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. The Neighborhood Council (NC), upon approval of the application, shall submit the approved application along with all required documentation to the Department of Neighborhood Empowerment.

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1	Name of NC from which you are seeking this grant:	000000000000000000000000000000000000000				
ECT	ION I- APPLICANT INFORMATION	l sa	t dishbal	and I don't	ardinamina ar es	
	Operation Blankets of Love	80-023	8786	California		3/25/2009 Date of 501(c)(3)
A 1	Organization Name	Feder	al I.D. # (EIN#)	State of I	ncorporation	Status (if applicable
	16911 San Fernando Mission, PMB 187	Grana	da Hills		CA	91344
1b)	Organization Mailing Address	City			State	Zip Code
1c)	Business Address (If different)	City			State	Zip Code
1d)	PRIMARY CONTACT INFORMATION: Elleen Smulson	(818)	sp2-65 8 6		obol@obol.info	
	Name	Phone	9		\$20.88.84038	
2)	Type of Organization- Please select one: □ Public School (not to include private schools) Attach Grant Request on School Lefterhe	or ad	501(c)(3) N Attach IRS	ion-Profit Determin	(other than relig	gious institutions)
3)	Name / Address of Affiliated Organization (If applicable)		Ci	ty	Stat	e Zip Code
SE	CTION II - PROJECT DESCRIPTION	711				

4) Please describe the purpose and intent of the grant.
The grant is for the printing of pleage envelopes (and thank you envelopes) that solicit donations of blankets and other critical pet items, such as food, towels, pet meds, etc. These items are for the shelters to improve the lives of the animals and increase their chances of being adopted.

Operation Blankets of Love (OBOL) is a unique 501(c)(3) animal welfare advocacy and emergency relief organization based in Los Angeles County. OBOL promotes grassroots efforts to alleviate animal neglect, cruelty and homelessness, by engaging individual community members and local businesses in collecting donated animal comfort and care items such as blankets, toys and premium pet food to improve quality of life for cats, dogs and other animals confined to overcrowded, under-funded shelters. This support, combined with OBOL's Humane Education, Pets of the Homeless outreach and Anti-Cruelty campaign, create greater community awareness about the plight of abused and neglected animals, while improving quality of life for thousands of homeless, vulnerable cats and dogs each year.

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)

OBOL's animal welfare outreach and direct services for animals in shelters has grown year after year, our organization's infrastructure has been stretched very thin.

As the number of animals served each year increases more than 20%, and with the expansion of OBOL's Homeless People's Pets Community Outreach Project and the increase of our Humane Education Learning Program to schools in the San Fernando Valley and the demands of the job have increased significantly.

OBOL's cash budget for overhead and basic operating expenses such as paid staffing, a new website, public outreach materials, volunteer recruitment and fundraising remains underfunded.

Pe	ersonnel Related Expenses		Requests		Total Projected Cost
N/	A				
april Contractive					
Nic	on-Personnel Related Expenses		Requests	-	Total Projected Cost \$250.00
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			4:297.00		
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500 VA	s the implementation of this specific pactors or sources or funding? (Include	program or purpose describing NPG applications to	cribed in boo	4 above co	ntingent on any other Yes, please describe
	Source of Funding		Amount		Total Projected Cost
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	What is the TOTAL amount of the gra	nt funding requested with	n this applic	ation:	\$250.0
		ate Funds Required:	8/15/2016	unca no	
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* If a current Board Member holds the position of Executive Director or Secretary, please contact the Department at (213) 978-1551 for instructions on completing this form

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, ON 45201

DEPARTMENT OF THE TRULE OF

DATE: MAR 2 5 2009

OPERATION BLASTETS OF LOVE C/O EILERN SMYLEON 11931 PASO BOBLES AVE GRANADA HILLS, CR 91344

Employer Identification Funber: V60-0334786 DLM: 17051344113004 Contact Persons COMMITTEE STATE OF THE STATE OF TD# 21307 Contact Telephone Number: (877) 829-5500 Accounting Period Rading: December 31 Public Charity Status: 170(b)(1)(A)(vi) Form 990 Required: Effective Date of Examption: October 39, 2008 Contribution Deductibility: Yea Addendam Applies: Mo

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are enempt from Pederal income tax under section 501(c)(1) of the Internal Reviews Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2512 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations except under section 101(c)(i) of the Code are further classified as either public charities or private foundations. We determined that you are letter.

Please see enclosed Publication appl-PC. Compliance duide for 511 (c) 127 Public Charities, for some helpful information about your responsibilities as an

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