- \_\_\_ If a tent will be used, we need the size to determine if a tent permit is required (*sometimes the vendor gets/already has these permits*).
- \_\_\_ If a stage will be used, a building permit is required is it will be higher than 24".
- \_\_\_ If valets will be used, we need the name of the company to be used to determine if a valet permit is required.
- \_\_\_ If a professional promoter will be used, we need a copy of the promoter's contract with the organization.



FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES  
COMMISSIONER NICOLE "NIKKI" FRIED

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October 27, 2021

Refer To: CH289

MORSELIFE FOUNDATION, INC.  
4847 DAVID S MACK DR  
WEST PALM BEACH, FL 33417-8023

RE: MORSELIFE FOUNDATION, INC.  
REGISTRATION#: CH289  
EXPIRATION DATE: November 7, 2022

Dear Sir or Madam:

The above-named organization/sponsor has complied with the registration requirements of Chapter 496, Florida Statutes, the Solicitation of Contributions Act. A COPY OF THIS LETTER SHOULD BE RETAINED FOR YOUR RECORDS.

Every charitable organization or sponsor which is required to register under s. 496.405 must conspicuously display the registration number issued by the Department and in capital letters the following statement on every printed solicitation, written confirmation, receipt, or reminder of a contribution:

"A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE."

The Solicitation of Contributions Act requires an annual renewal statement to be filed on or before the date of expiration of the previous registration. The Department will send a renewal package approximately 30 days prior to the date of expiration as shown above.

Thank you for your cooperation. If we may be of further assistance, please contact the Solicitation of Contributions section.

Sincerely,

Tianna Baity  
Regulatory Consultant  
850-410-3770  
Fax: 850-410-3804  
E-mail: [tianna.baity@fdacs.gov](mailto:tianna.baity@fdacs.gov)



## Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14  
R. 01/18

85-8014795184C-2	04/30/2018	04/30/2023	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

MORSELIFE FOUNDATION INC  
4847 FRED GLADSTONE DR  
WEST PALM BEACH FL 33417-8023

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



## Important Information for Exempt Organizations

DR-14  
R. 01/18

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
6. If you have questions about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

**RESOLUTION**  
**OF THE BOARD OF DIRECTORS**  
**OF**  
**MORSELIFE FOUNDATION, INC.**

WHEREAS, the Board of Directors of the MorseLife Foundation, Inc. has determined that it is necessary and desirable to hold an annual Golf Classic.

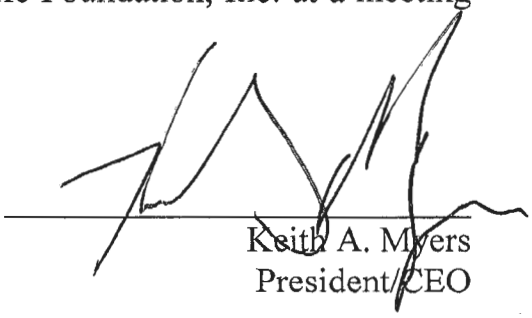
WHEREAS, MorseLife Foundation, Inc. has contracted with The Breakers for the annual Dinner Dance and Golf Classic.

NOW, THEREFORE, be it resolved that the MorseLife Foundation, Inc. undertake this project and will do any and all things necessary and desirable in connection therewith; and

BE IT FURTHER RESOLVED that the Fiscal Year 2023 Dinner Dance be held on Saturday, December 17, 2022 and Golf Classic to be held on Monday, March 27, 2023.

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I HEREBY CERTIFY that the forgoing is an accurate copy of the resolution duly passed by the Board of Directors of the MorseLife Foundation, Inc. at a meeting held on Wednesday, April 27, 2022.



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Keith A. Myers  
President/CEO

# MEMO

**DATE:** 10/3/22  
**TO:** Office of Town Clerk  
Town of Palm Beach

**FROM:** Ashley Robinson  
MorseLife  
Director of Events  
Phone: (561) 843-4383  
arobinson@morselife.org

**SUBJECT:** Town of Palm Beach Applications for Permit to Solicit Funds  
Dinner Dance December 17, 2022

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On behalf of the MorseLife Foundation, Inc., the application for the permit to solicit funds for charitable purposes in the Town of Palm Beach is enclosed. Also enclosed is our application fee (check #002566) in the amount of \$500.

I would greatly appreciate it if you would please email me or leave a message at 561-843-4383 that you have received this. Thank you!

The Breakers will be contacting you to confirm that they will have Crowd Control Management for this event.

Please do not hesitate to call me on my direct line, 561-843-4383, if additional information is needed or if I can assist with answering questions regarding the enclosed packet.

As in the past, we will forward a copy of the renewed State Registration form/renewal letter as soon as it is received.

Thank you for your attention to this application.



# TOWN OF PALM BEACH

Office of the Town Clerk

*Dinner Dance*

## GUIDELINES ON THE SUBMISSION OF AN APPLICATION FOR A CHARITABLE SOLICITATION PERMIT

1. Organizations planning to conduct charitable solicitation activities in the Town of Palm Beach are **required** (Sec. 78-102) to submit the application **at least** sixty (60) days prior to the proposed effective date of the permit. **You must submit one application per event.**

As of July 16, 2014, if the application is received:

<b>60 Days or More in Advance:</b>	
Events Estimated to Raise \$5,000 or less:	\$240 each
First Event Estimated to Raise over \$5,000:	\$500
Second Event Held Within the Past 12 months Estimated to Raise over \$5,000:	\$240
<b>31-59 Days in Advance:</b>	
Events Estimated to Raise \$5,000 or less:	\$290 each
First Event Estimated to Raise over \$5,000:	\$605
Second Event Held Within the Past 12 Months Estimated to Raise over \$5,000:	\$290
<b>16-30 Days in Advance:</b>	
Events Estimated to Raise \$5,000 or less:	\$340 each
First Event Estimated to Raise over \$5,000:	\$710
Second Event Held Within the Past 12 months Estimated to Raise over \$5,000:	\$340
<b>15-8 Days in Advance:</b>	
Events Estimated to Raise \$5,000 or less:	\$390 each
First Event Estimated to Raise over \$5,000:	\$815
Second Event Held Within the Past 12 Months Estimated to Raise over \$5,000:	\$390
<b>7 Days or Less in Advance (Including After the Fact Permits):</b>	
Events Estimated to Raise \$5,000 or less:	\$490 each
First Event Estimated to Raise over \$5,000:	\$920
Second Event Held Within the Past 12 Months Estimated to Raise over \$5,000:	\$490

2. The information contained in said application shall be available to the public. The application must be accompanied by the following:

A.	On page 5, the applicant's signature needs to have a witness. You may email your application. It will be date stamped the date received.
B.	A Resolution giving authority for the fund-raising event. A resolution can be signed by any single board member or the entire board. Minutes of the Board Meeting where authority was given are also acceptable.
C.	A copy of the State Registration form. The Town of Palm Beach requires a registration with the State of Florida Department of Agriculture and Consumer Services prior to engaging in any solicitation activities. Florida residents call 1-800-435-7352 for forms and further information. Out of State residents call (850)-488-2221. <b>NOTE: Check the expiration date on your State Registration Form as these forms are renewed annually by the State of Florida.</b>
D.	"Schedule" for last year's fund-raising activity in the Town of Palm Beach. (Items 15 & 16 on page 4 of the application) <b>NOTE: This requirement does not apply to first time solicitations.</b>
E.	A check in the amount to cover the permit fee and any late fees. Make checks payable to Town of Palm Beach. <b>NOTE: FEES ARE NON-REFUNDABLE.</b>

3. If you expect to have a drawing/raffle at the charitable event, furnish a copy of Form 501 (c) (3) filed with the IRS.
4. Save this application form to your local computer from the Town's website, fill it out and save it. This will save you time filling out your next application.

**Mailing:** Post Office Box 2029, Palm Beach, Florida 33480 • **Location:** 360 South County Road, Palm Beach, Florida 33480  
(561) 838-5416 • Fax No. (561) 838-5417 • townclerk@townofpalmbeach.com • www.townofpalmbeach.com