Neighborhood 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.

Tarzana Neighborhood Council

udiii (or to from which you are seeking this grant:		<u> </u>						
SEC	TION I- APPLICANT INFORMATION								
12)	POP/West ValleyFood Pantr	95-334998{	California	01/23/85					
14)	Organization Name	Federal I.D. # (EIN#)	State of Incorporation	Date of 501(c)(3) Status (if applicable					
1b)	5700 Rudnick Ave	Woodland H	lills CA	91367					
	Organization Mailing Address	City	State	Zip Code					
1c)									
	Business Address (If different)	City	State	Zip Code					
1d)	PRIMARY CONTACT INFORMATION:								
Debbie Decker 818-346-6955 ExecDirector@westvalleyfoodpar									
	Name	Phone	Email						
2)	Type of Organization- Please select one: Public School (not to include private schools) Attach Signed letter on School Letterhead Or Attach IRS Determination Letter								
3)	Name / Address of Affiliated Organization (if applica	ble) City	State	Zip Code					
SEC	TION II - PROJECT DESCRIPTION								

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

The West Valley Food Pantry is a local non-profit coalition of churches and temples that banded together over 35 years ago to feeding the hungry in our community. It serves the west San Fernando Valley and has over 200 volunteers that purchase, pick up, take delivery of food stuffs, and also serve the clients daily. Our efforts are made possible by contributions of both food and money received from the local community and our coalition members. Because of COVID- 19, the Pantry currently feeds approximately 13,000 people a month due to the unpresidented need. Unfortunately, those numbers are increasing dramatically each week.

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)

The Neighborhood Council's additional funding will go directly toward purchasing food to feed the clients during the November and Deciember holiday season. Though we can't supply turkeys for all the families, with this grant we can supply many of them with the side dishes, such as stuffing, instant potatoes, canned vegetables, gavey mix and pie filling and mix. This will help brighten a hurting community.

Non-Personnel Related Expenses	ECT ou m	ION III - PROJECT BUDGET OUTLINE	a senarate sheet if neces	sary or request	ed		
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Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project? No Yes If Yes, please list names of NCs: Is the implementation of this specific program or purpose described in Question 4 contingent on any other fac sources or funding? (Including NPG applications to other NCs) No Yes If Yes, please describe: Source of Funding			cal grocery stores	CONTRACTOR OF STREET,		CONTRACTOR OF THE PROPERTY OF THE	2.454(2.455.16.255.255.7 <u>1</u> 2.
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Source of Funding Amount Total Projected Completion S							
What is the TOTAL amount of the grant funding requested with this application: S S S S S S S S S				Name and Police of the Party of			
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Name of NC Board Member Relationship to Applicant				a Board Memb	er of the NC	?	
Yes No *(Please note that if a Board Member of the NC has a conflict of interest and completes or participates in the discussion and voting of this NPG, the NC Funding Program will deny the paying grant in its entirety.) ECTION V - DECLARATION AND SIGNATURE Receive y affirm that, to the best of my knowledge, the information provided herein and communicated otherwind accurately stated. I further affirm that I have read the documents "What is a Public Benefit," and "Conflict of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria enefit project/program and that no conflict of interest exist that would prevent the awarding of the Neignposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am is application. I further affirm that if the grant received is not used in accordance with the terms of the ated here, said funds shall be returned immediately to the Neighborhood Council. 10/2 Executive Director of Non-Profit Corporation or School Principal - REQUIRED* Debbie Decker Exec. Director Market 10/2 10/2					Relationship to Applicant		
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Ann Gillinger Secretary Open Lillinger 10/2		PRINT Name	Title	, 0	Signature		Date
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* If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or clerk.ncfunding@lacity.org for instructions on completing this form