

City of Pomona - Donations and Finding of Public Benefit

*** Name of Organization**

Valley Indoor Swap Meet

*** Full Address**

*** Contact Person**

Adali Valdivia

*** Contact Person Phone Number**

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

*** Total Funding Requested by Organization**

Five Hundred Dollars

*** 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)**

No

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

Free Back Pack Giveaway (Saturday, July 20 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 that is given 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 is truly appreciated.

*** 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 event. Each year our event has been growing and we have helped families and over 900 children, this year we are wishing to do the same.

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: 6/3/24

Mayor/ Councilmember Approval: Nora Garcia

Date: 5/21/24

City of Pomona - Donations and Finding of Public Benefit

*** Name of Organization**

Pomona Public Library Foundation

*** Full Address**

*** Contact Person**

Bree Hsieh

*** Contact Person Phone Number**

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

*** Total Funding Requested by Organization**

\$4,000

*** 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.**

No

Total Funding Requested by Councilmember(s)

Tim Sandoval

*** 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 2024 Mayor's Gala

*** 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 for a sponsorship, purchasing a table at the gala. Funds above meal cost will go to improving the Pomona Public Library through Pomona Public Library Foundation Projects

*** 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 improvements of facility and resources, such as patio improvements, conference room improvements, technology improvements, etc, will benefit all patrons of the Pomona Public Library (Door count 2023 was 51,000 people)

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: 6/3/24

Mayor/ Councilmember Approval:  _____

Date: 5/14/24

City of Pomona - Donations and Finding of Public Benefit

*** Name of Organization**

Victory Outreach Pomona

*** Full Address**

*** Contact Person**

Monica Patron

*** Contact Person Phone Number**

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

*** Total Funding Requested by Organization**

3,000

*** 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.**

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)**

Community Concert May 26th @ 6:00PM

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

Community Concert

*** 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.)**

Family even with positive message for young people to be empowered for positive change.

*** 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)**

Guest Singer/Performer Honorarium Sound Equipment Rental

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