

District 1 Legislative Superfund

The District 1 Legislative Superfund has been created specifically for the purpose of funding legislative efforts for the member states of District one. It is expected and required that the petitioning member state(s) have already committed their own financial resources to the effort. Additionally, it is required that the petitioning member states have already contacted the National Athletic Trainers Association's Public Affairs and Government Affairs Committees for financial support as their ranking from these committees will be used to determine need and readiness to move forward with legislative efforts.

Funding – The Legislative Superfund will be funded by a \$5.00 dues disbursement by all certified members and \$2.50 for student members from District 1.

Use – Legislative Superfund monies are to be used only for the funding of legislative efforts within the member states of District 1 as delineated below;

- a. Lobbyist – the hiring of lobbyist or the funding of specific lobbying activities designed to promote the profession of athletic training
- b. Legal Fees – coverage of legal fees specific to legislative efforts or licensure issues
- c. Lobbying Events – monies can be used directly to fund social functions in which District members can interact with and lobby state officials for the purpose of promoting athletic training legislation. These activities will be closely monitored with after action reports submitted to the District 1 Treasurer and Director including the names and titles of ALL attendees.

Allocation – Legislative Superfund monies will be allocated based on the following criteria and by vote of the District 1 Executive Board.

- a. Prioritization rank as assigned by the NATA's government affairs committee.
- b. Need based on impact to the member state vs other states within District 1

Pre-Authorization – All states applying for Legislative Superfund monies must complete the "*Legislative Superfund Grant Request Form*" and supply their previous years Income Tax Report to the District 1 Executive Board.

Post Activity Audit – All states which have used Legislative Superfund monies must file a "*Legislative Superfund Post Activity Report*" along with photocopies of all receipts to the District 1 Executive Board to prove that the funds were utilized to the best advantage of the member state and the District as a whole. Additionally, these states are required to send a copy of their Income Tax Report for the year that the funds were used for documentation purposes.

Surplus funds – In the event that the state does not use their entire allotted funds they are required to refund the remaining monies to the "*Legislative Superfund Account*" within sixty business days.

Punitive Action – In the unlikely event that the District 1 Executive Board determines that the funds granted to a state were used inappropriately then the individual state in question will be required to refund the Legislative Superfund in full plus 2% interest within 6 months. In the event that the state is unable to meet this financial responsibility the District 1 Treasurer will be ordered to refrain from paying the state its customary dues allotment until such time as the money and interest have been paid in full.

District 1
Legislative Superfund Grant Request Form

Date : _____

State : _____ Person Completing form : _____

Activity Type (check one) :

Lobbyist (complete Section 1) Legal (complete Section 2) Lobbying Events (complete Section 3)

Date money needed : _____ Amount Requested : _____

Where do you want the money sent _____

1. Name of Lobbyist : _____ Phone: _____ Email _____

Bill Number if known _____

Goals of lobbying effort _____

Is this a one time expense Yes / NO

if no then please explain: _____

2. Name of Lawyer : _____ Phone: _____ Email _____

State the issue in specific terms and how it will effect athletic training in your state _____

Is this a one time expense Yes / NO

if no then please explain: _____

3. Specify the title of the event _____ Date _____

Describe the event _____

What are the goals of the event _____

Who will be invited _____

How will attendance be tracked _____

State President's Signature

State Treasurer's Signature

State President's Name

State Treasurer's Name

* Please include your state association's Federal Income Tax Form from the previous year.

(Executive Board use only)

Date **Approved / Declined** by District 1 Executive Board : _____

(Circle one)

District Director's Signature

District Treasurer's Signature

District Director's Name

District Treasurer's Name

Date check sent _____ Check number _____

District 1
Legislative Superfund Post Activity Report
(This form must be completed within 12 months of receiving funds)

Date : _____

State : _____ Person Completing form : _____

Activity Type (check one) :

- | | | |
|--|--|---|
| <input type="checkbox"/> Lobbyist (complete Section 1) | | <input type="checkbox"/> Lobbying Events (complete Section 2) |
| <input type="checkbox"/> Legal (complete Section 1) | | |

Amount Requested : _____ Amount Used : _____

1. Name of Lobbyist / Lawyer: _____ (please attach receipt of payment)

Bill Number _____

Did the Lobbyist meet goals described in *Legislative Superfund Grant Request Form* Yes / No
(Please circle)

If no Describe why _____

(if more money is needed please resubmit *Legislative Superfund Grant Request Form*)

2. Specify the title of the event _____ Date _____

Please attach list of all certified athletic trainers who attended the event, highlighting state/district leaders in attendance

Please attach list of all target audience attendees who attended the event, highlighting state/district leaders in attendance. (ie if the governor, house speaker, house member and/or senator attended the event) Please attach a summary of the measurable effects documenting that the event was a success. Include a photocopy of all receipts totaling the entire amount allocated with the remainder being refunded back to the fund.

We the undersigned State officers swear to the accuracy of the information provided in this form

State President's Signature

State Treasurer's Signature

State President's Name

State Treasurer's Name

* Please include your state association's Federal Income Tax Form for the year the funds were given.

Accepted by District 1 Executive Board YES / NO Date : _____