Budget Fiscal Year: 2015-2016  Meeting Date: 7/27/2016  Agenda Item: 6. E. 1.	Department of Neighborhood Board Vote Form	Empowerment	EMPOWER LA					
Meeting Date: 7/27/2016  Agenda Item: 6. E. I.	NC NAME: Encino							10
Agranda I tem:    G. E. I.							ITEMS:	
Description: Approve June 2016 MER    Other Non-Hunding Action field								
Vote Count  *Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed.  Board Member Name Board Position Yes No Abstain *Recused Absent Ineligib UNNIE KEUSSEYAN RELIGIOUS REP X BOERA GEORGE PARK ADVOCATE X BOERA GEORGE PARK ADVOCATE X BOERA GEORGE PARK ADVOCATE X BOINGERL AT LARGE REP X BOINGERL AT LARGE REP X BUSINERSE BUSINER BUSINERS BUSINER BUSINERS BUSINESS BUSINERS BUSINESS BUSINERS BUSINESS BUSINERS BUSINESS BUSINERS BUSINESS BUSINERS BUSINESS BUS	Agenda Item: O. E. 1.							
**Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed.  **Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed.  **Board Member Name**  Board Position				THER: NON-FUND	DING ACTION IT	EM		
**Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed.  **Board Member Name**  Board Position**  **Recused Absent**  RELIGIOUS REP**  X	Description: Ap	prove June 2016 MER						
*Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed.  *Board Member Name**  Board Position**  *Recused**  RELIGIOUS REP**  X  ARCOL LEVIN**  ENCINO PROPERTY OWNERS**  X  BERRA GEORGE**  PARK ADVOCATE**  X  BAREA 5 REP**  X  BAREA 5 REP**  X  BUDILOT COHEN**  BERRALD SILVER**  HOMEOWNERS OF ENCINO**  X  BERRALD SILVER**  AREA 4 REP**  X  BERRALD SILVER**  AREA 4 REP**  X  BERRALD SILVER**  AREA 1 REP**  X  BERRALD SILVER**  AREA 2 REP**  X  BERRALD SILVER*  AREA 4 REP**  X  BERRALD SILVER*  AREA 4 REP**  X  BERRALD SILVER*  A								
*Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed.  *Board Member Name**  Board Position**  *Recused**  RELIGIOUS REP**  X  ARCOL LEVIN**  ENCINO PROPERTY OWNERS**  X  BERRA GEORGE**  PARK ADVOCATE**  X  BAREA 5 REP**  X  BAREA 5 REP**  X  BUDILOT COHEN**  BERRALD SILVER**  HOMEOWNERS OF ENCINO**  X  BERRALD SILVER**  AREA 4 REP**  X  BERRALD SILVER**  AREA 4 REP**  X  BERRALD SILVER**  AREA 1 REP**  X  BERRALD SILVER**  AREA 2 REP**  X  BERRALD SILVER*  AREA 4 REP**  X  BERRALD SILVER*  AREA 4 REP**  X  BERRALD SILVER*  A	L							
NNIE KEUSSEYAN  RELIGIOUS REP  X  AROL LEVIN  ENCINO PROPERTY OWNERS  X  DEBRA GEORGE  PARK ADVOCATE  X  DAREA 5 REP  X  DOUG KRIEGEL  AT LARGE REP  X  DEBRA GEORGE  AT LARGE REP  X  DOUG KRIEGEL  AT LARGE REP  X  DEBRALD SILVER  HOMEOWNERS OF ENCINO  X  BLENN BALLEY  PUBLIC SAFETY  X  EENRY ESHELMAN  AT-LARGE REP  X  ESS WHITEHILL  AREA 4 REP  X  AREA 7 REP  X  AURA SHOVLOWSKY  AREA 1 REP  X  AURA SHOVLOWSKY  AREA 1 REP  X  AREA 6 REP  X  AREA 7 REP  X  AREA 1 REP  X  AURA SHOVLOWSKY  AREA 1 REP  X  AREA 2 REP  X  AREA 2 REP  X  ARAR LEVINSON  ENCINO CHAMBER OF COMM.  X  ARAR LEVINSON  AREA 2 REP  X  ARAR LEVINSON  ARAR LEVINSON  ARAR LEVINSON  BUSINESS REP  X  ARAR LEVINSON  APARTIMENTICONDO REP  X  ARAR LEVINSON  ARAR LEVIN	*Recused-Boardmembe			ay not return t	to the room	until after the v	ote is comple	eted.
INNIE KEUSSEYAN  RELIGIOUS REP  X AROL LEVIN  ENCINO PROPERTY OWNERS  X  DEBRA GEORGE  PARK ADVOCATE  X  DIANE ROSEN  AREA 5 REP  X  DOUG KRIEGEL  AT LARGE REP  X  LILOT COHEN  PLU  X  LILOT COHEN  PLU  X  BERALD SILVER  HOMEOWNERS OF ENCINO  X  SEEN HOMEOWNERS OF ENCINO  X  SEEN HALLEY  PUBLIC SAFETY  X  EENRY ESHELMAN  AT-LARGE REP  X  EENRY ESHELMAN  AT-LARGE REP  X  MESTERLE  AREA 7 REP  X  AREA 4 REP  X  AREA 3 REP  X  AURA SHOVLOWSKY  AREA 1 REP  X  AURA SHOVLOWSKY  AREA 1 REP  X  AREA 1 REP  X  AREA CREP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 2 REP	loard Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
DEBRA GEORGE  PARK ADVOCATE  X  DIANE ROSEN  AREA 5 REP  X  DOUG KRIEGEL  AT LARGE REP  X  BELOT COHEN  PLU  X  BERALD SILVER  HOMEOWNERS OF ENCINO  X  BLENN BAILEY  PUBLIC SAFETY  X  BERN WHITEHILL  AREA 4 REP  X  BESS WHITEHILL  AREA 7 REP  X  BENNETH SILK  AREA 3 REP  X  AURA SHOVLOWSKY  AREA 1 REP  X  AURA SHOVLOWSKY  AREA 1 REP  X  AURIE KELSON  AREA 6 REP  X  AREA 6 REP  X  AREA 1 REP  X  AURIE KELSON  AREA 6 REP  X  AREA 1 REP  X  AURIE KELSON  AREA 6 REP  X  AREA 1 REP  X  AURIE KELSON  AREA 6 REP  X  AREA 1 REP  X  AURIE KELSON  AREA 6 REP  X  AREA 1 REP  X  AURIE KELSON  AREA 6 REP  X  AREA 1 REP  X  AURIE KELSON  AREA 6 REP  X  AREA 1 REP  X  AREA 1 REP  X  AURIE KELSON  AREA 2 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 3 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 3 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 3 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 3 REP  X  AREA 3 REP  X  AREA 1 REP  X  AREA								
DIANE ROSEN  AREA 5 REP  X  DOUG KRIEGEL  AT LARGE REP  X  ELIOT COHEN  PLU  X  BERALD SILVER  HOMEOWNERS OF ENCINO  X  BERALD SILVER  HOMEOWNERS OF ENCINO  X  BERNY ESHELMAN  AT-LARGE REP  X  ESS WHITEHILL  AREA 4 REP  X  ENNETH SILK  AREA 7 REP  X  AURA SHOVLOWSKY  AREA 1 REP  AURIE KELSON  AREA 6 REP  X  AURIE KELSON  BERNY ESHELMEN  AREA 2 REP  X  AURIE KELSON  AREA 6 REP  X  AURIE KELSON  AREA 6 REP  X  AURIE KELSON  AREA 2 REP  X  AURICHO CHAMBER OF COMM.  X  ATRICIA BATES  VOLUNTEER SERVICE  X  HERMAN GAMSON  APARTMENTICONDO REP  X  AURICHARD BUSINESS REP  X  AURICHARDSON  EDUCATION REP	AROL LEVIN	ENCINO PROPERTY OWNERS	х					
DOUG KREGEL  AT LARGE REP  X  LLOT COHEN  PLU  X  SERALD SILVER  HOMEOWNERS OF ENCINO  X  SEEN BAILEY  PUBLIC SAFETY  X  SEEN SHITEHILL  AREA 4 REP  X  MESTERLE  AREA 7 REP  X  MARK 1 REP  AURIE KELSON  AREA 6 REP  X  AREA 6 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 3 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 3 REP  X  AREA 1 REP  X  AREA 3 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 3 REP  X  AREA 1 REP  X	DEBRA GEORGE	PARK ADVOCATE	х				-	
LIOT COHEN  PLU  X  BERALD SILVER  HOMEOWNERS OF ENCINO  X  BLENN BAILEY  PUBLIC SAFETY  X  BENRY ESHELMAN  AT-LARGE REP  X  ESS WHITEHILL  AREA 4 REP  X  MESTERLE  AREA 7 REP  X  ALURA SHOVLOWSKY  AREA 1 REP  X  ALURA SHOVLOWSKY  AREA 6 REP  X  AREA 6 REP  X  AREA 6 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 3 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 3 REP  X  AREA 3 REP  X  AREA 3 REP  X  ARANT MAJARIAN  BUSINESS REP  X  ARANT MAJARIAN  ARANT MAJARIAN  BUSINESS REP  X  ARANT MAJARIAN  ARANT MAJARIAN  BUSINE	JIANE ROSEN	AREA 5 REP	х					
ELIOT COHEN  PERALD SILVER  HOMEOWNERS OF ENCINO  SLENN BAILEY  PUBLIC SAFETY  X  HENRY ESHELMAN  AT-LARGE REP  X  ESS WHITEHILL  AREA 4 REP  X  MESTERLE  AREA 7 REP  X  AURA SHOVLOWSKY  AREA 1 REP  AURA SHOVLOWSKY  AREA 6 REP  X  AREA 6 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 2 REP  X  AREA 3 REP  X  AREA 1 REP  X  AREA 3 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X  AREA 2 REP  X  AREA 1 REP  X	OOUG KRIEGEL						х	
BERALD SILVER HOMEOWNERS OF ENCINO X BLENN BAILEY PUBLIC SAFETY X BENRY ESHELMAN AT-LARGE REP X BESS WHITEHILL AREA 4 REP X BESS WHITEHILL AREA 7 REP X CENNETH SILK AREA 3 REP X AURA SHOVLOWSKY AREA 1 REP X AURA SHOVLOWSKY AREA 6 REP X AREA 6 REP X AREA 6 REP X AREA 6 REP X AREA 1 REP X AREA 1 REP X AREA 1 REP X AREA 6 REP X AREA 6 REP X AREA 1 REP X AREA 6 REP X AREA 1 REP X AREA 1 REP X AREA 6 REP X AREA 6 REP X AREA 1 REP X ARE			x				-	
SEENN BAILEY PUBLIC SAFETY X  SEEN WHITEHILL AREA 4 REP X  SEEN WHITEHILL AREA 4 REP X  SEENNETH SILK AREA 3 REP X  AURA SHOVLOWSKY AREA 1 REP X  AURIE KELSON AREA 6 REP X  AURIE KELSON AREA 6 REP X  AURIE KELVINSON ENCINO CHAMBER OF COMM. X  PATRICIA BATES VOLUNTEER SERVICE X  SHERMAN GAMSON APARTMENT/CONDO REP X  AURANT MAJARIAN BUSINESS REP X  AURIO CHARDSON EDUCATION REP X  AURIO CHARDSON APARTMENT/CONDO REP X  AURIO CHARDSON ARCHMENT/CONDO REP X  AURIO CHARDSON APARTMENT/CONDO REP X  AURIO CHARDSON ARCHMENT/CONDO REP X  AURIO CHARDSON ARCHMENT/CONDO REP	SERALD SILVER	HOMEOWNERS OF ENCINO	x					
EENRY ESHELMAN AT-LARGE REP  ESS WHITEHILL AREA 4 REP X  MESTERLE AREA 7 REP X  CENNETH SILK AREA 3 REP X  AURA SHOVLOWSKY AREA 1 REP X  AURIE KELSON AREA 6 REP X  MARK LEVINSON ENCINO CHAMBER OF COMM. X  ATRICIA BATES VOLUNTEER SERVICE X  COTT LINDEN AREA 2 REP X  CHERMAN GAMSON APARTMENT/CONDO REP X  AURICH MAJARIAN BUSINESS REP X  AURICH MAJARIA								
ESS WHITEHILL  AREA 4 REP  X  IM ESTERLE  AREA 7 REP  X  X  X  X  X  X  X  X  X  X  X  X  X							x	
AREA 3 REP  AURIE KELSON  AREA 6 REP  X  MARK LEVINSON  ENCINO CHAMBER OF COMM.  ATRICIA BATES  VOLUNTEER SERVICE  X  COTT LINDEN  AREA 2 REP  X  MARNT MAJARIAN  BUSINESS REP  X  MILLER  BUSINESS REP  X  X  X  X  X  X  X  X  X  X  X  X  X		AREA 4 REP	х					
AREA 3 REP  AURIE KELSON  AREA 6 REP  AURIE KELSON  AREA 6 REP  X  MARK LEVINSON  ENCINO CHAMBER OF COMM.  X  ATRICIA BATES  VOLUNTEER SERVICE  X  COTT LINDEN  AREA 2 REP  X  HERMAN GAMSON  APARTMENT/CONDO REP  X  AVARANT MAJARIAN  BUSINESS REP  X  AURICTORIA MILLER  BUSINESS REP  X  X  X  X  X  X  X  X  X  X  X  X  X	~							
AURIE KELSON  AREA 6 REP  X  MARK LEVINSON  ENCINO CHAMBER OF COMM.  X  ATRICIA BATES  VOLUNTEER SERVICE  X  COTT LINDEN  AREA 2 REP  X  HERMAN GAMSON  APARTMENT/CONDO REP  X  ARANT MAJARIAN  BUSINESS REP  X  MICTORIA MILLER  BUSINESS REP  X  DRIOHN RICHARDSON  EDUCATION REP  X		AREA 3 REP	х					
AURIE KELSON  AREA 6 REP  X  MARK LEVINSON  ENCINO CHAMBER OF COMM.  X  ATRICIA BATES  VOLUNTEER SERVICE  X  COTT LINDEN  AREA 2 REP  X  CHERMAN GAMSON  APARTMENT/CONDO REP  X  ARANT MAJARIAN  BUSINESS REP  X  AURICTORIA MILLER  BUSINESS REP  X  ADRIOHN RICHARDSON  EDUCATION REP  X  AREA 2 REP  X  X  X  X  X  X  X  X  X  X  X  X  X	AURA SHOVLOWSKY	AREA 1 REP						x
ATRICIA BATES  VOLUNTEER SERVICE  X  COTT LINDEN  AREA 2 REP  X  HERMAN GAMSON  APARTMENT/CONDO REP  X  VARANT MAJARIAN  BUSINESS REP  X  TCTORIA MILLER  BUSINESS REP  X  DRIOHN RICHARDSON  EDUCATION REP  X  X  X	AURIE KELSON	AREA 6 REP	х					
COTT LINDEN  AREA 2 REP  X HERMAN GAMSON  APARTMENT/CONDO REP  X ARANT MAJARIAN  BUSINESS REP  X  ADRIOHN RICHARDSON  EDUCATION REP  X  X  X  X  X  X  X  X  X  X  X  X  X	**	ENCINO CHAMBER OF COMM.						
HERMAN GAMSON  APARTMENT/CONDO REP  X ARANT MAJARIAN  BUSINESS REP  X ADRIOHN RICHARDSON  EDUCATION REP  X  X  X  X  X  X  X  X  X  X  X  X  X	ATRICIA BATES	VOLUNTEER SERVICE	х		<del></del>			
VARANT MAJARIAN  BUSINESS REP  X  JORIOHN RICHARDSON  EDUCATION REP  X  X  X	COTT LINDEN	AREA 2 REP					х	
VARANT MAJARIAN  BUSINESS REP  X  JORIOHN RICHARDSON  EDUCATION REP  X  X  X	HERMAN GAMSON	APARTMENT/CONDO REP	х					
ADRIOHN RICHARDSON EDUCATION REP X  ADRIOHN RICHARDSON EDUCATION REP X  X	/ARANT MAJARIAN	BUSINESS REP	х					
ADRIOHN RICHARDSON EDUCATION REP X		BUSINESS REP	х					
	ADRIOHN RICHARDSON	EDUCATION REP						X
IC Quorum: 11 Totals: 16 3 2								
IC Quorum: 11 <b>Totals:</b> 16 3 2								
IC Quorum: 11 <b>Totals:</b> 16 3 2								
VC Quorum: 11 Totals: 16 3 2								
to quotanti.	NC Quorum: 11	Totals:	16		Y		3	2
We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a			the informat	on presented	on this form	is accurate and	complete, ar	d that a
public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action.	4							
						5)		
	Treasurer's Signature	And an		Signer's S	ignature:	14	Lear	2/
Treasurer's Signature: Signature: DA Seng	Print/Type name	: PATRICIA BATES		Print/Typ	pe name: DE	BRA GEORGI	0 00	

Department of Neighborhood B	Empowerment_						(III)	
Reporting Month:	porting Month: JUNE		MONTHLY EX	PENDITURE REPOR	RT	MPOWER LA		
NG Name:	Encino		Submitted:	7/23/2016 14:41:39	Dep	Department of NEIGHBORHOOD TAMPENTEMENT		
STATE OF THE PARTY	5-2016							
FILL IN ALL THE UNSHADED (	WHITE) FIELDS	(Must be submitted to the	Department within 10 day	s of Board Approval	along with documen	tation and hard cop	oy)	
EXPENDITURES BY LINET	TEM (for more t	han 12 expenditures, yo	u may continue entering o	on page 3 of this we	orksheet - see belov	<b>~</b> )		
A Date / Item / Service Des	scription	BUDGET CATEGORY	VENDOR	INVOICE NUMBER	OUT OF STATE VENDOR	1099 Reportable	TOTAL	
1 2016 06 27		OUTREACH	Neighborhoods				\$1,000.	
2 2016 06 27		OUTREACH	NC Awards				\$250	

	CATEGORY		NUMBER	VENDOR	Reportable	TOTAL
1 2016 06 27	OUTREACH	Neighborhoods				\$1,000.00
2 2016 06 27	OUTREACH	NC Awards				\$250.00
3 2016 06 30 Reimburse printing cost	ELECTION	Sherman Gamson				\$52.28
4 2016 06 07 2 months of web maintenance	OUTREACH	The Web Comer	13314, 13447			\$198.00
5 2016 06 07 Website update	OUTREACH	The Web Corner	13397			\$1,500.00
6 2016 06 16 Temporary staffing	OPERATIONS	Apple One Employment				\$1,568.87
7 2016 06 17 NPG ENC13701	NPG	Lanai Road School				\$428.00
8 2016 06 17 NPG ENC13686	NPG	Lanai Road School				\$708.00
9 2016 06 17 NPG ENC 13702	NPG	Encino Charter School				\$1,000.00
10 2016 06 21 Temporary staffing	OPERATIONS	Partners in Diversity	24436			\$389.92
11 2016 06 21 Temporary staffing	OPERATIONS	Apple One Employment	S3629744			\$380.00
12 2016 06 29 Temporary staffing	OPERATIONS	Partners in Diversity	24488			\$223.59
SUSTROYAL Expenditures by Line Item May in	clude totals on 200 3, i	externit				911,490,65
B CUMULATIVE EXPENDITURES FROM PRIOR N	IONTHS					\$11.400.10 \$12.400.10
C OUTSTANDING COMMITMENTS						
C 1. Outstanding Checks (checks that have be	en issued, but have not	yet cleared the account)				\$10,166.38
C 2. Rent/Lease						
C 3. Contractual Services						
C 4. Large Purchases						
C 5. Neighborhood Purpose Grants (pending o	or in process)					
C 6. Temporary Staffing Services			F	OLAR	\$ 7507	\$188.53
C 7. Storage			F	OLAR OFEC	1,0003	
C 8. Other Outstanding Commitments	==> Description:					\$1,750.00
QUITOTAL: Curistanding Commitments						\$12,104.91
D Total Expenditures & Commitments						\$58,003.64
E Total Adjustments by Department (such as us	e taxes assessed, credit	s from prior fiscal years, etc) (u	use '+' for credits, '-' fo	or deductions)		\$18,006.67
F Approved Budget 2015-2016						\$42,000.00
G Balance of Budget						\$2,003.03

Revision Date 1-26-15



Reporting Month:	JUNE
NC Name:	Encino

MONTHLY CASH RECONCILIATION Beginning Balance **Funds Deposited** Total Available Cash Spent this Month (C) = (A+B) \$15,528.09 \$10,012.48 \$11,432.63 \$25,540.57

Remaining Balance B 6/20/15 Outstanding 4089.67
(E)=C-D
City Council 11,422.00

THE MEMORY PROPERTY AND THE MEMORY AND ADMINISTRATION OF THE PARTY AND ADMINISTRATION OF THE P	r - Sagres - American is to consider the consider to the consideration of the 1988	MONTHLY B	UDGETARY ANALYSIS	Chair which in a contract which is not to him in a sold		and the second of the second o
Category Identifier	Budget Category	Adopted Budget (A)	Total Spent this Month (B)	FY 2014-15 Expenses Cleared in FY 2015-16 (C)	Total Spent in Prior Months (D)	Unspent Budge Balance (E) = A - B + C - I
100	Operations	\$13,500.00	\$6,122.04	\$0.00	\$19,960.74	-\$12,582.78
200	Outreach	\$9,100.00	\$3,122.31	\$0.00	\$4,905.09	\$1,072.60
300	Community Improvement		\$0.00	M		\$0.00
400	NPG	\$11,000.00	\$2,136.00	(A) \$2,495.00	\$8,316.00	\$3,043.00
500	Elections	\$8,400.00	\$52.28	6	\$1,284.27	\$7,063.45
900	Unallocated		\$0.00	(8) \$15,511.67	\$0.00	\$15,511.67
	TOTAL	\$42,000.00	\$11,432.63	\$18,006.67	\$34,466.10	\$14,107.94

Outstanding at

C1 10166.38 c6 188,53

C8 1750,00 12104-91

<>-12104.91=2003.03

#### **NEIGHBORHOOD COUNCIL DECLARATION**

We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and will furnish additional documentation to the Department of Nelghborhood Empowerment upon request.

Treasurer Signature		Signer's Signature	
Print Name	PATRICIA BATES	Print Name	DEBRA GEORGE
Date		Date	

**NC Additional Comments** 

Revision Date 1-26-15

Reporting Month:	JUNE	
NC Name:	Encino	

ADDITIONAL EXPENDITURES BY LINE ITEM (0  A Date / Item / Service Description	BUDGET CATEGORY	VENDOR	INVOICE NUMBER	OUT OF STATE	1099 Reportable	TOTAL
13 2016 06 29 Reimburse toner cart., Meeting expense	OPERATIONS	Poquito Mas, S&F)	Reimburse Patric	ia Bates		\$318.70
14 2016 06 08 Office supplies, toner	OPERATIONS	Office Depot				\$394.53
15 2016 06 13 Internet	OPERATIONS	Time Warner Cable				\$124.73
16 2016 06 22 Meeting - drinks	OPERATIONS	Smart & Final				\$4.36
17 2016 06 22 Paper shredder	OPERATIONS	Office Depot				\$108.99
18 2016 06 23 Coffee for meeting	OPERATIONS	Dunkin Donuts				\$31.98
19 2016 06 23 Food for meeting	OPERATIONS	Fresh Bros				\$232.82
20 2016 06 27 Computer and monitor for office	OPERATIONS	Best Buy				\$1,485.49
21 2016 06 29 Toner, paper and supplies	OPERATIONS	Office Depot				\$353.06
22 2016 06 30 Budget advocates	OPERATIONS	Advocates			-	\$500.00
23 2016 06 30 Bank charge	OPERATIONS	Union Bank				\$5.00
24 2016 06 30 Business cards-Debra George	OUTREACH	Vistaprint				\$14.15
25 2016 06 30 Business cards-Victoria Miller	OUTREACH	Vistaprint				\$22.88
26 2016 06 30 Business cards-Glenn Bailey	OUTREACH	Vistaprint				\$22.88
27 2016 06 30 Business cards-Eliot Cohen	OUTREACH	Vistaprint				\$22.88
28 2016 06 30 Business cards-Patricia Bates	OUTREACH	Vistaprint				\$22.88
29 2016 06 30 Business cards-Laurie Kelson	OUTREACH	Vistaprint				\$22.88
30 2016 06 30 Business cards-Kenneth Silk	OUTREACH	Vistaprint				\$22.88
31 2016 06 30 Business cards-Mark levinson	OUTREACH	Vistaprint				\$22.88
32						
33						
34						
35						
36						
SULITOTAL: Expectitives by Line less						\$1,733.97

Revision Date 1-26-15



Charges on 6/30/16 not processed until July:			~		
7/1/2016 FACEBOOK R 650-6187714 CA 650-6187714 CA	Electronic debits	No	No	2.03	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 VISTAPR*VI 866-8936743 MA 866-8936743 MA	Electronic debits	No	No	22.88	
7/1/2016 BEST BUY M SHERMAN OAKS CA SHERMAN OAKS CA	Electronic debits	No	No	34.33	
7/1/2016 B&H PHOTO 800-2215743 NY 800-2215743 NY	Electronic debits	No	No	150.71	
7/1/2016 THEODORE P SUN VALLEY CA SUN VALLEY CA	Electronic debits	No	No	488.90	
7/7/2016 OFFICE DEP 800-463-3768 CA 800-463-3768 CA	Electronic debits	No	No	268.69	
7/5/2016 OFFICE DEP ENCINO CA ENCINO CA	Electronic debits	No	No	135.64	
					\$1,354.86
Items on 6/30/16 screenshots					
7/6/2016 Check #5043 Partners in Diversity	Checks	No	No	392.20	
7/8/2016 Check #5037 Debra George	Checks	No	No	82.82	
Sherman Gamson-note - actually cleared bank 6/30/1	6			-	
7/1/2016 ENCINO COMMUNITY ONLINE PMT WEB UN16821908	B Electronic debits	No	No	4,686.50	
7/5/2016 Southern California Preparedness foundation				850.00	
Los Angeles fire Department Foundation				2,000.00	
Southern California Garden Club				800.00	
					\$8,811.52
TOTAL					\$10,166.38

4



Scheduled Payments (5) History Make Payments Recurring & Auto Payments Add Payee In Process **\$ Pay From** Arrive By Amount Payee \$4,686.50 Encino Community Center - E... Business Basics Chec -2811 07/01/2016 Business Basics Chec -2811 07/06/2016 \$ 392,20 Partners in Diversity, Inc. - 1510 07/05/2016 \$850.00 Business Basics Chec -2811 Southern California Prepared... \$5,928.70 **Total Amount** 

Pending	ı
---------	---

Payee	<u> </u>	Pay From		Arrive B	<b>\$</b>	Amount 💠
Los Angeles F	ire Dept, Found	Business Bas2811	\$12,810.36	07/07/2	016 \$	2,000.00
Southern Cali	fornia Garden C	Business Bas2811	\$12,810.36	07/07/2	016 \$	800.00

Total Amount \$2,800.00



Add Payee	Make Payments	Recurring & Auto Payments	Scheduled Payments (5)	History
April 2, 2016 -	June 30, 2017	▼ Find a Payment by Payee or	Amount	
Find				
Arrive By	Payee	All Pay From Accounts	Draft - Outstanding	Amount 🖨
06/29/2016	Debra George - EXP	Business Bas2811	Sent - Draft Outstanding	\$82.82
				\$52.2

Note: this item schooly aleared bank on 6/30/16



#### STATEMENT UnionBank of Accounts

UNION BANK CENTURY CITY 0206 PO BOX 512380 LOS ANGELES

CA 90051-0380

**ENCINO NEIGHBORHOOD COUNCIL** 200 N SPRING ST FL 20 LOS ANGELES CA 90012-4801

Page 1 of 3 Statement Number: 06/01/16 - 06/30/16

Telephone Banking

For 24-hour Automated Direct Service 800-238-4486 800-826-7345(TDD)

Representatives are available Monday through Saturday

To open additional accounts, or apply for loans, call your banking office at 310-551-8900

You may also access your account online at unionbank.com

Thank you for banking with us since 2014

Save time by depositing checks directly from your smartphone or tablet. Easy Usage: It is simple to submit a deposit. Select an account, enter the amount and take a photo of both sides of the check. It's that simple. Quick Confirmation: Check your deposit status online or with your mobile app. For more information, go to: unionbank.com/mobilecheckdeposit

#### **Business Basics Checking Summary**

Account Number:

Days in statement period: 30

Balance on 6/1 Additions Subtractions	\$		<b>15,528.09</b> 10,012.48 -11,432.63
	Checks	-1,302.28	,
Pay	ments	-6,715.08	
Purc	chases	-2,910.27	
Other Withd	rawals	-505.00	
Balance on 6/30	\$		14,107.94

Statement Average Ledger Balance

17,246.56

We waived your service charge this statement period.

#### **Additions**

Date	Description/Location	Reference	Amount
6/13	OFFICE DEPOSIT # 0000609415	76411752	\$ 2,495.00
6/13	CITY OF LOS ANGE EFT PAYMT PPD ***********0735	50170256	7,517.48
Total			\$ 10,012.48

#### Checks

Number	Date	Reference	Amount	Number	Date	Reference	Amount
5035	6/27	08459818	1,250.00	5039*	6/30	08315582	52.28
Total							\$ 1,302.28

Payments online and electronic banking

Date	Description/Location	Reference	Amount
6/7	THE WEB CORNER, ONLINE PM	T WEB 55657158 \$	198.00
	UN1682190818POS		
6/7	THE WEB CORNER, ONLINE PM1	r WEB 55657159	1,500.00
	UN1682190818POS		
6/16	APPLEONE EMPLOYM ONLINE PM	T WEB 52643110	1,568.87
	UN1682190818POS		



Payments online and electronic banking

onic banking		
Date	Description/Location Reference	Amount
6/17	LANAI ROAD SCHOO ONLINE PMT WEB 53656434	428.00
	UN1682190818POS	
6/17	LANAI ROAD SCHOO ONLINE PMT WEB 53656435	708.00
	UN1682190818POS	
6/17	ENCINO CHARTER E ONLINE PMT WEB 53655456	1,000.00
	UN1682190818POS	
6/21	PARTNERS IN DIVE ONLINE PMT WEB 55531593	389.92
	UN1682190818POS	
6/24	APPLEONE EMPLOYM ONLINE PMT WEB 58180916	380.00
	UN1682190818POS	
6/29	PARTNERS IN DIVE ONLINE PMT WEB 52171706	223.59
	UN1682190818POS	
6/29	PATRICIA BATES ONLINE PMT WEB 52171714	318.70
	UN1682190818POS	
Total		\$ 6.715.08

Purchases ATM card and Debit card™ purchases

Date	Description/Location	Reference	Amount
6/8	OFFICE DE 16571 VE ENCINO CA	73368520	\$ 394.53
6/13	TWC*TIME W 888-TWCABLE CA 888-TWCABLE	71948917	124.73
	CA		
6/22	SMARTNFINA ENCINO CA ENCINO CA	71777370	4.36
6/22	OFFICE DEP ENCINO CA ENCINO CA	71777371	108.99
6/23	DUNKIN #35 ENCINO CA ENCINO CA	72502660	31.98
6/23	FRESH BROT ENCINO CA ENCINO CA	72502661	232.82
6/27	BEST BUY M SHERMAN OAKS CA SHERMAN	71637376	1,485.49
	OAKS CA		
6/29	OFFICE DEP ENCINO CA ENCINO CA	73041289	353.06
6/30	VISTAPR*VI 866-8936743 MA 866-8936743 MA	73761394	14.15
6/30	VISTAPR*VI 866-8936743 MA 866-8936743 MA	73761395	22.88
6/30	VISTAPR*VI 866-8936743 MA 866-8936743 MA	73761396	22.88
6/30	VISTAPR*VI 866-8936743 MA 866-8936743 MA	73761397	22.88
6/30	VISTAPR*VI 866-8936743 MA 866-8936743 MA	73761400	22.88
6/30	VISTAPR*VI 866-8936743 MA 866-8936743 MA	73761401	22.88
6/30	VISTAPR*VI 866-8936743 MA 866-8936743 MA	73761402	22.88
6/30	VISTAPR*WE 866-8936743 MA 866-8936743 MA	73761403	22.88
Total			\$ 2,910.27

Other Withdrawals including fees and adjustments

Date	Description/Location	Reference	 Amount
6/30	FEE FOR PURCHASE OF MONEY ORDERS	65004367	\$ 5.00
6/30	WITHDRAWAL # 0000606668	76141204	500.00
Total			\$ 505.00

#### **Information and Banking Office Services**

For each monthly statement period your account includes:

- Unlimited free Information Services calls to 24-hour Automated Direct Service
- Banking office Information Services calls are \$0.00
- Banking office deposits are \$0.00

For the current monthly statement period you made:



#### Information and Banking Office Services

1 banking office deposit.

Your account was not charged for information and banking office services during the statement period.



# 2016 Congress of Neighborhoods / NC Budget Advocates / EmpowerLA Awards Board Support Resolution

We, Debro George (President Name) and
We, Debro George (President Name) and Potricis Botes (Treasurer Name), declare that we are the
President and Treasurer, respectively of the
Resolved: That the Neighborhood Council supports:
LA Congress of Neighborhoods – September 24, 2016 Annual event in the amount of:  \$\text{\$\exititt{\$\text{\$\text{\$\}\$}\$\text{\$\text{\$\text{\$\text{\$\ti
and/or
LA Congress of Neighborhoods – Networking/EmpowerLA Awards event in the amount of:  \$\text{2}\$ 1000 \$\times 500\$ \$\times 500 \$\times 250\$ \$\times 0\$ ther Amount \$\times 250\$
and/or
Neighborhood Council Budget Advocates in the amount of:  \$\propto \\$1000  \\$500  \\$250  \\$*Other Amount \\$
Therefore, be it resolved that the Neighborhood Council approves the submission of this resolution authorizing the Department of Neighborhood Empowerment to transfer funds in the aforementioned amount from our checking account (or appropriation account if funds are available) and into the Congress and/or Budget Advocacy Account(s).
IN WITNESS of the above action, the undersigned has executed and delivered this certificate in the name and on behalf of the Neighborhood Council and as of the date set forth below.
Signature of President Date Date
Signature of Treasurer  Submit this form by emailing jasmine.duckworth@lacity.org, faxing to (213) 978-1751, or mailing to City Hall, 200 North Spring Street. 20 <sup>th</sup> Floor, Los Angeles, CA 90012.  Form must be received by the Department no later than Wednesday, June 22, 2016 in order to be
processed from Fiscal Year 15-16 available funds.

\*Please specify a specific monetary amount, i.e. statements such as "our unused funding for this fiscal year" will not be processed.

6/16 MER

#### Department of Neighborhood Empowerment Funding Request Form NC NAME: Encino 2015-2016 **Budget Fiscal Year: Patricia Bates** Requestor: 22-Jun-16 Request Date: Sherman Gamson Vendor: 6/22/2016 Meeting Date: Address: Agenda Item: Encino State: City: Zip Code: 91316 ■ Neighborhood Purpose Grant Phone: Operations Outreach NC Sponsored Event 52.28 Contract / Lease **☑** Board Member Reimbursement Community Improvement Project Amount:\$ Out of State ☐ 1099 Expense One Time Expense ☐ Monthly ☐ Multiple # of payments If a bank card exemption of the daily \$1,000 limit is required for this request, please provide the date(s) and amount needed for the daily limit to be lifted: Public Benefit To pay expenses for ENC election, as follows: Office Depot 3/16/2016 printing for election \$44.30; 2/5/2016 Super thrift Store Printing for election \$7.98 Description MER ITEM A3 Vote Count (Continued on page 2 if more than 20 Board Members) \*Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed. No Abstain \*Recused Absent Ineligible **Board Member Name Board Position** Yes ANNIE KEUSSEYAN RELIGIOUS REP X CAROL LEVIN ENCINO PROPERTY OWNERS X DEBRA GEORGE PARK ADVOCATE X DIANE ROSEN AREA 5 REP X DOUG KRIEGEL AT LARGE REP X ELIOT COHEN PLU X HOMEOWNERS OF ENCINO GERALD SILVER X **GLENN BAILEY** PUBLIC SAFETY X HENRY ESHELMAN AT-LARGE REP X JESS WHITEHILL AREA 4 REP X JIM ESTERLE AREA 7 REP X KENNETH SILK AREA 3 REP X LAURA SHOVLOWSKY AREA 1 REP X LAURIE KELSON AREA 6 REP X MARK LEVINSON ENCINO CHAMBER OF COMM. X PATRICIA BATES VOLUNTEER SERVICE X SCOTT LINDEN AREA 2 REP X SHERMAN GAMSON APARTMENT/CONDO REP X VARANT MAJARIAN **BUSINESS REP** X VICTORIA MILLER BUSINESS REP X Grand Total (including page 2): 14 NC Quorum: We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action. Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically, i.e. no additional Cash Request Form is required. Treasurer's Signatures Signer's Signature: Print/Type name: Patricia Bates Print/Type name: Debra George 8/2016 Date (mm/dd/yy): Date (mm/dd/yy): ☐ Contract ☐ CIP ☐ Advanced Payment Authorization Code Staff Initials ☐ Approved

☐ Denied

2nd Level

**Department Use Only** 

>\$2,500 NPG Sponsored Event

NC NAME:	Encino	
Meeting Date:	42543	
Agenda Item:	0	

*Recused-Boardmer	Notes the room prior to any dis	ote Count cussion and ma	y not return	to the room i	until after the v	ote is comp	leted.
Board Member Name	<b>Board Position</b>	Yes	No	Abstain	*Recused	Absent	Ineligible
HELLEY BILLIK	PARKS ALTERNATE						X
BRANDON RAPPORT	CHAMBER ALTERNATE						X
		+					
		-					
	P. V.						
				-			
				-			
		-					
		-					
						-	
C Quorum: 11	Totals (this page only):						2

ENC

BUTEN TIMET STORE
16344 SHERMAN WAY
RESEDA CA.
818 654-4806

\* ORDERW 0116 \*
his out all HEG OI CLERK 4 FINE 17:26

Dectroi copies

SUPER THRIFT STORE
18344 SHERMAN WAY

RESEDA CA. 818 654-4806

02/05/2016 FRI

11 NS \$4.99

10 MEN \$2.99

10 TAL \$7.98

ASH \$10.00

14 NO E \$2.02

\* ORDERN 0116 \*

b REG DI CLERK 4 TIME 17:26

Destroi copies

6/22/16 Agends 8.16 Gomson Reimbursemat

### **ENCINO NEIGHBORHOOD COUNCIL**

# CASH EXPENSES SHERMAN GAMSON ELECTIONS CO-CHAIR 2016

	L
Reinb Shemai	
// A	
NC Credit and {	
Credit and	
<u>_</u>	-

ENC	ELECTION	2016			
Date	Vendor	Item	Amount	Total	
Feb. 5	<b>Super Thrift Store</b>	Printing	7.98 ~		V
Mar. 16	Office Depot	Printing	44.30		
Apr. 15	Office Depot	Printing	18.52		-
Apr. 17	Smart & Final	Food	43.96 ~		V
Apr. 17	Smart & Final	Food	6.34 -		
				121.10	

## Invoice

The Web Corner, Inc. 19509 Ventura Blvd. Tarzana CA 91356 (818) 345-7443

Date	Invoice #	Due Date
5/1/2016	13314	5/1/2016

Bill To

Encino Neighborhood Council P.O. Box 260439 Encino, CA 91426

		P.O. No.	Terms	Project
		,		
Quantity	Description	1	Rate	Amount
	Phone Support and General Web Development		99.00	99.00
			Total	\$99.0
			Payments/Credits	\$0.00
			Balance Due	\$99.00

6/16 MER A4

## Invoice

The Web Corner, Inc. 19509 Ventura Blvd. Tarzana CA 91356 (818) 345-7443

Date	Invoice #	Due Date
6/1/2016	13447	6/1/2016

Bill To

Encino Neighborhood Council P.O. Box 260439 Encino, CA 91426

			Balance Due	\$99.00
			Payments/Credits	\$0.00
			Total	\$99.00
	Phone Support and General Web Development		99.00	99.00
Quantity	Description		Rate	Amount
		P.O. No.	Terms	Project

6/16 MER (AH)

## Invoice

The Web Corner, Inc. 19509 Ventura Blvd. Tarzana CA 91356 (818) 345-7443

Date	Invoice #	Due Date
5/3/2016	13397	5/3/2016

Bill To

Encino Neighborhood Council P.O. Box 260439 Encino, CA 91426

		P.O. No.	Terms	Project
Quantity	Description		Rate	Amount
	Re-Develop Website for DONE standards		1,500.00	1,500.0
			Total	\$1,500.0
			Payments/Cred	its \$0.0
	10/110	MER AS	Balance Due	\$1,500.0



**AppleOne Employment Services** 

P.O. Box 29048

Glendale CA 91209-9048

Tel: 818-240-8688

Email: specialbillingvms@ain1.com

TIN: 95-2580864

#### **CITY OF LOS ANGELES**

Attn: Attn: ACCOUNTS PAYABLE **CORPORATE OFFICES** 

> **200 N. SPRING ST. ROOM 2005** LOS ANGELES, CA 90012

Invoice

**Customer No:** 

00950101

Site No:

0079

**Period Ending:** Involce Date:

Multiple 05/25/2016

Invoice No:

S3601288

**Amount Due:** 

\$1,568.87

Payment Term:

**NET 30 DAYS** 

Name	Weekend	Inv Date	Ref Inv No	Reg Hr	Reg Rate	OT Hr	OT Rate	DT Hr	DT Rate	Misc Hr	MIsc Rate	ACA Hr	ACA Rate	Tax	Amount	State	Office
LAINO, ROMINA	04/23/2016	05/04/2016	01-4047619	16.17	\$23.10	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	\$0.00	\$373.45	CA	1002
LAINO, ROMINA	04/30/2016	05/04/2016	01-4047620	14.67	\$23.10	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	\$0.00	\$338.80	CA	1002
LAINO, ROMINA	05/07/2016	05/11/2016	01-4053726	13.17	\$23.10	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	\$0.00	\$304.15	CA	1002
LAINO, ROMINA	05/14/2016	05/18/2016	01-4062277	14.08	\$23.10	0.00	\$0.00	0,00	\$0.00	0.00	\$0.00	0.00	\$0.00	\$0.00	\$325.32	CA	1002
LAINO, ROMINA	05/21/2016	05/25/2016	01-4069825	9.83	\$23.10	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	\$0.00	\$227.15	CA	1002
Sub Total For:				67.92		0.00		0.00		0.00		0.00		\$0.00	\$1,568	1.87	
Grand Total Invoice A	mount			67.92		0.00		0.00		0.00		0.00		\$0.00	\$1,5	68.87	

Please remit payment to:

**AppleOne Employment Services** 

P.O. Box 29048

Glendale, CA 91209-9048

You can now pay electronically through



Visit www.ApplePay.com or Call (866)898-7152 for details

6/3/2016 2:32

Page 1 of 7

Department of Neigh	borhood Empowerment						
Funding Request Form				EMPO	WER LA		11
				HI GHEORHOS	T END WIND WINE		15
NC NAME: Encino							
Budget Fiscal Year: 2014/201	5	Mpra		r: Lenai Road			
Request Date:		_		Committee of the Party of the P	R. ES B	coster	
Meeting Date: 07/22/2015		-	Addres		Lanai	Rel	
Agenda Item: 7]1		-	City:	Encino		te: CA	
Operations Outreach	NC Spansored Event Neighborhood Pu		Zip Cod	- delignating representation		818 758	1930
	ember Réliminaryment Community Impre		Amoun	-			promptes and the Print Section
Out of State 1099 Expe		Mul	tiple # of pay	ments	-		
	e daily \$1,000 limit is required for this re amount needed for the daily limit to be						
Public Benefit	: Our community's under		and disno	sal of haz	ardous wa	ste will be	increase
Description	arough these students' studie						
S	tuations and share the scient	tific proced	dures with	the com	nunity at la	arge.	
<u> </u>	*		13 000		· epas	-	
The second secon	Vote Count (continue				Charles of the County County		
*Recused-Boardmemb	er must leave the room prior to any disc	ussion and mi	ay not return	to the room t	inth after the v	ote is compli	etec
Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
Al Mass	Al-Large Representative	Х					
Anni Keusseyan	Area 1 Representative	X					
Art Sherman	Public Safety Representative					х	
Carol Levia	Facino Property Owners Rep.	Х					
David Hudgins	Area 7 Representative	х					
Debra Georga	Fark Advocate/Environment Rep.		The second section is a second section of the second section of the second section sec			X	
Eliot Cohen	Planning and Land Use Rep.			x			
Gerald Silver	Homeowners of Encino Rep.	х					
ason Ackerman	Area 2 Representative	X					
Cathy Moghimi-Patterson	At-Large Representative	х					
Leu Silk	Arca 3 Representative	X					
aurie Kelson	Area 6 Representative	х					
Mark Levinson	Encino Chamber Representative	X				,	_
haron Brewer	Volunteer/Service Representative	x		The state of the s			
belley Rivlin	Education Representative	х					
derman Ganson	Apartment/Condo Representative	X					
alar Dardarian	Religious Organization Rep.					х	
odd Rubinstein	Business Representative	x			-		
ictoria Miller	Business Representative				-	x	
lenn Bailey	At-Large Alternate			and the second s			
C Quorum:	Grand Total (including page 2):	16	0	1	0	4	0
		1					
	e above indicated Council, declare that th						hat a public
eeting was held in accordance w	ith the Brown Act, where with a quorum of	of Board Mem	bers present,	the Council ag	proved the ab	ove action.	
nce the Department approves a F	unding Request submitted, the Departme	ent will transfe	r the request	ed amount int	o the Neighbor	hood Council	's checking
count automatically, i.e. no addi-	tional Cash Request form is required				111	(1)	
Treasurer's Signature:	Alixibran		Signer's Sig	nature:	/ yell	1	-1
Print/Type name:	Albert Mass		Print/Type	name:	Told	NUSIA	slu.
Date (mm/dd/yy).	3/23//6		Date (mm/	dd/yy):	4-1	2-201	- distance of the same of the
Department Use Only	Contract COP Advanced Payment	Approved	Staff Traitrals 05/11	/16 [1st	05/11/16	ENC137	
Department Ose Only	>\$2,500 NPG Sponsored Event	Denied	5011	1 1 200	Leyel	I FIADISI	

Revised 1-26-15

NC NAME:	Encino	
Meeting Date:	42207	
Agenda Item:	711	

**Vote Count** \*Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed. Board Member Name **Board Position** Yes \*Recused Absent Ineligible Abstain Diane Rosen Area 5 Representative X Herry Eshelman for Victoria Miller Business Alternate X Jean Stauber Education Alternate Pat Bates Park Advocate/Env. Alternate Norma Landau Homeowners of Encino Alternate Racquel Marshall-Cianci Planning and Land Use Rep. Valerie Dean Aren 3 Alternate Deborah Watson Area 7 Alternate

0

0

0

Totals (this page only):

NC Quarum:

Đ

6/16 MER AJ.1

D

0

# Neighborhood Council Funding Program APPLICATION for Neighborhood Purposes Grant (NPG)



This form is to be completed by the applicant seeking the Neighborhood Purposes Grant and submitted to the Neighborhood Council from whom the grant is being sought. All applications for grants must be reviewed and approved in a public meeting. The Neighborhood Council (NC), upon approval of the application, shall submit the approved application along with all required documentation to the Department of Neighborhood Empowerment.

	Name of NC from which you are seeking this gra-	nt: Er	cino Neighb	orhood Co	uncil	
SEC	CTION I- APPLICANT INFORMATION			3		
1a)	Lanei Road Elementary School		10/1			
166.7	Organization Name	Feder	ol LD. # (EIN#)	State of Inc.	orporation	Date of 501(c)(3) Status (if applicable
	4241 Lanal Rd,	Encino		0	2a	91436
1b)	Organization Mailing Address	City		S	tete	Zip Code
1c)	Business Address (If different)	City		S	tate	Zip Code
1d)	PRIMARY CONTACT INFORMATION: Mr. Erick Hansen	(818) 788	L-1590	eric	k.hansen@la	usd.net
	Name	Phone		En	all	•
2)	Type of Organization-Please select one:  Public School (not to include private schools)	or C	501(c)(3) Nor		er than religiou	is institutions)
	Attach Grant Request on School Letterhe	ad	Attach IRS D	etermination	Letter	
	Lanal Road Elementary School 4241 Lanai Rd		Endr	10	Ca	91436
3)	Home / Arkirage of Affiliated Occanization		Clty		State.	Zio Code

#### SECTION II - PROJECT DESCRIPTION

(Wapplicable)

Please describe the purpose and intent of the grant.

Land Road Eternentary requests the support of the ENC for our third grade (105 students) to visit the Discovery Cube, where hands on learning would benefit our community and our students' science knowledge. For example, the Eco Garage exhibit would challenge students to identify household hazardous waste and teach them how adults in their home can properly dispose these items at their local household hazardous waste collection facilities. The Science of Hockey exhibit, opening February, would teach students about velocity, strength, and Impact by testing their reaction time to sound, light and vibration; testing and comparing how pucks move on various surfaces and learning about the effect of friction. These experiences would give Lanal's students an interactive and memorable way to meet the Next Generation Science Standards for California. Public Schools:

Plen and conduct an investigation to provide evidence of the effects of balanced and unbalanced forces on the motion of an object. (3-PS2-1) Define a simple design problem reflecting a need a want that includes specified criteria for aucuses and constraints on materials, time or cost. (3-5-ETS1-1)

6) How will this grant be used to primarily support or serve a public purpose and benefit the public at-large. (Grants cannot be used as rewards or prizes for individuals)

We hope that providing our third grade a visit to the Discovery Cube will encourage our students to improve our community by reducing household hazardous waste. Additionally, as researched in "Perspectives of Hands-On Science Teaching," by David L. Haury and Peter Rillero, evidence confirms "students in a hands-on science program will remember material better, feel a sense of accomplishment when the task is completed and be able to transfer that experience easier to other learning situations. We hope this unforgettable visit will lead our students to further explore the sciences.

Revised 012615 - Page 1 of 2

6/16 MER A7.Z

a)	Carrie de la companya	Carol become contract	PHE BOTH TOTAL	TO NOTE PORT	
.,	Chaperones (13)				
	Chaperones (13)				
3					
					Start Control of the Control
(c				· ·	
-	Busses (2)	2 (1961) 2 (2007) 7 (2007) 1971 ( Excellent of the second			
	Admission to Discovery Cube Museum (1	(05)			
-			A Shared land of the Party of t	a Table	
li	Mave-you-(applicant) applied to a		councils requesting	g-funds for this pr	oject?
	☐ No ☐ Yes, please list n	names of NCs:			
)	Is the implementation of this spe	ecific program or nurnose	described in hov	4 shove continuen	t on any other
,	factors or sources or funding? (			_	es, please describe:
				G 140 G 16	sa, piease describe.
			THE RESERVED IN THE PARTY OF TH		To the state of the
-	Friends of Lanai Booster		L L		
1					
1		the second of the second secon		Edited Design	
)	What is the TOTAL amount of the	e grant funding requested	with this applicat	ion:	
					en e
a)	Start date: 10b)	Date Funds Required:			
c	Expected completion date:	(After compl	etion of the projec	t, the applicant mi	ust submit a
4	fallow on famo to the Matable	orhood Council and the De	enartment of Neigh	borhood Empowe	rment)
-	rollow-up form to the neighbo		- berninger or mail.		
	TION IV - POTENTIAL CONFLICTS				
С	TION IV - POTENTIAL CONFLICTS	S OF INTEREST		er of the NC?	
С	TION IV - POTENTIAL CONFLICTS  Do you (applicant) have a former	S OF INTEREST r or existing relationship v		er of the NC?	
С	TION IV - POTENTIAL CONFLICTS  Do you (applicant) have a former	S OF INTEREST	with a Board Memb	er of the NC?	licant
C	Do you (applicant) have a former	S OF INTEREST r or existing relationship v	with a Board Memb		licant
С	Do you (applicant) have a former	S OF INTEREST r or existing relationship v	with a Board Memb		illeant
С	Do you (applicant) have a former	S OF INTEREST r or existing relationship v	with a Board Memb		ilicant
C a)	TION IV - POTENTIAL CONFLICTS  Do you (applicant) have a former  Do O Yes - Pleas  Name of NC Board Member	S OF INTEREST  r or existing relationship vise describe below:	with a Board Memb	elationship to App	ilicant
C a)	Do you (applicant) have a former	S OF INTEREST  r or existing relationship vise describe below:  oard member consult the	with a Board Memb	elationship to App	
C a)	TION IV - POTENTIAL CONFLICTS  Do you (applicant) have a former  No Yes - Pleas  Name of NC Board Member	s OF INTEREST r or existing relationship vise describe below:  oard member consult the	with a Board Memb	elationship to App  Attorney before ember of the NC h	as a conflict of
C n)	Do you (applicant) have a former  No No Ves - Pleas Name of NC Board Member  If yes, did you request that the befiling this application?	s OF INTEREST  r or existing relationship was describe below:  oard member consult the solon or participates in the dis	with a Board Memb	elationship to App  Attorney before ember of the NC h	as a conflict of
(c)	Do you (applicant) have a former  No No Yes - Pleas  Name of NC Board Member  If yes, did you request that the befiling this application?  Yes interest and completes this form will deny the payment of this gra	oard member consult the D No *(Please not not in its entirety.)	with a Board Memb	elationship to App  Attorney before ember of the NC h	as a conflict of
(b)	Do you (applicant) have a former  O No O Yes - Pleas  Name of NC Board Member  If yes, did you request that the befiling this application?  O Yes  Interest and completes this form	oard member consult the D No *(Please not not in its entirety.)	with a Board Memb	elationship to App  Attorney before ember of the NC h	as a conflict of
(c)	Do you (applicant) have a former  No No Yes - Pleas Name of NC Board Member  If yes, did you request that the befiling this application?  Interest and completes this form will deny the payment of this grantion V DECLARATION AND SIG	S OF INTEREST  or existing relationship to be describe below:  oard member consult the s S No *(Please not a, or participates in the distant in its entirety.)	Office of the City Asserting the	Attorney before ember of the NC h	as a conflict of Department
(b)	Do you (applicant) have a former  \( \text{No}  \text{Ves} - Pleas \)  Name of NC Board Member  If yes, did you request that the bifiling this application?  \( Upper Vest Tion V DECLARATION AND SIGN Persons Tion V DECLARATION PERSONS TION PERSONS	S OF INTEREST  T or existing relationship to se describe below:  oard member consult the selection of the distriction of the di	ovith a Board Member of the City A cussion and voting the control of the City A cussion and voting the cussion and	Attorney before ember of the NC hg of this NPG, the	as a conflict of Department
(c)	Do you (applicant) have a former Do you (applicant) have a former Do you (applicant) have a former Peas Name of NC Board Member  If yes, did you request that the befiling this application? Dyes interest and completes this form will deny the payment of this graph of the payment of the pease	S OF INTEREST  T or existing relationship to se describe below:  oard member consult the search of the district of the consult of the district of the consult of the consul	office of the City A e that if a Board Me cussion and votin	Attorney before ember of the NC h g of this NPG, the erein and community what is a Public Be	as a conflict of Department nicated otherwise enefit," and
(c)	Do you (applicant) have a former  \( \text{No}  \text{Ves} - Pleas \)  Name of NC Board Member  If yes, did you request that the bifiling this application?  \( Upper Vest Tion V DECLARATION AND SIGN Persons Tion V DECLARATION PERSONS TION PERSONS	s of Interest  or existing relationship was describe below:  oard member consult the solon or (Please not in, or participates in the diam't in its entirety.)  ENATURE  of my knowledge, the information of this application and its or this application and its of this application and its of this application and its or this application and i	office of the City / e that if a Board Macuselon and votine mation provided head Appendix A, " affirm that the pro-	Attorney before ember of the NC h g of this NPG, the erein and community with the posed project(s) a	as a conflict of Department nicated otherwise enefit," and nd/or program(s)
(c)	Do you (applicant) have a former  No Yes - Pleas Name of NC Board Member  If yes, did you request that the befilling this application?  Interest and completes this form will deny the payment of this gra  TION V DECLARATION AND SIG	s of Interest  or existing relationship was describe below:  coard member consult the solow (Please not a, or participates in the distant in its entirety.)  ENATURE  of my knowledge, the information and a benefit project/program as	Office of the City / e that if a Board M cussion and votin mation provided h ead Appendix A, " affirm that the pro-	Attorney before ember of the NC h g of this NPG, the erein and community with the posed project(s) at of interest exist t	as a conflict of Department Inicated otherwise enefit," and ind/or program(s) hat would
(C)	Do you (applicant) have a former  No Yes - Pleas Name of NC Board Member  If yes, did you request that the befiling this application?  Interest and completes this form will deny the payment of this gra  I hereby affirm that, to the best of is truly and accurately stated. If Appendix B "Conflicts of Interest fall within the criteria of a public	oard member consult the Consul	Office of the City / e that if a Board M cussion and votin mation provided h add Appendix A, " affirm that the pro- and that no conflic- nt. I affirm that I am	Attorney before ember of the NC h g of this NPG, the erein and community with the posed project(s) a t of interest exist to not a current Bos	as a conflict of Department Inicated otherwise enefit," and ind/or program(s) hat would ard Member of the
(C)	Do you (applicant) have a former No Yes - Pleas Name of NC Board Member  If yes, did you request that the befiling this application? Yes Interest and completes this form will deny the payment of this gration V DECLARATION AND SIGN I hereby affirm that, to the best of is truly and accurately stated. If Appendix B "Conflicts of Interest fall within the criteria of a public prevent the awarding of the Neig	oard member consult the CI No *(Please not not in its entirety.)  SNATURE  of my knowledge, the inforturther affirm that I have not in the dispersion and its entirety project/program aphorhood Purposes Grant I am submitting this application this application is application.	Office of the City / e that if a Board Me cussion and votin mation provided h ead Appendix A, " affirm that the pro- and that no conflic- it. I affirm that I am lication. I further af	Attorney before ember of the NC h g of this NPG, the erein and community of the serein and current Bossimm that if the gra	as a conflict of Department  nicated otherwise enefit," and nd/or program(s) hat would ard Member of the nt received is not
(C)	Do you (applicant) have a former	oard member consult the CI No *(Please not not in its entirety.)  SNATURE  of my knowledge, the inforturther affirm that I have not in the dispersion and its entirety project/program aphorhood Purposes Grant I am submitting this application this application is application.	Office of the City / e that if a Board Me cussion and votin mation provided h ead Appendix A, " affirm that the pro- and that no conflic- it. I affirm that I am lication. I further af	Attorney before ember of the NC h g of this NPG, the erein and community of the serein and current Bossimm that if the gra	as a conflict of Department  nicated otherwise enefit," and nd/or program(s) hat would ard Member of the nt received is not
(Ca)	Do you (applicant) have a former No Yes - Pleas Name of NC Board Member  If yes, did you request that the befiling this application? Yes Interest and completes this form will deny the payment of this gration V DECLARATION AND SIGN I hereby affirm that, to the best of is truly and accurately stated. If Appendix B "Conflicts of Interestall within the criteria of a public prevent the awarding of the Neighborhood Council to whom used in accordance with the the to the Neighborhood Council.	oard member consult the D No *(Please not in, or participates in the disurt in its entirety.)  ENATURE  of my knowledge, the information and is benefit project/program aphorhood Purposes Grant I am submitting this application is	Office of the City / e that if a Board Me cussion and voting mation provided head Appendix A, " affirm that the project of the conflict of the	Attorney before ember of the NC h g of this NPG, the erein and community of the NC h good project(s) at the first exist to not a current Bossimm that if the grands shall be returned.	as a conflict of Department  nicated otherwise enefit," and nd/or program(s) hat would ard Member of the nt received is not
C (C	Do you (applicant) have a former No Yes - Pleas Name of NC Board Member  If yes, did you request that the befiling this application? Yes Interest and completes this form will deny the payment of this gration V DECLARATION AND SIGN I hereby affirm that, to the best of is truly and accurately stated. If Appendix B "Conflicts of Interestall within the criteria of a public prevent the awarding of the Neighborhood Council to whom used in accordance with the the to the Neighborhood Council.  Executive Director of Non-Profit.	oard member consult the CI No *(Please not not in its entirety.)  ENATURE  of my knowledge, the inforturther affirm that I have not benefit project/program aphorhood Purposes Gran I am submitting this application of the application of Corporation or School Pr	Office of the City / e that if a Board Me cussion and voting mation provided head Appendix A, " affirm that the project of the conflict of the	Attorney before ember of the NC h g of this NPG, the erein and community of the NC h good project(s) at the first exist to not a current Bossimm that if the grands shall be returned.	as a conflict of Department  Inicated otherwise enefit," and ind/or program(s) hat would ird Member of the int received is not ned immediately
(Ca)	Do you (applicant) have a former No Yes - Pleas Name of NC Board Member  If yes, did you request that the befiling this application?  Interest and completes this form will deny the payment of this gra  TION V DECLARATION AND SIGN  I hereby affirm that, to the best of is truly and accurately stated. If Appendix B "Conflicts of Interest fall within the criteria of a public prevent the awarding of the Neighborhood Council to whom used in accordance with the the to the Neighborhood Council.  Executive Director of Non-Profit Executive Director of Non-Profit	oard member consult the CI No *(Please not not in its entirety.)  ENATURE  of my knowledge, the inforturther affirm that I have not benefit project/program aphorhood Purposes Gran I am submitting this application of the application of Corporation or School Pr	Office of the City / e that if a Board Me ecuseion and voting mation provided head Appendix A, "I affirm that the pro- and that no conflicing that I am leation. I further affirm that I am leation. I further affirm that I am	Attorney before ember of the NC h g of this NPG, the erein and community what is a Public Be posed project(s) at of interest exist to not a current Bos firm that if the grands shall be return.	as a conflict of Department  Inicated otherwise enefit," and ind/or program(s) hat would ard Member of the int received is not ined immediately
(Ca)	Do you (applicant) have a former No Yes - Pleas Name of NC Board Member  If yes, did you request that the befiling this application? Yes Interest and completes this form will deny the payment of this gration V DECLARATION AND SIGN I hereby affirm that, to the best of is truly and accurately stated. If Appendix B "Conflicts of Interestall within the criteria of a public prevent the awarding of the Neighborhood Council to whom used in accordance with the the to the Neighborhood Council.  Executive Director of Non-Profit.	oard member consult the D No *(Please not in, or participates in the disurt in its entirety.)  ENATURE  of my knowledge, the information and is benefit project/program aphorhood Purposes Grant I am submitting this application is	Office of the City / e that if a Board Me ecuseion and voting mation provided head Appendix A, "I affirm that the pro- and that no conflicing that I am leation. I further affirm that I am leation. I further affirm that I am	Attorney before ember of the NC h g of this NPG, the erein and community of the NC h good project(s) at the first exist to not a current Bossimm that if the grands shall be returned.	as a conflict of Department  Inicated otherwise enefit," and ind/or program(s) hat would ard Member of the int received is not ined immediately
a)	Do you (applicant) have a former Pees Pleas Name of NC Board Member  If yes, did you request that the befiling this application? Dyes Interest and completes this form will deny the payment of this graville deny the payment of the best of is truly and accurately stated. If Appendix B "Conflicts of Interest fall within the criteria of a public prevent the awarding of the Neighborhood Council to whom used in accordance with the the to the Neighborhood Council.  Executive Director of Non-Profit Executive Director of Non-Profit Executive Director of Non-Profit	oard member consult the D No "(Please not	Office of the City / e that if a Board Me ecussion and voting remation provided head Appendix A, "I affirm that the project it. I affirm that I amplication. I further after that I amplicated here, said further after the control of	Attorney before ember of the NC h g of this NPG, the erein and community what is a Public Be posed project(s) at of interest exist to not a current Bos firm that if the grands shall be return.	as a conflict of Department  Inicated otherwise enefit," and ind/or program(s) hat would ird Member of the int received is not ned immediately
(C)	Do you (applicant) have a former Pees Pleas Name of NC Board Member  If yes, did you request that the befiling this application? Dyes Interest and completes this form will deny the payment of this graville deny the payment of the best of is truly and accurately stated. If Appendix B "Conflicts of Interest fall within the criteria of a public prevent the awarding of the Neighborhood Council to whom used in accordance with the the to the Neighborhood Council.  Executive Director of Non-Profit Executive Director of Non-Profit Executive Director of Non-Profit Executive Director of Non-Profit Corporate	oard member consult the se describe below:  oard member consult the se law (Please not a, or participates in the distant in its entirety.)  SNATURE  of my knowledge, the information of this application and seemefit project/program aphorhood Purposes Grant am submitting this application of the appl	Office of the City / e that if a Board Me ecussion and voting remation provided head Appendix A, "I affirm that the pro- and that no conflict int. I affirm that I am location. I further affirm that here, said further affirm that I am	Attorney before ember of the NC h g of this NPG, the erein and community what is a Public Be posed project(s) at of interest exist to not a current Bos firm that if the grands shall be return.	as a conflict of Department  Inicated otherwise enefit," and ind/or program(s) hat would ird Member of the int received is not ned immediately
b)	Do you (applicant) have a former Pees Pleas Name of NC Board Member  If yes, did you request that the befiling this application? Dyes Interest and completes this form will deny the payment of this graville deny the payment of the best of is truly and accurately stated. If Appendix B "Conflicts of Interest fall within the criteria of a public prevent the awarding of the Neighborhood Council to whom used in accordance with the the to the Neighborhood Council.  Executive Director of Non-Profit Executive Director of Non-Profit Executive Director of Non-Profit	oard member consult the December of this application and benefit project/program aphorhood Purposes Grant arms of the application of the applicati	Office of the City of that if a Board More that if a firm that it amples that if a firm that if and it attack here, said further affirm that if and it and it and it are the company of	Attorney before ember of the NC h g of this NPG, the erein and community what is a Public Be posed project(s) at of interest exist to not a current Bos firm that if the grands shall be return.	as a conflict of Department  Inicated otherwise Prefit," and Ind/or program(s) hat would and Member of the Int received is not

Revised 012615 - Page 2 of 2

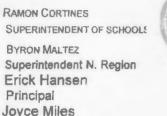
6/16 MER A 7.3



LOS ANGELES UNIFIED SCHOOL DISTRICT DISTRICT ONE

LANAI ROAD SCHOOL

4241 Lanai Road Encino, California 91436 Telephone 818-788-1590 Fax 818-788-4263



Assistant Principal





#### Dear Encino Neighborhood Council:

Lanai Road Elementary requests the support of the ENC for our Third Grade (105 students) to visit the Discovery Cube, where hands on learning would benefit our community and our students' science knowledge. For example, the Eco Garage exhibit would challenge students to identify household hazardous waste and teach them how adults in their home can properly dispose these items at their local household hazardous waste collection facilities. The Science of Hockey exhibit, opening February, would teach students about velocity, strength, and impact by testing their reaction time to sound, light, and vibration; testing and comparing how pucks move on various surfaces and learning about the effect of friction.

These experiences would give Lanai's students an interactive and memorable way to meet the Next Generation Science Standards for California Public Schools:

- Plan and conduct an investigation to provide evidence of the effects of balanced and unbalanced forces on the motion of an object. (3-PS2-1).
- Define a simple design problem reflecting a need or a want that includes specified criteria for success and constraints on materials, time, or cost. (3-5-ETS1-1).

We hope that providing our Third Grade a visit to the Discovery Cube will encourage our students to improve our community by reducing household hazardous waste. Additionally, as researched in "Perspectives of Hands-On Science Teaching," by David L. Haury and Peter Rillero, evidence confirms "students in a hands-on science program will remember material better, feel a sense of accomplishment when the task is completed, and be able to transfer that experience easier to other learning situations." We hope this unforgettable visit will lead our students to further explore the sciences.

Thank you for your consideration,

Mr. Hansen

Lanai Road Elementary Principal

Philippi Welles

Ms. Joyce Miles

Lanai Road Elementary Assistant Principal

6/16MERA7.4

Department of Neighbo	rhood Empowerment	MIN	ard par	Skelen		MEYNO.	Y' -
Funding Request Form	(adm) here is			EMPOY			
NC NAME: Encino				12 200000		- Aller Carrier Carrie	to 1 gar- A
Budget Fiscal Year: 2015/2016			Requesto	r: Lana	i Rol	ES	
Request Date: 3-3-4	6. 12. v			" LRE		ster .	
Meeting Date: 3	other profession vi			5: 4241		Rd.	
Agenda Item: 7 4				ENCINO		- April 1997 - Apr	A CONTRACTOR OF THE PARTY OF TH
Operations Outreach ON	C Sponsored Earnt Maightomad Pr	uspase Grant	Zip Coc	le: 91316		8.F 75	81950
Contract / Lease Board Memb	per Reimbursement Community Impr	overnegt Project	Amoun	t:\$ 70	8	1444-1-5	
Out of State 1099 Expense	One Time Expense Monthly	Mu	ltiple # of par	yments	-		
please provide the date(s) and am Public Benefit	ily \$1,000 limit is required for this no prime recorded for the daily limit to be The Masters Art Docent popular of visual arts through	lifted:	fers Encir	no an oppo	ortunity to	appreciat	e the
nome t	tanding of their process  Vote Count (continue)	artists wh	ose contr	ibutions ar	e enhano	ed through	h our
*Recused-Boardmember	must leave the room prior to any dis-				intil after the	vote is comple	eted.
Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
Al Mass	At-Large Representative	1					
Anni Keusseyan	Area i Representative	V		771177			
Art Sherman	Public Safety Representative						
Carol Levin	Encino Property Owners Rep.	V					
David Hollgins	Area 7 Representative	V					
Debra George	Park Advocate/Environment Rep.	1					
Éliot Cohen	Planning and Land Use Rep.	V					
Gerald Silver	Homeowners of Encino Rep.	V					
Jason Ackerman	Area 2 Representative	V					
Kathy Moghimi-Patterson	At Large Representative	./					
Ken Silk	Area 3 Representative	1/	-	201			
aurie Kelson	Area 6 Representative	1				1/	
Mark Levinson		V.				,	
Sharon Brewer	Volunteer/Service Representative						*
Shelley Rivlin	Education Representative	-					
	Apartment/Condo Representative	V					
Shemun Gamson					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(alar Dardarian)	Religious Organization Rep.	1			-		
Todd Rubinstein	Business Representative	V			4	V	
/ictoria Miller	Business Representative					7	
ilenn Bailey	At-Large Alternate						
IC Quorum: 11	Grand Total (including page 2):	15					
	above indicated Council, declare that to the Brown Act, where with a quorum						that a public
Ince the Department approves a Fur ecount automatically, i.e. no addition	nding Request submitted the De annual Cash Request Form is required.	ent will trans	fer the reques	ted amount in	to the Netshill	Thopd Counc	ir checking
Treasurer's Signature:	( Wather	-	Signer's Si	gcature:	1		*
Print/Type name:	MAIbert M	ass	Print/Typ	e name:	(00)	Rubi	ister
Date (mm/dd/yy):	3/23/16	and the second	Date (mm	/dd/yy):	4	-12-16	en Eeds
	Contract CP Advanced Payment  Spansored Event	Denied	14 0	5/11/18 [A	05/11/10	TAP	3686

Revised 1-26-15

# Neighborhood Council Funding Program APPLICATION for Neighborhood Purposes Grant (NPG)



This form is to be completed by the applicant seeking the Neighborhood Purposes Grant and submitted to the Neighborhood Council from whom the grant is being sought. All applications for grants must be reviewed and approved in a public meeting. The Neighborhood Council (NC), upon approval of the application, shall submit the approved application along with all required documentation to the Department of Neighborhood Empowerment.

	Name of NC from which you are seeking this grant		Enc	ino Neighb	orhood	Council		
SEC	TION I- APPLICANT INFORMATION				9			
101	Lanai Road Elementary School							
1a)	Organization Name	Fed	eral	I.D. # (EIN#)	State o	f Incorporation	Date of 501 Status (If a	
44.1	4241 Lanai Road	Enci	no			Ça	91436	
1b)	Organization Mailing Address	Clty	ŗ			State	Zip Code	9
1c)	Business Address (if different)	City	,		•	State	Zip Code	9
1d)	PRIMARY CONTACT INFORMATION:							
	Mr. Erick Hansen	(818)	788-	1590		erick.hansen@la	ausd.net	
	Name	Phon	e			Emeil		
2)	Type of Organization- Please select one:		_					
	Public School (not to Include private schools)	or	ш	501(c)(3) Nor		(other than religio	us institutions)	
	Attach Grant Request on School Letterhea	RO		Attach IRS D				
•	Lanai Road Elementary 4241 Lanai Road,			Encir	30	CA	91436	
3)	Name / Address of Affiliated Organization			Clhy		State	Zin Code	9

#### SECTION II - PROJECT DESCRIPTION

(if applicable)

#### 4) Please describe the purpose and intent of the grant.

Lanal Road Elementary requests the support of the ENC to expand our Art Docent program - which servers all 560 students with artistic expression as well as Art History - with a new school-wide series called "The Masters," which will focus on different prominent artists, the history behind their works and will have students create a work in their likeness. For example, fifth graders would study Marc Chagali's dreamlike, expressionist style peintings. Students would consider what Chagali might be communicating and explore the role of color. Then they would create their own dreamlike concept, including imagery from their dreams and future goals. They would use pastels to add rich, vibrant color. Sketch board pads would allow students to sketch outdoors and be able to include natural elements found throughout the campus. They would write a short story based on their artwork and examine if the story is similar to a dream. Lastly, they would compare the artwork to the texts they are reading in class at the time. This work is aligned to several Common Core State Standards, including: SL.5.1, W.5.3, W5.4. Teachers would assess students to ensure they are surpassing State requirements.

5) How will this grant be used to primarily support or serve a public purpose and benefit the public at-large. (Grants cannot be used as rewards or prizes for individuals)

Supporting "The Masters" Art Docent program series would benefit the entire Lanai student body by providing an opportunity to learn about Art History and to practice art expression, thereby improving and maintaining the quality of life for students, faculty and the greater community associated with Lanai Road Elementary. We hope that by providing students art at school we encourage them to be self-expressive at home and in all aspects of their lives. Each year builds on the next so that by the time the students complete fifth grade they will have a broad exposure to The Masters.

Revised 012615 - Page 1 of 2

6/14 MER. A8,1

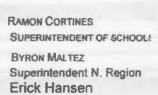
Sa)	了一面的现在分词 使开始			17:57:11:41	6 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .	7.161.71
,	A STATE OF THE PROPERTY OF THE	HICKORY AND THE PARTY OF THE PA				
				51: <b>利</b> 加拉斯斯	SEATTLE SA	W#773
6b)			The state of the s			
,	Watercolor Pan Sets (60) & Watercolor pap	n, schooles de de l'Askasil Havand 1987	4 12 14 14 14 14 14 14 14 14 14 14 14 14 14			
	Chalk Pastel Classroom Sets (7)					
	Small Sketch Board Pads & Tempera Cake	Sets (40)	11 12 13 13	AUSTRALIA 415 -15 *********************************		ALTERNATION CO. T. L
-		44 14 44 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				CITY OF ST PACES AND AND AND
.Z)	Have you (applicant) applied to an	-	d-Councils reques	ting-tunes-to	r-tnis-projecti	
	☐ No ☐ Yes, please list nar	mes of NCs:				
8)	is the implementation of this speci	ific program or purpo	se described in bo	x 4 above co	ntingent on a	ny other
	factors or sources or funding? (in				☐ Yes, ples	
1	A SECOND	The state of the s			•	tar a second
	Friends of Lanal Booster		1111 141 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	THORSE OF LANGE SOURS					
			5.0		Lahire	
<b>M</b>	What is the TOTAL amount of the	nant funding manage	ad white andi			
<b>#</b> )	What is the IOIAL amount of the g	grant runoing reques	Benjaman			
02)	Start date: 10b)	Date Funds Require	d: Planta			
10c)	Expected completion date:	(After con	pletion of the pro	ect. the appli	cant must sub	mlt a
100,	follow-up form to the Neighborn					
ECT	TION IV - POTENTIAL CONFLICTS (	OF INTEREST				
	TION IV - POTENTIAL CONFLICTS (		a with a Roami Mar	mbar of the N	C2	
	Do you (applicant) have a former or	r existing relationship	o with a Board Me	mber of the N	C?	
1a)	Do you (applicant) have a former of		o with a Board Me			
1a)	Do you (applicant) have a former or	r existing relationship	o with a Board Me		to Applicant	
1a) [	Do you (applicant) have a former o  No  Yes - Please Name of NC Board Member	r existing relationship	o with a Board Me	Relationship	to Applicant	
1a) [	Do you (applicant) have a former o  No  Yes - Please Name of NC Board Member	r existing relationship	o with a Board Me	Relationship	to Applicant	
1a)	Do you (applicant) have a former o  No  Yes - Please Name of NC Board Member	r existing relationship describe below:		Relationship Eg: Former boa	to Applicant rd member	
1a)	Do you (applicant) have a former of No	r existing relationship describe below:	ne Office of the Cit	Relationship Eg: Former boa	to Applicant and member	nflict of
1a)	Do you (applicant) have a former of No	r existing relationship describe below:  rd member consult th  No *(Please now participates in the consult of t	ne Office of the Citotte that if a Board	Relationship Eg: Former boa  y Attorney be Member of the	to Applicant rd member fore	
1a)	Do you (applicant) have a former of No	r existing relationship describe below:  rd member consult th  No *(Please now participates in the consult of t	ne Office of the Citotte that if a Board	Relationship Eg: Former boa  y Attorney be Member of the	to Applicant rd member fore	
1a)	Do you (applicant) have a former of No	r existing relationship describe below:  rd member consuit the line of participates in the clin its entirety.)	ne Office of the Citotte that if a Board	Relationship Eg: Former boa  y Attorney be Member of the	to Applicant rd member fore	
1a)	Do you (applicant) have a former of No	r existing relationship describe below:  rd member consuit the line of participates in the clin its entirety.)	ne Office of the Citotte that if a Board	Relationship Eg: Former boa  y Attorney be Member of the	to Applicant rd member fore	
11a)	Do you (applicant) have a former on No Yes - Please Name of NC Board Member Eg: John Dos  If yes, did you request that the board filing this application? Yes interest and completes this form, o will deny the payment of this grant ION V - DECLARATION AND SIGNAL hereby affirm that, to the best of members are supplied to the section.	r existing relationship describe below:  If member consult the line of the consult the con	ne Office of the City ote that if a Board liscussion and vot	Relationship Eg: Former boa  y Attorney be Member of the ing of this NE	to Applicant Ind member  fore In NC has a cooper, the Depart	otherwise
11a)	Do you (applicant) have a former on No Yes - Please Name of NC Board Member  Eg: John Dos  If yes, did you request that the board Member  If yes, did you request that the board Member  If yes, did you request that the board Member  If yes, did you request that the board Member If yes interest and completes this form, owill deny the payment of this grant  If NV - DECLARATION AND SIGNATION AND	r existing relationship describe below:  If member consult the light of the consult the co	ne Office of the City ote that if a Board liscussion and vot ormation provided read Appendix A,	Relationship Eg: Former boa  y Attorney be Member of the ing of this NE	to Applicant rd member  fore se NC has a co PG, the Depart communicated ublic Benefit,"	otherwise and
11a)	Do you (applicant) have a former on No Yes - Please Name of NC Board Member  Eg: John Dos  If yes, did you request that the board No Please of NC Board Member  Eg: John Dos  If yes, did you request that the board no Please of NC Board Member  Eg: John Dos  If yes, did you request that the board no Please of NC Board NC	r existing relationship describe below:  rd member consult the No *(Please nor participates in the clin its entirety.)  ATURE  my knowledge, the infither affirm that I have of this application and	ne Office of the City of that if a Board ilscussion and voto ormation provided read Appendix A, d affirm that the position is a second of the city of	Relationship Eg: Former boa  y Attorney be Member of thi ing of this NF  therein and c "What is a Proposed proje	to Applicant rd member  fore se NC has a co PG, the Depart communicated ublic Benefit," set(s) and/or p	otherwise and rogram(s)
11a)	Do you (applicant) have a former of No  Yes - Please Name of NC Board Member  Eg: John Dos  If yes, did you request that the board Member  Eg: John Dos  If yes, did you request that the board Member  Eg: John Dos  If yes, did you request that the board Member Description of the grant of this grant will deny the payment of this grant lon V - DECLARATION AND SIGNATION V - DECLARATION AND SIGNATION AND SIGNA	r existing relationship describe below:  and member consult the No *(Please nor participates in the clin its entirety.)  ATURE  my knowledge, the infither affirm that I have of this application and enefit project/program	to office of the City of that if a Board ilscussion and vote ormation provided read Appendix A, d affirm that the point and that no confi	Relationship Eg: Former boa  y Attorney be Member of thi ing of this NF  therein and c  What is a Proposed projet lct of interest	to Applicant rd member  fore se NC has a co PG, the Depart communicated ublic Benefit," act(s) and/or pr exist that wo	otherwise and rogram(s)
1a)	Do you (applicant) have a former of No  Yes - Please Name of NC Board Member  Eg: John Dos  If yes, did you requeet that the board Member  Eg: John Dos  If yes, did you requeet that the board Member  Eg: John Dos  If yes, did you requeet that the board Member  If yes, did you requeet that the board Member application?  Yes interest and completes this form, o will deny the payment of this grant  If NO V - DECLARATION AND SIGNATION V - DECLARATION AND SIGNATION	r existing relationship describe below:  and member consult the No *(Please nor participates in the clin its entirety.)  ATURE  my knowledge, the infitter affirm that I have of this application and enefit project/program corhood Purposes Green	ormation provided read Appendix A, a affirm that the pin and that no confiant. I affirm that I a	Relationship Eg: Former boa  y Attorney be Member of th ing of this NF  I herein and c "What is a Pr option of the rest im not a curre	to Applicant rd member  fore se NC has a co PG, the Depart communicated ublic Benefit," oct(s) and/or po exist that wo	otherwise and rogram(s) aid
1a)	Do you (applicant) have a former on No No Yes - Please Name of NC Board Member Eg: John Dos  If yes, did you requeet that the boar filling this application? Yes interest and completes this form, o will deny the payment of this grant ION V - DECLARATION AND SIGN I hereby affirm that, to the best of n is truly and accurately stated. I furl Appendix B "Conflicts of Interest" of fall within the criteria of a public be prevent the awarding of the Neighb Neighborhood Council to whom I a	rexisting relationship describe below:  and member consult the line of the entirety.)  ATURE  my knowledge, the infitther affirm that I have of this application and confit project/program corhood Purposes Gram submitting this application this application that it is application and confit project/program corhood purposes Gram submitting this application that is application and confit project/program corhood purposes Gram submitting this application that is application.	ormation provided read Appendix A, d affirm that no confiant. I affirm that I aplication. I further	Relationship Eg: Former boa  y Attorney be Member of the ing of this NF  therein and c "What is a Proposed project to finterest um not a curre affirm that if	to Applicant rd member  fore le NC has a co PG, the Depart communicated ublic Benefit," let(s) and/or pr exist that wor ant Board Men the grant recei	otherwise and rogram(s) aid nber of the
1a)	Do you (applicant) have a former on No No Yes - Please Name of NC Board Member Eg: John Dos  If yes, did you request that the boardiling this application? Yes interest and completes this form, o will deny the payment of this grant ION V - DECLARATION AND SIGNATION V - DECLARATION OF Interest of a public be prevent the awarding of the Neighb Neighborhood Council to whom I aused in accordance with the the terest.	rexisting relationship describe below:  and member consult the line of the entirety.)  ATURE  my knowledge, the infitther affirm that I have of this application and confit project/program corhood Purposes Gram submitting this application this application that it is application and confit project/program corhood purposes Gram submitting this application that is application and confit project/program corhood purposes Gram submitting this application that is application.	ormation provided read Appendix A, d affirm that no confiant. I affirm that I aplication. I further	Relationship Eg: Former boa  y Attorney be Member of the ing of this NF  i herein and c "What is a Proposed project to finterest um not a curre affirm that if	to Applicant rd member  fore le NC has a co PG, the Depart communicated ublic Benefit," let(s) and/or pr exist that wor ant Board Men the grant recei	otherwise and rogram(s) aid other of the ved is not the control of
1a)	Do you (applicant) have a former on No No Yes - Please Name of NC Board Member Eg: John Dos  If yes, did you requeet that the boar filling this application? Yes interest and completes this form, o will deny the payment of this grant ION V - DECLARATION AND SIGN I hereby affirm that, to the best of n is truly and accurately stated. I furl Appendix B "Conflicts of Interest" of fall within the criteria of a public be prevent the awarding of the Neighb Neighborhood Council to whom I a	rexisting relationship describe below:  and member consult the line of the entirety.)  ATURE  my knowledge, the infitther affirm that I have of this application and confit project/program corhood Purposes Gram submitting this application this application that it is application and confit project/program corhood purposes Gram submitting this application that is application and confit project/program corhood purposes Gram submitting this application that is application.	ormation provided read Appendix A, d affirm that no confiant. I affirm that I aplication. I further	Relationship Eg: Former boa  y Attorney be Member of the ing of this NF  i herein and c "What is a Proposed project to finterest um not a curre affirm that if	to Applicant rd member  fore le NC has a co PG, the Depart communicated ublic Benefit," let(s) and/or pr exist that wor ant Board Men the grant recei	otherwise and rogram(s) aid nber of the
1a)	Do you (applicant) have a former on No No Yes - Please Name of NC Board Member Eg: John Dos  If yes, did you request that the boardiling this application? Yes interest and completes this form, o will deny the payment of this grant ION V - DECLARATION AND SIGNATION V - DECLARATION OF Interest of a public be prevent the awarding of the Neighb Neighborhood Council to whom I aused in accordance with the the terest.	rexisting relationship describe below:  and member consult the line of the entirety.)  ATURE  my knowledge, the infither affirm that I have of this application and confit project/program corhood Purposes Gram submitting this application of the application.	ormation provided read Appendix A, d affirm that the polarity and that no configure that I affirm that I aplication. I further a stated here, said	Relationship Eg: Former boa  y Attorney be Member of the ing of this NF  i herein and c "What is a Proposed project to finterest im not a curre affirm that if the	to Applicant rd member  fore se NC has a co PG, the Depart  communicated ablic Benefit," act(s) and/or pr exist that wo ent Board Men the grant recei e returned imm	otherwise and rogram(s) aid aber of the ved is not nediately
1a) 1b) ECT	Do you (applicant) have a former on No No Yes - Please Name of NC Board Member Eg: John Dos  If yes, did you request that the boar filing this application? Yes interest and completes this form, o will deny the payment of this grant ION V - DECLARATION AND SIGNAL I hereby affirm that, to the best of n is truly and accurately stated. I furly and accurately stated. I furly and accurately stated. I furly and accurately stated in the enterior of a public be prevent the awarding of the Neighborhood Council to whom I award in accordance with the the two to the Neighborhood Council.	rexisting relationship describe below:  and member consult the line of the entirety.)  ATURE  my knowledge, the infither affirm that I have of this application and confit project/program corhood Purposes Gram submitting this application of the application.	ormation provided read Appendix A, d affirm that the polarity and that no configure that I affirm that I aplication. I further a stated here, said	Relationship Eg: Former boa  y Attorney be Member of the ing of this NF  i herein and c "What is a Proposed project to finterest im not a curre affirm that if the	to Applicant rd member  fore se NC has a co PG, the Depart  communicated ablic Benefit," act(s) and/or pr exist that wo ent Board Men the grant recei e returned imm	otherwise and rogram(s) aid aber of the ved is not nediately
1a) 1b) 1ca	Do you (applicant) have a former on No Yes - Please Name of NC Board Member  Eg: John Dos  If yes, did you request that the boardiling this application? Yes interest and completes this form, owill deny the payment of this grant  ION V - DECLARATION AND SIGNATION AND S	rexisting relationship describe below:  Independent of the consult the late of the application and the application of the appli	ormation provided read Appendix A, d affirm that the part and that no confiant. I affirm that I a plication. I further stated here, said	Relationship Eg: Former boa  y Attorney be Member of the ing of this NF  i herein and c "What is a Proposed project to finterest im not a curre affirm that if the	to Applicant rd member  fore se NC has a co PG, the Depart  communicated ablic Benefit," act(s) and/or pr exist that wo ent Board Men the grant recei e returned imm	otherwise and rogram(s) aid aber of the ved is not nediately
1a) 1b) ECT	Do you (applicant) have a former on No Yes - Please Name of NC Board Member  Eg: John Dos  If yes, did you request that the boardiling this application? Yes interest and completes this form, owill deny the payment of this grant  ION V - DECLARATION AND SIGNATION AND S	rexisting relationship describe below:  rd member consult the line of the participates in the consult in its entirety.)  ATURE  my knowledge, the infetter affirm that I have of this application and the application and the submitting this application of the app	ormation provided read Appendix A, d affirm that it a plication. I further a stated here, said	Relationship Eg: Former boa  y Attorney be Member of this ing of this NF  i herein and c  What is a Proposed proje let of interest im not a curre affirm that if the funds shall be  ED*  General Signature	to Applicant rd member  fore se NC has a co PG, the Depart  communicated ablic Benefit," act(s) and/or pr exist that wo ent Board Men the grant recei e returned imm	otherwise and rogram(s) aid other of the ved is not neediately
1a) 1b)	Do you (applicant) have a former on No Yes - Please Name of NC Board Member  Eg: John Dos  If yes, did you requeet that the board Member  If yes, did you requeet that the board Member  If yes, did you requeet that the board Member  If yes, did you requeet that the board Member application? If yes interest and completes this form, of will deny the payment of this grant If ION V - DECLARATION AND SIGN.  If hereby affirm that, to the best of nois truly and accurately stated. If further that within the criteria of a public be prevent the awarding of the Neighborhood Council to whom I are used in accordance with the the term to the Neighborhood Council.  Executive Director of Non-Profit Components of Non-Profit Compo	rexisting relationship describe below:  and member consult the last of the consult the last of the application and the application and the application of the applica	ormation provided read Appendix A, d affirm that it a plication. I further a stated here, said	Relationship Eg: Former boa  y Attorney be Member of this ing of this NF  what is a Proposed project ict of interest im not a curre affirm that if the funds shall be	to Applicant rd member  fore se NC has a co PG, the Depart  communicated ablic Benefit," act(s) and/or pr exist that wo ent Board Men the grant recei e returned imm	otherwise and rogram(s) aid other of the ved is not neediately
1a) 1b)	Do you (applicant) have a former on No Yes - Please Name of NC Board Member  Eg: John Dos  If yes, did you request that the boardiling this application? Yes interest and completes this form, owill deny the payment of this grant  ION V - DECLARATION AND SIGNATION AND S	rexisting relationship describe below:  rd member consult the line of the participates in the consult in its entirety.)  ATURE  my knowledge, the infetter affirm that I have of this application and the application and the submitting this application of the app	ormation provided read Appendix A, d affirm that the point and that no configuration. I further a stated here, said	Relationship Eg: Former boa  y Attorney be Member of this ing of this NF  i herein and c  What is a Proposed proje let of interest im not a curre affirm that if the funds shall be  ED*  General Signature	to Applicant rd member  fore se NC has a co PG, the Depart  communicated ablic Benefit," act(s) and/or pr exist that wo ent Board Men the grant recei e returned imm	otherwise and rogram(s) aid hiber of the ved is not neediately

Revised 012615 - Page 2 of 2

6/16MER A8.2



LOS ANGELES UNIFIED SCHOOL DISTRICT DISTRICT ONE LANAI ROAD SCHOOL 4241 Lanai Road Encino, California 91436 Telephone 818-788-1590 Fax 818-788-4263



Principal

Joyce Miles Assistant Principal





#### Dear Encino Neighborhood Council:

Lanai Road Elementary requests the support of the ENC to expand our Art Docent program — which serves all 560 students with artistic expression as well as Art History with a new school-wide series called "The Masters," which will focus on different prominent artists, the history behind their works and will have students create a work in their likeness. For example Fifth graders would study Marc Chagall's dreamlike, expressionist style paintings. Students would consider what Chagall might be communicating and explore the role of color. Then they would create their own dreamlike concept including imagery from their dreams and future goals. They would use pastels to add rich, vibrant color. Sketch board pads would allow students to sketch outdoors and be able to include natural elements found throughout the campus. They would write a short story based on their artwork and examine if the story is similar to a dream. Lastly they would compare the artwork to the texts they are reading in class at the time.

This work is aligned to several Common Core State Standards, including: SL.5.1, W.5.3, W.5.4. Teachers would assess students to ensure they are surpassing State requirements.

Supporting "The Masters" Art Docent program series would benefit the entire Lanai student body by providing an opportunity to learn about Art History and to practice art expression, thereby improving and maintaining the quality of life for students, faculty and the greater community associated with Lanai Road Elementary. We hope that by providing students art at school we encourage them to be self-expressive at home and in all aspects of their lives. Each year builds on the next so that by the time the students complete Fifth grade they will have a broad exposure to The Masters.

Thank you for your consideration,

Mr. Hansen

Lanai Road Elementary Principal

Philippe Welles
Ms. Joyce Miles

Lanai Road Elementary Assistant Principal

6/16 MER A813

Department of Neighb Funding Request Form	orhood Empowerment *			The second second	VER LA	(a)	
NC MANGE. Engine				EIGHEGKHOOD	THE SWEETING		
NC NAME: Encino  Budget Fiscal Year: 2014/2015		etuda .	Requestor:	Encino Char	ter		
Request Date:				Hartfo		ining	
Meeting Date: 07/22/2015		edição		16941	Addes	n 51	
Agenda Item: 7j1			City:	Encino	Stat	e: CA	
Operations Outreach	NC Sponsored Event Neighborhood P	Puspose Grant	Zip Code	91316	Phone:	818764	1762
□Contract / Lease □Board Mer	mber Reimbursement Community Imp	rovement Project	Amount	\$ 1,000.0	0	FESTS	
Out of State 1099 Expen	se One Time Expense Monthly		ultiple # of pay	ments			
please provide the date(s) and a Public Benefit Description	daily \$1,000 limit is required for this is mount needed for the daily limit to be ENC Safety committee is ring all segments of the confily located campus will be a	e lifted: s delighted nmunity fo	r inevitable	e school emerger	contribute	to our mi	ssion of staff at th
	Vote Count (continuer must leave the room prior to any dis	ed on page 2 of sno	re than 20 Board Me		intil after the v	ote is comple	eted.
			1	,			T
Board Member Name Al Mass	At-Large Representative	Yes	No	Abstain	*Recused	Absent	Ineligible
Anni Keusseyan	Area 1 Representative	X	-				
Art Sherman	Public Safety Representative	A				x	
Carol Levin	Encino Property Owners Rep.	x				A	
David Hudgins	Area 7 Representative	X				THE TENE	- 1001
Debra George	Park Advocate/Environment Rep.	A			-	x	
Eliot Cohen	Planning and Land Use Rep.	-		x		A .	
Gerald Silver	Homeowners of Encino Rep.	X		A			
Jason Ackerman	Area 2 Representative	X					
Kathy Moghimi-Patterson	At-Large Representative	X		-			
Ken Silk	Area 3 Representative	X	-				
Laurie Kelson	Area 6 Representative	X					
Mark Levinson	•	X				*	
Sharon Brewer	Encino Chamber Representative  Volunteer/Service Representative	X					
Shelley Rivlin	Education Representative	-		1			
Sherman Gamson	Apartment/Condo Representative	X					
Falar Dardarian	Religious Organization Rep.	^				x	
Todd Rubinstein	Business Representative	x				Α	
/ictoria Miller	Business Representative	^				x	
Glenn Bailey	At-Large Alternate					^	
VC Quorum:	Grand Total (including page 2):	16.	0	1	0	4	0
ve Quorani.							
neeting was held in accordance with the Department approves a F	e above indicated Council, declare that ith the Brown Act, where with a quorus funding Request submitted, the Depart tional Cash Request Form is required.	n of Board Me	embers present,	the Council a	pproved the at	oove action.	
Treasurer's Signature:	( Collings		Signer's Sig	gnature:		Mil	<i>(</i>
Print/Type name:	Albert Mas	5	Print/Type	e name:	Todd	100	islin
Date (mm/dd/yy):	3/23/16	X	Date (mm)	/dd/yy):	4-	12-201	
Department Use Only	Contract CIP Advanced Payment \$\ \_\$2,500 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Approved Denied	Staff Initials 04/27	7/16	Cevel 4.28.1	6 Authorizati	
evised 1-26-15							

6/16 MER 49

# Neighborhood Council Funding Program APPLICATION for Neighborhood Purposes Grant (NPG)



This form is to be completed by the applicant seeking the Neighborhood Purposes Grant and submitted to the Neighborhood Council from whom the grant is being sought. All applications for grants must be reviewed and approved in a public meeting. The Neighborhood Council, upon approval of the application, shall submit the approved application along with all required documentation to the Department of Neighborhood Empowerment.

	Name of Neighborhood Council you are seeking the g	rant from:	ENC Neighborho	ood Counci	il Name	
SEC	TION I- APPLICANT VERIFICATION INFORMATION					
	Encino Charter Elementary School	54-2	121912	(	CA	4/13/04
1A)	Organization Name	Federal I.	D. # (EIN#)	State of I	ncorporation	Date of 501(c)(3) Status (if applicable)
	16941 Addison Street	Encino			CA	91316
1B)	Organization Mailing Address	City			State	Zip Code
1C)	Business Address (If different)	City			State	Zip Code
1D)	Address of Affiliated Organization (If applicable)	City			State	Zip Code
	Name and address of person designated to receive	official/le	gal notices:	Nan	ne: Marcia K	off
2)	16941 Addison Street	Encino			CA	91316
	Street	City			State	Zip Code
3)	Type of Organization- Please select one: (Organization Public School (not to include private schools) of Attach Letterhead	r 🗖 50		rofits (other	than religious instil	
SEC	TION II - PROJECT DESCRIPTION					

4) Please describe the Neighborhood Improvement Project for which the grant is intended.

Through this project, ECES teachers and staff will be trained in Community First Aid & CPR. Representatives from the local community will be invited based on availability of space and funding. The funds will be used for a certification program to include professional instruction, instructional materials and practice mannequins. The certification is good for two years. Short-term project objectives: 1.) Ensure that ECES teachers and staff have Community First Aid & CPR training and 2.) Ensure that ECES teachers are in compliance with credentialing requirements. Long-term project objective: To be better prepared for emergency situations at school and in the local community. The •

5) How will this grant be used to primarily support or serve a non-discriminatory, public purpose and benefit the public at-large.

A comprehensive Community First Aid & CPR training and certification program will benefit the students and staff of ECES as well as the Encino community at large. ECES is set in the heart of Encino Village, across the street from the popular "Genesta Park," and adjacent to hundreds of Encino residences and businesses. Having a large population of certified "First Responders" who participate in ongoing practice drills is valuable to the entire community surrounding our school and the stakeholders of Encino.

6/16 MER A 9.1

	ION III - PROJECT BUDGET OUTLINE- Please outline the project b		
AF	Personnel Related Expenses	Requested of NC	Total Projected Cost
_	N/A	\$	\$
H	NA	\$	\$
1		\$	\$
1		\$	\$
L		9	ĮΨ.
N	Ion-Personnel Related Expenses	Requested of NC	Total Projected Cost
1	Staff First Aid & CPR Training (includes materials, certification)	\$ 1000	\$ 1000
T	Neighbor First Aid & CPR (includes materials, certificate		
Г	The training occurred in Aug 200	\$	\$
7	Optional with - Heartfare Training Co	s	\$
-	Robert Pavids 2- Instructar	Į <del>,</del>	I <del>V</del>
_	actors or sources or funding?	□ No	Total Prolocted Cont
2	ource of Funding	Amount	Total Projected Cost
-		\$	\$
-		\$	\$
1		S	\$
P	ON IV - PROJECT PRIMARY AND SECONDARY CONTACT INFORM rovide the name, telephone number, fax and e-mail address (if applied the funds and program(s) listed in Section II of this application.		s) responsible for
Pth	rovide the name, telephone number, fax and e-mail address (if apple funds and program(s) listed in Section II of this application.  Marcia  Koff		s) responsible for
Pth	rovide the name, telephone number, fax and e-mail address (if ap ne funds and program(s) listed in Section II of this application.	plicable) of the person(s	mi 22@lausd.net
PthN	rovide the name, telephone number, fax and e-mail address (if applied the funds and program(s) listed in Section II of this application.  Marcia  Koff  Last Name	plicable) of the person(s	
P th N	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia  Koff  irst Name  8187841762	plicable) of the person(s	
P th N	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia  Koff  Last Name  8187841762  elephone Number  Fax Number  Last Name	plicable) of the person(s mak74.	MI 22@lausd.net
P th N Fi	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia Koff  irst Name Last Name  8187841762  elephone Number Fax Number  irst Name Last Name  elephone Number Fax Number	plicable) of the person(s	MI 22@lausd.net
Pth N Fi	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia Koff  irst Name Last Name  8187841762  elephone Number Fax Number  irst Name Last Name  elephone Number Fax Number	mak74.	22@lausd.net
P th N Fi	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia Koff  irst Name Last Name  8187841762  elephone Number Fax Number  irst Name Last Name  elephone Number Fax Number	mak74.  E-meil  and a NC board memb	22@lausd.net
Pti N Fi	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia Koff  irst Name Last Name  8187841762  elephone Number Fax Number  irst Name Last Name  elephone Number Fax Number  ON V - AFFILIATIONS  there a former or existing relationship between your organization	mak74.  E-meil  and a NC board memb	MI 22@lausd.net  MI  er?
Pth N Fi	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia  Koff  Last Name  8187841762  elephone Number  Fax Number  Consult Name  Last Name  Last Name  Non V - AFFILIATIONS  There a former or existing relationship between your organization yes, did you and/or the board member consult the Office of the Circumstance of the	mak74.  E-meil  and a NC board membity Attorney?	er? Yes No
Pth N Fi	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia Koff  Itest Name Last Name  8187841762  Belephone Number Fax Number  Irst Name Last Name  Belephone Number Fax Number  ON V - AFFILIATIONS  there a former or existing relationship between your organization yes, did you and/or the board member consult the Office of the Corpe of Relationship	mak74.  E-meil  and a NC board membity Attorney? Ye  Board Memb	MI  22@lausd.net  MI  er?
Ptt N Fi	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia Koff  Itest Name Last Name  8187841762  Belephone Number Fax Number  Irst Name Last Name  Belephone Number Fax Number  ON V - AFFILIATIONS  there a former or existing relationship between your organization yes, did you and/or the board member consult the Office of the Corpe of Relationship	mak74.  E-meil  and a NC board membity Attorney? Ye  Board Memb	er? Yes No
P th N Fi	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia Koff  Itest Name Last Name  8187841762  Belephone Number Fax Number  Irst Name Last Name  Belephone Number Fax Number  ON V - AFFILIATIONS  there a former or existing relationship between your organization yes, did you and/or the board member consult the Office of the Corpe of Relationship	mak74.  E-meil  and a NC board membity Attorney? Ye  Board Memb	er? Yes No
Pth N Fi	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia Koff  Itest Name Last Name  8187841762  Belephone Number Fax Number  Irst Name Last Name  Belephone Number Fax Number  ON V - AFFILIATIONS  there a former or existing relationship between your organization yes, did you and/or the board member consult the Office of the Corpe of Relationship	mak74.  E-meil  and a NC board membity Attorney? Ye  Board Memb	er? Yes No
Pth N Fi	rovide the name, telephone number, fax and e-mail address (if applied funds and program(s) listed in Section II of this application.  Marcia Koff  Itest Name Last Name  8187841762  Belephone Number Fax Number  Irst Name Last Name  Belephone Number Fax Number  ON V - AFFILIATIONS  there a former or existing relationship between your organization yes, did you and/or the board member consult the Office of the Corpe of Relationship	mak74.  E-meil  and a NC board membity Attorney? Ye  Board Memb	er? Yes No

6/16MER A9.2

City of Los Angeles, Department of Neighborhood Empowerment NPG APPLICATION Page 3

Two signatures required	am and that no conflict of interest exist that would prevent the awar	unig or
Executive Director of Non-Profit Corpora	ation or School Principal	
Marcia Koff	Principal Mulau Vall	13-19
PRINT First Name/ Last Name	Title Signature	Date
Secretary of Non-profit Corporation or As	ssistant School Principal	
Tracy Sandler	Asst. Principal	3/15
PRINT First Name/ Last Name	Title Signature	Date
Date Received	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	Application	complete
Reviewer Name	Date Reviewed	complete
£		
REVEIWER'S NOTES		The state of
months in the contraction of the		Mark Services
		ASSESSED OF THE SECOND
Date submitted to Funding Unit		
Date submitted to Funding Unit		
Date submitted to Funding Unit		
Date submitted to Funding Unit Method: In-person I E-mail	□ Fax □ Inter-departmental mail	
Date submitted to Funding Unit  Method: In-person I E-mail  NPG #  Application I Complete I Inc.		
Date submitted to Funding Unit Method: In-person I E-mail	□ Fax □ Inter-departmental mail	
Pate submitted to Funding Unit  Method: In-person E-mail  MPG #  Application Complete	□ Fax □ Inter-departmental mail	
Date submitted to Funding Unit  Method: In-person I E-mail  VPG #  Application I Complete I Inc.	□ Fax □ Inter-departmental mail	

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is

SECTION VI - DECLARATION AND SIGNATURE

6/16 MER A9,3



## LOS ANGELES UNIFIED SCHOOL DISTRICT Encino Charter Elementary School

16941 Addison Street, Encino, CA 91316 Telephone: (818) 784-1762 Fax: (818) 995-7110

www.encinoelementary.net

Dr. John E. Deasy Superintendent of Schools Linda Del Cueto Superintendent – ESC North Marcia Koff Principal Tracy Sandler APEIS

January 12, 2015

Encino Neighborhood Council Neighborhood Purpose Grant 4924 Paso Robles Ave. Encino, CA 91316

Dear Grants Committee.

I am pleased to submit this application for support to the Encino Neighborhood Council. This request is for \$1,500 to support Encino Charter Elementary School's Community First Aid & CPR Training and Certification program for teachers, staff and the local community. In addition to satisfying the state credentialing requirement, this project will help our neighborhood to be better prepared for emergency situations at school and in the local community. ECES is set in the heart of Encino Village, across the street from the popular "Genesta Park," and adjacent to hundreds of Encino residences and businesses. Having a large population of certified "First Responders" who participate in ongoing practice drills is valuable to all of the stakeholders of Encino.

Thank you for your careful consideration. Please feel free to contact me should you have any questions.

Sincerely,

Marcia Koff School Principal

Large Staff



Encino Elementary School is a 2012 California Distinguished School

6/16 MER A9,4



Remit to: Partners In Diversity, Inc.
ASGE Marquette Commercial Finance

NW 6333 P.O. Box 1450 Minneapolis, MN 55485-6333

Neighborhood Council/Encino 4924 Paso Robles Ave Encino, CA 91316

#### INVOICE

Invoice Amount \$389.92

Payment Terms	Invoice Date
Net 10 Days	06/13/2016
Invoice No.	Customer No.
24436	1510

Customer Name	Department	Customer No.	Payment Terms		
Neighborhood Council/Encino	Corporate	1510	Net 10 Days		

D	escription	Туре	Units	Rate	Amount
Week ending: 06/05/2016					
Ackerman, Jason Elias	Executive Administrative Assistant	Reg	9.00	\$22.18	\$199.62
			Total	This Week ending:	\$199.62
Week ending: 06/12/2016					
Ackerman, Jason Elias	Executive Administrative Assistant	Reg	8.58	\$22.18	\$190.30
			Total '	This Week ending:	\$190.30

Reg: 17.58 OT: 0 DT: 0	Total - This Invoice:	\$389.92
------------------------	-----------------------	----------

Partners In Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, age, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms in policy and practice to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all applicable federal, state and municipal laws.

4/16 MER A10

Invoice No.: 24436

AppleOne

**AppleOne Employment Services** 

P.O. Box 29048

Glendale CA 91209-9048

Tel: 818-240-8688

Email: specialbillingvms@ain1.com

TIN: 95-2580864

#### **CITY OF LOS ANGELES**

Attn: Attn: ACCOUNTS PAYABLE

**CORPORATE OFFICES** 

200 N. SPRING ST. ROOM 2005

LOS ANGELES, CA 90012

Invoice

Customer No:

00950101 0079

Site No:

Period Ending: 05/28/2016

Invoice Date:

06/01/2016

Invoice No:

\$3629744 \$380.00

Amount Due: Payment Term:

NET 59 DAYS

Norma	Weekend	Inv Date	Refiny No	Reg Hr	Reg Rate	OT Hr	OT Rate	DTHr	DT Rate	Misc Hr	Misc Rate	ACA Hr	ACA Rate	Tax	Amount	State	Office
LAINO, ROMINA	05/28/2016	06/01/2016	01-4079046	16.45	\$23.10	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	\$0.00	\$380.00	CA	1002
Sub Total For:	or some an analysis of the second	a construct special site in the	en in the second of the con-	18.45	and a supplier of the state of	B.08	1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.00	notion in a party	0.00		0.00		\$0.00	\$380.	00	
Grand Total Invoice Ar	mount			16.45		0.00	TALL DE	0.00		0.00		0.00		\$0.00	\$38	0.00	

Please remit payment to:

**AppleOne Employment Services** 

P.O. Box 29048

Glendale, CA 91209-9048

You can now pay electronically through



Visit www.ApplePay.com or Call (866)898-7152 for details

6/16 MER A.

Date: 6/20/2016 10:34

Page 1 of 2



Remit to: Partners In Diversity, Inc.

ASGE Marquette Commercial Finance NW 6333 P.O. Box 1450 Minneapolis, MN 55485-6333

Neighborhood Council/Encino 4924 Paso Robles Ave Encino, CA 91316

#### **INVOICE**

Invoice Amount \$223.59

Payment Terms	Invoice Date
Net 10 Days	06/20/2016
Invoice No.	Customer No.
24488	1510

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Net 10 Days

D	escription	Туре	Units	Rate	Amount
Week ending: 06/19/2016					
Ackerman, Jason E	Executive Administrative Assistant	Reg	8.92	\$22.18	\$197.85
Ackerman, Jason E	Minute Taker	Reg	1.00	\$25.74	\$25.74
			Total 7	This Week ending:	\$223.59

. 9.92 OT: 0 DT: 0	Total - This Invoice:	\$223.59
	Total - This Invoice:	\$2

Partners In Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, age, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms in policy and practice to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all applicable federal, state and municipal laws.

4/16 MER A12

Invoice No.: 24488

## **Department of Neighborhood Empowerment Funding Request Form**



2nd Level

NC NAME:	Encino			TIGHEGENGOD	(MPOWERMEN)		
Budget Fiscal Year:	2015-2016		Requestor	re q	Patricia B	lates	
Request Date: 22-Jun-16			Vendor	*	Patricia B	lates	
Meeting Date: 6/22/2016			Address	s:	16811 Wedding	gton Street	
Agenda Item:			City:	Encir	no Stat		CA
Operations Outreach	□ NC Sponsored Event □ Neighborhood Purp	oose Grant	Zip Cod				0962
	Member Reimbursement Community Improv	-	Amoun		318	3.70	
Out of State 1099 E		☐ Mu	Itiple # of pay	ments			
	the daily \$1,000 limit is required for this read amount needed for the daily limit to be			MER I	TEM 1	3	
Public Benefit Description	toner cartridge for office printer, needed to p	rint agendas	and other items		for 5/25/16 gen		
*Recused-Boardmen	Vote Count (Continued on the must leave the room prior to any discu				until after the	vote is comp	leted.
Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					3-1-
CAROL LEVIN	ENCINO PROPERTY OWNERS	x					
DEBRA GEORGE	PARK ADVOCATE					x	
DIANE ROSEN	AREA 5 REP	x					
DOUG KRIEGEL	AT LARGE REP					x	
ELIOT COHEN	PLU	x					
GERALD SILVER	HOMEOWNERS OF ENCINO	x					
GLENN BAILEY	PUBLIC SAFETY	x					
HENRY ESHELMAN	AT-LARGE REP	x					
JESS WHITEHILL	AREA 4 REP	x					
JIM ESTERLE	AREA 7 REP						x
KENNETH SILK	AREA 3 REP	x					
LAURA SHOVLOWSKY	AREA 1 REP					x	
LAURIE KELSON	AREA 6 REP	-				x	
MARK LEVINSON	ENCINO CHAMBER OF COMM.					x	
PATRICIA BATES	VOLUNTEER SERVICE	x					
SCOTT LINDEN	AREA 2 REP	x					
SHERMAN GAMSON	APARTMENT/CONDO REP	x					
VARANT MAJARIAN	BUSINESS REP	х					
VICTORIA MILLER	BUSINESS REP	X					
NC Quorum: 11	Grand Total (including page 2):	14				5	3
public meeting was held in ac	of the above indicated Council, declare that coordance with the Brown Act, where with a	quorum of	Board Membe	rs present, the	Council appro	oved the abo	ve action.
	es a Funding Request submitted, the Depart Ily, i.e. no additional Cash Request Form is re		ansfer the req	uested amoun	t into the Neig	hborhood Co	ouncil's
Treasurer's Signat	ture: An 2 PE		Signer's S	Signature:	110	way	
Print/Type na	ame: Patricia Bates		Print/Ty	pe name: Del	ora George	1	
Date (mm/dd,			Date (mr	m/dd/yy):	8/18/1	6	
Department Use Only	☐ Contract ☐ CIP ☐ Advanced Payment ☐ >\$2,500 ☐ NPG ☐ Sponsored Event	☐ Approved ☐ Denied			st Level	Authoriza	tion Code

NC NAME:	Encino	
Meeting Date:	42543	
Agenda Item:	0	

Vote Count  *Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed.							
Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
SHELLEY BILLIK	PARKS ALTERNATE						X
BRANDON RAPPORT	CHAMBER ALTERNATE						X
W							
							-
				-			
C Quorum: 11	Totals (this page only):						2

# Office Max

OFFICE DEPOT #3320 18211 Ventura Boulevard Tarzana, CA 91356 (818) 668-9067

9 09/2016 16.3.2

4:

3320 REG 2 TRN 4791 EMP 744349

E

duct ID Description Total
702 TONER, HP 80A, B 103.99 SS

 Subtotal:
 103.99

 es Tax:
 9.36

 Total:
 113.35

 MasterCard 5056
 113.35

H CODE 03438P

Chip Read

A0000000041010 4348415345204D415354

0000008000

Signature Verified

PATRICIA BATES 5576210164

Congratulations! You are eligible for Choice Member rewards next quarter!

Select your 5 additional product categories at officedepot.com/rewards

Shop online at www.officedepot.com

\*\*\*\*\*\*\*\*\*\*\*\*\*

WE WANT TO HEAR FROM YOU!

Participate in our online customer survey and receive a coupon for \$10 off your next qualifying purchase of \$50 or more on office supplies, furniture and more.

(Excludes Technology, Limit 1 coupon per household/business.)

Visit www.officedepot.com/feedback and enter the survey code below.

Survey Code:

JP HDHE NPQO



27VT3A3PM3QYYYWBC

Toner Coffridge for ENC office 5/9/2016

6/16 MER A13





CREDIT CARD (...5056)

Trans Date	Post Date	Type	Description		Amount
05/09/2016	05/10/2016	Sale	OFFICE DEPOT #3320	-	\$113.35
			<b>Transaction Number</b> 05436846131500098186547		
			TARZANA, CA 913560000 US In-person transaction		
Rewards ear	med <sup>1</sup>		+ 1 mile per \$1 earned on all purchases	113.35	
			Total rewards	113.35 Miles	



WED MAY 25,2016 CHECK #471846- 1

1 >>>OPEN FOOD <<< TAX

\$183.00 \$16.47

We don't serve fast food We serve Fresh Food as fast as we can. (R) 1 CUSTOMER Time: 13:47

> Welcome 818 789 9400

YOU HAVE BEEN SERVED BY : MARCIA

TRANSACTION RECORD



CARD TYPE: Master Card Nu. \*\*\*\*\*\*\*\*\*\*5056 EXPI.: \*\*\*\* ENTRY: SWIPED AUTHORIZATION:02229P STORE #:1 TERMINAL:3 REFERENCE: 471846

**PURCHASE** 

\$199.47

THANK YOU MAY 25,2016 13:47:25 Server's name : MARCIA

CUSTOMER COPY

\*\* We come To Our Engine Store \*\* Store #477

\* See Us On WEB www.smartandfinal.com

Cashier: Adela

DATE 05/25/16

TIME 17:46:54

6 @ .88 Crysta Geyse 5. Was \$5.94 / YOU SAVED -> \$.65 5.28 F 6 0 .10 SUBTOTAL 5.88 Sales Tax TOTA... TENDER MasterCard Account Number \*\*\*\*\*\*\* APPRVL CODE 01774P Cas Ref# 2 CHANGE Cash

TOTAL NUMBER OF ITEMS THIS VISIT--> 6 \* Smart & Final Store # 477 16847 Ventura Blvd.

Encino, CA 91436

Operator 23016916 DATE 05/25/16 TIME 17:47:23 \* Account #

130982 Reference # 01774P APPRVL CODE Reason Code R400 5.88

TOTAL. BALANCE

Encino Neighborhood Council 5/25/2015 Board Meeting

6/16MER A 13.4



UNITED

CREDIT CARD (...5056)

Trans Date 05/25/2016	Post Date	Туре	Description		Amount
05/25/2016					Amount
0312312010	05/26/2016	Sale	SMARTNFINAL47710104776		\$5.88
			<b>Transaction Number</b> 05410196146929170018455		
			ENCINO, CA 913160000 US In-person transaction		
Rewards ean	ned <sup>1</sup>		+ 1 mile per \$1 earned on all purchases	5.88	
		j	Total rewards	5.88 Miles	
F	Rewards ean	Rewards earned <sup>1</sup>	Rewards earned <sup>1</sup>	05410196146929170018455  ENCINO, CA 913160000 US In-person transaction  + 1 mile per \$1 earned on all purchases	05410196146929170018455  ENCINO, CA 913160000 US In-person transaction  + 1 mile per \$1 earned on all purchases 5.88

# CHASE ()



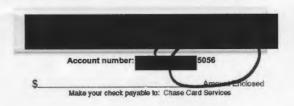
CREDIT CARD (...5056)

Trans Date	Post Date	Type	Description		Amount
05/25/2016	05/26/2016	Sale	POQUITO MAS ENCINO		\$199.47
			<b>Transaction Number</b> 55480776147207799501013		
			ENCINO, CA 914360000 US In-person transaction		
Rewards ear	ned <sup>1</sup>		+ 1 mile per \$1 earned on all purchases	199,47	
			Total rewards	199.47 Miles	



P.O. BOX 15123 WILMINGTON, DE 19850-5123

> 80499 BEX 9 16816 C PATRICIA BATES



CARDMEMBÉR SÉRVICE PO BOX 94014 PALATINE IL 60094-4014



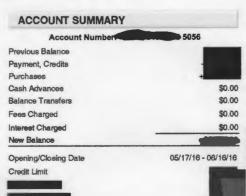
Mileage UNITED

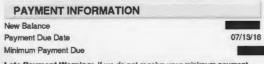






Mobile: Visit chase.com on your mobile browser





Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay a late fee of up to \$37.00.

Minimum Payment Werning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:



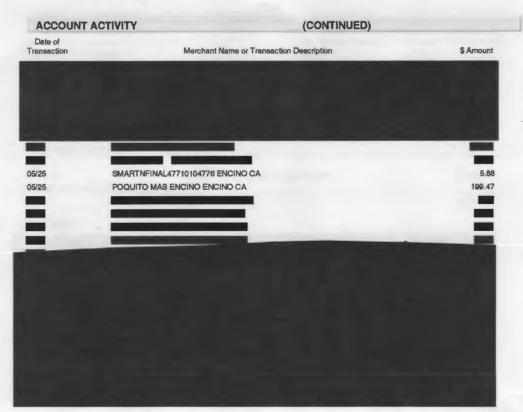
Manage your account online: www.chase.com/united



Customer Service: 1-800-323-6252



Mobile: Visit chase.com on your mobile browser



# Office DEPOT OfficeMax

OFFICE DEPOT #949 16571 Ventara Blvd Encino, CA 91436

Phone: (818) 907-1741 Fax: (818) 907-2 5/08/2016 16.3.2 7:19 Pi TR 949 REG 2 TRN 5867 EMP 779380

Description Total 6726 TRIMMER.TITANI 25.99
5819 TONER, HP 80X, B 178.99
2065 CARD, LSR, TENT, 26.99
4421 BADGE, 74459, 10 79.99
5386 BADGE, WBC-4C, 5 49.99

 Subtotal:
 361.95

 Sales Tax:
 32.58

Total: 394.53 Debit Card 4209: 394.53

TDS Chip Read AID A0000000042203 Debit \*VR 8000048000 \*VS PIN Verified

Shop online at www.officedepot.com

WE WANT TO HEAR FROM YOU!

'articipate in our online customer sur nd receive a coupon for \$10 off your xt qualifying purchase of \$50 or more office supplies, furniture and more. Excludes Technology. Limit 1 coupon populations to the coupon population of the coupon populati

and enter the survey code below.

John Arnstein Total due by Jun 08, 2016: \$119.98 Account number: 8448 20 001 3772834 Customer code: 6486 'tement date: May 28, 2016



	Previous balance Balance last statement	59.99
	Total previous balance	\$59.99
	Monthly services	=
	Internet/Data services	
05/28	Internet Modem Lease BASIC Internet	10.00 49.99
	Internet/Data services total	\$59.99
	Total monthly services	\$59.99
	Total due by Jun 08, 2016	\$119.98

Paid by Debit Cord 6/9/16
Paid by Debit Cord at date
124.73 Payment date
Cord #8892
058892



#### Reach us at your convenience

In person

9260 Topanga Canyon Blvd., Chatsworth, CA 91311 Monday - Friday 8:30am - 6:30pm Saturday 9am - 5pm

#### On twc.com

Visit twc.com/account to pay your bill online, view FAQs/self-help options and chat with a live agent. Just have your customer code above on hand.

Through your mobile device

th our free My TWC° app.

Over the phone

Call us anytime at **1-888-892-2253** and simply say "pay my bill" to pay your bill for free. Or you can speak to someone live with any questions about your bill

### Pay online Customer information

Go green with online bill payment.
Sign up at twc.com/account
Have your account number and customer code ready, found on the top of this page.

#### Pay by phone

Make a credit card payment free of charge using our automated payment option at **1-888-892-2253**; simply say "pay my bili". Use your Visa, MasterCard, Discover or merican Express card.

Experiencing technical issues with closed captioning? Call 1-800-892-2253, email closedcaption@twcable.com, or fax 1-877-430-1386. Address written complaints to W. Wesselman, Legal, 13820 Sunrise Valley Dr., Herndon, VA 20171, email

13820 Sunrise Valley Dr., Herndon, VA 20171, email ccissues@twcable.com, or fax 1-704-697-4935. To follow up on a written submission only, call 1-877-276-7432.

If your check is returned, you expressly authorize your bank account to be electronically debited for the amount of the check plus any applicable fees. The use of a check for payment is your acknowledgment and acceptance of this policy and its terms and conditions

For information on any upcoming programming changes please consult the Legal Notices published in Los Angeles Times 1st and 3rd Wednesday each month and on two.com

Visit twc.com/careers for career opportunities at Time Warner Cable.

TWC imposes surcharges to recover costs of complying with its governmental obligations.

Unresolved Concerns: City Of Los Angeles Information Technology Agency 200 North Main St Suite 1255 Los Angeles CA 90012 Telephone and Tdd: 3-1-1 One Call to City Hall OR Http://www.lacity.org

6/16 MER A15

# Board Meeting Food 4/22/2016

CITCARE GREEK

Due: Wed 6/22, 6:30PM \*\*\*



Fresh Brothers - Encino 16060 Ventura Blvd. Encino, CA 91436 Phone: (818) 528-2100 FreshBrothers.com

Delivery

Order #N/A

Empl:JAMES S. 11:14 AM

6/21/2016

ENCINO COMMUNITY CENTER 4935 BALBOA AVE

## Smart&Final. Warehouse & Market, Friend & Neighbor.

Tran Seq No: 376526

15.99

15.99

\$31.98

\$0.00

\$31.98

\$0.00

\$0.00

\$31.98

\*\* Welcome To Our Engine Store \*\* Store #477

See Us On WEB www.smartandfinal.com

Cashier: Laura

Welcome to Dunkin Donuts PC# 353754 4920 Balboa Blvd., Encino, Ca 91316

HEY AMERICA!

WANT A FREE CLASSIC DOWLT OF KIDS CONF WHEN YOU PUT MEDIUM OR LARGER FAMILY T.

6/21/2016 11:15:59 AM Carry Out

Order: 526

Cashier: Kimberly O.

Bx Joe Dcf

Sub. Total:

Discount Total:

UD DYONAN DE

Bx Joe Orig Blnd

Register:1

Tax:

Total:

Change

COM 3

MasterCard:

TIME 12.01:25 DATE 06/21/16

4 0 .99 Arrowhead Dstld Wt 3.96 F 4 0 .10 +CRV SUBTOTAL 4.36 00 Sales Tax TOTAL

TENDER MasterCard 1.36 Account Number \*\* > APPRVL CCF Cas Ref

6/16 MER A 16,18,19

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* ORDER NOTE

PFN 50 \*\*\*\*\*\*\*\*\*\*\*\*\*\*\* 4 LG Regular Create Your Own Pizza 63.96 Thin Crust Pepperoni 7.96 4 LG Regular Create Your Own Pizza 63.96 Thin Crust 4 LG Regular Fresh Vegetable Pizza 91.96 Thin Crust NO Onions [Fresh Fan] -22.78Subtotal 205.06 Delivery Fee 3.95 Tax 18.81 Total 227.82

Paid MC .82

# Office DEPOT

OFFICE DEPOT #949 16571 Ventura Blvd. Encino, CA 91436

Phone: (818) 907-1741 Fax: (818) 907-2742 06/21/2016 16.4.2 10:55 AM STR 949 REG 3 TRN 8758 EMP 595235

SALE marlove to brown a vot principles lenione

Product ID Description Total 597427 SHREDDER 12SHT 159.99SS Instant Savings -60.00

You Pay 99.99SS

modilinuO Subtotal: 99.99 pe

Sales Tax: 9.00 Total: 9.00

MasterCard 4209: 108.99

AUTH CODE 036844

TDS Chip Read

AID A0000000042203 Debit

TVR 8000088000 CVS No Signature Required

Total Savings: \$60.00

#### WE WANT TO HEAR FROM YOU!

Participate in our online customer survey and receive a coupon for \$10 off your next qualifying purchase of \$50 or more on office supplies, furniture and more.

(Excludes Technology, Limit 1 coupon per household/business.)

Visit www.officedepot.com/feedback and enter the survey code below.

Survey Code: to a mag D tentilmul

64K2 ZNW8 GN69

6/16 MER A17

Welcome to Dunkin Donuts PC# 353754 4920 Balboa Blvd., Encino, Ca 91316 6/21/2016 11:15:59 AM

## Carry Out Order: 526

Register:1 Tran Seq No: 376526 Cashier:Kimberly O.

1 Bx Joe Orig Bind 15.99 1 Bx Joe Dcf 15.99

 Sub. Total:
 \$31.98

 Tax:
 \$0.00

 Total:
 \$31.98

 Discount Total:
 \$0.00

Change \$0.00 MasterCard: \$31.98

HEY AMERICA!
WANT A FREE CLASSIC DONUT OR KIDS CONE
WHEN YOU PURCHASE A

MEDIUM OR LARGER DUNKIN' DONUTS
OR BASKIN-ROBBINS BEVERAGE?
Go to www.telldunkinbaskin.com on your
computer or mobile device in the next
3 days and tell us about your visit.

Te invitame a narticinar on

6/23/16

Pick up coffee

at Dunkin

A18 Donuts -

Z Carriers

A19

WELCOME TO BEST BUY #764 4500 VAN NUYS BLVD SHERMAN DAKS, CA 91403 (818) 501-0933

Keep your receipt!

Val #:000083-224348-868467-377849-130916-751

0764 019 6973 06/25/16 15:04

8767099 VG248QE	229.99	
24" LED 1MS 1080P 3D READY	227.77	
50.00 SALE DISCOUNT		
SPU Order # 1116177605034		
Pickup In Store SHERMAN DAKS CA		
Sales Tax 20.70		
6715986 CA RECYCLE	4.00	N
CA RECYCLE TIER 2	1.00	14
Sales Tax 0.00		
5216602 I7368-0027G	749.99	м
DELL STARLORD 13" I5	177,77	п
0.00 MCSFT SOFTWR BNDL		
0.00 GKSVCS BNDL		
0.00 GSP BNDL		
Sales Tax 67.49	2 00	46
6715977 CA RECYCLE CA RECYCLE TIER 1	3.00	TM
Sales Tax 0.00	204 00	
	284.99	112
3YR GSP&S+ LAPTOP \$600-899.99		
15.00 GSP BNDL		
GSP# 5595313553 SKU # 5216602		
SKU # 5216602		
Sales Tax 0.00	2 00	
1689012 KAS018800F1	2.99	
KASPERSKY IS BOX 2015 3-USER		
0.00 GKSVCS BNDL 0.00 GSP BNDL		
SERIAL # KSP00IS160001872736		
Sales Tax 0.26	12 01	v
5871412 KASPERSKY I	12.01	*
KASPERSKY IS 3 USER 3 YEAR		
30.00 GKSVCS BNDL 64.99 GSP BNDL		
Sales Tax 1.08	0 00	h1
5266500 79G-04729	0.00	N*
OFFICE HOME AND STUDENT 2016 W		
0.01 SOFTWR BNDL 0.00 MCSFT SOFTWR BNDL		
SERIAL # MS79G04729260448508		
Sales Tax 0.00		
4220120 OFFICE ENG	99.99	*
OFFICE ENG TERM		
0.00 SOFTWR BNDL		
20.00 MCSFT SOFTWR BNDL		
30.00 DISCOUNT		

SUBTOTAL 1386.96 Sales Tax 98.53

9.00

MODE: Issuer

AID: A0000000042203

MCSFT SOFTUR BNDL SAVINGS: 20.00
GKSVCS BNDL SAVINGS: 30.00
GSP BNDL SAVINGS: 79.99
SOFTUR BNDL SAVINGS: 0.01
OTHER SAVINGS: 80.00
TOTAL SAVINGS: 210.00

MY BEST BUY CORE TIER MEMBER ID 4167695055

SOFTWARE
You purchased the following:
KASPERSKY IS BOX 2015 3-USER
Serial Nbr:: KSP00IS160001872736
Please install your Internet Security
immediately as your device is unprotected.

SERVICE AND SERVICE OPTIONS KASPERSKY IS 3 USER 3 YEAR

HARDWARE/SOFTWARE
You purchased the following:
OFFICE HOME AND STUDENT 2016 W
Serial Nbr:: MS79G04729260448508

SERVICE AND SERVICE OPTIONS OFFICE ENG TERM

JASON,
THANKS FOR SHOPPING AT BEST BUY TODAY!
YOUR MY BEST BUY BALANCE AS OF 06/25/2016
POSTED POINTS: 0
GO TO BestBuy com FOR MORE INFO

\* INDICATES ITEM IS PART OF A BUNDLE

UPON RETURN, IF BUNDLE IS BROKEN, THE SAVINGS WILL BE REMOVED AND CURRENT PRICES WILL BE APPLIED

14-day return period on Phones and Carrier Connectable Devices for all customers.

> 15-day return own and my almost everything else

Sales Tax

## Office DEPOT Office Max

OFFICE DEPOT #949 16571 Ventura Blvd. Encino, CA 91436

Phone: (818) 907-1741 Fax: (818) 907-2742 06/30/2016 16.4.2 3:47 PM STR 949 REG 3 TRN 149 EMP 640372

SALE		
Product	ID Description	Total
196517	PPR,X-9,11",10	55.99
Promo	tion	-23.00
	You Pay	<b>32.99</b> SS
432087	STAPLES, STNDRD	6.99 SS
196156	STAPLER, ELECT,	28.49 SS
327025	LABEL, 8366, 150	29.99 SS
983932	LABEL, 8163, 250	
2 @ 1	2.99	25.98
Promo	tion	
	You Pay	<b>25.98</b> SS
983932	LABEL, 8163, 250	12.99
Promo	tion	-12.99
	You Pay	0.00SS

	Subtotal:	124.44
Sales Tax:		11.20
	Total:	135.64
Maste	rCard 4209:	135.64

AUTH CODE 094713	HIII)
TDS Chip Read	
AID A0000000042203 Debit	
TVR 8000088000	
CVS No Signature Required	

PATRICIA BATES 5576210164

Congratulations! You are eligible for
Choice Member rewards next quarter!

Choice Member rewards next quarter!
Select your 5 additional product
categories at officedepot.com/rewards

Total Savings: \$35.99

#### WE WANT TO HEAR FROM YOU!

WE WANT TO HEAR FROM 100

Participate in our online customer survey and receive a coupon for \$10 off your next qualifying purchase of \$50 or more on and more.

(Excludes lecturality | List | coupon per

# Office DEPOT Office Max

OFFICE DEPOT #949 16571 Ventura Blvd. Encino, CA 91436

Phone: (818) 907-1741 Fax: (818) 907-2742 06/28/2016 16.4.2 1:51 PM STR 949 REG 3 TRN 9785 EMP 669562

SHLE	
Product ID Descript 940958 MYPASSPORT,1TB Instant Savings You Pay 385819 TONER,HP 80X,B 212860 BDR,INP,VW,3", Promotion	tion Total 89.99SS -30.00 . <b>59.99</b> SS 178.99 SS
You Pay 212779 BDR, INP, VW, 3", Promotion	<b>13.99</b> SS
You Pay 212662 BDR, INP, VW, 3", Promotion	<b>13.99</b> SS
196517 PPR,X-9,11",10 Promotion	-13.99 0.00SS 55,99
You Pay 475168 DIVIDERS, 1-31, 475136 DIVIDERS, JAN-D 3 @ 4.99	-23.00 <b>32.99</b> SS 8.99 SS
You Pay	14.97

3 @ 4.99

You Pay

14.97

Subtotal:

Sales Tax:

Total:

MasterCard 4209:

AUTH CODE 001955

TDS Chip Read

AID A00000000042203 Debit TVR 80000880 CVS No Signa

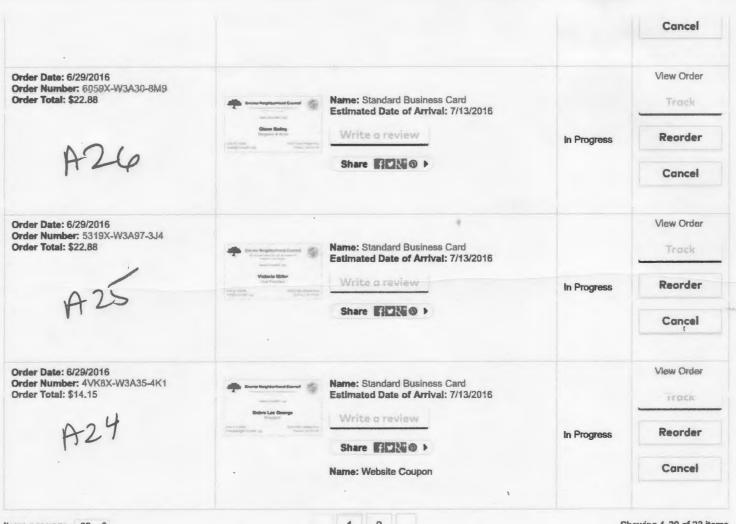
# 2016 Congress of Neighborhoods / NC Budget Advocates / EmpowerLA Awards Board Support Resolution

We, Debra George (President Name) and Patricia Bates (Treasurer Name), declare that we are the
Patricia Bates (Treasurer Name), declare that we are the
President and Treasurer, respectively of the
Resolved: That the Neighborhood Council supports:
LA Congress of Neighborhoods – September 24, 2016 Annual event in the amount of:  □\$1000 □\$500 □\$250 □ *Other Amount \$
and/or
LA Congress of Neighborhoods – Networking/EmpowerLA Awards event in the amount of:  \$\square\$1000 \$\square\$500 \$\square\$250 \$\square\$*Other Amount \$\square\$
and/or
Neighborhood Council Budget Advocates in the amount of:  □\$1000 □\$250 □ *Other Amount \$
Therefore, be it resolved that the Neighborhood Council approves the submission of this resolution authorizing the Department of Neighborhood Empowerment to transfer funds in the aforementioned amount from our checking account (or appropriation account if funds are available) and into the Congress and/or Budget Advocacy Account(s).
IN WITNESS of the above action, the undersigned has executed and delivered this certificate in the name and on behalf of the Neighborhood Council and as of the date set forth below.
Signature of President Date  Type 22 20/6  Date
Signature of Treasurer  Submit this form by emailing jasmine.duckworth@lacity.org, faxing to (213) 978-1751, or mailing to City Hall, 200 North Spring Street, 20 <sup>th</sup> Floor, Los Angeles, CA 90012.
Form must be received by the Department no later than Wednesday, June 22, 2016 in order to be

\*Please specify a specific monetary amount, i.e. statements such as "our unused funding for this fiscal year" will not be processed.

processed from Fiscal Year 15-16 available funds.

6/16 MER A22,23



items per page 20 ≎

1 2 Showing 1-20 of 23 items

Indicates that your document includes foil accents. Click here to learn more about foil.

Let Us Help

What We Offer

**Our Company** 

**Our Policies** 

Connect with us

Owner Nation

Read our blog

Refer a friend and get \$10 OFF.

Rely on Vistaprint

Absolutely Guaranteed

Every time. Any reason. Or we'll make it right.



1.866.614.8002 | Home | Site Map | Privacy Policy | Terms of Use | a Cimpress company © 2001-2016 Vistaprint. All rights reserved.

6/16 MER A24-26

View Order Order Date: 6/29/2016 Order Number: Y300Y W3A50 6D5 Order Total: \$22.88 Name: Standard Business Card Estimated Date of Arrival: 7/13/2016 Write a review In Progress Reorder Share FINO Cancel View Order Order Date: 6/29/2016 Order Number: LPL9X-W3A59-1L8 Order Total: \$22.88 Name: Standard Business Card Estimated Date of Arrival: 7/13/2016 write a review Reorder In Progress Share TINO > Cancel May Order Order Date: 6/29/2016 Order Number: L9J9X-W3A99-4U6 Order Total: \$22.88 Name: Standard Business Card Track Estimated Date of Arrival: 7/13/2016 Write a review Reorder in Progress Share TING > Cancei View Order Order Date: 6/29/2016 Order Number: JGC9X-W3A60-4G7 Order Total: \$22.88 Name: Standard Business Card Track Estimated Date of Arrival: 7/13/2016 A28 Write a review Reorder In Progress Share FILL 0 > Cancel Order Date: 6/29/2016 View Order Order Number: D899X-W3A07-8F4 Order Total: \$22.88 Track Name: Standard Business Card Estimated Date of Arrival: 7/13/2016 Reorder Ellet Cohen Write a review In Progress Share FIDNO >

6/16 MER A 27-31