



## Mayor's Fund to End Homelessness Funding Application

For more information on the Mayor's Fund to End Homelessness, please visit:  
<http://www.longbeach.gov/health/services/directory/mayors-fund/>

The City of Long Beach (City) works in collaboration with non-profit and other community partners to address the needs of those experiencing homelessness in our area. Through the City's model Continuum of Care system, sites such as the Multi-Service Center have been able to work together to assist individuals and families experiencing homelessness to achieve self-sufficiency.

However, there is still much work to be done. The Mayor's Fund to End Homelessness (Mayor's Fund) provides small grants to organizations in Long Beach that address significant service delivery needs that are not covered by existing funding and are not considered emergency needs. Donations to this fund could support a variety of critical needs, including:

- Relocation Assistance
- Shelter Services
- Transportation Assistance
- Critical infrastructure improvements and repairs
- Replacement of mission critical equipment
- Move-in Assistance
- Immediate shelter needs

The Mayor's Fund is financed by donations from residents, businesses and community organizations, with most funding coming from an annual campaign. Money disbursed from the Mayor's Fund must be used to benefit people experiencing homelessness in Long Beach.

All approved allocations are for single use only. Recurring funding is not available, but an organization can apply more than once. Allocations from the Mayor's Fund will only be granted to nonprofit or other community agencies serving people experiencing homelessness in the City.

### Eligible Applicants:

- Must be a 501(c)(3) nonprofit organization or Long Beach based community group.
- Must have an address located within Long Beach.
- Must currently provide services to people experiencing homelessness in Long Beach.

**Mayor's Fund Allocation Recipient Requirements:**

- The Agency must submit monthly invoices for reimbursement and back-up documentation that supports the actual expenditures for the service activity allocated from the Mayor's Fund.
- For capital expenditures over \$10,000, HSAC reserves the right to request multiple bids

**Mayor's Fund Allocation Process:**

- To request funding, agencies must submit a proposal to the Homeless Services Advisory Committee (HSAC), which should include the following:
  1. Legal name of the agency requesting the allocation
  2. Agency's history of serving homeless populations in Long Beach, including services currently provided
  3. Statement of need; for what exactly the money will be used (itemized)
  4. A simple project budget with expenditures and requested funds
  5. Amount requested and impact of one-time Mayor's Fund allocation (grants typically range from \$2,500-\$10,000)

Proposals should be emailed to [HomelessServices@longbeach.gov](mailto:HomelessServices@longbeach.gov) or submitted online via this form.

All proposals requesting Mayor's Fund allocations will be reviewed by the Homeless Services Advisory Committee (HSAC) and must be approved by the Long Beach Department of Health and Human Services. Funds to be disbursed using cost-based reimbursement and pending MOU execution between the submitting agency and the City via check from the City's agent within two weeks of approval. Upfront grant payments will be considered on an as-needed basis.

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## Funding Application

**Organization**

GP Carepackages and Blankets of Love

**501(c)(3) Number**

845014100

**Name**

Eloise Parker

**Email**

[gpcarepackages@gmail.com](mailto:gpcarepackages@gmail.com)

**Phone**

(562) 200-5978

**Address**

2131 1/2 Pacific ave #3, LONG BEACH, California 90806

## Organizational Experience:

**State the number of years your organization has been serving people experiencing**

**State the number of persons your organization serves in an average month:**

**homelessness:**

9

300

**Describe the services your organization provide:**

We provide hygienic products, food, blankets

**List all subpopulations served by your organization:**

All in need, no specific demographic

## **Request Information:**

**Amount of funding requested:**

\$5,000.00

**Summarize your proposed project:**

We would like to continue passing out blankets and carepackages, provide food, shoes and tents. Location would be the 14th st park in Long Beach.

**Are you applying for funds on a reimbursement or payment in advance basis?**

Reimbursement

## **Supporting Documentation**

**Statement of Need (one-page maximum)**

**Cost Breakdown of Proposed Project (one-page maximum)**

**Non-Profit Entity Status Letter**

20230308\_150422.jpg

**Proof of Address in Long Beach**

20230313\_180443.jpg

**Other Supporting Documentation**

IMG\_1718001.jpg

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## **Signature and Acknowledgement**

By signing and submitting this application, I certify that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances and agree to comply with all of the required policies set forth by the Homeless Services Advisory Committee and City of Long Beach if funded. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to exclusion from participating in future funding opportunities.

**Submission of an application is not a guarantee of funding.** Applications will be reviewed by the Homeless Services Advisory Committee and City of Long Beach Homeless Services Bureau staff.

**Name**

Eloise Parker

**Signature**

A handwritten signature in black ink, consisting of a stylized 'A' followed by a vertical stroke and a loop.

**Date**  
4/24/2023