

SAN PABLO ANNUAL COMMUNITY GRANT PROGRAM FY 2018-19 FINANCIAL REPORT



Please provide a brief description of how the FY 2018-19 grant was used including program events and any activities that were implemented. Use the following questions as a guideline to complete this report. You may include no more than four (4) additional pages to this report. **Only one (1) set is required as staff will make necessary copies. DO NOT INCLUDE ANY CONFIDENTIAL INFORMATION, (e.g. Social Security Numbers, Bank Account, etc.) THIS IS A PUBLIC DOCUMENT**

I. CONTACT INFORMATION

Agency Name	San Pablo Baseball Association	
Street Address	14761 San Pablo #2	
City/State/Zip Code	San Pablo, Ca 94806	
Phone/Fax/Email	(510) 860-5286	
Contact Person/Title	Andre L. Williams President	
Community Activity/Event Name	San Pablo Baseball Association	
Date of Event(s)	6/30/18	
Amount of grant funding received:	\$5000	
Amount of grant funding spent:	\$5,000	
Summary of sponsored event participants	Age range: 18/15-15 # of San Pablo Residents: 170	
	Target # of people served: 181	Actual # of people served:
	Target goal: Meets	Actual goal:
	Brand new uniforms and field equipment	Brand new league uniforms and field equipment

II. PROGRAM AND EVENT INFORMATION

The Annual San Pablo Community Foundation Grant program is intended to focus on grant awards that promote any of the recommended activities, policies or programs identified in the recently adopted **City of San Pablo Childhood Obesity Prevention Task Force: Community Action Plan** adopted by the San Pablo City Council on April 21, 2014. A copy of this plan may be referenced from the City's website (www.SanPabloCA.gov), under the "City Council" Department webpage. Please describe where and how your program or event falls in one or more categories:

We're a sports program we exercise everyday, we teach healthy eating habits.

The grant awards should also focus on enhancing or promoting any of the "**Major Policy Goals and/or Strategic Policy Initiative**" identified under the **San Pablo Adopted FY 2018-21 Priority Workplan Update**, effective November 1, 2017. A copy of this plan may be referenced from the City's website (www.SanPabloCA.gov), under the "City Council" Department webpage. Please describe where and how your program or event falls in one or more categories:

I've teamed with the West Contra Costa Salesian Boy's & Girl's club we focus on at risk youths, we started a mentoring ship program.

Please provide a description of the program(s), event(s) and/activity, including date(s). If you were not able to complete or achieve the goals outlined on your grant application please provide a brief explanation:

San Pablo Baseball enters it 63rd season. We serve almost 200 youths bring our annual baseball season that starts at March 22 to July 1st.

Please provide financial information on how the grant funds were used and the number of San Pablo residents the program/event/activity serviced (requirement of at least 75% San Pablo Residents)

1. Jerseys - 2,400
 2. field equipment (shovels, screens, baseballs for 12 teams' Bat's and gloves)
- total = 2,400
The other \$100 umpire fees

III. PROGRAM/EVENT ATTACHMENTS

Please include any applicable supplemental documents not limited to: financial spreadsheet, revenues vs. expenses, invoices, stories, program agenda, etc. (Limited to **ONLY** four (4) pages – size 8 1/2" x 11" – single sheets)

☐ Page 1 description see attached

☐ Page 2 description _____

☐ Page 3 description _____

☐ Page 4 description _____

IV. ADDITIONAL SUPPORT

Please list any in-kind donations provided (printing, promotional items, education materials) by any other organizations:

N/A

V. ADDITIONAL COMMENTS

Please share with us any additional comments:

We had a beautiful summer closing ceremonies
Thank you for your support

VI. SIGNATURE

Andre L. Williams

Andre L. Williams, President

Name & Title

Andre L. Williams 4/1/19

Authorized Signature & Date

Please mail this * financial report and * supporting documents to the address below. Document must be received in the City Manager's Office (postmarks NOT accepted) by Monday, April 1, 2019 at 6:00pm.

- o Reporting criteria – single side document – 8 1/2" x 11"
 - ❖ 3 Page Financial Report
 - ❖ 4 additional pages – Program/Event Attachments (if applicable)

City of San Pablo
City Manager's Department, Bldg. 1
13831 San Pablo Avenue
San Pablo, CA 94806
c/o FY 18-19 San Pablo Community Grant Program



**WEST CONTRA COSTA SALESIAN
BOYS & GIRLS CLUB**

2018-2019 Budget

REVENUE	
Foundations/Corporations	(120,000)
Special Events	(154,896)
Membership Fees	(65,000)
TOTAL REVENUE	(339,896)
EXPENDITURES	
Full-Time Positions	(100,715)
Part-Time Positions	(84,160)
Seasonal Employees	(26,000)
Payroll Expenses	(15,148)
Program Expenses	(12,810)
Special Event Rental Expenses	(3,700)
Office Supplies/Equipment	(6,000)
Printing and Copying	(3,000)
Postage and Mailing	(2,000)
Memberships and Publications	(3,963)
Training and Travel	(1,100)
Utilities	(41,000)
Building Maintenance Costs	(5,700)
Maintenance Supplies	(4,000)
Professional Services/Specialized Services	(8,600)
Equipment Maintenance/Repair	(2,000)
Club Insurance	(20,000)
TOTAL EXPENDITURES	(339,896)

