



FOR IMMEDIATE RELEASE Date: February 2, 2026

From: Spencer Mayor, Donavon Wunschel

Phone: (712) 580-7200

Email: info@spenceriowacity.com

City of Spencer Announces Opening of 2026 Grant Applications for Local Option Sales Tax and Hotel/Motel Tax Funds

SPENCER, IA – The City of Spencer is pleased to announce that applications are now being accepted for the **2026 Local Option Sales Tax (LOST) Grant** and the **Hotel/Motel Tax Grant** programs. These initiatives are designed to reinvest local tax revenues into projects that enhance the quality of life for residents and bolster Spencer’s appeal as a premier destination for visitors.

“These grants represent a vital partnership between the City of Spencer and the innovative organizations that make Spencer thrive,” said Mayor Wunschel. “By utilizing these funds, we are able to support everything from essential infrastructure and public safety to the vibrant arts and tourism events that define our community’s character.”

Grant Categories at a Glance

Grant Program	Primary Focus	Eligible Applicants
Local Option Sales Tax (LOST)	Community improvement, economic development, and infrastructure projects.	Local government departments & non-profit organizations.
Hotel/Motel Tax	Tourism promotion, recreation, and cultural events.	Organizations focused on attracting visitors to Spencer.



Application Details

The City is seeking projects that demonstrate a clear benefit to the Spencer community, show financial sustainability, and align with the City Council's long-term strategic goals.

- **Submission Deadline:** All applications must be received by **4:30 PM on March 1, 2026**.
- **How to Apply:** Application forms are available on the City of Spencer website at www.spenceriowacity.com and attached to this press release.
- **Review Process:** The Finance Committee and City Council will review submissions with final award announcements expected on April 6th, 2026.

END



City of Spencer Hotel/Motel Tax Community Impact Grant Application

Fiscal Year 2026/2027 | Funded by Hotel/Motel Tax Revenue

The City of Spencer invites local non-profit organizations to apply for the Community Impact Grant. This funding is intended to support projects that enhance the local economy, improve quality of life, and encourage visitors to our community.

Section 1: Applicant Information

- **Organization Name:** _____
 - **Tax ID (EIN):** _____
 - **Contact Person & Title:** _____
 - **Mailing Address:** _____
 - **Email Address:** _____
 - **Phone Number:** _____
-

Section 2: Grant Eligibility & Impact Area

To qualify for funding, your project must fall into at least one of the following categories. Please check all that apply:

- ☐ **Entertainment:** Festivals, concerts, community events, or performances that attract residents and visitors.
- ☐ **Culture:** Arts initiatives, historical preservation, museum exhibits, or diverse community celebrations.
- ☐ **Recreation:** Improvements to parks, trails, youth sports facilities, or outdoor activity programming.



Section 3: Project Overview

1. **Project Name:** _____
2. **Amount Requested (\$):** _____
3. **Total Project Budget (\$):** _____
4. **Matching Funds (\$):** _____
5. **Project Date(s):** _____
6. **Project Description:**
(Briefly describe the project and how the funds will be used.)

Section 4: Community Impact & Tourism

Because this grant is funded by hotel/motel tax, we must track how these funds benefit the city.

- **Target Audience:** Who is this project intended to serve? (Local residents, regional tourists, etc.)
- **Anticipated Attendance:** _____
- **Economic Impact:** How will this project encourage visitors to shop, dine, or stay overnight in Spencer?



Section 5: Required Attachments

Please ensure the following documents are attached to your submission:

- ☐ Detailed Project Budget (including other sources of funding).
 - ☐ Proof of Non-Profit Status (IRS Determination Letter).
 - ☐ Project Timeline.
 - ☐ Matching Funds Supporting Documentation
-

Section 6: Authorization

By signing below, I certify that the information provided is true and correct to the best of my knowledge and that any funds awarded will be used specifically for the purposes described above.

Signature: _____ **Date:** _____

Administrative Use Only

- **Date Received:** _____
- **Review Committee Rating:** ☐ Approved ☐ Denied ☐ Pending Info

Total Awarded: \$_____



City of Spencer Local Option Sales Tax (LOST) Grant Application

Purpose: To provide financial assistance to local organizations for projects that enhance the quality of life (Community Development) or promote financial growth and job creation (Economic Development) within the City of Spencer.

Section 1: Applicant Information

- **Legal Name of Organization:** _____
 - **Mailing Address:** _____
 - **Contact Person & Title:** _____
 - **Email:** _____ **Phone:** _____
 - **Tax ID / EIN:** _____ **Non-Profit Status:** ☐ Yes ☐ No
 - **Project Title:** _____
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Section 2: Funding Request Summary

- **Total Project Cost:** \$ _____
 - **Grant Amount Requested:** \$ _____
 - **Matching Funds (Minimum 25% recommended):** \$ _____
 - **Attach Matching Funds Supporting Documentation**
 - **Source of Matching Funds:** _____
-



Section 3: Category Selection

Please select the primary category for this application. While projects may overlap, choose the one that aligns most closely with your primary goals.

[] Category A: Community Development

Focus: Quality of life, public amenities, culture, safety, and infrastructure.

- **Key Indicators:** Neighborhood revitalization, park/trail enhancements, public safety equipment, arts/culture programming, and accessibility improvements.

[] Category B: Economic Development

Focus: Job creation, business retention, and tax base expansion.

- **Key Indicators:** Business expansion, workforce housing, downtown beautification (facade grants), tourism attraction, and professional recruitment.

Section 4: Narrative & Impact (The "Specifics")

Please attach a separate document (not to exceed 3 pages) answering the following prompts based on your selected category.

1. Project Description

Provide a concise overview of the project. What is the timeline for completion? What specific problem or opportunity does this project address in Spencer?

2. Impact on Category Goals

- **If Community Development:** Describe how this project improves the daily lives of Spencer residents. Will it serve a specific demographic? How will success be measured (e.g., increased park usage, reduced response times, number of event attendees)?
- **If Economic Development:** Describe the "Return on Investment" (ROI). Will this create new jobs (FTE)? Will it increase property values or local sales tax generation? How does it encourage visitors to spend money in Spencer?



3. Sustainability and Maintenance

If this is a physical project or a new program, how will it be funded/maintained after the grant funds are exhausted?

4. Community Support

Does this project have partnerships with other local entities (e.g., Spencer Chamber, Clay County Fair, Main Street Spencer)? Provide letters of support if available.

Section 5: Budget Detail

Please provide a line-item budget for the project. Highlight specifically which items the LOST Grant funds would cover.

Item Description	Total Cost	Grant Portion	Other Funding
<i>Example: Playground Equipment</i>	<i>\$10,000</i>	<i>\$5,000</i>	<i>\$5,000 (Private Donation)</i>
TOTALS	\$	\$	\$



Section 6: Certification & Signature

I certify that the information contained in this application is true and correct to the best of my knowledge. I understand that LOST funds are public funds and are subject to audit and public disclosure.

Authorized Signature: _____ **Date:** _____

Internal Use Only (City Manager's Office)

- **Date Received:** _____
- **Completeness Check:** ☐ Pass ☐ Incomplete
- **Council Review Date:** _____

Action Taken: ☐ Approved ☐ Denied ☐ Tabled