#### DocuSign Envelope ID: 1AF4CA98-A489-4502-B004-8E4160DA21DA Neignbornood Council Funding Program

## **APPLICATION for Neighborhood Purposes Grant (NPG)**



This form is to be completed by the applicant seeking the Neighborhood Purposes Grant and submitted to the Neighborhood Council from whom the grant is being sought. All applications for grants must be reviewed and approved in a public meeting. Upon approval of the application the Neighborhood Council (NC) shall submit the application along with all required documentation to the Office of the City Clerk, NC Funding Program.

# Name of NC from which you are seeking this grant: Sherman Oaks NC

4 - 1	Los Angeles Responsible Pit Bull Owners	46-2563118	CA	09/22/14
1a)	Organization Name	Federal I.D. # (EIN#)	State of Incorporation	Date of 501(c)(3) Status (if applicable
1b)	6320 Canoga Avenue, #1700	Woodland Hil	lls CA	91367
	Organization Mailing Address	City	State	Zip Code
1c)				
	Business Address (If different)	City	State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:			
		210 202 0070	sammi@	
	Sammi Maon	310-382-0079	Samme	LARPBO.org
	Sammi Maon Name	310-382-0079 Phone	Email	LARFDO.019
2)	Name Type of Organization- Please select one:	<i>Phone</i> or ■ 501(c)(3) Non-F		

4) Please describe the purpose and intent of the grant.

Industrial dishwasher for East Valley Animal Shelter

5) How will this grant be used to primarily support or serve a public purpose and benefit the public at-large. (Grants cannot be used as rewards or prizes for individuals)

### **SECTION III - PROJECT BUDGET OUTLINE**

You n	nay also provide the Budget Outline on a separate sheet if necessary	or requested.	
6a)	Personnel Related Expenses	Requested of NC	Total Projected Cost
		\$	\$
		\$	\$
		\$	\$
6b)	Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
6b)	Non-Personnel Related Expenses Industrial dishwasher	Requested of NC \$4000	Total Projected Cost           \$4000
6b)		•	

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?

8) Is the implementation of this specific program or purpose described in Question 4 contingent on any other factors or sources or funding? (Including NPG applications to other NCs) 🖬 No 🛄 Yes 👘 If Yes, please describe:

ources or running? (including NPG applications to other NCS) - No		please describe.
Source of Funding	Amount	Total Projected Cost
	\$	\$
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application:  $\$^{4,000.00}$ 

10a) S	start date: 03	<u>01 (</u>	<u>,19</u>	10b) Date Fi	unds Required:	04 _01	/ <u>19</u> _1	0c) Expected	Completion D	ate: <u>03</u>	<u>,31 /</u>	20
(	After comple	tion of	the pr	oject, the ap	plicant should	submit a P	roject	<b>Completion Re</b>	eport to the N	eighborh	ood Cc	ouncil

### SECTION IV - POTENTIAL CONFLICTS OF INTEREST

11a) Do you (applicant) have a current or former relationship with a Board Member of the NC?

🗖 No	🛛 Yes	If Yes, please describe be	ow:
Name	e of NC Board Me	mber	Relationship to Applicant

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application?
□ Yes □ No <u>\*(Please note that if a Board Member of the NC has a conflict of interest and completes this form, or participates in the discussion and voting of this NPG, the NC Funding Program will deny the payment of this grant in its entirety.)</u>

**SECTION V - DECLARATION AND SIGNATURE** 

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read the documents "What is a Public Benefit," and "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of Non-Profit Corporation or School Principal - REQUIRED\*

Troy Smith	President	1 11-	2/5/2019
PRINT Name	Title	D5D6F0CB2C9B4C1 Signature	Date
12b) Secretary of Non-profit Corpor	ation or Assistant Scho	ol Principal - REQUIRED*	
		Docusigned by.	
Sammi Maon	Secretary	Sammi Maon	2/5/2019

\* If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or <u>clerk.ncfunding@lacity.org</u> for instructions on completing this form