



**Canoga Park Neighborhood Council (CPNC)
Via Zoom webinar CPNC General Board Meeting
When: May 26, 2021 07:00 PM Pacific Time (US and
Canada)**



Please click the link below to join the webinar:

<https://us02web.zoom.us/j/88212412355>

Or One tap mobile :

**US: +16699006833,,88212412355# or
+13462487799,,88212412355#**

Or Telephone:

**Dial(for higher quality, dial a number based on your
current location):**

**US: +1 669 900 6833 or +1 346 248 7799
Webinar ID: 882 1241 2355**

Executive Board

Mary Paterson

President

Community-Based Org. Rep
Public Safety & Prep. Chair
Outreach

Thema Bryant

Vice President

Racial Equity Officer
CIS

Helen Morales

Youth Group Rep
Youth Advocacy
Education

Leonel Fuentes

Treasurer

Retail/Service Rep.

Board of Directors

Michelle Miranda

Immediate Past President

Community-Based Org. Rep
Sergeant at Arms
Grievance

Ron Clary

Parliamentarian
Bylaws Chair

Senior Group Rep.
Senior Advocacy

Quincy Clemons

Retail/Service Rep.
Arts

Si requiere servicios de traducción, favor de avisar al Concejo Vecinal 3 días de trabajo (72 horas) antes del evento. Por favor contacte Mary, 818.606.8652. o por correo electrónico Helen Morales, Secretaria,

HelenMorales@CanogaParkNC.org para avisar al Concejo Vecinal.

The mission of the Canoga Park Neighborhood Council is to provide an innovative forum for all community stakeholders to contribute to a healthy, vibrant, and inclusive Canoga Park. The Neighborhood Council system enables meaningful civic participation and serves as a voice for improving government responsiveness to local communities and their needs. Please remember our code of conduct and maintain civility. Acknowledge that what the speaker is expressing is true for them and be respectful even when our opinions differ. We are an advisory body to the City of Los Angeles, comprised of stakeholder volunteers who are devoted to the mission of improving our community.

I. WELCOME / OPENING COMMENTS

- a. Call to Order
- b. Roll Call (A quorum of at least 13 members present is required to conduct official Board Business)

II. GUEST CONTROLLER RON GALPERIN

III. COMMUNITY/GOVERNMENT REPORTS & ANNOUNCEMENTS (3 minutes per speaker)

IV. ADMINISTRATIVE MOTIONS

- a. Approval of the Minutes of the Regular Meeting held on April 28, 2021 and
- b. Approval of MERs for December 2020, February, March and April 2021

V. EQUITY TRAINING - PART TWO: PROFESSOR MIGUEL GALLARDO

VI. FUNDING MOTIONS

- a. Discussion and/or possible action to approve up to \$5000.00 for Boys and Girls Club
- b. Discussion and/or possible action to approve up to \$5000.00 for Overdue for supplies and promotion for clean-up projects
- c. Discussion and/or possible action to approve up to



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Raymond Cole

*Residential Renters Rep.
Homeless Solutions*

Michael Davis

*Residential Renters Rep.
Outreach*

Kyra Edrington

*At-Large Rep.
Public Safety*

Elmer Garcia

*Schools Rep
Education
Youth*

Jessica Gonzalez

*Budget Rep
Outreach
At-Large Rep*

Daniel Griffith

Residential Renter's Rep

Nauman Khan

*Faith-Based Organization Rep.
Homeless Solutions II Chair*

Brian Mallasch

*Retail/Service Business Rep.
Land Use Chair*

Annette McClain

Community-Based Organization Rep.

Robert Muñoz

Residential Renter's Rep

Steve Slutzah

\$1000.00 for One Generation for food program for seniors

- d. Discussion and/or possible action to approve up to \$5000.00 for Parents, Educators/Teachers & Students in Action

VII. VICE PRESIDENT'S COMMENTS

VIII. GENERAL PUBLIC COMMENT ON NON-AGENDA ITEMS (2 MINUTES PER PERSON)

IX. NEW BUSINESS

a. Committee Reports

b. Board Announcements

c. ADJOURNMENT

IN CONFORMITY WITH THE GOVERNOR'S EXECUTIVE ORDER N-29-20 (MARCH 17, 2020) AND DUE TO CONCERNS OVER COVID-19, THE BOARD OF THE CANOGA PARK NEIGHBORHOOD COUNCIL MEETING WILL BE CONDUCTED ENTIRELY TELEPHONICALLY.

PUBLIC INPUT AT NEIGHBORHOOD COUNCIL MEETINGS The public is requested to raise their virtual hand or if attending telephonically dial *9, when prompted by the presiding officer, to address the Board on any agenda item before the Board takes an action on an item. Comments from the public on agenda items will be heard only when the respective item is being considered. Comments from the public on other matters not appearing on the agenda that are within the Board's jurisdiction will be heard during the General Public Comment period. Please note that under the Brown Act, the Board is prevented from acting on a matter that you bring to its attention during the General Public Comment period; however, the issue raised by a member of the public may become the subject of a future Board meeting. Public comment is limited to 2 minutes per speaker, unless adjusted by the presiding officer of the Board.



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*At-Large Rep.
Budget Rep
GECO*

*Jitzel Vasquez-Ruiz
Youth Group Rep.
Youth Advocacy
Education*

*Stuart Vaughn
Retail/Service Business Rep.
Art Chair*

*Vacant Seats:
Home/Condo Owner Rep (2025)
Home/Condo Owner Rep (2025)
Senior Rep - appointed (2022)
Home/Condo Owner Rep (2023)
Home/Condo Owner Rep (2023)*

THE AMERICAN WITH DISABILITIES ACT As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and upon request will provide reasonable accommodation to ensure equal access to its programs, services, and activities. Sign language interpreters, assisted listening devices, or other auxiliary aids and/or services may be provided upon request. To ensure availability of services, please make your request at least 3 business days (72 hours) prior to the meeting by contacting the Department of Neighborhood Empowerment by calling (213) 978-1551 or email: NCsupport@lacity.org

PUBLIC ACCESS OF RECORDS – In compliance with Government Code section 54957.5, non-exempt writings that are distributed to a majority or all of the board in advance of a meeting may be viewed on our website at www.CanogaParkNC.org or at the scheduled meeting. In addition, if you would like a copy of any record related to an item on the agenda, please contact Helen Morales, Secretary, at helenmorales@canogaparknc.org

PUBLIC POSTING OF AGENDAS – Neighborhood Council agendas are posted for public review as follows:

- Canoga Park Community Center, 7248 Owensmouth Ave., Canoga Park, CA 91303
- www.CanogaParkNC.org
- You can also receive our agendas via email by subscribing to L.A. City's Early Notification System at <https://www.lacity.org/subscriptions>

RECONSIDERATION AND GRIEVANCE PROCESS - For information on the NC's process for board action reconsideration, stakeholder grievance policy, or any other procedural matters related to this Council, email info@canogaparknc.org



CANOGA PARK
NEIGHBORHOOD COUNCIL

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Secretary of State
Articles of Incorporation of a
Nonprofit Public Benefit Corporation

ARTS-PB-501(c)(3)



IMPORTANT — Read Instructions before completing this form.

Filing Fee - \$30.00

Copy Fees - First page \$1.00; each attachment page \$0.50;
 Certification Fee - \$5.00

Note: A separate California Franchise Tax Board application is required to obtain tax exempt status. For more information, go to ftb.ca.gov.

This Space For Office Use Only

1. Corporate Name (Go to www.sos.ca.gov/business/be/name-reservations for general corporate name requirements and restrictions.)

The name of the corporation is OVERDUE Cleanup Crew

2. Business Addresses (Enter the complete business addresses. Item 2a cannot be a P.O.Box or "in care of" an individual or entity.)

a. Initial Street Address of Corporation - Do not enter a P.O. Box 21021 Erwin St, APT315	City (no abbreviations) Woodland Hills	State CA	Zip Code 91367
b. Initial Mailing Address of Corporation, if different than Item 2a	City (no abbreviations)	State	Zip Code

3. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL – Complete Items 3a and 3b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation) Maxwell	Middle Name	Last Name Suwaki	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 21021 Erwin St, APT315	City (no abbreviations) Woodland Hills	State CA	Zip Code 91367

CORPORATION – Complete Item 3c. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 3a or 3b

Item 4a: One or both boxes **must** be checked.

4. Purpose Statement **Item 4b:** If "public" purposes is checked in Item 4a, or if you intend to apply for tax-exempt status in California, you **must** enter the specific purpose in Item 4b.)

- a. This corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. It is organized under the Nonprofit Public Benefit Corporation Law for: public purposes. charitable purposes.
- b. The specific purpose of this corporation is to clean up community and restore the beauty of public environment.

5. Additional Statements (See Instructions and Filing Tips.)

- a. This corporation is organized and operated exclusively for the purposes set forth in **Article 4** hereof within the meaning of Internal Revenue Code section 501(c)(3).
- b. No substantial part of the activities of this corporation shall consist of carrying on propaganda, or otherwise attempting to influence legislation, and this corporation shall not participate or intervene in any political campaign (including the publishing or distribution of statements) on behalf of any candidate for public office.
- c. The property of this corporation is irrevocably dedicated to the purposes in **Article 4** hereof and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, officer or member thereof or to the benefit of any private person.
- d. Upon the dissolution or winding up of this corporation, its assets remaining after payment, or provision for payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for **charitable, educational and/or religious** purposes and which has established its tax-exempt status under Internal Revenue Code section 501(c)(3).

6. Read and Sign Below (This form must be signed by each incorporator. See Instructions. Do not include a title.)

Signature

Maxwell Suwaki
 Type or Print Name

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: Canoga Park

SECTION I - APPLICANT INFORMATION

1a) Organization Name	<u>ONEgeneration</u>	<u>95-406979</u>	<u>CA</u>	<u>1978</u>
	<small>Federal I.D. # (EIN#)</small>	<small>State of Incorporation</small>	<small>Date of 501(c)(3) Status (if applicable)</small>	
1b) Organization Mailing Address	<u>17400 Victory Blvd.</u>	<u>Van Nuys</u>	<u>CA</u>	<u>91406</u>
	<small>City</small>	<small>State</small>	<small>Zip Code</small>	
1c) Business Address (if different)	_____	_____	_____	_____
	<small>City</small>	<small>State</small>	<small>Zip Code</small>	

1d) PRIMARY CONTACT INFORMATION:

<u>Sue Sexton</u>	<u>818-708-4756</u>	<u>ssexton@onegeneration.org</u>
<small>Name</small>	<small>Phone</small>	<small>Email</small>

2) Type of Organization- Please select one:

- D** Public School (not to include private schools) **or** **iii** 501(c)(3) Non-Profit (other than religious institutions)
- Attach Signed letter on School Letterhead** **Attach IRS Determination Letter**

3) _____ _____ _____ _____

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

SECTION II - PROJECT DESCRIPTION

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

ONEgeneration would like to request the Canoga Park Neighborhood Council's support in provide access to food for our local families who are facing food insecurity. Funds will support the direct distribution of both perishable and non-perishable food which is given out on weekly basis. Food/groceries will also be delivered to the homes of isolated/homebound seniors who are unable to access the food bank due to a disability.

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)

Currently, ONEgeneration's food bank programs are fully dependent on donations and volunteers. Over 250,000lbs of food is received and redistributed every month to over 2,000 households, including those living in Canoga Park. Funds to support ONEgeneration's food efforts will benefit the public at-large as anyone who is facing food insecurity can received food at no cost and can continue to receive support as long as it is needed.

SECTION III - PROJECT BUDGET OUTLINE

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

Ga)	Personnel Related Expenses	Requested of NC	Total Projected Cost
		\$	\$
		\$	\$
		\$	\$
6b)	Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
	Perishable and non-perishable	\$ 1,000.00	\$ 1,000
		\$	\$
		\$	\$

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?
 No **ii 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 factors or sources or funding? (Including NPG applications to other NCs) No Yes If Yes, please describe:

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

8) What is the TOTAL amount of the grant funding requested with this application: \$ 1,000.00

10a) Start date: 10b) Date Funds Required: 5/30/2021 10c) Expected Completion Date: 6/30/2021
 (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 - Jenna Hauss, MSW President & CEO 

4/29/21

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

4/29/21

* 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

Date of this notice: 03-24-2021

Employer Identification Number:
86-2819165

Form: SS-4

Number of this notice: CP 575 E

OVERDUE CLEANUP CREW
% MAXWELL SUWAKI
21021 ERWIN ST APT 315
WOODLAND HLS, CA 91367

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 86-2819165. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

When you submitted your application for an EIN, you checked the box indicating you are a non-profit organization. Assigning an EIN does not grant tax-exempt status to non-profit organizations. Publication 557, Tax-Exempt Status for Your Organization, has details on the application process, as well as information on returns you may need to file. To apply for recognition of tax-exempt status under Internal Revenue Code Section 501(c)(3), organizations must complete a Form 1023-series application for recognition. All other entities should file Form 1024 if they want to request recognition under Section 501(a).

Nearly all organizations claiming tax-exempt status must file a Form 990-series annual information return (Form 990, 990-EZ, or 990-PF) or notice (Form 990-N) beginning with the year they legally form, even if they have not yet applied for or received recognition of tax-exempt status.

Unless a filing exception applies to you (search www.irs.gov for Annual Exempt Organization Return: Who Must File), you will lose your tax-exempt status if you fail to file a required return or notice for three consecutive years. We start calculating this three-year period from the tax year we assigned the EIN to you. If that first tax year isn't a full twelve months, you're still responsible for submitting a return for that year. If you didn't legally form in the same tax year in which you obtained your EIN, contact us at the phone number or address listed at the top of this letter.

For the most current information on your filing requirements and other important information, visit www.irs.gov/charities.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.** You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.
- * Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is OVER. You will need to provide this information, along with your EIN, if you file your returns electronically.

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter. Thank you for your cooperation.

Keep this part for your records. CP 575 E (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 E

9999999999

Your Telephone Number () -	Best Time to Call	DATE OF THIS NOTICE: 03-24-2021
_____	_____	EMPLOYER IDENTIFICATION NUMBER: 86-2819165
		FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023
|||||

OVERDUE CLEANUP CREW
% MAXWELL SUWAKI
21021 ERWIN ST APT 315
WOODLAND HLS, CA 91367

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.

Name of NC from which you are seeking this grant: _____

SECTION I - APPLICANT INFORMATION

1a) _____
Organization Name Federal I.D. # (EIN#) State of Incorporation Date of 501(c)(3) Status (if applicable)

1b) _____
Organization Mailing Address City State Zip Code

1c) _____
Business Address (if different) City State Zip Code

1d) **PRIMARY CONTACT INFORMATION:**

Name	Phone	Email
------	-------	-------

2) **Type of Organization- Please select one:**
 Public School *(not to include private schools)* or 501(c)(3) Non-Profit *(other than religious institutions)*
Attach Signed letter on School Letterhead **Attach IRS Determination Letter**

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

SECTION II - PROJECT DESCRIPTION

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

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 may 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
		\$	\$
		\$	\$

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: \$ _____

10a) Start date: ____/____/____ 10b) Date Funds Required: ____/____/____ 10c) Expected Completion Date: ____/____/____
 (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*

_____ _____ _____ _____
PRINT Name *Title* *Signature* *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

Neighborhood Council Funding Program
APPLICATION for Neighborhood Purposes Grant (NPG)



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Name of NC from which you are seeking this grant: Canoga Park Neighborhood Council

SECTION I - APPLICANT INFORMATION

1a) Parents, Educators/Teachers & Students in Action 46-2694430 California 12/2013
Organization Name *Federal I.D. # (EIN#)* *State of Incorporation* *Date of 501(c)(3) Status (if applicable)*

1b) 106 1/2 John Aiso Street #755 Los Angeles CA 90012
Organization Mailing Address *City* *State* *Zip Code*

1c) _____
Business Address (if different) *City* *State* *Zip Code*

1d) PRIMARY CONTACT INFORMATION:

Seymour Amster 818-943-0613 Seymour.Amster@pesa-edu.org
Name *Phone* *Email*

2) Type of Organization- Please select one:

- Public School *(not to include private schools)* or 501(c)(3) Non-Profit *(other than religious institutions)*
Attach Signed letter on School Letterhead **Attach IRS Determination Letter**

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

SECTION II - PROJECT DESCRIPTION

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

PROJECT: EDUCATIONAL AND MENTAL HEALTH SUPPORT FOR THE YOUTHFUL RESIDENTS OF CANOGA PARK FOR APRIL 2021 TO SEPTEMBER 2021

Parents, Educators/Teachers, & Students in Action (PESA) is a nonprofit organization dedicated to helping the youth located in Canoga Park through advocacy, mentorship and education. We provide a variety of services to the youth from the Canoga Park area, including tutoring/mentoring, empowerment workshops, and mental health counseling, in order to meet students' needs in a more holistic way. Our programs are so well received that the Los Angeles Police Department has partnered with us to address issues of intolerance in our community. (Please see attached documents for more information)

Due to the COVID-19 pandemic, we have successfully adapted our programs to an online format and are successfully providing the youth from Canoga Park with services to ease the burdens and mental stress of distance learning. This grant will aid PESA in continuing to provide services as well as ensure equal access to education for the youth in Canoga Park.

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)

PESA receives referrals to its program from judicial officers, police officers, probation officers, attorneys involved with juvenile offenders, educators and support personnel, employees working at FamilySource Partnership Program Centers, and other community organizations and law enforcement agencies. Our programs have a 96% success rate and are so well received that youth often refer their friends to our organization. We are providing much needed support in a time when students' education and mental health are suffering. The viability and reach of our programs have garnered the recognition of notable bodies such as; the City of Los Angeles, Los Angeles County Board of Education, Parent and Community Engagement Division of Los Angeles Unified School District, and many more.

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
	Tutoring and Mentoring Services	\$ 1,500.00	\$ 5,000.00
	Mental Health and Counseling Services	\$ 1,500.00	\$ 5,000.00
	Workshops	\$ 1,000.00	\$ 5,000.00

6b)	Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
	Social Media Outreach	\$ 500.00	\$ 500.00
	Flyers and Distribution of Flyers	\$ 500.00	\$ 500.00
		\$	\$

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: \$ 5,000.00

10a) Start date: 04 / 01 / 2021 10b) Date Funds Required: 04 / 01 / 2021 10c) Expected Completion Date: 09 / 30 / 2021
 (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*

Seymour I. Amster	Executive Director	_____	2/12/2021
<i>PRINT Name</i>	<i>Title</i>	<i>Signature</i>	<i>Date</i>

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

Francine S. Amster	Secretary	_____	2/12/2021
<i>PRINT Name</i>	<i>Title</i>	<i>Signature</i>	<i>Date</i>

* 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

We would like to thank our partners in this endeavor!



Imagine a World Without Hate



To find out more about PESA or to make a donation please visit our website:

<http://parentsinactionforbetterschools.org/>

OR

Contact us directly:

PESA

18017 Chatsworth Street, Suite 337

Granada Hills Ca, 91344

(800)894-7201

Printed in House with Volunteer Labor

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Parents, Educators/Teachers and Students in Action for Better Schools

Help reduce hate incidents one step at a time!

HATE INCIDENTS happen when people bully each other because of their identity.

The best way to prevent hate incidents are by being **TOLERANT!**

WHAT IS TOLERANCE?

TOLERANCE IS ACCEPTANCE AND APPROVAL OF OTHERS FOR WHO THEY ARE.



5 Ways to be Tolerant!

1. Don't spread hurtful rumors about others.
2. Treat others how you would like to be treated.
3. Find things in common with kids who seem different than you.
4. If you think you've been mean to someone, apologize.
5. If something is unclear, ask a teacher in order to better understand.



More Information about Hate Crimes

There are various private and government agencies that provide information about how to deal with and report hate crimes. If you are interested in learning more, here are some suggestions to get you started:

American Psychological Association

750 First Street, NE
Washington, D.C. 20002-4242
202-336-6062
202-336-6063 FAX

The nation's largest organization of psychologists in both academic and service delivery settings. Psychologists are an important resource for information about the biases which motivate hate crimes. Assistance and services to individuals suffering the adverse mental health consequences of prejudice and hate motivated violence are also offered by psychologists. Skilled psychologists also conduct law enforcement training focusing on understanding the causes and effects of hate-related criminal behavior.

PESA- Parents, Educators/Teachers & Students in Action

18017 Chatsworth Street, Suite 337
Granada Hills, CA. 91344
PHONE:(800) 894-7201
FASCIMILE: (818) 781-8180

Tolerance Handout

PESA's mission is to help our community through advocacy, mentorship and education. Their organization enhances student achievement by partnering with middle schools, high schools, community colleges and law schools. Through these partnerships their organization is able to promote neighborhood safety, intercultural tolerance, and career education and exploration.

INTERESTING FACTS

Venice Beach is the second largest tourist attraction in California, after Disneyland

The LAPD was established in 1869

The Los Angeles Police Academy was used for the 1932 Olympic Game's pistol and rifle competitions

The Los Angeles Police Academy remains a favorite of filmmakers, whose "Academy Arches" are recognizable around the world

I WANT TO KNOW

[How can I keep my family from getting involved in gangs?](#)

[How do I help a family member who is involved with gangs?](#)

[How do I report gang violence?](#)

DNA MONTHLY



COUNTY OF HEROES

Stories of Acceptance

Last year, the kids in my class who didn't look like me always called me a "thug," and it hurt my feelings. During the Ebola outbreak that started in Africa, people kept their distance from me because of my skin color. They thought that I could be sick but my family and I have never been to Africa. I am taking science classes right now so when I get older I can go to Medical School. I want to be a **doctor** so I can help people when they are sick.



"Just as it will take global cooperation to defeat COVID-19, it will take the entire world to defeat hate."



PESA'S DISTINGUISHED SPEAKER SERIES

**SO YOU WANT TO
BECOME AN EXECUTIVE
DIRECTOR?**

A CONVERSATION WITH KIM ROBERTS HEDGPETH



**SO YOU WANT TO
BECOME AN ORGANIZATIONAL
PSYCHOLOGIST?**

A CONVERSATION WITH DR. RAFFI ARSLANIAN



WHAT IF: JOKES

what if someone's *joke* caused hurt instead of laughter



Teasing:

- Just for fun, no harm intended
- "Target" of tease doesn't mind or it is reciprocal
- May or may not be frequent
- May or may not have power imbalance

**Making
fun of
someone**

Bullying:

- Done to cause harm
- Done to be mean
- "Target" feels badly or embarrassed
- Frequent behavior pattern
- Power imbalance either exists or is created

Remember – what you meant as friendly teasing can be perceived as hurtful.

HIGH SCHOOL AND BEYOND PROGRAM

WHERE DID I COME FROM & WHERE WILL I GO



This workshop enables students to recognize that they hold the power to their future! We will provide them with tools for achieving their objectives by setting S.M.A.R.T goals, developing a growth mindset, finding positive role models, and understanding the importance of asking for help.

INCOME, SAVINGS & SPENDING

Financial literacy is a vital undeveloped subject for students whether they are preparing to enter the workforce or attend college. Budgeting, credit scores and saving strategies are some of the topics this workshop covers followed by activities that will engage the student's knowledge with practical applications.



CAREER READINESS

Although students are often asked about their plans after high school, many don't always have the resources to achieve those goals. This workshop is designed to empower students with skills such as resume building, interview preparation and networking strategies for both academic and professional pursuits.





“Creating a Better Future for Our Community through Advocacy, Mentorship and Education”

COVID-19 CRITICAL NEED SERVICES BEING OFFERED

- **Online Career Fair - Distinguished Speaker Series.**

Every week PESA is hosting speakers from different professions to give career advice to middle school students, high school students, college students and graduate students.

- **Tutoring and mentoring for diverted youth referred by LAPD or District Attorney’s office.**

- **Tutoring for all K-12 students who need educational assistance.**

- **Virtual Playdates for all K-12 students.**

To reduce the stress and feeling of isolation we are offering virtual playdates that can include insightful discussions, art/stem projects, workshops and tutoring, so our youth can interact with their friends from school.

- **COVID-19 Hero Project.**

To help our children understand what COVID-19 is and the reason to comply with parent and teacher requests for social distancing by getting a certificate acknowledging them as a COVID-19 HERO for doing so.

- **Combating Racism and Hate Incidents caused by COVID-19.**

PESA has partnered with the Museum of Tolerance to address this issue through online interactive presentations.

PESA through its COVID-19 HERO series has created online art projects and booklets to be distributed to the community to address this issue.

- **Mental Health Counseling for the Community.**

- **Mental Health Counseling for diverted youth being monitored.**

THESE SERVICES HAVE BEEN RECOGNIZED BY THE



The Superior Court

INGLEWOOD JUVENILE COURTHOUSE
110 E. REGENT STREET
INGLEWOOD, CALIFORNIA 90301
CHAMBERS OF
DAVID S. WESLEY
JUDGE (RETIRED)

TELEPHONE
(310) 412-8341
FAX
(310) 330-7071
EMAIL
DWesley@LACourt.org

June 7, 2019

To Whom It May Concern:

I am the Director of the Los Angeles Superior Court Teen Court program (hereinafter referred to as "LASC Teen Court Program"). Parents, Educators/Teachers & Students in Action (hereinafter referred to as "PESA") is a non-profit, that has been designated as the Community Based Organization for the LASC Teen Court program through a Memorandum of Understanding executed by the Superior Court and PESA (hereinafter referred to as "MOU"), a true and correct copy of the MOU is attached to this letter and incorporated herein by reference.

One of the purposes of the MOU is to designate PESA as the entity that can receive funds for the LASC Teen Court program. That is why the following language was included in the MOU:

6. Any monies received by PESA designated for use in the Teen Court, SHADES or CAYC programs cannot be used for any other program, and a categorized budget designating how monies will be spent must be submitted by PESA prior to any expenditures of the designated monies and be approved by the Judicial Director of the Program or his designee. The Judicial Director of the Program or his designee will have the right to conduct an audit concerning the expenditure of the monies.

PESA has received monies in the past from both private and public entities, such as the County of Los Angeles, for this purpose.

As such if the entity you represent has been authorized or desires to provide support to the LASC Teen Court program I would appreciate you transmitting the funds to PESA, and in compliance with the MOU, it will be used for and budgeted for use for the LASC Teen Court Program. Thank you for your support, if you have any questions or comments, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "David S. Wesley".

David S. Wesley, Judge (Retired)
Director of the Judge David S. Wesley
LASC Teen Court Program

MEMORANDUM OF UNDERSTANDING between the Los Angeles Superior Court and Parents, Educators/Teachers and Students in Action.

1. The Los Angeles Superior Court (hereinafter referred to as "LASC") is a governmental entity that as part of its outreach to the community seeks to educate citizens, especially the youth about government, the role of the courts in a democratic society, and the significance of civic participation. One of the community service programs of the LASC is the Teen Court Program of the Los Angeles Superior Court (hereinafter referred to as "Teen Court").
2. Parents, Educators/Teachers & Students in Action (hereinafter referred to as "PESA") is a 501 (c) (3) corporation whose mission statement is "Creating a better future for our community through Advocacy, Mentorship, and Education." PESA has as one of its programs the Teen Court Project for Justice. Through this program:
 - PESA agrees to assist Teen Court through its Teen Court Project for Justice program. PESA will assist Teen Court by providing support to the host school as needed. The purpose of this support will ensure that the Teen Court Program is not burdensome to the host school.
 - PESA will also assist the host school participating in Teen Court in any way possible to enhance student achievement.
 - PESA will assist Teen Court by providing opportunities to the students and juveniles involved in the Teen Court.
 - PESA will assist Teen Court by arranging and providing support for field trips or other events, such as SHADES and CAYC, that the Teen Court participants desire to engage in related to the goals of Teen Court.
 - PESA will assist Teen Court by arranging and/or hosting training programs for the participants of the program.
 - PESA will assist Teen Court by arranging or hosting presentations to occur on subjects of interest to the Teen Court participants.
 - PESA will assist Teen Court by causing opportunities for the judicial officers to become a part of the host school community, by doing things such as presenting on Senior Awards night to a graduating student(s) who participated in Teen Court.
 - PESA will assist Teen Court by providing assistance when needed in monitoring the juvenile offenders who have been sentenced.
 - PESA will assist when requested with the victims of the offenses brought before Teen Court.
 - PESA will assist the Teen Court Program by providing any other appropriate assistance to the program.
3. This MOU becomes effective on the date both parties have signed the MOU. Either party may terminate this MOU upon thirty (30) days prior written notice. If either party believes that the

MOU might violate any law or regulation, either party may terminate the MOU immediately upon written notice to the other party.

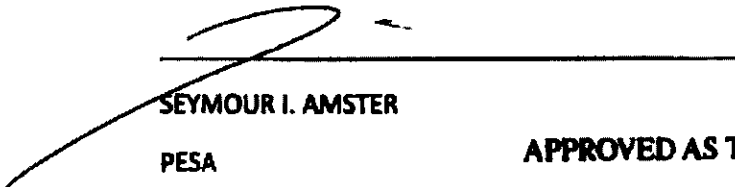
4. LASC may use PESA's name verbally in reference to the matters referred to in this MOU. PESA grants LASC the right to use PESA's name and logo in writing for matters referred to in this MOU. LASC grants PESA the right to use the LASC Teen Court Logo in writing for matters referred to in this MOU, subject to approval by the Judicial Director of the program. PESA may not use the LASC Teen Court Logo for fundraising activities.
5. Each party acknowledges that the relationship with the other is that of an independent contractor, however all activities of PESA with respect to any outreach program of the Los Angeles Superior Court must be approved by the Judicial Director of the program or the Los Angeles Superior Court Outreach Committee.
6. Any monies received by PESA designated for use in the Teen Court, SHADES or CAYC programs cannot be used for any other program, and a categorized budget designating how the money will be spent must be submitted by PESA prior to any expenditures of the designated monies and be approved by the Judicial Director of the Program or his designee. The Judicial Director of the Program or his designee will have the right to conduct an audit concerning the expenditure of the monies.
7. Each party agrees to abide by all applicable Federal and State Laws. This MOU shall be governed by and construed with the laws of the State of California. Jurisdiction for any claim, dispute, or lawsuit shall be in Los Angeles County.
8. This MOU outlines the framework of a working relationship between PESA and LASC and does not create a joint venture nor is it a binding contract.
9. This MOU does not create any rights, title for any entity other than for PESA and LASC.
10. This writing constitutes the entire MOU between LASC and PESA and can only be amended in writing.

Date:



SHERRI R. CARTER
Los Angeles Superior Court

Date: 2/27/17



SEYMOUR I. AMSTER
PESA

APPROVED AS TO FORM:



Court Counsel

OGDEN UT 84201-8029

In reply refer to: 4077591934
Oct. 28, 2015 LTR 4168C 0
46-2694430 000000 00

00030922
BODC: TE

**PARENTS EDUCATORS-TEACHERS &
STUDENTS IN ACTION
18017 CHATSWORTH ST.
GRANADA HILLS CA 91344-5608**

007650

**Employer Identification Number: 46-2694430
Person to Contact: Ms. Wiles
Toll Free Telephone Number: 1-877-829-5500**

Dear Taxpayer:

This is in response to your Oct. 05, 2015, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in December 2013.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

4077591934
Oct. 28, 2015 LTR 4168C 0
46-2694430 000000 00
00030923

PARENTS EDUCATORS-TEACHERS &
STUDENTS IN ACTION
18017 CHATSWORTH ST
GRANADA HILLS CA 91344-5608

If you have any questions, please call us at the telephone number
shown in the heading of this letter.

Sincerely yours,



Jeffrey I. Cooper
Director, EO Rulings & Agreement



CITY OF LOS ANGELES

Office of Finance
P.O. Box 53200
Los Angeles CA 90053-0200

18017 CHATSWORTH STREET SUITE #337
GRANADA HILLS, CA 91344-5608



*****5-DIGIT 91344 139
PARENTS, EDUCATORS / TEACHERS & AMP; STUDENTS IN ACTION
42397
18017 CHATSWORTH ST STE 337
GRANADA HILLS CA 91344-5608

THIS CERTIFICATE MUST BE POSTED AT PLACE OF BUSINESS

CITY OF LOS ANGELES TAX REGISTRATION CERTIFICATE

THIS CERTIFICATE IS GOOD UNTIL SUSPENDED OR CANCELLED
BUSINESS TAX

ISSUED: 5/7/2018

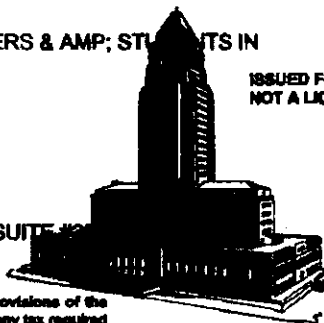
ACCOUNT NO.	FUND/CLASS	DESCRIPTION	STARTED	STATUS
0002893373-0001-4	L049	Professions / Occupations	3/1/2016	ACTIVE

PARENTS, EDUCATORS / TEACHERS & AMP; STUDENTS IN ACTION
18017 CHATSWORTH ST STE 337
GRANADA HILLS CA 81344-5608

ISSUED FOR TAX COMPLIANCE PURPOSES ONLY
NOT A LICENSE, PERMIT, OR LAND USE AUTHORIZATION

ISSUED TO

18017 CHATSWORTH STREET SUITE #337
GRANADA HILLS, CA 81344-5608



ISSUED BY:

Clare Bantel

DIRECTOR OF FINANCE

"No registration certificate or permit issued under the provisions of the Business Tax ordinances of the LAMC, or the payment of any tax required under the provisions of the Business Tax ordinances of the LAMC shall be construed as authorizing the conduct or continuance of any illegal business or of a legal business in an illegal manner."

NOTIFY THE OFFICE OF FINANCE IN WRITING OF ANY CHANGE IN OWNERSHIP OR ADDRESS - Office of Finance, P.O. Box 53200, Los Angeles CA 90053-0200

FORM 289 (Rev. 11/15)

IMPORTANT - READ REVERSE SIDE

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Parents, Educators/Teachers & Students in Action

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC C Corporation S Corporation Partnership Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶ **Non-Profit Corporation exempt under 501 (c)(3)**

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

Applies to accounts maintained outside the U.S.

5 Address (number, street, and apt. or suite no.) See instructions.

18017 Chatsworth Street, Suite 337

6 City, state, and ZIP code

Granada Hills, Ca. 91344

Requester's name and address (optional)

7 List account number(s) here (optional)

Print or type.
See Specific Instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									

OR

Employer identification number									
4	5	-	2	6	9	4	4	3	0

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of U.S. person ▶

Date ▶ April 22, 2020

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

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
Director	\$	\$ 50,000
	\$	\$
	\$	\$

6b)

Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Custom contractor bags, Custom kitchen bags, Gloves, Vests, Grabbers, T-shirts, Hats, Wheel carts	\$ 3,000	\$ 10,000
Website, leadership program	\$ 1,000	\$ 3,000
Advertisement, Virtual meeting costs, Gas for hauling, Other equipments	\$ 1,000	\$ 7,000

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: \$ 5000

10a) Start date: 5 / 5 / 2021 10b) Date Funds Required: 5 / 5 / 2021 10c) Expected Completion Date: 7 / 30 / 2021
 (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*
 Maxwell Suwaki Executive director  5/23/21
 PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*
 Danielle Knudson Secretary  5/23/2021
 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

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.

Name of NC from which you are seeking this grant: Canoga Park

SECTION I - APPLICANT INFORMATION

1a) OVERDUE Cleanup Crew 862819165 CA 5/4/2021
Organization Name *Federal I.D. # (EIN#)* *State of Incorporation* *Date of 501(c)(3) Status (if applicable)*

1b) 21021 Erwin St, #315 Woodland Hills CA 91367
Organization Mailing Address *City* *State* *Zip Code*

1c) _____
Business Address (If different) *City* *State* *Zip Code*

1d) **PRIMARY CONTACT INFORMATION:**
Maxwell Suwaki (503)-431-9452 admin@itisoverdue.com
Name *Phone* *Email*

2) Type of Organization- Please select one:
 Public School (not to include private schools) or 501(c)(3) Non-Profit (other than religious institutions)
 Attach Signed letter on School Letterhead Attach IRS Determination Letter

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

SECTION II - PROJECT DESCRIPTION

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

We are OVERDUEcleanup crew. We are on a mission to make LA the cleanest city in the nation. We have been hosting daily cleanups mainly in Woodland Hills and Canoga Park for the last 200 days straight. We started from nothing in October 2020 and have grown to about 400 volunteers on our email list, and have a great social media followers. We have collected more than 33,000 LBs of trash off the streets. We have been recognized a certification of recognition by Bob Blumendfield in March.

We are trvinda to make a leadership proogram in which anvbody can sian up online and host

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)

This grant will allow us to expand our reach to a greater community members and serve to make more community engagement to make a better cleaner future in this neighborhood. We believe the more people who participate in this movement, the more people who cares about the community, which will bond us stronger than ever before.

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.

Name of NC from which you are seeking this grant: Canoga Park

SECTION I - APPLICANT INFORMATION

- 1a) Boys & Girls Club of the West Valley 95-4419365 CA 1992
Organization Name *Federal I.D. # (EIN#)* *State of Incorporation* *Date of 501(c)(3) Status (if applicable)*
- 1b) 7245 Remmet Ave. Canoga Park CA 91303
Organization Mailing Address *City* *State* *Zip Code*
- 1c) _____
Business Address (if different) *City* *State* *Zip Code*
- 1d) **PRIMARY CONTACT INFORMATION:**
Ruben Rodriguez 818-610-1054 r.rodriguez@wvbgc.org
Name *Phone* *Email*
- 2) **Type of Organization- Please select one:**
 Public School (not to include private schools) or 501(c)(3) Non-Profit (other than religious institutions)
Attach Signed letter on School Letterhead **Attach IRS Determination Letter**
- 3) _____
Name / Address of Affiliated Organization (if applicable) *City* *State* *Zip Code*

SECTION II - PROJECT DESCRIPTION

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

Funds requested will support a capital project to improve a large area at the entrance to our building. Currently, the beds are in desperate need of landscaping updates. We intend to move the fencing back to incorporate the beds. We will install large square concrete pavers intermittent with draught tolerant plants and shrubs. Members can enjoy the large pavers as a place to sit and/or create with chalkart.

- 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)

Currently, the beds are walked through from street parking. As a result, the beds are mostly dirt and have dry patches of grass. Often the homeless take shelter underneath the large hedges, and trash and road debris often litter the beds. We believe this update will greatly enhance our building and the neighborhood, by bringing a sense of pride to visitors, those who pass by and especially our Club members and their families. We thank the Neighborhood Council for this opportunity to submit a request for funds and join with other businesses who are working to ensure our community landscape reflects pride and is ascetically appealing.

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
		\$	\$
		\$	\$
		\$	\$
6b)	Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
		\$5,000	\$5,000
		\$	\$
		\$	\$

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: \$5,000

10a) Start date: 07/01/2021 10b) Date Funds Required: 07/31/2021 10c) Expected Completion Date: 7/31/2021
 (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***
Geovanny Ragsdale CEO  5/13/2021
 PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - **REQUIRED***
Martin M. Cooper Secretary  5/13/2021
 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