

City of Pomona - Donations and Finding of Public Benefit

* **Name of Organization**
African American Advisory Alliance

* Full Address (Same as W9 Form)

* **Contact Person**
Chara Nicole Swodeck

* Contact Person Phone Number

* **Tax ID of Group or Individual Receiving Payment**

* **Total Funding Requested by Organization**
1500.00

* **Will City services be required? (i.e. P.D., street closures, rentals). If yes, please explain. Any Council provided funding will go towards City services first.**
No

Total Funding Requested by Councilmember(s)
SKIPPED

* **Promotion - Request event promotion on City marquee @ SW corner of Garey and Mission. (City Seal can only be used to promote official City events and functions)**
Yes

* **Is this an event? If so, please provide the name of the event.**
Kwanzaa Joy Celebration

* **How will the Donations/Sponsorship be used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)**
We humbly request a monetary donation to the African American Advisory Alliance, our nonprofit fiscal agent, on behalf of this year's Kwanzaa Joy Celebration. All donations received will cover the overall cost of this break-even event including Kuumba | Creative activities and Zawadi | Gifts for all attendees and donated event tickets to the community, event décor and signage, as well as several logistical requirements including volunteer badges, event insurance, etc.

* **What is the benefit to the City of Pomona? (An expenditure of public funds must be for primary benefit of the public agency that is making the expenditure)**
This one-day celebration is based on the seven fundamental principles of Kwanzaa known as the Nguzo Saba which promotes unity within the family and community, self awareness, faith and responsibility to the future of our people and our culture. This event is both an opportunity to experience the rich African culture as well as raise awareness and educational diversity.

I, Mayor/Councilmember Tim Sandoval, District No. 7, hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.

Account Number: 101-1302-52107-00000

Council Meeting Date: 1/6/24

Mayor/ Councilmember Approval: 

Date: 12/12/24