

City of Pomona - Donations and Finding of Public Benefit

*** Name of Organization**

God's Pantry

* Full Address (Same as W9 Form)

*** Contact Person**

Viki Battaglia

* Contact Person Phone Number

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

*** Total Funding Requested by Organization**

\$10,500

*** 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)

\$1,500 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)**

Yes

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

God's Pantry Annual Golf Classic

*** 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 for God's Pantry's Golf Classic will be used to directly benefit the public by funding food distribution programs that provide free groceries to thousands of low-income families, seniors, and individuals experiencing homelessness in Pomona. Contributions will also support workforce development by offering job training and employment opportunities to formerly incarcerated individuals. Additionally, funds will continue to ensure food security and community resilience.

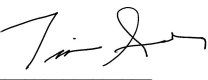
*** What is the benefit to the City of Pomona? (An expenditure of public funds must be for primary benefit of the public agency that is making the expenditure)**

Donations and sponsorships to God's Pantry's Golf Classic benefit Pomona by reducing food insecurity, easing the burden on city resources, and improving public health. Funds support food distribution for low-income families and job training for formerly incarcerated individuals, reducing unemployment and recidivism. Strengthening the local workforce and fostering community stability creates a safer, healthier Pomona, ensuring long-term benefits for residents and the city as a whole.

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: 101-1302-52107-010000

Council Meeting Date: 3/3/25

Mayor/ Councilmember Approval: 

Date: 2/18/25

City of Pomona - Donations and Finding of Public Benefit

*** Name of Organization**

Healed Women Heal

* Full Address (Same as W9 Form)

*** Contact Person**

Tracy Evanson

* Contact Person Phone Number

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

*** Total Funding Requested by Organization**

\$1250

*** 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.**

United Voices

*** 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 from this event will go directly towards our success workshops for women and youth.

*** 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)**

We need to heal our families. Our families are suffering from family violence, abuse, from trauma, community violence and we want to empower our families to develop themselves to make better choices. We make bad choices when we don't feel we have options. We want to support families by empowering them to see their options and supporting them to access those other options.

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: 3/3/25

Mayor/ Councilmember Approval: 

Date: 2/18/25

City of Pomona - Donations and Finding of Public Benefit

*** Name of Organization**

East Side of the River

* Full Address (Same as W9 Form)

*** Contact Person**

Cynthia Carranza

* Contact Person Phone Number

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

*** Total Funding Requested by Organization**

1000.00

*** 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)

500.00

*** 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)**

Yes

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

Washington Park Mural Unveiling

*** 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 for printing, promotion and refreshments/paper goods for those attending the Unveiling.


*** 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 bring together local residents, artist and civic leaders to commemorate the project in a culturally appropriate manner that fosters unity and environmental stewardship.

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: 2/19/25

Mayor/ Councilmember Approval: 

Date: 3/3/25