## **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.

<u> </u>	TION I- APPLICANT INFORMATION						
1a)	Organization Name	Fe	deral I.D. # (EIN#)	State of Incorporation	Date of 501(c)(3) Status (if application		
1b)							
	Organization Mailing Address	Cit	y	State	Zip Code		
1c)							
	Business Address (If different)	City Stat		State	Zip Code		
1d)	PRIMARY CONTACT INFORMATION:						
	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) Nor Attach IRS D	institutions)			
3)	Name / Address of Affiliated Organization (if appl	icable)	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)

PAGE 1 NCFP 107

Personnel Related Expenses		D	ed.	Total Projected Ocet	
		### ##################################	ted of NC	Total Projected Cost	
		\$		\$	
		\$		\$	
Non-Personnel Related Expenses		-	ted of NC	Total Projected Cost	
		\$		\$	
		\$ \$		\$ \$	
L	er Neighborhood Councils		funds for thi	1,	
	ase list names of NCs:			· <i>,</i>	
Is the implementation of this specific pro				-	
sources or funding? (Including NPG app	olications to other NCs)			s, please describe:	
Source of Funding		Amoun		Total Projected Cost	
		э \$		\$ \$	
		\$		\$	
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					
Name of No Board Member			riciationsin	у со другости	
			Attorney he		
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PAGE 2 NCFP 107

<sup>\*</sup> If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or <a href="mailto:clerk.ncfunding@lacity.org">clerk.ncfunding@lacity.org</a> for instructions on completing this form