

**CITY OF SOUTH SAN FRANCISCO
PARKS AND RECREATION DEPARTMENT**

**NON-PROFIT GROUP CO-SPONSORSHIP
ANNUAL RENEWAL REPORT FOR YEAR**
Due: 05/23/2025

CLUB/ORGANIZATION	SSFUYSL		
PREPARER'S NAME	Patty Gomez	TITLE	President
ADDRESS			
CITY			
PHONE NUMBER			

Please review the list of required documents and return them with your completed application:

- ☐ Current Officers Roster (page 2)
- ☐ Program Report (pages 3-4)
- ☐ Financial Statement (pages 5-7) or attach (must include all revenues & expenditures and match Beginning & Ending balances from Bank Statements)
 - ☐ Copies of January 2024 and December 2024 Bank Statements, attach
- ☐ Statement of Compliance with Co-Sponsorship Agreement (page 8)
- ☐ Current Certificate of General Liability Insurance, attach
 - ☐ Supplemental Self-Insured Retention (SIR) Questionnaire, attach
 - ☐ City of South San Francisco must be listed as additionally insured, attach
- ☐ Current Certificate of Workers Compensation Insurance or Statement of Waiver (if no employees), attach
- ☐ Co-Sponsored Permit Fee, attach
- ☐ Current Membership Roster (Must include addresses for all participants), attach
- ☒ Copy of Organization's Bylaws, attach

All non-profit organizations must file appropriate tax returns in accordance with the law. Please note that the City may audit your records and you would be required to comply with our requests to produce relevant documents.

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OFFICERS ROSTER

To be submitted with annual renewal and whenever officers change. An officer includes executive officer positions, board of directors, trustees, agents, or other leadership roles with control or substantial influence over the organization's policies or operations as may be designated by the organization bylaws.

NAME Patty Gomez TITLE President
ADDRESS [REDACTED]
CITY [REDACTED]
PHONE NUMBER [REDACTED]

NAME Mario Ayar TITLE Vice-President
ADDRESS [REDACTED]
CITY [REDACTED]
PHONE NUMBER [REDACTED]

NAME Marina Martinez TITLE Treasurer
ADDRESS [REDACTED]
CITY [REDACTED]
PHONE NUMBER [REDACTED]

NAME Brian Mansell TITLE Secretary
ADDRESS [REDACTED]
CITY [REDACTED]
PHONE NUMBER [REDACTED]

NAME _____ TITLE Other: _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE NUMBER _____ E-MAIL _____

NAME _____ TITLE Other: _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE NUMBER _____ E-MAIL _____

NAME _____ TITLE Other: _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE NUMBER _____ E-MAIL _____

☐ Check if additional officers are listed on a supplemental sheet

Number of Officers: 4

Number of officers who are residents of South San Francisco: 2

Percentage of Officers who are SSF residents: 50.00%

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REPORT FOR YEAR ENDING 12/31/2024

PROGRAM REPORT

I. MEMBERSHIP:

Total number of members as of 12/31/23:	<u>460</u>
Total number of members as of 12/31/24:	<u>799</u>
Number of members as of 12/31/24 who are South San Francisco residents:	<u>661</u>
Percentage of members as of 12/31/24 that are South San Francisco residents:	<u>82.73%</u>
Net Membership Gains (Losses):	<u>339</u>

Staff reserves the right to request additional documentation from the membership as verification of residency.

Please describe any membership requirements (100 word limit):

If your membership or officers is less than 51% South San Francisco residents, please describe efforts you have made or plan to make to increase the ratio (250 word limit):

Annual Membership Fees/Dues: \$ 155.00

Form(s) of Payment accepted: Credit Card

Describe how fees are collected (auto-pay, in person, mail) and reported:

Online registration

II. BOARD MEETINGS

Meetings are held quarterly on the first (1st) Friday
of January/April/July/October at 06:00 p.m.

Location of meetings: 533 Airport Blvd., Burlingame, CA 94010

Are meetings open to the public? Yes Average # of attendees: 5

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REPORT FOR YEAR ENDING 12/31/2024

FINANCIAL STATEMENT

INCOME/REVENUE:

CONTRIBUTIONS, gifts, grants

<u>SOURCE</u>	<u>FORM</u>	<u>AMOUNT</u>
Ex.: Amateur Athletic Foundation	Grant	500.00
		1,850.00

TOTAL CONTRIBUTIONS, gifts, grants 1,850.00 **A**

PROGRAM revenue

Ex.: Registration Fees	Annual	900.00
		136,662.46

TOTAL PROGRAM revenue 136,662.46 **B**

MEMBERSHIP fees/dues

Ex.: Membership Dues	Monthly	300.00

TOTAL MEMBERSHIP fees/dues **C**

Inventory/Concession Sales

Gross Receipts:	Description	
Gross Receipts:	Description	

Gross Profit from Sales: **D**

SPECIAL EVENTS/fundraisers (net profit)

07/04/2018	Independence Day Picnic Fundraiser	800.00

TOTAL SPECIAL EVENTS/fundraisers **E**

OTHER (please describe)

Ex. Money Market Interest	Income	13.75

TOTAL OTHER **F**

TOTAL REVENUE \$ 138,512.46 **G**

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REPORT FOR YEAR ENDING 12/31/2024

OPERATING EXPENSES:

AMOUNT

Grants and allocations (attach schedule)	
Cash \$	
Non-cash \$	
Specific assistance to individuals (attach schedule)	
Benefits paid to or for members (attach schedule)	
Compensation of officers, directors, etc.	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Professional fundraising fees	
Accounting fees	
Legal fees	146.38
Supplies	6,857.45
Telephone	1,091.98
Postage and shipping	320.93
Occupancy/Rental	
Equipment rental and maintenance	
Printing and publications	
Travel	
Conferences, conventions, and meetings	6,640.51
Interest	
Depreciation, depletion, etc. (attach schedule)	
Advertising	
Bank Charges	
Registration Fees Paid	5,141.20
Equipment/Supplies	4,536.52
Promotion	
Subcontractors	76,753.34
Team Clothing, etc.	50,107.40
Repairs & Maintenance	
Value of Inventory	
Liability Insurance	
Other (itemize):	
Refunds	579.37
Software	1,986.75
TOTAL	\$ 154,161.83

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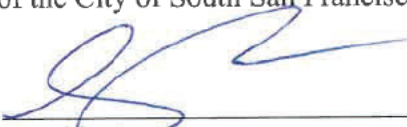
REPORT FOR YEAR ENDING 12/31/2024

STATEMENT OF EQUITY
For the Year ending 12/31/2024

	CHANGES	BALANCE
① Beginning Balance (01/01/2024).....		\$ 31,655.72
CONTRIBUTIONS, gifts, grants	1,850.00 A	
PROGRAM revenue	136,662.46 B	
MEMBERSHIP fees/dues		C
Gross Profit from Sales		D
SPECIAL EVENTS/fundraisers		E
OTHER		F
SUBTOTAL of REVENUE	\$ 138,512.46 G	
	SUBTOTAL	\$ 170,168.18
	Total Liabilities Paid	\$ 154,161.83 H
② Ending Balance (12/31/2024).....		\$ 16,006.35

☐ I certify that this report and the attached Financial Statement(s) are correct and true, and agree to a review of the records of the club by a representative of the City of South San Francisco, if requested.

DocuSigned by:
Marina Martinez
EA9B147B09C5423...
Treasurer



President

9/12/2025

Date

I understand that I, or an organization representative, shall attend the Parks and Recreation Commission meeting for the month our organization is agenized for renewal.

The date for this meeting is June 17, 2025

SSFUYSL

REPORT FOR YEAR ENDING 12/31/2024

CO-SPONSORSHIP ANNUAL STATEMENT OF COMPLIANCE

I (we) have reviewed the executed Co-Sponsorship Agreement and hereby certify that the Organization remains in compliance with all obligations under the Co-Sponsorship Agreement.

I (we) certify that the information provided in to the City is accurate. I acknowledge that I will promptly provide the City with any changes from what was originally provided in the Application for Co-Sponsorship. I hereby acknowledge that any material misrepresentations will result in immediate termination of the Co-Sponsorship Agreement and any related privileges.

Club/Organization Name: SSFUYSLSignature: Print Name: Patty GomezTitle: President