

CITY OF FONTANA
COMMUNITY SERVICES DEPARTMENT

DONATION ACCEPTANCE
(For All Donations)

Name of Donor/Organization

Kaiser Permanente

Address

75 N. Fair Oaks Avenue, 4th Fl Pasadena, CA 91103

Contact Person, Title

Phone No.

Martha Valencia, Community Health Manager

(909) 427-5268

Type of Donation: (Check boxes)

☒ Monetary

Amount \$ 14,000

(Receipt No.

Invoice No. 80348

(Attach copy of Receipt)

☐ Goods/Services

Estimated Value \$

Description

Intended use of Donation:

☒ Specific →

Description

☐ General

Community Health Contributions Program "The Awareness Project" grant

☒ Thank you/acknowledgement letter sent to Donor? (Required for ALL donations)

☒ Attach copy of acknowledgement letter to this form.

☒ G.E.T. Online Donation Tracking Form Has Been Completed.
(Required for ALL donations with a value equal to or greater than \$500.00)

Received By

Date

Jasmine Sarsadias

11/22/2021

☒ Copy of this form sent to Supervisor/Manager

=== FOR ADMINISTRATION USE ONLY ===

City Council Agenda Date

Entered in Novus by:

Date

This form must be filled out for all donations received regardless of value amount. This donation must be approved by City Council prior to any spending or use of the donation.



City Council

Acquanetta Warren
Mayor

Phillip W. Cothran
Mayor Pro Tem

John B. Roberts
Council Member

Jesus "Jesse" Sandoval
Council Member

Peter A. Garcia
Council Member

November 22, 2021

Kaiser Permanente

Martha Valencia, MPH, Community Health Manager

9961 Sierra Avenue

Fontana, CA 92335

Dear Martha,

On behalf of Healthy Fontana and the City's Community Services Department, thank you for choosing our proposal of 'The Awareness Project' as one of the funded Community Health Contributions Program grants for next year. We are so excited to work on this project to bring awareness and reduce stigma associated with mental health and mental illness. This much needed funding will help to bring education and activities to the most vulnerable populations including the youth of our community.

It is with deep gratitude that Healthy Fontana accepts this funding to bring much needed resources for all in the City of Fontana and we look forward to continuing to partner with Kaiser Permanente in the future.

Sincerely,

Jasmine Sarsadias

Jasmine Sarsadias, Community Services Coordinator

Healthy Fontana



FONTANA
CALIFORNIA
Community Services Department
16860 Valencia Ave
Fontana
California
United States, 92336
Tel: 909-349-6900

1 QTY Healthy Fontana-
Donation

\$14,000.00

SUBTOTAL

\$14,000.00

TOTAL

\$14,000.00

INITIAL PAYMENT

\$14,000.00

COPY

CHECK TEND

\$14,000.00

STATUS

Success

Payment#

PYMT-435800

Payment Date

11/22/21 12:16:02

Customer

Kaiser Permanente

Telephone

(626) 381-2200

Type

Sale

Transaction#

403919

Transaction Date 11/22/21 12:16:03

Clerk

JCastellon Solares

See Refund Policy at:
<http://www.fontana.org/index.aspx?NID=159>, No Camp Refunds



403919

CSD Administration Office

KAISER PERMANENTE
KAISER FOUNDATION HEALTH PLAN INC.
ACCOUNTS PAYABLE DEPARTMENT
75 N. Fair Oaks Avenue, 4th Fl
Pasadena, CA 91103
(626) 381-2200



0121953 01 RE 0.458 **AUTO T6 0 6219 92335-359853 -P21974 C07



CITY OF FONTANA
8353 SIERRA AVE
FONTANA CA 92335-3598

11/12/2021

COPY

PAGE 1 OF 1

VENDOR 100021809

INVOICE NO.	INVOICE DATE	GROSS AMOUNT	DISCOUNT	NET AMOUNT
80348	11/05/2021	\$14,000.00		\$14,000.00
Preferred payment is ACH. Email kp-vendorportal-support@kp.org.				
TOTALS		\$14,000.00	\$0.00	\$14,000.00



DETACH AND RETAIN THIS STUB FOR YOUR RECORDS

CHECK # 0020634350 ATTACHED BELOW



KAISER PERMANENTE
KAISER FOUNDATION HEALTH PLAN INC.
ACCOUNTS PAYABLE DEPARTMENT
75 N. Fair Oaks Avenue, 4th Fl
Pasadena, CA 91103
(626) 381-2200

62-20
311

No. 0020634350

11/12/2021

PAY TO THE
ORDER OF
CITY OF FONTANA
8353 SIERRA AVE
FONTANA CA 92335

DISBURSING AGENT FOR
KAISER FOUNDATION HEALTH PLAN INC.
VENDOR 100021809

\$\$\$\$\$\$\$\$\$14,000.00

NOT VALID AFTER ONE YEAR

KAISER FOUNDATION HEALTH PLAN, INC.
GENERAL ACCOUNT

Fourteen Thousand and 00/100 Dollars

CITIBANK, N.A.
ONE PENN'S WAY, NEW CASTLE, DE 19720

⑈00 20634350⑈ ⑆031100209⑆

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