

March 22, 2011

Mr. Ann Werlein Office of the County Judge

Ms. Werlein:

Please accept this as our written request of waiver for all lemonade stands registered for operation during Prepared 4 life's Lemonade Day event on Sunday, May 1, 2011. The hours of operation for every stand are from 8:00 a.m. until 5:00 p.m. on that day. We know that one of the requirements is a list of all registered stand locations, and the name of the supervising adult for each. The registration process has started already and will continue through April 30, 2011. At that time, we will have a complete list of the registered stands, and will forward that list to you as required. Should you prefer to receive a partial list every Friday as children register, we can also do that.

Please let us know if you require any further information. We look forward to receiving your favorable response by the end of this week or sooner if possible.

Sincerely,

Julie Jenkins Houston Lemonade Day Project Manager On behalf of Michael H. Holthouse, Chairman



Lemonade Day is a FREE community-wide educational program designed to teach youth how to start own and operate their own business through a lemonade stand. Give your students the opportunity to learn crucial life lessons through hands-on experience!

Lemonade Day helps youth learn to:

- Set Goals
- Plan for Success
- Find Investors
- Advertise Their Product
- Build A Stand
- Purchase Supplies
- Make A Product
- Serve Their Customers
- Account For Sales and **Expenses**
- Open A Bank Account
- Give Back To The Community





BBVA Compass





Thanks To Our Local Sponsors:

























Founding Sponsor of Serving

Capital One Bank













































Want to learn more? LemonadeDay.org

INTERNAL REVENUE SERVICE MAY 2 2 2006 P. O. BOX 2508 CINCINNATI, OH 45201

Date: MAY 1 6 2006

P4L 1800 W LOOP S STE 1875 HOUSTON, TX 77027

Employer Identification Number: 20-4235269 DLN: 17053083026016 Contact Person: ID# 31364 JOHN J KOESTER Contact Telephone Number: (877) 829-5500 Accounting Period Ending: DECEMBER 31 Public Charity Status: 170 (b) (1) (A) (vi) 10% Form 990 Required: YES Effective Date of Exemption: JANUARY 31, 2006 Contribution Deductibility: YES Advance Ruling Ending Date: DECEMBER 31, 2010

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. During your advance ruling period, you will be treated as a public charity. Your advance ruling period begins with the effective date of your exemption and ends with advance ruling ending date shown in the heading of the letter.

Shortly before the end of your advance ruling period, we will send you Form 8734, Support Schedule for Advance Ruling Period. You will have 90 days after the end of your advance ruling period to return the completed form. We will then notify you, in writing, about your public charity status.

Please see enclosed Information for Exempt Organizations Under Section 501(c)(3) for some helpful information about your responsibilities as an exempt organization.

If you distribute funds to other organizations, your records must show whether they are exempt under section 501(c)(3). In cases where the recipient organization is not exempt under section 501(c)(3), you must have evidence the funds will be used for section 501(c) (3), purposes.



Name of purchaser, firm or agency
P4L dba Prepared for Life

TEXAS SALES AND USE TAX EXEMPTION CERTIFICATION

Address (Street & number, P.O. Box or Route number) 1800 West Loop South, Ste 1875		Phone (Area code and number) 713-626-5511
City, State, ZIP code Houston, TX 77027		
I, the purchaser named above, claim an exem items described below or on the attached orde		and use taxes (for the purchase of taxable
Seller:		
Street address:	City, State	, ZIP code:
Description of items to be purchased or on the attac	hed order or invoice:	
Equipment and Supplies		
		7-17-17-17-17-17-17-17-17-17-17-17-17-17
Purchaser claims this exemption for the following real Exempt Organization 501 (c) (3)	ason:	
Tax ID 20-4235269		
I understand that I will be liable for payment of sales of Tax Code: Limited Sales, Excise, and Use Tax Act; M Authorities; County Sales and Use Tax Act; County F Provisions Relating to Hospital Districts, Emergency S of 125,000 or less.	lunicipal Sales and Use Tax Act; Health Services Sales and Use	Sales and Use Taxes for Special Purpose Taxing Tax; The Texas Health and Safety Code; Special
I understand that it is a criminal offense to give an exer will be used in a manner other than that expressed in to from a Class C misdemeanor to a felony of the secon	his certificate and, depending on	
sign Hull Jusph	Title CC QUATA I S	Date
NOTE: This certificate cannot be iss	sued for the purchase, lease, or	

This certificate should be furnished to the supplier. Do not send the completed certificate to the Comptroller of Public Accounts.

Sales and Use Tax "Exemption Numbers" or "Tax Exempt" Numbers do not exist.



HEALTH & HUMAN SERVICES

Environmental Health Department Fort Bend County, Texas

REQUIREMENTS FOR BEVERAGE STAND OPERATIONS (Lemonade Day, May 1, 2011 Only)

Each booth / stand shall operate under the attached sample design and the following food safety requirement guidelines:

ITEM 1: All ice and water used for human consumption must be from an approved source (grocery store, bottled water manufacturer, etc.) and not made in or received from a household or a household refrigerator. Receipts and invoices of food source(s) must be retained by the booth operator.

ITEM 2: Only Lemonade will be prepared and offered from the stand. There shall be no other food products prepared or served.

ITEM 3: Protect beverages being served. Keep containers of beverages closed/covered until service. Keep condiments and straws for self-service protected from consumer contamination or utilize individual packages.

- Wear an effective hair restraint, example: cap or hair net.
- All equipment and single service items shall be stored at least 6 inches above the floor.
- No eating, drinking, or smoking is allowed in the beverage booth.

ITEM 4: Ice shall be held in bags until used and dispensed properly. Use a utensil such as a scoop or ladle to dispense ice. Do not store any items in contact with water/undrained ice. Do not place any items or containers in the ice utilized for consumption.

ITEM 5: Food contact surfaces of equipment shall be protected from contamination by consumers by using separating counters or tables.

ITEM 5: Provide only single-service cups and napkins for customer' use.

ITEM 6: Use a gravity-type water dispenser for hand washing. Example: drink dispenser with a spout or spigot. Do not forget hand washing soap, paper towels and catch basin. Wash hands for at least 20 seconds. Single-use gloves are required for all food handlers.

ITEM 7: Dispose of all liquid and solid waste properly. Provide a trash can on site for proper collection.

ITEM 8: Provide a ceiling or canopy above average preparation and service areas. Example: wood, canvas, or other material that protects the interior of the establishment from the weather and other agents.

ITEM 9: Each stand shall be operated under the supervision of a responsible adult designated by the minor's parent or guardian.

SERVE BEVERAGES THAT ARE OBTAINED FROM AN APPROVED SOURCE BUY INGREDIENTS, WATER, AND ICE FROM AN APPROVED SOURCE



FORT BEND COUNTY ENVIRONMENTAL HEALTH DEPARTMENT APPLICATION FOR TEMPORARY FOOD EVENT

Name of Applicant		
Address of Applicant		
Contact Number		
Name of the EventLEM		
Date of the Event MAY	<u>Y 1, 2011</u>	
Time of the Event		
Address of the Lemonade St	anq	
ONL	Y LEMONADE TO BE	SERVED
FOOD PRODUCT	SOURCE of PRODUCT	PLACE of PREPARATION
List ingredients	Place of Purchase	In Booth
Lemons or Mix		
Water		
Sugar		
Ice		
Cups		
	ingredients, including ic	ce and water, used for this event
from a retail food store.		
ADDITIONAL 72 HOURS INCR OR MONEY ORDER MUST AG	EMENTS UP TO A MAXII CCOMPANY THIS APPLIC	T 72 HOURS AND \$20.00 FOR ANY MUM OF 15 DAYS. CASH, CHECK CATION. A LATE FEE OF \$10 IS 3 DAYS PRIOR TO THE EVENT.
PROOF OF THIS TO THE FORT B	END COUNTY ENVIRONME E EXEMPT FROM FEES,	PRGANIZATION YOU MUST PROVIDE NTAL HEALTH DEPARTMENT. NON- HOWEVER ALL REQUIREMENTS AL RECEIVED.
PERMIT IN FORT BEND COUNTY. I UN	DERSTAND AND WILL COMPLY TION AND / OR RECVOCATION O	BTAINING A TEMPORARY FOOD SERVICE WITH THE REQUIREMENTS OR BE SUBECT OF THIS PERMIT. I UNDERSTAND THAT THIS MENTAL HEALTH DEPARTMENT.
SIGNATURE OF APPLICANT'S PAREN OR GUARDIAN	T REG	ISTERED SANITARIAN
DATE	— — — — — — — — — — — — — — — — — — —	E

ALL TRANSACTIONS ARE FINAL. NO REFUNDS OR CREDITS.