* Name of Organization Latino and Latina Roundtable
* Full Address (Same as W9 Form)
* Contact Person Lina Mira, community members for Dia del Niñe
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization 3,500
* 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. MLK park grounds
Total Funding Requested by Councilmember(s) 3,500
* 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) City Marquee @SW corner of Garey and Mission
* Is this an event? If so, please provide the name of the event. Día del Niñe 2025- April 30th 2025
* 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.) The donation will be used to promote an event for children and families for the entire City of Pomona. The event brings together various community organizations to share resources available to promote the wellbeing of local children and families. Día del Niñe brings together agencies and families that want better opportunities for families and for children. The planning committee is made up of various community members that want to promote this cultural event that celebrates children rights.
* 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)
The City benefits from receiving recognition as a sponsor of this event. It also shows the community that the City cares about community engagement and bringing together people for celebration and connection. The families and children of Pomona also need engagement and opportunities to develop city/community partnerships. We invite all Councilmembers and Mayor and city staff to join us.
I, Mayor/Councilmember Steve Lustro , District No. 5 , 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: 4/7/25
Mayor/ Councilmember Approval: Sanota
Date: 3/25/25

* Name of Organization Bridgette Bentley
* Full Address (Same as W9 Form)
* Contact Person Bridgette Bentley
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization \$10,000.00 or funding the rental for theater/ venue for the first weekend
* 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. Yes, I would like to rent the Fox Theater in Pomona.
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) All available promotional opportunities will be requested
* Is this an event? If so, please provide the name of the event. Yes. I would like to do the Tony award winning Musical "Dreamgirls" for a 3 week run
* 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.) Hosting this popular production of Dreamgirls the iconic Fox Theater would not only be promoting arts, culture, and community engagement through the creative arts to a new audience from around the Inland Empire; it would allow the creative arts culture an opportunity to engage in an environment specifically for them. This well know production will allow those who enjoy musical theater the chance to experience on of Broadways best. As well as an opportunity for those with a gift to participate.
* 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) Public Agency Awareness Campaign: Featuring promotional materials and informational booths highlighting services and resources provided by the public agency, ensuring attendees leave more informed and empowered. Educational Workshops & Youth Engagement: Partnering with local schools and community organizations to offer workshops related to theater production, performance, and technical skills, inspiring the next generation of artists and leaders in the creative arts.
I, Mayor/Councilmember Victor Preciado , District No. 2 , hereby request that the above donation/payment be made and that a finding of publi benefit be determined by the City Council.
Account Number: 101-1302-52102-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval:
Date: 3/25/25

* Name of Organization Celebrating A Vision
* Full Address (Same as W9 Form)
* Contact Person Sonya Adams
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization 700.00
* 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. N/A
Total Funding Requested by Councilmember(s) 700.00
* 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) N/A
* Is this an event? If so, please provide the name of the event. Educating the youth and their families on LAW! This law firm will explain the do's and dont's during traffic stops. How to retain an attorney. Learn their legal rights when arrested ,
* 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 have a group of young men and women who will get the opportunity to come face to face with two high profile Attorneys. Our organization has the responsibility of providing breakfast Lunch, and transportation. We have to provide training supplies for a total of 30 participants. The law firm will be answering all questions about traffic, trials, the bar exam, what is a Bail bondsman, how to retain an Atty. Warrants, restraining orders. Penal codes 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)
The benefit is the families being more knowledgeable about their rights as a citizen. Another benefit is they get information in real time about what to do if arrested. If you see a crime and how to report it. What to do if you encounter ICE. How to protect yourself
I, Mayor/Councilmember Steve Lustro , District No. 5 , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52105-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval: Law Sastio
Date: 3/25/25

* Name of Organization TBD
*Full Address (Same as W9 Form) 505 South Garey Pomona Ca 91767
*Contact Person Elizabeth Ontiveros-Cole
*Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization \$2000
* 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) \$2000
* 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) no
* Is this an event? If so, please provide the name of the event. Area Commander Meeting for D4
* 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.) Funding will go toward the purchase of food, refreshments, for the D4 Area Commander Meeting being held at the Ebell Club.
* 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)
Providing a meal encourages people to attend this important meeting, where they can learn about the city's initiatives, departments and, more specifically, the developments happening in District 4.
I, Mayor/Councilmember <u>Elizabeth Ontiveros-Cole</u> , District No. <u>4</u> , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52104-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval:

* Name of Organization Diamonds Love Foundation DBA Mosley Foundation of Love
* Full Address (Same as W9 Form)
* Contact Person Shante Hall
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization 3,500
* 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) \$500 or more from each member
* 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) No
* Is this an event? If so, please provide the name of the event. Sugar Shane Mosley Youth Boxing Camp
* 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.) Sponsorship will be used to allow 20 local residents to participate in the boxing camp. Last year with the help of the POFB, 10 kids had an experience of a lifetime, getting in the ring with the Boxing Champion.
* 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)
The benefit to the City of Pomona is creating an alternative for the youth in our community to experience professional training and leadership skills that not only can help them in the future, but can use the self discipline and self awareness to stay away from all bad influences that plague our communities.
I, Mayor/Councilmember <u>Steve Lustro</u> , District No. <u>5</u> , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52105-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval: Law Lastin
Date: 3/25/25

Fist of Gold Youth Center, Inc.
* Full Address (Same as W9 Form)
* Contact Person FIST OF GOLD YOUTH CENTER, INC.
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization 10,000.00
* 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.
1. Pomona Police Department 2. Security Guards 3. Temporary Fencing 4. Porta Potties 5. Ambulance Services
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. "911 Fight Night" presented by Fist of Gold Youth Center.
* 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.) Donations and sponsorships will be used to support services and programs offered through Fist Of Gold Youth Center, focusing on boxing, mental health, and mentorship for the youth of Pomona. The funds will help enhance our training facilities, provide necessary equipment, and develop mentorship programs that promote mental well-being and personal growth. By investing in these initiatives, we aim to empower young individuals, foster resilience, and cultivate a sense of community through boxing.
* 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) The benefit to the City of Pomona is significant through our event sanctioned by the California Athletic Commission, featuring first responders competing to raise funds for the youth. This initiative honors local heroes and fosters community pride and engagement. By showcasing first responders in a supportive environment, we strengthen community bonds. Funds go to youth mental health, mentorship, and boxing programs, ultimately enhancing the well-being of our young people.
I, Mayor/Councilmember <u>Steve Lustro</u> , District No. <u>5</u> , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52105-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval:
Date: 3/25/25

Human Values Center, a trusted community-based organization serving Pomona since 2018
* Full Address (Same as W9 Form)
* Contact Person Dr. Laura Burgis
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization REQUEST: Sponsorship of \$5,000 to support the Collective Wellbeing Summit & Public Exhibit, taking place at the Sheraton/LA County Fair
* 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) n/a
* 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) n/a
* Is this an event? If so, please provide the name of the event. YES. Collective Wellbeing Summit & LA County Fair Public Exhibit
* 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.) The Southern California Wellbeing Summit brings together 200 multi-sector leaders to explore social equity, youth and family support, climate justice, and more. This event fosters regional collaboration, informs policy, and bridges gaps in community engagement/development. PUBLIC EXHIBIT: "Stories of Place" will highlight Pomona's voices, showcasing local resilience and wellbeing. Videos will be weaved into the exhibit. Booths and QR codes provide Fair attendees ways to get involved.
* 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) BENEFITS TO POMONA: Key Pomona participation by way of Pomona CBOs, agencies, and residents Insights, solutions, and tangible outcomes shared with Pomona, including multimedia stories of resilience Increased public participation/support local CBOs Gather ideas for shaping a more vibrant and inclusive future Public interface to garner support and engagement.
I, Mayor/Councilmember <u>Steve Lustro</u> , District No. <u>5</u> , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52105-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval: Law Fastio
Date: 3/25/25

Date: 3/25/25

* Name of Organization Juneteenth Education Technology Mobile Arts Center
*Full Address (Same as W9 Form)
* Contact Person Trudy Coleman-Hailey
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization \$6,000
* 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. Yes, requesting that all park fees and street usage fees be paid by city with funds. Street bridge on Garey & second. All park pavilions will be used, stage, community building, and parking areas.
Total Funding Requested by Councilmember(s) \$6,000
* 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)
We are requesting any City promotional items be made available for this special Freedom Day Event. Billboards, Overpass on White & 2nd Street (north and South bround), Flag Poles, Pavilions at Park.
* Is this an event? If so, please provide the name of the event. 35th Yr. Pomona Valley Juneteenth Family Jazz and Arts Festival
* 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.)
The donations will be used to help pay for the park and city expenses. Outreach to the public, thru social media, newspaper, flyers, radio, and other media that is available. Also, will help pay for the Professional Music Artist who will be performing live on stage. New banners and backdrop for stage. The minimum estimated cost of the event is \$20,000.
* 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) The city will have the opportunity to show their hands-on participation with the community with this federal holiday, the California National Juneteenth Freedom Day Holiday Observance that represents all people born on American soil through the Emancipation Proclamation. The city's participation is important for goodwill and inclusion in this cultural event. It has been 35 years celebrated in the city of Pomona.
I, Mayor/Councilmember <u>Steve Lustro</u> , District No. <u>5</u> , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52105-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval:

* Name of Organization NCNW Pomona Valley Section
* Full Address (Same as W9 Form)
* Contact Person Jamie Lindsay
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization 1,500
* 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. Not currently.
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) NCNW Pomona Valley Section Membership Gala "Sisters United"
* Is this an event? If so, please provide the name of the event. Yes, A NCNW Membership GALA Sisters United
* 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 Will use the donations to enhance our event and show the community what Pomona Valley Section has been serving the community.
* 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) WeNCNW Pomona Valley Section organizes events that promote community unity and strengthen social ties, such as the Membership Luncheon, Thanksgiving food drives, and the Black Family Reunion. These events encourage public participation, volunteerism, and civic pride, fostering a sense of belonging among residents.
I, Mayor/Councilmember Nora Garcia , District No. 3 , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52103-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval: Nota Solice
Date: 3/25/25

Nogales Buffalo Soldiers Legacy Association
* Full Address (Same as W9 Form)
* Contact Person Donna Jackson-Houston
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment Donna Jackson-Houston
* Total Funding Requested by Organization
* 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 city services are required
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)
* Is this an event? If so, please provide the name of the event. Events and speaking engagements are provided throughout the year to educate students and the community about the historic all-Black segregated Buffalo Soldier regiments of the U.S. Army
* 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.) Annual events include Black History Month, Juneteenth, Veterans Day, Memorial Day, National Buffalo Soldiers Day, Pomona Christmas Parade. Funds will be used to provide educational and cultural public events for the students and community of Pomona. I personally fund thousands of dollars annually to maintain the organization which include Buffalo Soldier appearance fees, materials, website fees, travel, exhibit costs, etc. FOPB will offset a portion of these ongoing fees.
* 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)
After discovering that my grandfather served as a Buffalo Soldier in the 25th Infantry in the early 1900s during the Border Wars, For the past four years it has been my honor to conduct numerous events in Pomona and other cities. My presentations and exhibit recognize the positive cultural relationship the Buffalo Soldiers had with Mexico decades after the military conflicts. Historical events emphasize positivity/unity. www.NogalesBuffaloSoldiers.org Thank you for your continued support
I, Mayor/Councilmember Steve Lustro , District No. 5 , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52105-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval: Saption Date: 3/25/25

* Name of Organization Pauly's Project
* Full Address (Same as W9 Form)
* Contact Person Paul Avila
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization 5000
* 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 thank you
* Is this an event? If so, please provide the name of the event. Pauly's Project First Annual Autism Awareness Free Community Event
* 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.)
Pauly's Project is requesting funds for our 2nd Annual Autism & Neurodivergent Free Community Event to provide resources, education, and inclusive activities for individuals with autism and their families. Donations will support sensory-friendly spaces, workshops, entertainment, and vendor booths offering essential services. Funds will also help with event logistics, outreach, and ensuring accessibility, fostering a supportive environment for all attendees.
* 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)
Pauly's Project, a resident-led nonprofit, hosts two major community events and an annual Job Fair in Pomona, drawing over 5,000 attendees combined. Our 2nd Annual Autism & Neurodivergent Free Community Event provides families with vital resources, education, and support. These events promote inclusivity, accessibility, and public health while boosting local businesses and workforce development. Supporting this initiative strengthens Pomona's commitment to diversity, economic growth & community.
I, Mayor/Councilmember Steve Lustro , District No. 5 , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52105-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval: Law Sastio
Date: 3/25/25

Pomona American LL
* Full Address (Same as W9 Form)
* Contact Person PAUL Aurelio AYALA
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization \$300.00
* 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, city services will be needed, all help will be volunteer, parents and volenteers help run the League, so no City streets or help will be needed, we thank yu s
Total Funding Requested by Councilmember(s) \$5 00.00, we are requesting to help our League function this year,so we can finish the year debt free, and help kids and finish the season, debt free, since we are a non profit organizzation n
* 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)
no, it will not be posted, its a league event for the youth of Pomona , over 400 kids play in the league, alot cant pay registration fees so all donations help the League cover expensives, of Pomona
* Is this an event? If so, please provide the name of the event. This donation will go to a non profit organization, in Pomona called Pomona A merican Little League, we have over 400, kids playing with over 100 coaches teaching the game of baseball, Softb America In
* 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.) This donation, will help us pay for our light bill, charter fees, insurance fees, equipment, like balls, bats, helmets, uniforms, snack bar suppleys, umpire fees, functions, like our O pening Day coming up March 29th, where we have Garey High School come sing the National Athem, also will help with the constructio we are doing to the park, we installed infield grass to our big field, and also installing turf to one of our smaller fields, which will run the league \$40,000, most of it donated
* 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 will benefit the City of Pomona by keeping at risks kids playing in sports, after school, helping them learn the game of Baseball, Softball, we feel its important to get kids of there ipads, and exercise and learn to have friends, with other kids, besides family, learn to learn how to win and also how to lose.it also gives time for the parent to spend time with their kids, and the might have a closer relationship with the parent, our league, our league has been here in Pomona,41yrs
I, Mayor/Councilmember Lorraine Cananles , District No. 6 , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52106-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval: Canalus
Date: 3/20/25

* Name of Organization Pomona Valley Pride
* Full Address (Same as W9 Form)
* Contact Person Frank Guzman
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization 5000
* 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, this is a scholarship brunch opportunity
Total Funding Requested by Councilmember(s) 715 each
* 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) No
* Is this an event? If so, please provide the name of the event. colors of success scholarship brunch
* 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.) Council members and the mayor will be able to participate in the scholarship brunch and support scholarship opportunities for Pomona students
* 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) To support local students in pursuing there higher educational goals.
I, Mayor/Councilmember
Account Number: 101-1302-52107-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval:
Date: 3/26/25

Project Resilience
* Full Address (Same as W9 Form)
* Contact Person Stephanie Sepeda
* 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) 250.00
* 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) Through Social Media and flyers that we will hand out to the community
* Is this an event? If so, please provide the name of the event. Unveiling the Truth: From Sexual Violence to Human Trafficking
* 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.) This will support the financial part on the venue at Ganesha High School Parking Lot which is 270.00 plus 508.00 for Janitorial cost. It will support with marketing and flyer This will also provide some support for drinks and food.
* 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) Project Resilience and Parents Anonymous are collaborating to have guest speakers, Narcan training, education booths, resources, food. Through the community awarene event it provides life-saving education, prevention strategies, access to resources, recognizing signs of overdoses, dangers of laced drugs, Building a stronger support network. personal stories, equip the youth and students of Pomona. This is the large epidemic in Pomona on the streets.
I, Mayor/Councilmember Steve Lustro , District No. 5 , hereby request that the above donation/payment be made and that a finding of publisherift be determined by the City Council.
Account Number: 101-1302-52105-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval: Law Lastto Date: 3/25/25

* Name of Organization Victory Outreach Pomona *Full Address (Same as 9 Form) P.O
*Contact Person Office / Media - Monica Patron
*Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization \$2500
* 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. none
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) Victory Outreach Easter Outreach
* Is this an event? If so, please provide the name of the event. Victory Outreach Easter Outreach
* 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.) During out annual Easter Outreach we reach Innercity children in our community by having various booth of arts/crafts, face painting, giveaways of gift cards, bikes and toys, and an egg hunt for 4 different age groups~ as well as giving each child a big easter basket
* 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) Victory Outreach reaches out to Innercity families and children who come from unprivileged and troublesome situations, and during the holidays we try to be present in the lives to bring hope, joy, love, and fun as well as provide them with testimonies and resources to help their situations, or provide avenues to make better choices in their lives.
I, Mayor/Councilmember Steve Lustro , District No. 5 , hereby request that the above donation/payment be made and that a finding of publi benefit be determined by the City Council.
Account Number: 101-1302-52105-00000
Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval: Law Laston
Date: 3/25/25

Date: 3/25/25

* Name of Organization Vietnamese Community of Pomona Valley
* Full Address (Same as W9 Form)
* Contact Person Huu Dinh Vo
* Contact Person Phone Number
* Tax ID of Group or Individual Receiving Payment
* Total Funding Requested by Organization 2000.00
* 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) N/A
* Is this an event? If so, please provide the name of the event. New Lunar Year 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.) Provide cultural music, dance, performance. Provide cultural food to share with local residents and guests
* 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) The event will share the culture and tradition to the people of City of Pomona and show the diversity of the city
I, Mayor/Councilmember Steve Lustro , District No. 5 , hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52105-00000 Council Meeting Date: 4/7/25
Mayor/ Councilmember Approval: