#### \* Name of Organization

Tradición Dance Company

\* Full Address 237 e Second St Pomona CA 91767

\* Phone (909) 868-8672

\* Tax ID of Group or Individual Receiving Payment

616-50-652

\* Total Funding Requested by Organization

\$3,000

Total Funding Requested by Councilmember(s)

\$3.000

\* 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)

N/A

Date: 5/16/23

\* Is this an event? If so, please provide anticipated attendance, and flyer or promotional material.

Yes- Folklorico Dance Show - anticipated attendance 600 people \*Flyer available

\* 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 will be used to cover primarily costume expenses for the youth that participate in the program as some cannot afford them. This will also provide the opportunity for cFitizens of Pomona to watch a concert level, cultural dance production, put on by active citizens of the city of Pomona. A portion of the funds will also be used for prints and promotional materials to invite guests to our show.

\* 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 sponsorship/donation to our organization, will support us in continuing to provide extra curricular activities for children, youth and adults in the city. At the same time we promote our Mexican culture through the art of Mexican folklorico to many audiences at multiple city events.

I, Mayor/Councilmember Nora Garcia benefit be determined by the City Council.	_, District No3	, hereby request that the above donation/payment be made and that a finding of public
Account Number: 101-1302-5103-00000  Council Meeting Date: 6/5/23		
Mayor/ Councilmember Approval: Nota Golice		

* Name of Organization God Provides Ministry - Pomona Valley Food bank
* Full Address 284 East Holt Ave Pomona CA 91767
* Phone (626) 200-0356 * Tax ID of Group or Individual Receiving Payment
95-4704549 * Total Funding Requested by Organization \$3,000
Total Funding Requested by Councilmember(s) \$3,000
* 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)  no  * Is this an event? If so, please provide the name of the event.  Pomona Valley Food Bank Fundraiser  * 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.)
Monies being raised is to help with the financial loss of our shipping vehicles used for picking up food and distribution of food to local organizations. The 17 ft truck is a total crashed by theft and vandalism.
* 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 provide food to agencies, sober living home, pantries, and outreaches for 28 years. We service and support social service organization and local church pantries. Were also Pomona Meals on Wheels serving Pomona, Chino, Chino Hills and City of La Verne.
I, Mayor/Councilmember Elizabeth Ontiveros-Cole, District No. 4, 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: 6/5/23
Mayor/ Councilmember Approval: Elizabeth Ontinsos - Cole
Date: 5/22/23

* Name of Organization Valley Indoor Swap Meet
* Full Address 1600 E. Holt Ave. Office Pomona CA 91767
* Phone (909) 620-4792
* Tax ID of Group or Individual Receiving Payment 953184809
* Total Funding Requested by Organization Five Hundred Dollars
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) No
* Is this an event? If so, please provide the name of the event. FREE Back Pack Giveaway (Saturday, July 15th at 10am)
* 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 generous donation provided by the City of Pomona will be used to purchase backpacks as well as other school supplies for this event, benefiting the children in our community. Your contribution would be extremely helpful.
* 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) For over 10 years the Valley Indoor Swap Meet has been able to give back to the community by hosting a FREE Backpack Giveaway Event. Each year our event grows and we are hoping to help over 900 children this year. This event will take place on Saturday, July 15th starting at 10am. Thank you in advance for your continued support with our community events.
I, Mayor/Councilmember Nora Garcia, District No. 3, hereby request that the above donation/payment be made and that a finding of publisherefit be determined by the City Council.
Account Number: 101-1302-52103-00000
Council Meeting Date: 6/5/23
Mayor/ Councilmember Approval: Nora Golice
Date: <u>5/22/23</u>

* Name of Organization Pomona Public Library Foundation
*Full Address 101 W Mission Blvd. Pomona CA 91767
*Phone
(909) 620-2376
* Tax ID of Group or Individual Receiving Payment n/a
* Total Funding Requested by Organization 1,500
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.  Pomona Public Library Foundation Mayor's Gala 2023
* 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.)  n/a
* 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) Raising funding for the Pomona Public Library
I, Mayor/CouncilmemberTim Sandoval, District No7 , hereby request that the above donation/payment be made and that a finding of publishenefit be determined by the City Council.
Account Number: 101-1302-52107-00000
Council Meeting Date: 6/5/23
Mayor/ Councilmember Approval:
Date: 5/16/23

* Name of Organization Pomona Police Dept.	
* Full Address 490 W. Mission Blvd. Pomona US: California 91766	
* Phone (909) 620-3696	
* Tax ID of Group or Individual Receiving Payment N/A	
* Total Funding Requested by Organization Any amount will be appreciated	
<b>Total Funding Requested by Councilmember(s)</b> 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 event and functions)  N/A	ts
* Is this an event? If so, please provide anticipated attendance, and flyer or promotional material.  Yes. Pomona PD Summer Camp Day July 7, 2023	
* 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 funds will be used to help purchase snacks, drinks, inflatables, and raffle items.	
* 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)  Summer Day Camp will host a full one day event to 150 children of Pomona, ages 8-11. We aim to provide a fun and engaging experience for the children in our commun while also allowing them to interact with Pomona PD Officers, PD staff, City Staff, local organizations, and community members. This day will include various activities, games, face painting, lunch, dinner, and raffles. Your support will help make this event a huge success. Thank you for your consideration.	nity
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 pu benefit be determined by the City Council.	ıblic
Account Number: 101-1302-52104-00000	
Council Meeting Date: 6/5/23	
Elizabeth Ontrovas - Cole	
Date: <u>5/22/23</u>	

* Name of Organization Pomona Released Time Education Inc.
* Full Address P. O. Box 1304 Pomona CA 91763
* Phone (909) 973-2274
* Tax ID of Group or Individual Receiving Payment 95-4419046
* Total Funding Requested by Organization \$1000.00
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) No
* Is this an event? If so, please provide anticipated attendance, and flyer or promotional material.  We will have a luncheon May 20 with about 160 people to raise funds for yrly operation of PRT but we have provided services to children of PV for 31 yrs. This yr, PRT had 125 children attending ea wk.
* 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 are used to solely benefit 4th grade students of the Pomona Valley. Money received provides supplies and awards for the children. The money received also provides for 3 buses which are used as portable classrooms. Funds pay for bus maintenance, fuel, and insurance. No funds are used for salaries (all staff are volunteers). The program is offered totally free to the children.
* 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) In our classes, children are taught good values from a biblical perspective including honesty, kindness, respect for others & forgiveness. This encourages them to make sound, moral decisions. Children read in class, thereby reinforcing what they learn from their school teachers. In time, they will join work force with educational skills. With these internal positive traits, children will be beneficial to our community. Our goalto grow respectable, strong citizens to later represent our nation.
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: 6/5/23
Mayor/ Councilmember Approval:
Date: 5/22/23

* Name of Organization Better Tomorrow Organization
* Full Address 3420 Falcon Street Pomona CA 91767
* Phone (909) 450-1169
* Tax ID of Group or Individual Receiving Payment 61-1996282
* Total Funding Requested by Organization \$3000
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 anticipated attendance, and flyer or promotional material.  Approximately 1,500
* 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 funding is being requested to help defray costs for the facility at Pilgrims Congregational Church for the activities/event.
* 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)  "Operation Catch Them Young" will be a non denominational church event bringing many churches from the City together in one place to educate and guide teens towards becoming productive and responsible members of society, helping cultivate good morals and habits. The event is open to all.
I, Mayor/Councilmember Elizabeth Ontiveros-Cole , District No. 4 , 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: 6/5/23
Mayor/ Councilmember Approval:
Date: 5/22/23

* Name of Organization CONCEPTUAL ART THERAPY
* Full Address 436 W. 4th Street 225 POMONA CA 91766
* Phone (909) 236-0039
* Tax ID of Group or Individual Receiving Payment 88-1132592
* Total Funding Requested by Organization \$4,600
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.  Youth Art Immersion Summer Program
* 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 be used to offset costs for Pomona youth as they spend two days on a retreat fully immersed in arts of different mediums. This experience will be immediately followed by a trip to the Sawdust Festival, an art festival in Laguna Beach. This program will also take youth to the Basquiat exhibit. Lodging, food, art supplies, transportation, chaperones, admissions, and recreational funds for youth at the festival will be provided and this funding will help support the program.
* 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 program will not only fully immerse Pomona's youth in an environment that will be artistically focused, this will expand their scope with access to experiences that they normally would not have access to. This program will be hosted at Conceptual Art Therapy's office in District 2 providing a summer program available to Pomona Students at no cost to them.
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: 6/5/23
Mayor/ Councilmember Approval: Nota Golie
Date: 5/23/23

* Name of Organization
Pomona United for Stable Housing
* Full Address 1305 W Holt Blvd 105
Pomona CA 91768
* Phone (909) 896-5669
* Tax ID of Group or Individual Receiving Payment 27-1487442
* Total Funding Requested by Organization \$2,000
Total Funding Requested by Councilmember(s) \$2,000
* 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)  N/A
* Is this an event? If so, please provide the name of the event.  Pomona United for Stable Housing(PUSH) Presents Know Your Rights Workshop
* 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.) PUSH will be purchasing translation equipment for this event and to be utilized for any future events where language justice is required.
* 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
<b>expenditure)</b> This funding will benefit the city of Pomona in education it's non-english speaking residents about their tenant protections through the urgency RSO.
I, Mayor/CouncilmemberJohn Nolte, District No1, hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.
Account Number: 101-1302-52101-00000
Council Meeting Date:
Mayor/ Councilmember Approval:
Date: 5/30/25