

REQUEST RECEIVED BY
BY ADMINISTRATION ON 6/25/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUESTName of Organization: NAACP Pomona Valley Branch #1085BStreet/Mailing Address: Village Indian Hill 1460 E. Holt Ave. #142, Pomona, CA 91767Daytime Phone Number: (909) 764-7833Is Organization Registered as a 501(c): ☒ YES ☐ NOTax ID of Group or Individual receiving payment: 47-2130384

(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: \$1,225.00TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): \$150IS USE OF THE CITY SEAL BEING REQUESTED? ☐ YES ☒ NO

(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)

PROMOTION OF EVENT ON ELECTRONIC READERBOARD: ☐ YES ☒ NO

How will the Donation/Sponsorship used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)

Funds associated with Poor People Campaign Event on 6/23/18.2-Porta Potties 1 of Handicap and 2 sinks. \$698.00 - City Insurance \$207.00 andCity equipments - 150 Chairs- 12-Table - PA system & electricity - \$320.00-total \$1,225.00

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.)

Poor Peoples Campaign, will provide various resource booths demonstrating love
and acts of kindness to our community.I, Mayor/Councilmember Cristina Carrizosa, 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: 101-1302-52103-00000Council Meeting Date: 7/16/18Cristina N. Carrizosa
Mayor/Councilmember ApprovalDate: 6/25/18



CITY OF POMONA - COMMUNITY SERVICES

INVOICE

Name of Event: Poor Peoples Campaign Pomona Valley
Contact: Jeanette Ellis Royston, President NAACP Branch #1085B
Date: Saturday, June 23, 2018
Time: 11:00 a.m. - 3:00 p.m.
Location: Civic Center Plaza

Remit Payment to:
City of Pomona
P.O. Box 660
Pomona, CA 91769
Tel. (909) 620-2321
Fax (909) 624-8752

Staff	Qty	Rate	Unit	Units	Total
Part-Time Custodian	1	\$ 15.00	hour	4	\$ 60.00
Total Labor:					\$ 60.00

*In the event a full-time employee incurs overtime hours for special events,
actual time and one-half wages (1.5) will be billed to the applicant.

Equipment	Cost	Unit	Qty	Total
Folding Chairs	\$ 1.00	each	150	\$ 150.00
Folding Tables	\$ 5.00	each	14	\$ 70.00
Portable Audio System	\$ 50.00	each	1	\$ 50.00
Electricity	\$ 10.00		1	\$ 10.00
Total Equipment:				\$ 280.00
Total Event Cost:				\$ 340.00

CITY OF POMONA
DEPARTMENT
POMONA, CALIFORNIA

CASH
RECEIPT

Date

4/18/18

106135

Received From

NASOP Pomona Valley

Address

Dollars \$

207.00

For

Event June 23, 2018

Insurance CN#241

ACCOUNT			HOW PAID		
AMT. OF ACCOUNT	207.00		CASH		
AMT. PAID	207.00		CHECK	1163	✓
BALANCE DUE	0		MONEY ORDER <input type="checkbox"/>		
			CREDIT CARD <input type="checkbox"/>		

By

SG

REQUEST RECEIVED BY
BY ADMINISTRATION ON 6/27/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUEST

Name of Organization: Pomona Public Library Foundation
 Street/Mailing Address: 101 W. Mission Blvd., Ste. 110-219, Pomona, CA 91766
 Daytime Phone Number: 909-576-5795
 Is Organization Registered as a 501(c): ☒ YES ☐ NO
 Tax ID of Group or Individual receiving payment: 20-0991292

(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: \$450TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): \$450

IS USE OF THE CITY SEAL BEING REQUESTED? ☐ YES ☒ NO
 (Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)

PROMOTION OF EVENT ON ELECTRONIC READERBOARD: ☐ YES ☒ NO

How will the Donation/Sponsorship used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)


\$450 to cover the cost of a table at the Mayor's Gala (previously approved on June 4, 2018)

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.)

Funds will support the Pomona Public Library.

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: 101-1302-52107-00000Council Meeting Date: 7/16/18


 Mayor/Councilmember Approval

Date: 6/27/18

REQUEST RECEIVED BY
BY ADMINISTRATION ON 6/21/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUEST

Name of Organization: Juneteenth Education Technology Mobile Arts Center, Inc.
Street/Mailing Address: 10808 E. Foothill Blvd., Ste. 160-868, Rancho Cucamonga, 91730
Daytime Phone Number: (909) 418-8530
Is Organization Registered as a 501(c): ☒ YES ☐ NO
Tax ID of Group or Individual receiving payment: 83-0442614

(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: \$3,000

TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): TBD

IS USE OF THE CITY SEAL BEING REQUESTED? ☒ YES ☐ NO
(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)

PROMOTION OF EVENT ON ELECTRONIC READERBOARD: ☐ YES ☒ NO

How will the Donation/Sponsorship used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)

Expenses for the 2018 Juneteenth VIP Reception & Flag Raising: community center
fees, event insurance, food and drinks, sound system, decoration, social media,
advertising, stipends for volunteers, temporary flag pole, graphics artwork and
printing.

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.)

A national and local cultural diversity event, unites the community, celebrates
freedom and the Emancipation Proclamation, provides health education for ethnic
communities.

I, Mayor/Councilmember E. 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: 7/16/18

E. Ontiveros-Cole
Mayor/Councilmember Approval

Date: 6/28/18



CITY OF POMONA, COMMUNITY SERVICES DEPARTMENT

FACILITIES USE PERMIT

505 S. GAREY AVE, POMONA, CA 91769, (909) 620-2321, Fax: (909) 624-8752

Permit No: 5933
Issued: 5/23/2018
By: CC☐ ChangedFacility: Ganesha Community CenterEvent: Juneteenth Celebration

Event Date(s)

Saturday, June 16, 2018

Electricity: ☐ Bounce: ☐Number Attending: 100Setup/Decorating: 8:00 AM to Security Time: to Event: 9:00 AM to 1:00 PMClean Up Ends: 2:00 PMSpecial Arrangements/ List Dates/Notes: Flag Presentation 10:00am - 11:00am
Reception to follow inside Ganesha Community Center 11:00-1:00
Setup pending
Per Roberto

APPLICANT INFORMATION

Full Name: Trudy ColemanOrganization: JuneteenthAddress: 10808 Foothill Blvd. Ste. 160-868Address: City, ZIP: Rancho Cucamonga 91730City, ZIP: Phone: 909-418-8530 Alt Phone: **F
E
E
S**

ITEM	QTY	PRICE	TOTAL
Refundable Deposit		\$250.00	\$250.00
Pavilion	<u>0</u>	\$0.00	\$0.00
Electricity	<u>0</u>	\$0.00	\$0.00
Community Center:	First Hour	\$50.00	\$50.00
Additional Hours	<u>4</u> hours	\$50.00 /hour	\$200.00
	First <u>0</u> Hour(s)	\$0.00	\$0.00
Additional Hours	<u>0</u> hours	\$0.00 /hour	\$0.00
Insurance		\$81.00	\$81.00
Custodial Fees	<u>1</u> hours	\$30.00 /hour	\$30.00
Security <u>0</u> guards	<u>0</u> hours	\$0.00 /hour	\$0.00
TOTAL:			\$611.00

Non-Emergency Line:
(909) 622-1241

PAYMENT

Date: 6/7/2018Amount: \$611.00Receipt No 106166Emp: lgBalance 0Date: Amount: Receipt No Emp: Balance

CITY OF POMONA HOLD HARMLESS AGREE

The undersigned applicant agrees to and shall indemnify, defend and hold harmless the City of Pomona, its agents, officers, elected and appointed officials, employees, and volunteers against any legal proceeding in law or equity, and further shall indemnify, defend and hold harmless the City of Pomona and its agents, officers elected and appointed officials, employees, and volunteers from and against any and all claims, liabilities, demands, suits, judgments, expenses, costs and other legal expenses of every kind to which the City may be subject by reason of any act or omission, whether intentional or negligent, or from strict liability, arising from the conduct of any participant, invitee, attendee, sponsor or any third person who is or is not an invitee, attendee, participant, or sponsor of the event.

I certify that I have read and will abide by the accompanying rules and regulations and understand that NO ALCOHOL is permitted.

APPLICANT SIGNATURE

EMPLOYEE SIGNATURE

DATE

DATE

I have been notified to
obtain liability insurance at
least two (2) weeks before
my
event**NO ALCOHOL PERMITTED AT ANY CITY FACILITY**

REQUEST RECEIVED BY
BY ADMINISTRATION ON 6/22/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUEST

Name of Organization: Pomona Catholic School

Street/Mailing Address: 533 W. Holt Ave., Pomona, CA 91768

Daytime Phone Number: (909) 967-2490

Is Organization Registered as a 501(c): ☒ YES ☐ NO

Tax ID of Group or Individual receiving payment: 95-1759179

(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: \$1,000

TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): TBD

IS USE OF THE CITY SEAL BEING REQUESTED? ☒ YES ☐ NO
(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)

PROMOTION OF EVENT ON ELECTRONIC READERBOARD: ☒ YES ☐ NO

How will the Donation/Sponsorship used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)

This is a request for a donation to benefit our students at Pomona Catholic School.

The funds go directly to the Academic Scholarship Program for inner city youths who can't afford to attend PC HS/MS. We offer excellence in private education for all students. The funds assist students who deserve but cannot afford to attend PC.

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.)

Support for this event from the City of Pomona means support for all Pomona students' futures and education.

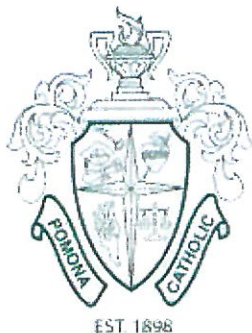
I, Mayor/Councilmember E. Ontiveros-Cole, District No. 4, hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.

Account Number: 101-1302-52104-00000

Council Meeting Date: 7/16/18

E. Ontiveros-Cole
Mayor/Councilmember Approval

Date: 6/28/18



Faith ~ Scholarship ~ Tradition ~ Empowerment

July 20, 2018

Dear City of Pomona Mayor Tim Sandoval & Councilmembers,

This is a request for a donation to benefit our students at Pomona Catholic School. We will be hosting our **20th Annual Casino Night on September 29, 2018**. This event is well attended with over 500 guest and affords great exposure. We would be honored if you can join us.

WILL YOU JOIN OUR CAUSE?

Your donation will greatly benefit our Academic Scholarship Program and will give you added publicity as well. Please refer to the sponsor business opportunity form. We ask that you consider donating. With your donation, we will gladly add your City Logo to our event program.

On behalf of our students, parents, faculty and staff, we thank you for your consideration. We look forward to your positive response. Arrangements can be made for donations to be picked up by calling Sally (909) 967.2490~volunteer parent.

For tax purposes, the school states that you have received no goods or services in exchange for this donation. **Our tax I.D. is 95-1759179.**

Thank you in advance for your generous support.

Sincerely,

Mr. Samuel Torres
Principal

POMONA CATHOLIC SCHOOL • 533 WEST HOLT AVE. • POMONA, CA 91768
909.623.0352
WWW.POMONACATHOLIC.ORG

REQUEST RECEIVED BY
BY ADMINISTRATION ON 6/28/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUESTName of Organization: Victory Outreach Pomona ValleyStreet/Mailing Address: 177 W. Monterey Ave. Pomona, Ca 91768Daytime Phone Number: 909-865-0373Is Organization Registered as a 501(c): ☒ YES ☐ NOTax ID of Group or Individual receiving payment: 95-4146308


(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: \$1,000TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): TBDIS USE OF THE CITY SEAL BEING REQUESTED? ☐ YES ☒ NO
(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)PROMOTION OF EVENT ON ELECTRONIC READERBOARD: ☒ YES ☐ NO

How will the Donation/Sponsorship used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)

Your contribution would afford Victory Outreach Pomona Valley the opportunity to
expand its free programming that serves the betterment of children and families and
invest greater resources into new programs offered to children. Additionally, it would
purchase additional supplies from Pomona Stores.

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.)

Our community has a lack of summer activities available to serve families. We intend
to continue being apart of the solution to the City of Pomona desire to improve
quality of life, in sponsoring our annual, I love Pomona Festival.I, Mayor/Councilmember Rubio Gonzalez, District No. 1, hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.Account Number: 101-1302-52101-00000Council Meeting Date: 7/16/18
Mayor/Councilmember ApprovalDate: 6/28/18

REQUEST RECEIVED BY
BY ADMINISTRATION ON 7/2/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUESTName of Organization: Support Kids in Progress, Inc.Street/Mailing Address: 12626 Philadelphia St., Whittier, CA 90601Daytime Phone Number: (909) 561-5305Is Organization Registered as a 501(c): ☒ YES ☐ NOTax ID of Group or Individual receiving payment: 46-4695886

(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: \$950TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): \$950IS USE OF THE CITY SEAL BEING REQUESTED? ☐ YES ☒ NO
(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)PROMOTION OF EVENT ON ELECTRONIC READERBOARD: ☐ YES ☒ NO

How will the Donation/Sponsorship used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)

Funds will support their "Salute to Welcome Home Vietnam Veterans and all
Veterans from Pomona Valley" event.

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.)

The event's goal is to acknowledge U.S. veterans and help prevent suicide through-
out Pomona Valley. Their mission is to support U.S. Military veterans and families
transitioning back into society,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: 101-1302-52107-00000Council Meeting Date: 7/16/18
Mayor/Councilmember ApprovalDate: 7/2/18

REQUEST RECEIVED BY
BY ADMINISTRATION ON 7/3/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUESTName of Organization: National Council of Negro WomenStreet/Mailing Address: 601 W. McKinley Ave.Daytime Phone Number: (909) 622-6550Is Organization Registered as a 501(c): ☒ YES ☐ NOTax ID of Group or Individual receiving payment: 51-0456873

(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: TBDTOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): TBDIS USE OF THE CITY SEAL BEING REQUESTED? ☐ YES ☒ NO

(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)

PROMOTION OF EVENT ON ELECTRONIC READERBOARD: ☐ YES ☒ NO

How will the Donation/Sponsorship used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)

Funds will support their annual Bethune-Height Recognition Luncheon.

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.)

NCNW's mission is to lead, empower and advocate for women and their families and communities. They provide community-based health, education and economic empowerment services and programs throughout the Pomona valley, and communities national wide.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: 101-1302-52107-00000Council Meeting Date: 7/16/18
Mayor/Councilmember ApprovalDate: 7/3/18



Mary McLeod Bethune
Founder
(1875 - 1955)

Dr. Dorothy I. Height
Chair and President Emerita
(1912 - 2010)

Ingrid Saunders Jones
National Chair

Janice L. Mathis
Executive Director

Dr. Helena Johnson
SoCal Area President

SoCal Area Section Presidents

Athens Westmont Section
Yolanda Lathern

Bethune Section
Diane Henry

Compton Section
Susan Adams

High Desert Section
Diana Prioleau

Inland Empire Section
Milele Robertson

LA Life Members Guild
Octavia T. Scott

Long Beach Section
Charlene Fontenot

Los Angeles Section
Bertha Carter

Moreno Valley
Life Member Guild
Lois Stewart

Orange County Section
Dr. DeVera Heard

Pomona Valley Section
Mona Sparks Johnson

San Diego Section
Pamela Hendrickson

San Gabriel Valley Section
Brenda Anderson

View Park Section
Carmen Taylor Jones

May 29, 2018

Mayor Tim Sandoval
City of Pomona
P.O. Box 660
Pomona, CA 91769

Dear Mayor Sandoval:

On Saturday, September 22, 2018 The Southern California Area National Council of Negro Women (NCNW) will host our Annual **Bethune-Height Recognition Luncheon**. We invite you to be a part of this important fundraising event!

Attracting more than 400 NCNW members from all over Southern California, local business leaders, community organizations and elected officials, this luncheon is not to be missed. Each year we honor the work and the legacy of Mary McLeod Bethune, founder of NCNW and recognize women in our local communities who make a difference in the lives of others.

NCNW's mission is to lead, empower and advocate for nearly four million women, their families and communities. We fulfill our mission through national and community-based health, education and economic empowerment services and programs undertaken by our area sections and affiliate volunteers in 31 states. NCNW addresses local needs while impacting communities nationwide.

Will you and the City of Pomona help us to continue this important work? Please find enclosed a list of sponsorship opportunities for your consideration. On behalf of the local members of NCNW and the communities we serve, we sincerely hope you will join us for the 2018 **Bethune-Height Recognition Luncheon**.

Please feel free to call either of us at the numbers listed below or email BethuneHeight@gmail.com if you are interested in participating or have any questions about NCNW or the event.

Thank you for your consideration!

Best regards,



Mona Sparks Johnson
Luncheon Chair
President, Pomona Valley Section NCNW
(909) 938-8892



Linda Ursery-Fleming
Luncheon Committee Member
Life Member, Inland Empire Section NCNW
(909) 622-6550

Fortified by the Past Focused on the Future

Southern California Area National Council of Negro Women ~ 3720 W. 54th Street ~ Los Angeles, California 90043

REQUEST RECEIVED BY
BY ADMINISTRATION ON 6/11/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUEST

Name of Organization: Richard D. Davis Foundation for the Developmentally Disabled, Inc.

Street/Mailing Address: 75 Rancho Camino Drive, Pomona, CA 91766

Daytime Phone Number: 909-706-3575

Is Organization Registered as a 501(c): ☒ YES ☐ NO

Tax ID of Group or Individual receiving payment: Federal Tax ID # 93-0977399
(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: TBD

TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): _____

IS USE OF THE CITY SEAL BEING REQUESTED? ☐ YES ☒ NO
(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)

How will the Donation/Sponsorship used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)

This will be used as raffle prizes during the 4th Annual Back to School Readiness Festival on July 28th
in the city of Pomona. The event is an outreach effort for low income families who have one or more child
in the home with a developmentally disabled. The children invited to this event will receive a free breakfast,
backpack filled with school supplies, entertainment, ice cream and a whole bunch more. Invitation only event.

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.)

These items would go directly to families that are being served by the San Gabriel/Pomona Regional Center that
are invited to attend this event. Our case managers will identify and invite low income families with school age children.
This event is a community outreach effort to provide them with assistance in a dignified and respectful manner where
children don't feel like they are getting a handout. This event allows for families to spend the day together with other families in similar situations.

I, Mayor/Councilmember Rubio Gonzalez, District No. 1, hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.

Account Number: 001-1302-52101-00000

Council Meeting Date: 7/2/18

Mayor/Councilmember Approval

Date: 6/12/18

REQUEST RECEIVED BY
BY ADMINISTRATION ON 6/14/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUEST

Name of Organization: Claremont Symphony Orchestra

Street/Mailing Address: PO Box 698, Claremont, CA 91711

Daytime Phone Number: (909) 596-5979

Is Organization Registered as a 501(c): ☒ YES ☐ NO

Tax ID of Group or Individual receiving payment: 95-6102159

(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: \$787.50

TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): TBD

IS USE OF THE CITY SEAL BEING REQUESTED? ☐ YES ☒ NO
(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)

PROMOTION OF EVENT ON ELECTRONIC READERBOARD: ☐ YES ☒ NO

How will the Donation/Sponsorship used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)

Since 2013, the CSO has performed each summer in Ganesha Park. We produce a concert for families and senior citizens and provide a musical instrument "petting zoo" for children. This year's theme is "Favorites from Broadway and Hollywood." We request reimbursement for using the park.

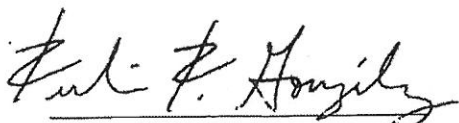
What is the benefit to the City of Pomona? (An expenditure of public funds must be for the primary benefit of the public agency that is making the expenditure.)

The goal is to provide a free park concert and draw 400-500 people from Pomona and other communities to the Selby Bandshell and Ganesha Park.

I, Mayor/Councilmember Rubio Gonzalez, District No. 1, 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: 7/2/18


Mayor/Councilmember Approval

Date: 6/15/18

REQUEST RECEIVED BY
BY ADMINISTRATION ON 6/18/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUESTName of Organization: Celebrating a VisionStreet/Mailing Address: PO Box 415, Pomona CA 91769Daytime Phone Number: 909-896-9041Is Organization Registered as a 501(c): ☒ YES ☐ NOTax ID of Group or Individual receiving payment: 82-2550378

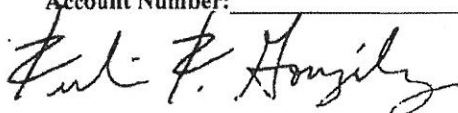
(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: \$1,000TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): TBDIS USE OF THE CITY SEAL BEING REQUESTED? ☐ YES ☒ NO
(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)PROMOTION OF EVENT ON ELECTRONIC READERBOARD: ☐ YES ☒ NO

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 donation will be used to provide random acts of kindness for cancer survivors.We need funding for wigs, groceries, gift certificates, etc.

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.)

The benefit to the City is the increased individual resident morale for those who are selected to receive the random acts of kindness.I, Mayor/Councilmember Rubio Gonzalez, District No. 1, hereby request that the above donation/payment be made and that a finding of public benefit be determined by the City Council.Account Number: 101-1302-52101-00000Council Meeting Date: 7/2/18

Mayor/Councilmember Approval

Date: 6/19/18

REQUEST RECEIVED BY
BY ADMINISTRATION ON 5/23/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUEST

Name of Organization: American Legion Post 30 Pomona

Street/Mailing Address: 239 E. Holt Ave., Pomona, CA 91767

Daytime Phone Number: (909) 973-0463

Is Organization Registered as a 501(c): ☒ YES ☐ NO

Tax ID of Group or Individual receiving payment: 95-1159443

(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: TBD

TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): TBD

IS USE OF THE CITY SEAL BEING REQUESTED? ☐ YES ☒ NO

(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)

How will the Donation/Sponsorship 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 help defray costs incurred from the various community events
that Pomona veterans participate in.

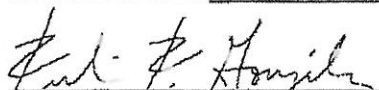
What is the benefit to the City of Pomona? (An expenditure of public funds must be for the primary benefit of the public agency that is making the expenditure.)

The benefit to the City is having actual war veteran representing Pomona at these various
community events. Post 30 helps all veterans who need any type of support.

I, Mayor/Councilmember Rubio Gonzalez, District No. 1, 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: 6/18/18


Mayor/Councilmember Approval

Date: 5/23/18

REQUEST RECEIVED BY
BY ADMINISTRATION ON 5/30/18

CITY OF POMONA

DONATION AND FINDING OF PUBLIC BENEFIT REQUEST

Name of Organization: U.S.A. Fit Force Taekwondo, Inc.

Street/Mailing Address: 1460 E. Holt Ave. Rm.15, C/O Suite 14, Pomona CA 91767

Daytime Phone Number: (909) 979-7473

Is Organization Registered as a 501(c): ☒ YES ☐ NO

Tax ID of Group or Individual receiving payment: 27-3092667

(Tax ID number is required prior to issuance of donation.)

TOTAL FUNDING REQUESTED BY ORGANIZATION: 450.00

TOTAL FUNDING REQUESTED BY COUNCILMEMBER(S): _____

IS USE OF THE CITY SEAL BEING REQUESTED? ☒ YES ☐ NO

(Limited to print on informational material related to specific event. No commercial use of City Seal Permitted.)

How will the Donation/Sponsorship used? (The donation must primarily serve a public purpose, as opposed to solely benefiting an individual or private organization.)

Our event will offer encouragement of children to lead healthy, active lives, by performing interactive family friendly exercises, play with hula hoops, jump ropes, jump on trampolines, we'll have a ring toss and bean bag toss, potato sack races, body bumpers, over sized boxing gloves, a torch relay race and other family friendly games including a Dunk Tank.

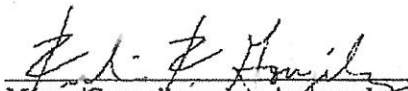
What is the benefit to the City of Pomona? (An expenditure of public funds must be for the primary benefit of the public agency that is making the expenditure.)

Our programs assists children's preparation for the future with, increased discipline and weight control through aerobic physical activity which is a fun and challenging way that increases muscle and bone strength. Many children have cultural-related health and behavioral risks including: obesity, diabetes, hypertension, cardiovascular disease, depression, alcohol and drug usage tendencies, TKD benefits our athlete's & families by aiding them in their preparation for the future with physical activity and self discipline.

I, Mayor/Councilmember Rubio Gonzalez, District No. 1, 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: 6/18/18


Mayor/Councilmember Approval

Date: 5/30/18

TO BE COMPLETED BY CITY STAFF**FINDING OF PUBLIC BENEFIT MADE BY CITY COUNCIL AT THE COUNCIL MEETING DATE OF:**6/4/18 - Pomona Public Library Foundation
_____**Additional contributions by Council members:**

_____ Date: _____ Amount: _____
D-1 Councilmember Approval

Juan Carlos Date: 6/5/18 Amount: \$375

D-2 Councilmember Approval

Cristina N. Carrizosa Date: 6/5/18 Amount: \$300

D-3 Councilmember Approval

Elizabeth Ontiveros-Cole Date: 6/4/18 Amount: \$500

D-4 Councilmember Approval

J.S.S. Date: 6/4/18 Amount: \$375

D-5 Councilmember Approval

R.L. Date: 6/4/18 Amount: \$500

D-6 Councilmember Approval

_____ Date: _____ Amount: _____

Mayor's Approval