

**CITY OF FONTANA
COMMUNITY SERVICES DEPARTMENT**

**DONATION ACCEPTANCE
(For All Donations)**

Name of Donor/Organization
Karen Ho / Lisa Kunz /Options For Youth

Address
17216 Slover Ave Ste L-102 Fontana Ca, 92337

Contact Person, Title
Karen Ho

Phone No.
(626)372-1533

Type of Donation: (Check boxes)

<input checked="" type="checkbox"/> Monetary	Amount \$2,500	Receipt No. 403923
<i>(Attach copy of Receipt)</i>		

<input type="checkbox"/> Goods/Services	Estimated Value \$	Description

Intended use of Donation:

<input checked="" type="checkbox"/> Specific	→	Description: Gold Sponsor for Fontana Festival of Winter
<input type="checkbox"/> General		

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 greater than \$500.00)

Received By Salena Zapata	Date 11/24/2021
-------------------------------------	------------------------

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.

FONTANALAND

Sponsorship Application

Company Name: Options For Youth

Contact Person: Karen Ho, Lisa Kunz

Address: 17216 Slover Ave. Ste L-102

City: Fontana

State: CA

Zip: 92337

Phone: (626) 372-1533

Fax: _____

Email: Karenho@skyrocket-ed.com, Lkunz@ofy.org

Please complete the appropriate level of sponsorship below and fill in the dollar amount of the item donated.

Platinum Sponsor: \$5,000

\$ _____

Gold Sponsor: \$2,500-\$4,999

\$ 2,500.00

Silver Sponsor: \$1,000-\$2,499

\$ _____

Bronze: Product Donation

\$ _____

Please pick up donation from:

Location Name: Check will be mailed.

Address: _____

City: _____

Pick Up Date: _____

Contact Name & Title: _____

Phone: _____

Email: _____

Mail To: Festival of Winter 2021
16860 Valencia Ave.
Fontana, CA 92335

Phone: (909) 349-6946
Fax: (909) 349-6911
Email: Events@Fontana.org



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

1 QTY Events General \$2,500.00
Revolving
(9/01/21)
Event ID: 0168.301.FA21
Attendee(s): Karen Ho

SUBTOTAL	\$2,500.00
TOTAL	\$2,500.00
INITIAL PAYMENT	\$2,500.00

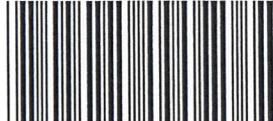
CHECK TEND \$2,500.00
STATUS Success
Payment# PYMT-435806
Payment Date 11/22/21 12:32:53
Customer Karen Ho
Telephone (626) 204-2552

Type Sale

Transaction# 403923
Transaction Date 11/22/21 12:32:54

Clerk JCastellon Solares

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



403923

CSD Administration Office

C A L I F O R N I A
C I T Y O F F o n t a n a





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 15, 2021

Karen Ho
Options For Youth
17216 Slover Ave Ste L-102
Fontana Ca, 92337

Dear Karen Ho:

On behalf of the City of Fontana, Community Service Department, we would like to thank you for your donation of Twenty-Five Hundred dollars as Gold Sponsor for the 2021 Fontana Festival of Winter. With your generous donation the City of Fontana can obtain the necessary tools and equipment to have the best Festival of Winter yet. We would not have been able to achieve such success if it weren't for your help. It is with deepest gratitude that we thank you for your efforts in helping the city improve this community event.

We look forward to working with you in the future.

Sincerely,

Salena Zapata
Community Services Coordinator
City of Fontana