

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: North Hollywood NE Neighborhood Council

SECTION I - APPLICANT INFORMATION

- 1a) No. HOLLYWOOD INTERFAITH FOOD PANTRY 84-3216434 CA
 Organization Name Federal I.D. # (EIN#) State of Incorporation Date of 501(c)(3) Status (if applicable)
- 1b) % FIRST CHRISTIAN CHURCH
4390 COLFAX AVE STUDIO CITY CA 91604
 Organization Mailing Address City State Zip Code
- 1c) _____
 Business Address (if different) City State Zip Code

1d) PRIMARY CONTACT INFORMATION:

BARBARA JAVITZ, DIRECTOR 323-646-7801 barbara@nhifp.org
 Name Phone Email

2) Type of Organization- Please select one:

☐ 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

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.

To provide hygiene kits for our unhoused populations which is 50% of clients served and to supplement our bags of staple goods with requested fresh fruit and vegetables. Currently produce is not available from our usual sources, Food Forward and Mend.

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 grant serves a public purpose by keeping our community healthy and providing fresh food to the food insecure in the community.

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 |
| | SUPPLIES FOR HYGIENE KITS | \$ 2500 | \$ 3500 |
| | PERISHABLE FOOD | \$ 2500 | \$ 4000 |
| | | \$ | \$ |

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: 06/30/2020 10b) Date Funds Required: 06/15/2020 10c) Expected Completion Date: 08/31/2020
(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*

BARBARA JAVITZ

PRINT Name

DIRECTOR

Title

[Signature]

Signature

6/2/2020

Date

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

Jillie Pock

PRINT Name

SECRETARY

Title

[Signature]

Signature

3/15/20

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