



City Council Communication

AGENDA DATE: May 18, 2026

LEGISTAR ITEM #: 26-029

PRESENTER: Lori Young
Office

DEPARTMENT: City Manager's

<input type="checkbox"/> Administrative Business	<input checked="" type="checkbox"/> Noticed Council Business
<input type="checkbox"/> Informational Presentation	<input type="checkbox"/> Consensus-Building Presentation

BACKGROUND/REQUEST

Kids First Healthcare Sponsorship Request – see attached information

Co-Sponsor: Susan Noble

From: [Young, Lori - CC](#)
To: [Peters, Annette - CM](#)
Subject: Re: RESPONSE NEEDED: Council Sponsorship Request - Kids First Health Care
Date: Monday, May 11, 2026 9:41:21 AM
Attachments: [image003.png](#)
[image004.png](#)
[image005.png](#)
[image006.png](#)
[image007.png](#)
[image008.png](#)
[image009.png](#)
[image002.png](#)

I'll sponsor this
Lori

Lori Young

From: Peters, Annette - CM <apeters@c3gov.com>
Sent: Monday, May 11, 2026 9:40:29 AM
To: City Council <CityCouncil@c3gov.com>
Subject: RESPONSE NEEDED: Council Sponsorship Request - Kids First Health Care

Good morning,

I hope you are doing well. I am reaching out to request a sponsor and co-sponsor for an upcoming item that will be submitted for Council consideration.

If you are interested in sponsoring or co-sponsoring this request, please let me know **NO LATER THAN MAY 19, 2026.**

Thank you for your time and consideration.



Annette Peters
Assistant to the City Manager

apeters@c3gov.com | O: 303-227-8808

c3gov.com

City of Commerce City | 7887 E. 60th Ave. | Commerce City, CO 80022



Quality Community for a Lifetime



Open Forms submission for a Council Sponsorship Request.

Someone has filled out a request for a Council sponsored event.
Information below.

1. Type of Sponsorship Requested	
Application date	4/23/2026
Please indicate types of in-kind sponsorship sought	
Please indicate amount of cash requested	3000
Please indicate amount of cash requested for school or school-related group	3000
2. Organization/Group Details	
Registered Name of Organization:	Kids First Health Care
Doing Business As:	
Contact Name:	wconnor@kidsfirstco.org
Contact Title/Position:	Whitney Gustin Connor
Mailing Address:	wconnor@kidsfirstco.org
City:	Commerce City
State:	CO
Zip:	80022

Email:	wconnor@kidsfirstco.org
Organization or Event Website:	https://www.kidsfirsthealthcare.org/
Business phone:	303-853-3279
Mobile number:	
3. Not-For-Profit Status	
Upload documentation here	Kids First IRS Determination Letter 1-10-2024.pdf
Not-for-profit	Yes
Registered in Colorado	Yes
Registered Not-For Profit for Tax Purposes	Yes
Tax Exempt No.:	84-0799374
Mission/Purpose of the Organization (attach additional documentation if needed):	Kids First Health Care provides pediatric primary care - medical, mental, dental - to children and youth ages birth to 21. Our Commerce City clinics are located inside Adams 14 middle schools and high schools and co-located with other supportive services at the Commerce City Community Campus (72nd & Colorado Blvd). Our mission: Kids First Health Care improves the health and wellbeing of all children, regardless of their circumstances, through access to high quality health care.
4. Program/Event Details	
Name of Program/Event:	Back to Health Breakfast
Type of Program/Event:	Annual fundraiser
Event or Program Mission/Purpose (attach additional documentation if needed):	Generous grants, donations and sponsorships make it possible for Kids First to serve all children regardless of families' ability to pay for care. Sponsorships also allow us to make event attendance free so that all our community members can join us.
Is this a fundraising event?	Yes

If yes, who will receive the proceeds?	Proceeds go to Kids First to support our health care services for children and youth in need.
Fundraising recipient's 501(c)3 Number	84-0799374
Event Address:	TBD
Event Date(s):	9/10/2026
Event Time(s):	7:30-10:00 AM
Expected Number of Participants:	150-200
Please attach a schedule detailing major portions of the event, if applicable	
Event Open to the Public?	Yes
Has this event been previously held?	Yes
Number of previous occurrences:	3
5. Benefits Proposal	
Check all of the proposed benefits, goods and/or services the City would receive if approved.	Recognition in social media City logo on marketing materials Other (please list below or attach)
List other	Sponsorship benefits vary based on the level of contribution and can include sponsor's name and logo on event signage and invitation, event banner, advertisement in event program, on Kids First website and more.
Attach list of other	Kids First Health Care Event Sponsorship Packages 2026.pdf
6. Event Promotion/Marketing	

<p>Please list how the program/event will be promoted, including both digital and/or print methods and attach copies of available materials. Materials from previous occurrences of the event may be used if similar to marketing planned for current event.</p>	<p>The attached 2026 sponsorship level document includes a complete list of promotion/marketing opportunities.</p>
<p>7. Insurance</p>	
<p>Does the organization/group possess General Liability Insurance? A copy of the certificate must be supplied with this application.</p>	<p>Yes</p>
<p>Upload certificate copy</p>	<p>Kids First COPIC Cert of Insurance 8-2025.pdf</p>
<p>8. Event Budget and Funding (required only for cash requests)</p>	
<p>How is the event being funded? Please list all types, including sponsorships, vendor fees, ticketing, etc.</p>	<p>Sponsorships</p>
<p>Please list all event fees that will be charged below,</p>	

including registration, entry, spectator, vendor sign-up, parking, etc.	\$0
Please list all Sponsors and Sponsor Contributions.	As of 4/23/2026, the following entities have confirmed support: School District 27J - \$1000 Caring for Colorado Foundation - \$2000 Maiker Housing Partners - \$3000 Suncor - \$6000 City of Thornton - \$1000
9. Event Booths (required only for cash requests)	
Vendor/Sponsor Booths at the Event	No
Number of booths	
Will they be selling products and/or services?	No
Please list the types of products and/or services that will be sold.	
10. Exception Criteria (required only for cash requests)	
Provide statement here.	Kids First relies on donations to cover the cost of providing health care to children and youth whose families are unable to pay for services. We opened our first clinic in Commerce City in 1978, and 5 of our 9 clinics are still located here. Our administration office is also located in Commerce City. Sponsorship funds cover the cost of medical, mental and dental care. The breakdown of which is primarily salaries for patient care teams which include: our pediatrician, nurse practitioners, behavioral health providers, health educators, and medical assistants. Sponsorship support also allows Kids First to host the event free of charge so all community members can attend. Each year, we provide care to 2000-3000 Commerce City children and youth, supporting their

health and well-being so they can succeed in school and contribute to our community for a lifetime.

11. Required Attachments (required only for cash requests)

Please indicate below which attachments are being provided with the application.

501(c)3 Copy or Letter of Determination of Exempt Status
Certificate of Insurance
Exception Criteria

Attach documents here

Signature

Printed name whitney gustin connor

Title executive director

[Link to signature](#)

Date 4/23/2026