ATTACHMENT "D"

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. The Neighborhood Council (NC), upon approval of the application, shall submit the approved application along with all required documentation to the Department of Neighborhood Empowerment.

	Name of NC from which you are seeking this grant:	Bel	Air- Beverly	y Crest	Neighborho	od Council
SEC	TION I- APPLICANT INFORMATION					
1a)	Los Angeles Fire Department Foundation	27-2007	326	CA		05/16/2010
iaj	Organization Name	Federa	I.D. # (EIN#)	State of	Incorporation	Date of 501(c)(3) Status (if applicable)
41.	1875 Century Park East, Suite 200	Los Ang	eles		CA	90067
1b)	Organization Mailing Address	City			State	Zip Code
1c)	Business Address (If different)	City		navena a later de la casa de la c	State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:					
	Karen Wagener	310-552-4	178		Karen@support	lafd.org
	Name	Phone			Email	
2)	Type of Organization- Please select one: Public School (not to include private schools) Attach Grant Request on School Letterhea	or a	501(c)(3) No Attach IRS I		(other than religio	us institutions)
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.

The grant is intended to assist in the purchase of oxygen masks for pets to be provided to the Los Angeles Fire Department's stations 37, 41, 97, 99, 108, and 109. The aforementioned stations serve the area of Bel Air-Beverly Crest and will be better prepared to respond to incidents that involve pets with this grant, in turn serving pet owners in the area.

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)

While stations 37, 41, 97,99, 108 and 109 are within the region of Bel Air-Beverly Crest, they can aid in any call throughout the city, dependant upon the deployment of Department resources on any given day. With that said, the purchase of the pet oxygen masks through this grant will allow them to assist any struggling pet on scenes that they are called to throughout the entire area of Los Angeles proper.

3 Um				
a) Pe	ersonnel Related Expenses		Requested of NC	Total Projected Cost
_				
-				
			[D	F-4-I Di4-4 C4
-	on-Personnel Related Expenses		Requested of NC	Total Projected Cost
P	et Oxygen Masks		\$540	\$540
-		And the second s		
) H	ave you (applicant) applied to any ot No Yes, please list names		ouncils requesting funds for	this project?
	the implementation of this specific actors or sources or funding? (Include			ntingent on any other Yes, please describe
S	ource of Funding		Amount	Total Projected Cost
		-		The second secon
-				
			241, 41.2	
) V	hat is the TOTAL amount of the gra	nt funding requested	with this application:	\$540
١. ٥	10h) Do	to Eunda Paquirad:	06/18/18	
a) S	tart date: 05/18/18 10b) Da	te Funds Required:		
0c)	Expected completion date: 06/30/	(After comple	etion of the project, the appl	icant must submit a
- 2	follow-up form to the Neighborhoo	d Council and the De	partment of Neighborhood	Empowerment)
CTI	ON IV - POTENTIAL CONFLICTS OF	INTEREST		
In) F	lo you (applicant) have a former or e	xisting relationship w	ith a Board Member of the l	NC?
la) [o you (applicant) have a former or e	xisting relationship w scribe below:	rith a Board Member of the l	NC?
•	■ No □ Yes - Please de	xisting relationship w scribe below:		vC? p to Applicant
•	lo you (applicant) have a former or e ■ No □ Yes - Please de lame of NC Board Member	xisting relationship w scribe below:		
•	■ No □ Yes - Please de	xisting relationship w scribe below:		
•	■ No □ Yes - Please de	xisting relationship w scribe below:		
N	■ No □ Yes - Please de lame of NC Board Member	scribe below:	Relationshi	p to Applicant
1b) I	■ No □ Yes - Please de lame of NC Board Member f yes, did you request that the board	member consult the	Relationshi	p to Applicant
1b) I	In No Yes - Please de lame of NC Board Member Fyes, did you request that the board ling this application?	member consult the	Relationshi Office of the City Attorney be that if a Board Member of	p to Applicant efore the NC has a conflict of
Ib) I	In No Yes - Please de lame of NC Board Member If yes, did you request that the board iling this application? Yes nterest and completes this form, or process the state of the lambda of	member consult the No *(Please note participates in the dis	Relationshi Office of the City Attorney be that if a Board Member of	p to Applicant efore the NC has a conflict of
Ib) I	In No Yes - Please de lame of NC Board Member Fyes, did you request that the board ling this application?	member consult the No *(Please note participates in the dis	Relationshi Office of the City Attorney be that if a Board Member of	p to Applicant efore the NC has a conflict of
1b) I	Ino Yes - Please de lame of NC Board Member Fyes, did you request that the board liling this application? Yes nterest and completes this form, or puill deny the payment of this grant in	member consult the O No *(Please note participates in the dis	Relationshi Office of the City Attorney be that if a Board Member of	p to Applicant efore the NC has a conflict of
1b) If	In No Yes - Please de lame of NC Board Member If yes, did you request that the board iling this application? Yes neerest and completes this form, or puill deny the payment of this grant in ION V - DECLARATION AND SIGNAT	member consult the No *(Please note participates in the distissentirety.)	Office of the City Attorney be that if a Board Member of cussion and voting of this N	efore the NC has a conflict of NPG, the Department
1b) I f	Ino Yes - Please de lame of NC Board Member f yes, did you request that the board illing this application? Yes nterest and completes this form, or puill deny the payment of this grant in ION V - DECLARATION AND SIGNAT	member consult the No *(Please note participates in the distinct its entirety.)	Office of the City Attorney be that if a Board Member of cussion and voting of this Member of the Me	p to Applicant efore the NC has a conflict of NPG, the Department communicated otherwis
1b) I f	Ino Yes - Please de lame of NC Board Member Fyes, did you request that the board iling this application? Yes nterest and completes this form, or puil deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my	member consult the No *(Please note participates in the distissentirety.)	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this Members of the cussion and voting of the cussion	p to Applicant efore the NC has a conflict of NPG, the Department communicated otherwis Public Benefit," and
1b) l'i	Ino Yes - Please de lame of NC Board Member If yes, did you request that the board iling this application? Yes nterest and completes this form, or puil deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth	member consult the No *(Please note participates in the distissentirety.) URE knowledge, the information and this application and	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this New York and Provided Herein and ead Appendix A, "What is a affirm that the proposed pro-	p to Applicant efore the NC has a conflict of NPG, the Department communicated otherwis Public Benefit," and bject(s) and/or program(s)
In the state of th	Ino Yes - Please de lame of NC Board Member If yes, did you request that the board iling this application? Yes nterest and completes this form, or pull deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth Appendix B "Conflicts of Interest" of a public ben	member consult the D No *(Please note participates in the distits entirety.) URE knowledge, the information and the project/program and the project/program are series.	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this Member of the cussion and that no conflict of interesting the customer of	efore the NC has a conflict of NPG, the Department communicated otherwis Public Benefit," and bject(s) and/or program(s) est exist that would
In the state of th	In No Yes - Please de lame of NC Board Member If yes, did you request that the board liling this application? Yes neerest and completes this form, or puill deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth appendix B "Conflicts of Interest" of fall within the criteria of a public ben	member consult the ONO *(Please note participates in the distits entirety.) URE knowledge, the information and the second purposes Grant project/program are thood Purposes Grant project project grant	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this had been accorded to the confirmation provided herein and the confirmation provided herein and that the proposed provided that no conflict of interests. Laffirm that I am not a cu	p to Applicant efore the NC has a conflict of NPG, the Department communicated otherwis Public Benefit," and oject(s) and/or program(s) est exist that would rrent Board Member of th
ECT	In No Yes - Please de lame of NC Board Member If yes, did you request that the board iling this application? Yes neterest and completes this form, or pull deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth Appendix B "Conflicts of Interest" of all within the criteria of a public benorevent the awarding of the Neighboard Council to whom I am	member consult the No *(Please note participates in the distissentirety.) URE knowledge, the information and the effirm that I have rething application and effit project/program arrhood Purposes Gram submitting this application and the submitting this application and the submitting this application and the submitting this application.	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this New and Appendix A, "What is a affirm that the proposed product of interest. I affirm that I am not a cuication. I further affirm that	efore the NC has a conflict of NPG, the Department communicated otherwis Public Benefit," and oject(s) and/or program(s) st exist that would rrent Board Member of the
FECT	In No Yes - Please de lame of NC Board Member If yes, did you request that the board iling this application? Yes neterest and completes this form, or pull deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth Appendix B "Conflicts of Interest" of all within the criteria of a public benorevent the awarding of the Neighboard Council to whom I am	member consult the No *(Please note participates in the distissentirety.) URE knowledge, the information and the effirm that I have rething application and effit project/program arrhood Purposes Gram submitting this application and the submitting this application and the submitting this application and the submitting this application.	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this New and Appendix A, "What is a affirm that the proposed product of interest. I affirm that I am not a cuication. I further affirm that	efore the NC has a conflict of NPG, the Department communicated otherwis Public Benefit," and oject(s) and/or program(s) st exist that would rrent Board Member of the
ECT	In No Yes - Please de lame of NC Board Member If yes, did you request that the board iling this application? Yes nterest and completes this form, or possible the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth Appendix B "Conflicts of Interest" of fall within the criteria of a public benorevent the awarding of the Neighbon Neighborhood Council to whom I amused in accordance with the term	member consult the No *(Please note participates in the distissentirety.) URE knowledge, the information and the effirm that I have rething application and effit project/program arrhood Purposes Gram submitting this application and the submitting this application and the submitting this application and the submitting this application.	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this New and Appendix A, "What is a affirm that the proposed product of interest. I affirm that I am not a cuication. I further affirm that	efore the NC has a conflict of NPG, the Department communicated otherwis Public Benefit," and oject(s) and/or program(s) st exist that would rrent Board Member of the
In the second se	In No Yes - Please de lame of NC Board Member If yes, did you request that the board illing this application? Yes nterest and completes this form, or pull deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth appendix B "Conflicts of Interest" of fall within the criteria of a public ben prevent the awarding of the Neighbon Neighborhood Council to whom I am used in accordance with the the term to the Neighborhood Council.	member consult the No *(Please note participates in the distist entirety.) URE knowledge, the informer affirm that I have rethis application and refit project/program arrhood Purposes Grant submitting this applies of the application services.	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this New York and Appendix A, "What is a affirm that the proposed product of interest. I affirm that I am not a cuication. I further affirm that stated here, said funds shall	efore the NC has a conflict of NPG, the Department communicated otherwis Public Benefit," and oject(s) and/or program(s) st exist that would rrent Board Member of the
In the second se	In No Yes - Please de lame of NC Board Member If yes, did you request that the board illing this application? Yes nterest and completes this form, or pull deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth appendix B "Conflicts of Interest" of fall within the criteria of a public ben prevent the awarding of the Neighbon Neighborhood Council to whom I am used in accordance with the the term to the Neighborhood Council.	member consult the No *(Please note participates in the distist entirety.) URE knowledge, the informer affirm that I have rethis application and refit project/program arrhood Purposes Grant submitting this applies of the application services.	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this Note and Appendix A, "What is a affirm that the proposed product of interest. I affirm that I am not a culication. I further affirm that stated here, said funds shall incipal - REQUIRED*	efore the NC has a conflict of NPG, the Department communicated otherwise Public Benefit," and Dject(s) and/or program(s) est exist that would rrent Board Member of the fif the grant received is no be returned immediately
ECT III	In No Yes - Please de lame of NC Board Member If yes, did you request that the board illing this application? Yes nterest and completes this form, or pull deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth appendix B "Conflicts of Interest" of fall within the criteria of a public ben prevent the awarding of the Neighbon Neighborhood Council to whom I am used in accordance with the the term to the Neighborhood Council. Executive Director of Non-Profit Core	member consult the No *(Please note participates in the distist entirety.) URE knowledge, the informer affirm that I have rethis application and refit project/program arrhood Purposes Grant submitting this applies of the application services.	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this Note and Appendix A, "What is a affirm that the proposed product of interest. I affirm that I am not a culication. I further affirm that stated here, said funds shall incipal - REQUIRED*	efore the NC has a conflict of NPG, the Department communicated otherwise Public Benefit," and Dject(s) and/or program(s) est exist that would rrent Board Member of the fif the grant received is no be returned immediately
FECT III	In No Yes - Please de lame of NC Board Member If yes, did you request that the board illing this application? Yes nterest and completes this form, or pull deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth appendix B "Conflicts of Interest" of fall within the criteria of a public ben prevent the awarding of the Neighbon Neighborhood Council to whom I am used in accordance with the the term to the Neighborhood Council.	member consult the No *(Please note participates in the distist entirety.) URE knowledge, the informer affirm that I have rethis application and effit project/program arrhood Purposes Grant submitting this applies of the application supportation or School Proportation or S	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this New York and Appendix A, "What is a affirm that the proposed product of interest. I affirm that I am not a cuication. I further affirm that stated here, said funds shall	efore the NC has a conflict of NPG, the Department communicated otherwise Public Benefit," and Dject(s) and/or program(s) est exist that would rrent Board Member of the fif the grant received is no be returned immediately
In the state of th	In In Image: Please declared of NC Board Member If yes, did you request that the board iling this application? Yes interest and completes this form, or possible the payment of this grant in ION V - DECLARATION AND SIGNATION V - DECLARATION AND SIGNATION OF The Property of the Property of the Property of the Property of the Neighborhood Council to whom I amount of the Neighborhood Council. Executive Director of Non-Profit Core Karen Wagener	member consult the No *(Please note participates in the distissentirety.) URE knowledge, the information and refit project/program arrhood Purposes Gram submitting this applies of the application submitting this applies the submitted subm	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this Note and Appendix A, "What is a affirm that the proposed product of interest. I affirm that I am not a culication. I further affirm that stated here, said funds shall fincipal - REQUIRED* Laun Wayener Signature	efore the NC has a conflict of NPG, the Department communicated otherwise Public Benefit," and Dject(s) and/or program(s) est exist that would rrent Board Member of the fif the grant received is no be returned immediately 5-27 Date
ECT III	In No Yes - Please delame of NC Board Member If yes, did you request that the board iling this application? Yes nterest and completes this form, or possible the payment of this grant in ION V - DECLARATION AND SIGNAT thereby affirm that, to the best of my struly and accurately stated. I furth Appendix B "Conflicts of Interest" of fall within the criteria of a public benorevent the awarding of the Neighbon Neighborhood Council to whom I amused in accordance with the the term to the Neighborhood Council. Executive Director of Non-Profit Corporation PRINT Name Secretary of Non-profit Corporation	member consult the No *(Please note participates in the distissentirety.) URE knowledge, the information and refit project/program arrhood Purposes Grant submitting this applies of the application of the	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this Members of the cussion and that the proposed product of the custom of the	efore the NC has a conflict of NPG, the Department communicated otherwise Public Benefit," and Diect(s) and/or program(s) set exist that would rent Board Member of the fifthe grant received is not be returned immediately Date Dotally regree by Gamend Mattern As decrey, dispenses and As Department of Mattern As decrey dispenses and Department of Mattern As decrey dispenses and Department of Mattern As decrey dispenses and Department of Depar
ECT III	In No Yes - Please delame of NC Board Member If yes, did you request that the board illing this application? Yes nterest and completes this form, or pull deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth appendix B "Conflicts of Interest" of fall within the criteria of a public benorevent the awarding of the Neighbon Neighborhood Council to whom I amused in accordance with the the term to the Neighborhood Council. Executive Director of Non-Profit Corkaren Wagener PRINT Name Secretary of Non-profit Corporation Matt Gammel	member consult the No *(Please note participates in the distissentirety.) URE knowledge, the information and refit project/program arrhood Purposes Gram submitting this applies of the application of School President Title or Assistant School Figure 2 in the submitted	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this Members of the cussion and that the proposed product of the custom that I am not a custom. I further affirm that is tated here, said funds shall be considered in the custom of the custo	efore the NC has a conflict of NPG, the Department communicated otherwise Public Benefit," and Dject(s) and/or program(s) est exist that would rrent Board Member of the if the grant received is no be returned immediately
ECT III	In No Yes - Please declare of NC Board Member If yes, did you request that the board illing this application? Yes nterest and completes this form, or pull deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth appendix B "Conflicts of Interest" of fall within the criteria of a public benorevent the awarding of the Neighbon Neighborhood Council to whom I amused in accordance with the the term to the Neighborhood Council. Executive Director of Non-Profit Conflicts of	member consult the No *(Please note participates in the distissentirety.) URE knowledge, the informer affirm that I have rethis application and refit project/program arrhood Purposes Grant submitting this applies of the application submitting this applies that the submitted	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this had been appendix A, "What is a affirm that the proposed product of interest. I affirm that I am not a cuication. I further affirm that istated here, said funds shall be the complete of the	p to Applicant efore the NC has a conflict of NPG, the Department communicated otherwise Public Benefit," and Dject(s) and/or program(s) est exist that would rrent Board Member of the iff the grant received is not be returned immediately Date Date Date
1b) l' f f i i i i i i i i i i i i i i i i i	In No Yes - Please delame of NC Board Member If yes, did you request that the board illing this application? Yes nterest and completes this form, or pull deny the payment of this grant in ION V - DECLARATION AND SIGNAT hereby affirm that, to the best of my struly and accurately stated. I furth appendix B "Conflicts of Interest" of fall within the criteria of a public benorevent the awarding of the Neighbon Neighborhood Council to whom I amused in accordance with the the term to the Neighborhood Council. Executive Director of Non-Profit Corkaren Wagener PRINT Name Secretary of Non-profit Corporation Matt Gammel	member consult the D No *(Please note participates in the distinction its entirety.) URE knowledge, the informer affirm that I have restricted the informer affirm that I have restricted the importance of the importance of the application and restricted the importance of the application is of the application of the application of the importance of the	Relationshi Office of the City Attorney be that if a Board Member of cussion and voting of this had been appendix A, "What is a affirm that the proposed product of interest. I affirm that I am not a cuication. I further affirm that istated here, said funds shall be the complete of the	p to Applicant efore the NC has a conflict of NPG, the Department communicated otherwise Public Benefit," and Dject(s) and/or program(s) est exist that would rrent Board Member of the iff the grant received is not be returned immediately Date Date Date

Revised 012615 - Page 2 of 2



The Wag'N O2 Fur Life® Kit includes:

- 3 Oxygen Masks 1 small, 1 medium & 1 large
- 3 Oxygen Air Tubes -1 for each mask, 22 mm diameter
- 1 Wag'N O2 Fur Life Carry Bag for easy storage & mobility
- 1 Laminated Instruction Sheet which includes ABCs of CPR For Cats & Dogs
- 1 Kennel Lead for animal restraint & control
- 2 Animal Incident Report (AIR) Forms for First Responders carbonless 3-part form
- 2 "Pet Oxygen Masks On Board" Decals (to display on vehicle or at station) included inside each kit
- 1 "Wag'N Instructional DVD Pets Need Oxygen Too" per kit
- 1 Pet Rescue Notice Form provided in electronic format seFile provided as link on your email order receipt
- 1 PowerPoint Presentation provided in electronic format eFile provided as link on your email order receipt
- 1 Sponsor Certificate. Editable PDF eFile provided as link on your email order receipt

Pricing based on quantity ordered:

1 - 3 kits priced at \$90.00 ea

4 - 20 kits priced at \$85.00 ea

21+ kits priced at \$80.00 ea

www.PetOxygenMasks.org