

## REQUEST FORM

CITY OF POMONA  
DONATION/PAYMENT AND FINDING OF PUBLIC BENEFITCouncilmember making Request: Cristina CarrizosaName of Group/Organization or Individual: Washington Park Community CenterAddress: 505 S. Garey Avenue, Pomona, CA 91767Telephone Number: (909) 620-2305Tax ID of Group/Organization or Individual receiving payment: 95-60000764  
(Tax ID number required prior to issuance of donation.)Registered 501(c)(3): ☐ YES ☒ NOTOTAL FUNDING REQUESTED BY ORGANIZATION: NATOTAL FUNDING REQUESTED BY COUNCILMEMBER: \$600

(Any additional funding by Councilmembers must be made within 30 days of the City Council making the finding of public benefit.)

How will the Donation/Sponsorship 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 support activities for senior citizens for the month of May,  
including Cinco de Mayo and Mother's Day.

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

Senior citizen activities and programming for Pomona residentsRequest Received by Administration Offices on (attach request if available): 3/28/17I, Mayor/Councilmember Cristina Carrizosa, District No. 3, hereby requests that the above donation/payment be made and that a finding of public benefit be determined by the City Council.Cristina N. Carrizosa  
Mayor/Councilmember

## REQUEST FORM

CITY OF POMONA  
DONATION/PAYMENT AND FINDING OF PUBLIC BENEFITCouncilmember making Request: Cristina CarrizosaName of Group/Organization or Individual: City of Pomona Community ServicesAddress: 505 S. Garey Avenue, Pomona, CA 91767Telephone Number: (909) 620-2305Tax ID of Group/Organization or Individual receiving payment: 95-60000764  
(Tax ID number required prior to issuance of donation.)Registered 501(c)(3): ☐ YES ☒ NOTOTAL FUNDING REQUESTED BY ORGANIZATION: NATOTAL FUNDING REQUESTED BY COUNCILMEMBER: \$600

(Any additional funding by Councilmembers must be made within 30 days of the City Council making the finding of public benefit.)

**How will the Donation/Sponsorship used?** (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)In support of the Summer Movie Program at Washington Park Community Center,  
Philadelphia Park Community Center, and Renacimiento Community Center  
(\$200 each center).**What is the benefit to the City of Pomona?** (An expenditure of public funds must be for the primary benefit of the public agency that is making the expenditure.)To support summer family programs at City community centers  
  
  
Request Received by Administration Offices on (attach request if available): 3/28/17I, Mayor/Councilmember Cristina Carrizosa, District No. 3, hereby requests that the above donation/payment be made and that a finding of public benefit be determined by the City Council.Cristina N. Carrizosa  
Mayor/Councilmember

## REQUEST FORM

CITY OF POMONA  
DONATION/PAYMENT AND FINDING OF PUBLIC BENEFITCouncilmember making Request: Cristina CarrizosaName of Group/Organization or Individual: Renacimiento Community CenterAddress: 505 S. Garey Avenue, Pomona, CA 91767Telephone Number: (909) 620-2305Tax ID of Group/Organization or Individual receiving payment: 95-60000764  
(Tax ID number required prior to issuance of donation.)Registered 501(c)(3): ☐ YES ☒ NOTOTAL FUNDING REQUESTED BY ORGANIZATION: TBDTOTAL FUNDING REQUESTED BY COUNCILMEMBER: TBD

(Any additional funding by Councilmembers must be made within 30 days of the City Council making the finding of public benefit.)

**How will the Donation/Sponsorship used?** (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)In support of educational and recreational activities at the community center.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**What is the benefit to the City of Pomona?** (An expenditure of public funds must be for the primary benefit of the public agency that is making the expenditure.)To help provide more City sponsored educational and recreational opportunities for the  
community.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Request Received by Administration Offices on (attach request if available): 3/28/17I, Mayor/Councilmember Cristina Carrizosa, District No. 3, hereby requests that the above donation/payment be made and that a finding of public benefit be determined by the City Council.Cristina N. Carrizosa  
Mayor/Councilmember

**TO BE COMPLETED BY CITY STAFF**

**FINDING OF PUBLIC BENEFIT MADE BY CITY COUNCIL AT COUNCIL MEETING  
DATE OF:**

2/27/17 - Decker Elementary School PTA

**Additional contributions by Council members:**

*Paul F. Hengily* Date: 3/2/17 Amount: \$100  
Councilmember Approval

*Edmar Pineda* Date: 2/27/17 Amount: \$100  
Councilmember Approval

*Cristina N. Carrizosa* Date: 2/28/17 Amount: \$100  
Councilmember Approval

*J.S.S.* Date: 3/7/17 Amount: \$500  
Councilmember Approval

\_\_\_\_\_ Date: \_\_\_\_\_ Amount: \_\_\_\_\_  
Councilmember Approval

\_\_\_\_\_ Date: \_\_\_\_\_ Amount: \_\_\_\_\_  
Councilmember Approval

**TO BE COMPLETED BY CITY STAFF**

**FINDING OF PUBLIC BENEFIT MADE BY CITY COUNCIL AT COUNCIL MEETING  
DATE OF:**

2/27/17 - Kennedy Austin Foundation

**Additional contributions by Council members:**

*Paul F. Gonzales*

Date: 3/2/17

Amount: \$100

Councilmember Approval

*Edmundo Pineda*

Date: 2/27/17

Amount: \$100

Councilmember Approval

*Cristina N. Carrizosa*

Date: 2/28/17

Amount: \$200

Councilmember Approval

Date: \_\_\_\_\_

Amount: \_\_\_\_\_

Councilmember Approval

Date: \_\_\_\_\_

Amount: \_\_\_\_\_

Councilmember Approval

Date: \_\_\_\_\_

Amount: \_\_\_\_\_

Councilmember Approval

**TO BE COMPLETED BY CITY STAFF**

**FINDING OF PUBLIC BENEFIT MADE BY CITY COUNCIL AT COUNCIL MEETING  
DATE OF:**

2/27/17 - Pomona Catholic School

**Additional contributions by Council members:**

Paul F. Gonzales Date: 3/2/17 Amount: \$350  
Councilmember Approval

Edmar Pineda Date: 2/27/17 Amount: \$150  
Councilmember Approval

Cristina N. Carrizosa Date: 2/28/17 Amount: \$100  
Councilmember Approval

\_\_\_\_\_ Date: \_\_\_\_\_ Amount: \_\_\_\_\_  
Councilmember Approval

\_\_\_\_\_ Date: \_\_\_\_\_ Amount: \_\_\_\_\_  
Councilmember Approval

\_\_\_\_\_ Date: \_\_\_\_\_ Amount: \_\_\_\_\_  
Councilmember Approval