

Cannabis Opportunity Reinvestment & Equity (CORE) Program

BUSINESS REIMBURSEMENT REQUEST FORM

Business Operating Permit (BOP) applicants who have completed the CORE program are eligible to receive a reimbursement of up to \$25,000 for expenses incurred towards obtaining their permit. Requesters must own at least 51% of business. Reimbursement funds are provided by the Bureau of Cannabis Control (BCC) Equity Grant Fund award to the City of Sacramento.

Completed forms and receipts must be submitted to **Office of Cannabis Management** either by:

- 1) Mail addressed to:
915 I Street, 2nd Floor
Sacramento, CA 95814; OR
- 2) Email to cannabis@cityofsacramento.org

Requester's Name: _____
(Last) *(First)*

Business Name: _____

Business Type: _____ **Requester's % of Ownership:** _____

BOP Status:

Issued * Permit #: _____ Date: _____
 In Process OP#: _____

CORE Classification (check one): 1 2 3 4 5

CORE Program Completion:

A. Sacramento Grow Green (Sacramento Asian Chamber of Commerce)

Completed Date of Completion: _____
 In Progress Expected date of completion: _____

B. Sacramento Green Equity (Greater Sacramento Urban League)

Completed Date of Completion: _____
 In Progress Expected date of completion: _____

**If BOP has been issued, qualifying expenses will be limited to those incurred after the issuance of the BOP.*

Reimbursements are limited to items on the qualifying expense list. Requester can mix and match items for a total of reimbursement not to exceed \$25,000. Reimbursements are available on a per-permit basis. Receipts must be submitted along with request form or no reimbursement can occur.

Check Item(s) that apply	QUALIFYING EXPENSE	DATE	AMOUNT
	Building permit fees		
	State application fees		
	Other permit fees		
	Rent (check qualifying criteria below):		
	Paid for CUP; reimbursement up to amount of CUP fees		
	Tenant in a shared manufacturing premises		
	Incubator		
	Security deposit		
	Security system		
	SMUD power upgrade		
	Equipment (must be specific to the business type. Please specify below):		
	Cultivation equipment:		
	Manufacturing equipment:		
	Equipment for delivery vehicles:		
	Safes/secured storage:		
	Inventory management system:		
	Business-related training or education (describe below):		
TOTAL (must not exceed \$25,000)			\$

CERTIFICATION:

___ I certify that the information provided on this application are true.

___ I authorize the Office of Cannabis Management to verify the authenticity of the receipts submitted along with this application.

Requester's Signature

Date

BUREAU OF CANNABIS CONTROL REPORTING REQUIREMENTS:

As a requirement of the BCC as part of the grant disbursement agreement, recipients of the grant funds must disclose the following demographic data. The information provided is not a basis for evaluating applicant's reimbursement request. The information collected will be consolidated and reported without the individual's identifying information.

A. Gender:

- Male
- Female
- Gender Non-Conforming
- Other (please state): _____
- Decline to state

B. Sexual Orientation:

- Gay
- Lesbian
- Straight
- Other (Please state): _____
- Decline to state

C. Race/Ethnicity:

- White (Provide details below):
 - German
 - Italian
 - Irish
 - Polish
 - English
 - French
 - Other (please state): _____

- Black or African American (Provide details below):
 - African American
 - Nigerian
 - Jamaican
 - Ethiopian
 - Haitian
 - Somali
 - Other (please state): _____

- Asian (Provide details below):
 - Chinese
 - Vietnamese
 - Filipino
 - Korean
 - Asian Indian
 - Japanese
 - Other (please state): _____

- Middle Eastern or North African (Provide details below):
 - Lebanese
 - Syrian
 - Iranian
 - Moroccan
 - Egyptian
 - Israeli
 - Other (please state): _____

- Native Hawaiian or Other Pacific Islander (Provide details below):
 - Native Hawaiian
 - Tongan
 - Samoan
 - Fijian
 - Chamorro
 - Marshallese
 - Other (please state): _____

Some Other Race or Ethnicity (Please state): _____

Decline to state

D. Income (Personal Annual Income)

- \$0 – \$25,000
- \$25,001 - \$49,000
- \$49,001 - \$75,000
- \$75,001 and above

E. Prior Convictions

- Yes
- No

F. Veteran Status

- Yes (Veteran)
- No (Non-Veteran)