

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

**NON-PROFIT GROUP CO-SPONSORSHIP
ANNUAL RENEWAL REPORT FOR YEAR**

Due: 06/02/2026

CLUB/ORGANIZATION	<u>Italian American Citizens Club of South San Francisco</u>		
PREPARER'S NAME	<u>Leo Pierini</u>	TITLE	<u>President</u>
ADDRESS	<u>PO Box 5674</u>		
CITY	<u>So. San Francisco</u>	STATE	<u>CA</u>
		ZIP	<u>94083</u>
PHONE NUMBER	<u>(415) 716-6813</u>	E-MAIL	<u>IACC.LEO@YAHOO.COM</u>

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 2025 and December 2025 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.

ITALIAN AMERICAN CITIZENS CLUB OF SOUTH SAN FRANCISCO
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 Leo Pierini TITLE President
 ADDRESS [REDACTED]
 CITY So. San Francisco STATE CA ZIP 94080
 PHONE NUMBER [REDACTED] E-MAIL [REDACTED]

NAME Manny Garcia TITLE Vice-President
 ADDRESS [REDACTED]
 CITY So. San Francisco STATE CA ZIP 94080
 PHONE NUMBER [REDACTED]

NAME Barbara Guevara TITLE Treasurer
 ADDRESS [REDACTED]
 CITY Millbrae STATE CA ZIP 94030
 PHONE NUMBER [REDACTED]

NAME Dee Delorio TITLE Secretary
 ADDRESS [REDACTED]
 CITY So. San Francisco STATE CA ZIP 94080
 PHONE NUMBER [REDACTED]

NAME Richard Garbarino TITLE Director
 ADDRESS [REDACTED]
 CITY So. San Francisco STATE CA ZIP 94080
 PHONE NUMBER [REDACTED]

NAME Winnie Gerard TITLE Director
 ADDRESS [REDACTED]
 CITY So. San Francisco STATE CA ZIP 94080
 PHONE NUMBER [REDACTED]

NAME Celeste Giuliani TITLE Director
 ADDRESS [REDACTED]
 CITY So. San Francisco STATE CA ZIP 94080
 PHONE NUMBER [REDACTED]

☒ Check if additional officers are listed on a supplemental sheet

Number of Officers: 17

Number of officers who are residents of South San Francisco: 9

Percentage of Officers who are SSF residents: 52.94%

ITALIAN AMERICAN CITIZENS CLUB OF SOUTH SAN FRANCISCO
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NAME Rose Marie Garcia TITLE Director
 ADDRESS [REDACTED]
 CITY So. San Francisco STATE CA ZIP 94080
 PHONE NUMBER [REDACTED]

NAME Robert Cox TITLE Director
 ADDRESS [REDACTED]
 CITY San Bruno STATE CA ZIP 94066
 PHONE NUMBER [REDACTED]

NAME Helen Birkeland TITLE Director
 ADDRESS [REDACTED]
 CITY San Bruno STATE CA ZIP 94066
 PHONE NUMBER [REDACTED]

NAME Judy Dianos TITLE Director
 ADDRESS [REDACTED]
 CITY Millbrae STATE CA ZIP 94030
 PHONE NUMBER [REDACTED]

NAME Janae Morales TITLE Director
 ADDRESS [REDACTED]
 CITY Daly City STATE CA ZIP 94015
 PHONE NUMBER [REDACTED]

NAME Bill Green TITLE Director
 ADDRESS [REDACTED]
 CITY Millbrae STATE CA ZIP 94030
 PHONE NUMBER [REDACTED]

NAME Sandy Lencioni TITLE Director
 ADDRESS [REDACTED]
 CITY So. San Francisco STATE CA ZIP 94080
 PHONE NUMBER [REDACTED]

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NAME Armando Altamirano TITLE Director
 ADDRESS [REDACTED]
 CITY So. San Francisco STATE CA ZIP 94080
 PHONE NUMBER [REDACTED]

NAME Steve Hawthorne TITLE Other: Trustee
 ADDRESS [REDACTED]
 CITY Daly City STATE CA ZIP 94014
 PHONE NUMBER [REDACTED]

NAME Armando Altamirano TITLE Other: Trustee
 ADDRESS [REDACTED]
 CITY So. san Francisco STATE CA ZIP 94080
 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:
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 CITY _____ STATE _____ ZIP _____
 PHONE NUMBER _____ E-MAIL _____

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

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PROGRAM REPORT**I. MEMBERSHIP:**

Total number of members as of 12/31/ 23 : 24	379
Total number of members as of 12/31/ 23 : 25	387
Number of members as of 12/31/24 who are South San Francisco residents:	198
Percentage of members as of 12/31/24 that are South San Francisco residents:	51.16%
Net Membership Gains (Losses):	8

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

Please describe any membership requirements (100 word limit):

The Italian American Citizens Club has three member categories: Regular, Senior (30 year member over 65), and Honorary (nominated by the president or a director and ratified by the membership). The basic requirements are to be 21 years of age, be sponsored by a current member and to share in the mission of the IACC in perpetuating the Italian heritage and culture, maintain high moral standards and foster the general interest of SSF. Membership is open to all sexual orientations and ethnicities.

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):

The officers of the IACC and its membership is comprised of more than 51 percent South San Francisco residents.

Annual Membership Fees/Dues: \$ 50.00

Form(s) of Payment accepted: Cash or Check

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

Members are mailed dues invoices and may pay in person or by mail

II. BOARD MEETINGS

Meetings are held every other month on the first (1st) Tuesday

of January/March/May/July/September/ November at 01:00 p.m.

Location of meetings: IACC Clubhouse

Are meetings open to the public? No

Average # of attendees: 17

III. CLUB ACTIVITIESA: Describe the **on-going** activities put on by your organization for the membership in a calendar year:

ACTIVITY/TYPE	LOCATION	FREQUENCY (1 x week, etc.) Please indicate season dates, if any.	TOTAL # ACTIVITY MEETINGS PER YEAR	AVG. # MEMBERS ATTENDING (Each Activity)	TOTAL # PARTICIPANTS PER YEAR
General Meeting	St. Veronica's & IACC Clubhouse	bi-monthly	6	70	420
Board Meetings	IACC Clubhouse	bi-monthly	6	17	102
Club Socials	IACC Clubhouse	bi-monthly	6	70	420
IACC Leagues	IACC Clubhouse / Bocce Courts	seasonal	20	35	700
IACC Tourneys	IACC Clubhouse / Bocce Courts	seasonal	6	35	210
Bocce Lessons	IACC Clubhouse / Bocce Courts	Spring / Fall	8	5	40
Pedro Play	IACC Clubhouse / Bocce Courts	Every Monday	45	30	1350
Court Mainten.	Bocce Courts	Weekly	54	8	432
Adult Lessons	Bocce Courts	Various Weeks	4	4	16
Youth Camps	Bocce Courts	Various Weeks	15	4	60
Spec Needs Camps	Bocce Courts	Spring	8	6	48
Bingo	Clubhouse	Winter / Spring	3	30	90

B: Describe the **one-time** events put on by your organization for the membership in a calendar year:

ACTIVITY	DATE(S)	LOCATION	# ATTENDING	
			Members	Others
Crab Feed	2/7/25	Scholarship Fundraiser - Fernekes Rec Center	120	30.00
Pedro Tourney	3/30/25	IACC Clubhouse / Bocce Courts	40	0.00
Lasagna Challenge	3/23/25	IACC Clubhouse / Bocce Courts	40	5.00
Members BBQ	7/20/25	IACC Clubhouse / Bocce Courts	150	25.00
SF Giants Ital Nite	6/17/25	Oracle Park	40	8.00
Tournament	9/7/25	Host SSF PAL Boosters Fundraiser-Bocce Courts	24	70.00
Tournament	9/12/25	Host SSF FD Burn Victims Fundraiser-Bocce Courts	15	70.00
Festa Italiana - SSF	9/14/25	w/SSF & CLECA - Orange Memorial Park	60	1,300.00
Tournament	9/14/25	Ital Heritage Tourney-Ital Club invited-Courts	20	20.00
IACC Italian Festival	10/26/25	In-house Festival for members & family -courts	150	20.00
Tournament	8/6/25	Host SSF Athletic Club fundraiser - Club & Courts	15	30.00
Italian parade	10/12/25	Italian Heritage Parade - SF's North Beach	5	5,000.00
Holiday Party	12/14/25	SSF Elk's Lodge	120	20.00

FINANCIAL STATEMENT**INCOME/REVENUE:****CONTRIBUTIONS, gifts, grants**

<u>SOURCE</u>	<u>FORM</u>	<u>AMOUNT</u>
Ex.: Amateur Athletic Foundation	Grant	500.00
<u>Misc. Donations</u>	<u>Club members</u>	<u>553.00</u>
<u>Scholarship Donation Event</u>	<u>Club members</u>	<u>3,020.00</u>
_____	_____	_____
_____	_____	_____

TOTAL CONTRIBUTIONS, gifts, grants 3573.00

A

PROGRAM revenue

Ex.: Registration Fees	Annual	900.00
<u>Member's Meetings</u>	<u>Bi-monthly</u>	<u>701.57</u>
<u>Italian Lessons</u>	<u>Seasonal</u>	<u>130.00</u>
<u>Newsletter Ads</u>	<u>bi-monthly</u>	<u>150.00</u>
<u>Bocce Tourneys / Leagues</u>	<u>Seasonal</u>	<u>2,505.00</u>

TOTAL PROGRAM revenue 3486.57

B

MEMBERSHIP fees/dues

Ex.: Membership Dues	Monthly	300.00
<u>Membership Dues</u>	<u>Yearly</u>	<u>17,897.50</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL MEMBERSHIP fees/dues 17897.50

C

Inventory/Concession Sales

Gross Receipts:	<u>Description</u>	_____
Gross Receipts:	<u>Description</u>	_____

Gross Profit from Sales: _____

D

SPECIAL EVENTS/fundraisers (net profit)

07/04/2018	Independence Day Picnic Fundraiser	800.00
<u>2/7/25</u>	<u>Crab Feed Fundraiser</u>	<u>11,837.00</u>
<u>6/17/25</u>	<u>Giants Italian Heritage Nite</u>	<u>166.00</u>
<u>12/14/25</u>	<u>Xmas & Person of the Year Dinner</u>	<u>7,069.05</u>
_____	<u>Socials</u>	<u>3,298.13</u>

TOTAL SPECIAL EVENTS/fundraisers 22370.18

E

OTHER (please describe)

Ex. Money Market Interest	Income	13.75
<u>Bank Interest</u>	_____	<u>1,418.03</u>
<u>Club Merchandise</u>	_____	<u>25.00</u>
<u>Keys</u>	_____	<u>300.00</u>

TOTAL OTHER 1743.03

F

TOTAL REVENUE 49070.28

G

ITALIAN AMERICAN CITIZENS CLUB OF SOUTH SAN FRANCISCO

REPORT FOR YEAR ENDING 12/31/2025

OPERATING EXPENSES:

	AMOUNT
Grants and allocations (attach schedule)	5,500.00
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	400.00
Legal fees	
Supplies	6,979.12
Telephone	
Postage and shipping	
Occupancy/Rental	1.00
Equipment rental and maintenance	
Printing and publications	1,435.38
Travel	
Conferences, conventions, and meetings	16,462.32
Interest	
Depreciation, depletion, etc. (attach schedule)	
Advertising	
Bank Charges	
Registration Fees Paid	
Equipment/Supplies	1,496.88
Promotion	
Subcontractors	
Team Clothing, etc.	
Repairs & Maintenance	
Value of Inventory	
Liability Insurance	4,006.00
Other (itemize):	
Dues & California Tax	25.00
SSF Co-sponsorship	416.10
PO Box, Utilities & Wifi	3,196.32
TOTAL	39,918.12

H

STATEMENT OF EQUITY
For the Year ending 12/31/2025

	2025	CHANGES	BALANCE	
① Beginning Balance (01/01/2024)			\$ 63,707.39	CHECKING
CONTRIBUTIONS, gifts, grants		3,573.00 A		\$
PROGRAM revenue		3,486.57 B		CD
MEMBERSHIP fees/dues		17,897.50 C		
Gross Profit from Sales		D		
SPECIAL EVENTS/fundraisers		22,370.18 E		
OTHER		1,743.03 F		
SUBTOTAL of REVENUE		49,070.28 G		
		SUBTOTAL	49,070.28	
		Total Liabilities Paid	39,918.12 H	
② Ending Balance (12/31/2025)			74987.26	
			CHECKING 32,859.55	
			CD+Int. 42,127.71	

☒ 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.

Barbara Karamian
Treasurer

[Signature]
President

3 June 2026
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 will be announced.

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: ITALIAN AMERICAN CITIZENS CLUB OF SO

Signature: 

Print Name: Leo Pierini

Title: President