



Fort Bend County Parks and Recreation Community Use Request Form

COMMUNITY USE CRITERIA

Tax Exempt Entities which serve Fort Bend resident communities and can provide copies of their active 501(c)(3) tax-exempt designations are eligible to schedule and use community rooms and pavilions with use fees waived. Use shall be, up to a maximum of one use per month, during regular rental hours (Monday–Friday from 8:00 a.m. to 4:00 p.m.).

Schedules are subject to availability and management approval. Events/meetings must be booked at least 30 days out, and no more than 12 months out. Should significant set up be required, the County may require the entity requesting use to provide assistance necessary for room set up at the entity's own cost. The Authorized Representative for the entity must complete the FACILITY USE AGREEMENT & GUIDELINES prior to the Approval and must ensure that the event/meeting does not allow for more than 50 attendees.

Requests must be submitted by use of this Community Use Request Form, and will be reviewed/approved before any reservations are made. Staff will make every effort to notify applicant within five (5) business days of the determination, whether or not the request can be honored, and will follow-up with the appropriate rental documents. Questions regarding community Use Requests should be directed to the Parks Director at (832) 471-2583. Exceptions to the Community Use Criteria shall only be made by a waiver approved by Commissioners Court.

Entity requesting facility use: FILIPINO CANCER NETWORK OF AMERICA - METRO HOUSTON

Authorized Representative Name, Title: CHERRY SLOAN-MEDRANO ^{FOUNDER} COORD [FCNA-MH)

Term of Office (if applicable): TWO YEARS

Contact Information (Phone, Email Address): [REDACTED]

Organization Mailing Address: [REDACTED]

Secondary Contact Name, Title: CHONA SANDOZ - CO-COORDINATOR

Is your organization a federally-designated 501(c)(3)? YES

If so, please attach a copy of your designation certificate with this request

What is your organization's purpose? A. TO PROVIDE COMPASSIONATE CARE AND SUPPORT TO PTS. WITH CANCER, THEIR FAMILIES & CAREGIVERS
B. TO MAINTAIN & PROMOTE QUALITY OF LIFE THROUGH EDUCATION, NETWORKING AND EFFICIENT UTILIZATION OF COMMUNITY RESOURCES

Do you provide direct services to the citizens of the County, and if so, what are they?

YES - REFERRAL & NAVIGATION @ MD ANDERSON CANCER CTR; CANCER EDUCATION; HEALTH FAIRS; FUNDRAISERS FOR CANCER SURVIVORS; REFERRAL TO COMMUNITY RESOURCES

Has your entity used County Parks facilities previously, and if so, when and for what sorts of functions?

YES - ANNUAL CELEBRATION OF LIFE HEALTH FAIR & PICNIC EVERY OCTOBER SINCE 2008 @ KILTY HOLLOW PARK

Complete usage request chart on following page

Date & Times Requested	Type of Function	Recurring? If so, frequency?	Est. # Attending	Room Preference & Equipment Required	Room Booked Tentatively	Firmed-up
★ 1. OCT. 29, 2022	CELEB. OF LIFE MF + PICNIC	YES /	25-50	PARK / PAU.	PAU. AA	
★ 2. [REDACTED]		ANNUALLY		AA		
3. [REDACTED]		YEARLY				
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						

Staff Use Only:

Approvals:

X: _____

Date: _____

X: _____

Date: _____

Reservation agreement sent to client:

Date: _____

Form Approved by Commissioners Court on: _____

NOEL L. CARIÑO, CPA

2314 Parkhaven Drive . Sugar Land . TX 77478

Tel (713) 502-4434

May 2, 2022

Cherry Sloan-Medrano, President
Filipino Cancer Network of America – Metropolitan Houston
[REDACTED]
Missouri City, TX 77459

Re: IRS Filing

Dear Cherry,

Enclosed for your files is a copy of confirmed filing of Form 990-N with the Internal Revenue Service for the year 2021.

If you have any question or need additional information, please let me know.

Sincerely,





Confirmation

[Home](#) | [Security Profile](#) | [Logout](#)

Your Form 990-N(e-Postcard) has been submitted to the IRS

- **Organization Name:** FILIPINO CANCER NETWORK OF AMERICA-METROPOLITAN HOUSTON
- **EIN:** 263564440
- **Tax Year:** 2021
- **Tax Year Start Date:** 01-01-2021
- **Tax Year End Date:** 12-31-2021
- **Submission ID:** 10065520221175517909
- **Filing Status Date:** 04-27-2022
- **Filing Status:** Accepted

MANAGE FORM 990-N SUBMISSIONS

Department of the Treasury
Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2021

Open to Public Inspection

A For the 2021 Calendar year, or tax year beginning 2021-01-01 and ending 2021-12-31

B Check if available

- ☐ Terminated for Business
- ☒ Gross receipts are normally \$50,000 or less

C Name of Organization: FILIPINO CANCER NETWORK OF
AMERICA-METROPOLITAN HOUSTON3139 SHORE VIEW LANEMISSOURI CITY, TX, US77459D Employee Identification
Number 26-3564440

E Website:

F Name of Principal Officer: CHERRY SLOAN-MEDRANOMISSOURI CITY, TX, US77459

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.