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: No.Hollywood Northeast NC SECTION I- APPLICANT INFORMATION **Lutheran Social Services** 95-2225798 10/31/2002 Organization Name State of Incorporation Federal I.D. # (EIN#) Date of 501(c)(3) Status (if applicable) 1b) 27132 Manor Circle Valencia CA 91354 Organization Mailing Address City Zip Code _{1c)} 7400 Tujunga Ave. NoHo CA 91605 Business Address (If different) City Zip Code State 1d) PRIMARY CONTACT INFORMATION: imaseda@lsssc.org Jan Maseda (818)288-7054 Phone Email Name 2) Type of Organization- Please select one: 501(c)(3) Non-Profit (other than religious institutions) ☐ Public School (not to include private schools) or **Attach Signed letter on School Letterhead** Attach IRS Determination Letter 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 purchase food for our Food Pantry

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)

To feed low/no income familes and individuals and the homeless in the San Fernando Valley

Personnel Related Expenses Requested of NC Total Project \$-0- \$-0- \$ Non-Personnel Related Expenses Requested of NC Total Project \$5,000 \$5,000 \$ \$ \$	
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ave you (applicant) applied to any other Neighborhood Councils requesting funds for this project? No Yes If Yes, please list names of NCs: North Hollywood NC	
s the implementation of this specific program or purpose described in Question 4 contingent on any ot	
ources or funding? (Including NPG applications to other NCs) No Yes If Yes, please desc	
Source of Funding Amount Total Project	ted Cost
\$ \$ \$ \$	
\$ \$	
What is the TOTAL amount of the grant funding requested with this application: $\5,000	
Do you (applicant) have a current or former relationship with a Board Member of the NC? No Yes	
Relationship to Applicant	
☐ Yes ☐ No *(Please note that if a Board Member of the NC has a conflict of interest and conformal participates in the discussion and voting of this NPG, the NC Funding Program will deny the	mpletes t
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