

Name of NC from which you are seeking this grant:

1a) Joint Matters, INC. 85-0937590 CA
Organization Name Federal I.D. # (EIN#) State of Incorporation Date of 501(c)(3)
Status (if applicable)

1b) 18520 Burbank Blvd. #103 Tarzana CA 91356
Organization Mailing Address City State Zip Code

1c)

<u>Business Address (if different)</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>
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Jon Mann 818-518-4697 Jon@Jointmatters.com
Name Phone Email

☐ Public School (not to include private schools)
Attach Signed letter on School Letterhead

or

☐ 501(c)(3) Non-Profit (other than religious institutions)
Attach IRS Determination Letter

Neither

3) Name / Address of Affiliated Organization (if applicable)	City	State	Zip Code

Purchase paint supplies and refreshments for volunteer artists who will be painting two DOT traffic control boxes.

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)

Art is in the community. These are in
a highly trafficked area. Flanking the West side
of Reseda Blvd freeway exit + onramp.
101 N onramp on left side + 101 S exit on right side.
They will help beautify our community + offer a
positive reflection to a person's day.

SECTION III - PROJECT BUDGET OUTLINE

You may also provide the Budget Outline on a separate sheet if necessary or requested.

6a) Personnel Related Expenses	Requested of NC	Total Projected Cost
Water, granola bars, sunscreen, safety vests	\$ 150	\$ 150
	\$	\$
	\$	\$

6b) Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Paints, tape, brushes, rollers, tarp	\$ 550	\$ 550
bucket, cleaner, scrubber	\$	\$
	\$	\$

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

☒ No

☐ Yes

If Yes, please list names of NCs: _____

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:

Source of Funding	Amount	Total Projected Cost
	\$	\$
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: \$ 700

10a) Start date: 09/01/25 10b) Date Funds Required: 09/01/25 10c) Expected Completion Date: 11/01/25
(After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)

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 below:

Name of NC Board Member	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

*(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.)

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*

Jon Mann
PRINT Name

CEO
Title

[Signature]
Signature

8/9/25
Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*

PRINT Name

Title

Signature

Date

* 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