

**Central San Pedro Neighborhood Council Funding Request for:  
Community Improvement Project or Outreach Event**

(Requests are recommended at least three months before funding is needed)

Date of Request: \_\_\_\_\_

Name of Program/Project/Outreach: \_\_\_\_\_

Date of Activity: \_\_\_\_\_

Organization/Individual Submitting Request: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone # \_\_\_\_\_; E-Mail Address \_\_\_\_\_

Purpose of the Request: Please describe how the project will benefit the community and how many CSPNC stakeholders will be affected:

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Amount Requested: \$ \_\_\_\_\_ Federal Tax ID# \_\_\_\_\_

Funds: Specifically, on what will the funds be used?

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By what means will your organization acknowledge our sponsorship of this event?

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Los Angeles Business Tax Certificate Registration Number (BRAC): \_\_\_\_\_

(If you are an Individual/Sole proprietor, Partnership or Other than a corporation, please submit a completed W-9 form.)

Type of Organization? \_\_\_\_\_ For Profit \_\_\_\_\_ Non-Profit (Please attach copy of 501c3 IRS letter)

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If the Expenditure will be outside the Central San Pedro NC boundaries, please state location:

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Signature \_\_\_\_\_ Date: \_\_\_\_\_

Name Printed: \_\_\_\_\_

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**Please submit this application, a project budget and a brief statement of your annual budget to:**

**Linda Alexander, Treasurer, Central San Pedro Neighborhood Council  
1840 S. Gaffey St. PMB 212, San Pedro, CA 90731. Telephone: 310-548-5395**