

Office of the City Clerk			
Reporting Month:	JUNE	MONTHLY EXPENDITURE REPORT	
NC Name:	Encino	Submitted:	7/22/2017 11:13:05
Budget Fiscal Year:	2016-2017		



FILL IN ALL THE UNSHADED (WHITE) FIELDS (Must be submitted to the Department within 10 days of Board Approval along with documentation and hard copy)

EXPENDITURES BY LINE ITEM (for more than 12 expenditures, you may continue entering on page 3 of this worksheet - see below)								
A	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / DESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
1	America's Healthy Kids		ENC 17105	6/2/2017 Healthy kid event	NPG	<input type="checkbox"/>	<input type="checkbox"/>	\$1,250.00
2	Partners in Diversity	26863		6/5/17 Temporary staffing w/e 4/23/17	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$197.85
3	Partners in Diversity	27013		6/5/17 Temporary staffing w/e 4/23/17	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$234.47
4	Partners in Diversity	27072		6/5/17 Temporary staffing w/e 5/21/17	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$267.94
5	Los Encinos Docents		ENC-17363	6/5/17 dirt for instructional garden	NPG	<input type="checkbox"/>	<input type="checkbox"/>	\$300.00
6	Los Encinos Docents		ENC-17365	6/5/17 Beautification of entrance	NPG	<input type="checkbox"/>	<input type="checkbox"/>	\$700.00
7	Lanai Road School		ENC-17364	6/5/17 STEAM instructional materials	NPG	<input type="checkbox"/>	<input type="checkbox"/>	\$1,000.00
8	Encino Charter School		ENC-17362	6/5/17 STEAM instructional materials	NPG	<input type="checkbox"/>	<input type="checkbox"/>	\$1,000.00
9	City of LA Rec/Parks			6/9/17 Permit for community get together	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$100.00
#	City of LA Rec/Parks			6/9/17 Food truck permit for get together	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$200.00
#	M.A.R.Y. Foundation		ENC-17366	6/9/17 Grant for Children's festival	NPG	<input type="checkbox"/>	<input type="checkbox"/>	\$750.00
#	Congress of Neighborhoods			9/9/17 Congress of Neighborhoods event	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$1,000.00
SUBTOTAL: Expenditures by Line Item (May include totals on page 3, if entered)								\$8,945.89
B CUMULATIVE EXPENDITURES FROM PRIOR MONTHS (CURRENT FISCAL YR)								\$27,627.18
C OUTSTANDING COMMITMENTS (OBLIGATIONS)								
1	PARTNERS IN DIVERSITY			6/16/17 REVERSED PAYMENT	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$197.85
2	PARTNERS IN DIVERSITY			6/16/2017 REVERSED PAYMENT	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$234.47
3	PARTNERS IN DIVERSITY			6/16/17 REVERSED PAYMENT	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$267.94
4	PARTNERS IN DIVERSITY			6/30/17 REVERSED PAYMENT-see note	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$549.20
5	PARTNERS IN DIVERSITY			#1,2,3 REVERSED, ALSO INCLUDED a2, 3, 4	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	-\$700.26
6						<input type="checkbox"/>	<input type="checkbox"/>	
7						<input type="checkbox"/>	<input type="checkbox"/>	
8						<input type="checkbox"/>	<input type="checkbox"/>	
9						<input type="checkbox"/>	<input type="checkbox"/>	
10						<input type="checkbox"/>	<input type="checkbox"/>	
SUBTOTAL: Outstanding Commitments (Includes total on page 3)								\$549.20
D Total Expenditures & Commitments								\$37,122.27
E Total Adjustments (such as use taxes assessed, prior fiscal years items, etc) (use '-' for credits, '+' for deductions)								\$0.00
F Approved Budget 2016-2017								\$42,000.00
G Balance of Budget 2016-2017								\$4,877.73

Reporting Month:	JUNE
NC Name:	Encino

MONTHLY CASH RECONCILIATION				
Beginning Balance (A)	Funds Deposited (B)	Total Available (C) = (A+B)	Cash Spent this Month (D)	Remaining Balance (E) = C - D
\$14,372.79	\$1,249.46	\$15,622.25	\$8,945.89	\$6,676.36

MONTHLY CASH FLOW ANALYSIS						
Category Identifier	Budget Category	Adopted Budget (A)	Total Spent this Month (B)	FY 2015-16 Expenses Cleared in FY 2016-17 (C)	Total Spent in Prior Months (D)	Unspent Budget Balance (E) = A - B - D
100	Operations	\$14,300.00	\$1,671.81	\$0.00	\$9,566.79	\$3,061.40
200	Outreach	\$11,000.00	\$2,274.08	\$0.00	\$10,644.90	(\$1,918.98)
300	Community Improvement	\$4,200.00	\$0.00	\$0.00		\$4,200.00
400	NPG	\$12,500.00	\$5,000.00	\$0.00	\$7,415.49	\$84.51
500	Elections		\$0.00	\$0.00		\$0.00
	TOTAL	\$42,000.00	\$8,945.89	\$0.00	\$27,627.18	\$5,426.93

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 Office of the City Clerk, Neighborhood Council Funding Section upon request.			
Treasurer Signature		Signer's Signature	
Print Name	PATRICIA BATES	Print Name	DEBRA GEORGE
Date		Date	
NC Additional Comments	A 20 & A21 include \$39.38 in charges for drinking water provided for community get togethers and America's Healthy Kids Events. The funds deposited of \$1249.46 actually includes \$549.20 of erroneously reversed Partners in Diversity charges which were not paid; the invoices are directly following the bank statement in this MER		

Reporting Month:	JUNE
NC Name:	Encino

ADDITIONAL EXPENDITURES BY LINE ITEM (Optional, do not print page 3 unless you use it)								
A	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / DESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
#	Martin Outdoor	25459		6/14/17 Bus Bench printing	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$300.00
#	Partners in Diversity	27180		6/13/17 Temporary Staffing w/e 6/5/17	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$177.44
#	The Web Corner	14990		6/13/17 Web site maibntenance	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$99.00
#	Office Depot			6/2/2017 Sharpie markers for Community get-together	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$5.44
#	Office Depot			6/2/17 Name Badges for community get together	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$13.01
#	TWC			6/5/17 Cable for internet	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$59.99
#	Quality Logo products	719393322		6/5/2017	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$198.31
#	Office Depot			6/6/17 Paper, pens, water (see note)	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$129.18
#	Office Depot			6/5/17 Paper, computer cable, water (see note)	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$66.64
#	Bucca di Beppo			6/8/17 Refreshments for general meeting	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$278.33
#	Office Depot			6/8/17 2 extra capacity toner cartridges	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$408.88
#	Office Depot			6/9/2017 glue	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$7.81
#	Office Depot			6/9/17 1 remanufactured super capacity toner	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$181.60
#	Constant contact			6/23/17 Outreach emailing service	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$20.00
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
SUBTOTAL: Expenditures by Line Item								\$1,945.63



STATEMENT OF ACCOUNTS

Page 1 of 2

Statement Number: [REDACTED]

06/01/17 - 06/30/17

UNION BANK
CENTURY CITY 0206
PO BOX 512380
LOS ANGELES CA 90051-0380

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

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

Business Basics Checking Summary

Account Number [REDACTED]

Days in statement period: 30

Balance on 6/1	\$	14,372.79
Additions		1,249.46
Subtractions		-15,073.05
Checks		-2,626.44
Payments		-4,950.26
Purchases		-1,369.19
Other Withdrawals		-6,127.16
Balance on 6/30	\$	549.20

① 549.20
② 6127.16
6676.36

Statement Average Ledger Balance 7,540.12

We waived your service charge this statement period.

Partners in Diversity

199.62
349.58
549.20

Additions

Date	Description/Location	Reference	Amount
6/16	Partners in Dive PMT REFUND PPD *****0818	55959695 \$	197.85
6/16	Partners in Dive PMT REFUND PPD *****0818	55959697	234.47
6/16	Partners in Dive PMT REFUND PPD *****0818	55959699	267.94
6/30	MISCELLANEOUS BANK ORIGINATED ITEM	99351149	549.20
Total		\$	1,249.46

Checks

Number	Date	Reference	Amount	Number	Date	Reference	Amount
5090	6/9	06782198	100.00	5107	6/14	08297394	300.00
5103*	6/9	06782196	200.00	5108	6/13	07528668	177.44
5105*	6/13	07630654	750.00	5109	6/13	08281138	99.00
5106	6/22	06114102	1,000.00				
Total						\$	2,626.44

* Checks missing in sequence. Out of sequence check numbers may also be located in the Payments section of your statement.

Payments online and electronic banking

Date	Description/Location	Reference	Amount
6/2	AMERICA'S HEALTH ONLINE PMT WEB UN1682190818POS	51586566 \$	1,250.00
6/5	PARTNERS IN DIVE ONLINE PMT WEB UN1682190818POS	53059447	197.85

Payments *online and electronic banking*

Date	Description/Location	Reference	Amount
6/5	PARTNERS IN DIVE ONLINE PMT WEB UN1682190818POS	53059448	234.47
6/5	PARTNERS IN DIVE ONLINE PMT WEB UN1682190818POS	53059449	267.94
6/5	LOS ENCINOS DOCE ONLINE PMT WEB UN1682190818POS	53058735	300.00
6/5	LOS ENCINOS DOCE ONLINE PMT WEB UN1682190818POS	53058736	700.00
6/5	LANAI ROAD SCHOO ONLINE PMT WEB UN1682190818POS	53058577	1,000.00
6/5	ENCINO CHARTER E ONLINE PMT WEB UN1682190818POS	53057545	1,000.00
Total			\$ 4,950.26

Purchases *ATM card and Debit card™ purchases*

Date	Description/Location	Reference	Amount
6/2	OFFICE DEP 800-463-3768 CA 800-463-3768 CA	71983842	\$ 5.44
6/2	OFFICE DEP 800-463-3768 CA 800-463-3768 CA	71983841	13.01
6/5	TWC*TIME W 888-TWCABLE CA 888-TWCABLE CA	70409855	59.99
6/5	QUALITY LO 08663125646 IL 08663125646 IL	73359551	198.31
6/6	OFFICE DEP ENCINO CA ENCINO CA	71123767	129.18
6/8	OFFICE DEP ENCINO CA ENCINO CA	72550733	66.64
6/8	BUCA DI BE ENCINO CA ENCINO CA	72550735	278.33
6/8	OFFICE DEP 800-463-3768 CA 800-463-3768 CA	72550734	408.88
6/9	OFFICE DEP ENCINO CA ENCINO CA	73287930	7.81
6/9	OFFICE DEP 800-463-3768 CA 800-463-3768 CA	73287931	181.60
6/23	CTC*CONSTA 855-2295506 MA 855-2295506 MA	71772998	20.00
Total			\$ 1,369.19

Other Withdrawals *including fees and adjustments*

Date	Description/Location	Reference	Amount
6/29	CLOSING TRANSACTION	99350699	\$ 6,127.16

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

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



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

INVOICE

Invoice Amount
\$349.58

Remit to: Partners In Diversity, Inc.
ASGE Marquette Commercial Finance
NW 6333 P.O. Box 1450
Minneapolis, MN 55485-6333

Payment Terms	Invoice Date
Due On Receipt	05/30/2017
Invoice No.	Customer No.
27128	1510

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

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 05/28/2017				
Ackerman, Jason E Executive Administrative Assistant	Reg	6.86	\$22.18	\$152.15
Ackerman, Jason E Minute Taker	Reg	7.67	\$25.74	\$197.43
Total This Week ending:				\$349.58

Reg: 14.53 OT: 0 DT: 0	Total - This Invoice:	\$349.58
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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.

*Paid June 5, 2017.
Did not clear but was
reversed by bank on 6/30/17*



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

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
\$199.62

Payment Terms	Invoice Date
Due On Receipt	04/17/2017
Invoice No.	Customer No.
26812	1510

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 04/16/2017				
Ackerman, Jason E Executive Administrative Assistant	Reg	9.00	\$22.18	\$199.62
Total This Week ending:				\$199.62

Reg: 9 OT: 0 DT: 0	Total - This Invoice:	\$199.62
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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.

Paid 5/3/17 included with # 26863

Reversed 5/19/17

Paid just this invoice

June 5, 2017. It did not clear but was reversed by bank 6/30/17 along with invoice 27128

**Department of Neighborhood Empowerment
Funding Request Form**

EMPOWER L.A.

NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 24-May-17

Meeting Date: 5/24/2017

Agenda Item: 6. C. 1.0

Requestor: Patricia Bates

Vendor: America's Healthy Kids

Address: 638 Stephen Road

City: Burbank State: CA

Zip Code: 91504 Phone: 8185009800

Amount: \$ 1,250.00

of payments 1

- Operations Outreach NC Sponsored Event Neighborhood Purpose Grant
 Contract / Lease Board Member Reimbursement Community Improvement Project
 Out of State 1099 Expense One Time Expense Monthly Multiple

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 Description

Grant will be used by America's Healthy Kids to bring the Kids fitness Challenge to Encino as a free health and wellness fitness event. The grant will fund a portion of the costs of the event, a joint venture with Lake Balboa Neighborhood Council (LBNC). Funding of the event, contingent on participation of the LBNC, in the amount of up to \$1,850 was approved at the March 26, 2017 meeting of the Encino Neighborhood Council. This NPG comprises a portion of the previously approved amount.

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	X					
DIANE ROSEN	AREA 5 REP	X					
ALEX GARAY	AT LARGE REP ALT	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 <u>M DAVIS</u>	<u>AREA 3 REP ALT</u>	X					
<u>Laura Shoulowsky VACANT</u>	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					
FRANK MANDER <u>APIKYAN</u>	BUSINESS REP	X					
VICTORIA MILLER	BUSINESS REP	X					
NC Quorum: <u>11</u>	Grand Total (Including page 2):	<u>18</u>		<u>1</u>		<u>2</u>	

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 Signature: <u>[Signature]</u>	Signer's Signature: <u>[Signature]</u>
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): <u>5/24/17</u>	Date (mm/dd/yy): <u>5/24/17</u>
Department Use Only <input type="checkbox"/> Contract <input checked="" type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Authorization Code ENC-17105 1st Level: <u>5.25.17</u> 2nd Level: <u>5.24.17</u>

**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: Encino

SECTION I - APPLICANT INFORMATION

1a) America's Healthy Kids 46-3846356 CA 03/23/14
Organization Name **Federal I.D. # (EIN#)** **State of Incorporation** **Date of 501(c)(3) Status (if applicable)**

1b) 638 Stephen Rd Burbank CA 91504
Organization Mailing Address **City** **State** **Zip Code**

1c) Business Address (if different) City State Zip Code

1d) PRIMARY CONTACT INFORMATION:

David Cain (818) 500-9800 americashealthykids@gmail.com
Name **Phone** **Email**

2) Type of Organization- Please select one:

Public School (not to include private schools) or 501(c)(3) Non-Profit (other than religious institutions)

Attach Grant Request on School Letterhead Attach IRS Determination Letter

3) Name/ Address of Affiliated Organization City State Zip Code
(if applicable)

SECTION II - PROJECT DESCRIPTION

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

Grant will be used by America's Healthy Kids to bring The Kids Fitness Challenge to Encino Neighborhood Council as a free health and wellness fitness event.

The purpose and intent of the grant is to allow free entrance to children and their families, this grant will also cover a portion of the costs of the event i.e. insurance and labor costs. America's Healthy Kids is donating the use of our equipment to make this event happen.

**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)**

The primary purpose of this grant is to allow low and moderate income families free access to The Kids Fitness Challenge a physical fitness and activities community event in the fight against childhood obesity.

By allowing low income children and their families the opportunity to have a full day of exercise we are taking the first major step in turning the tide against childhood obesity. As the economy continues to push more and more people into poverty, with many unable to afford the fees associated with organized sports, the need for free fitness programs has never been greater. Working together we can create a ongoing fitness program that's free to all residents through the City of Los Angeles. Our goal is to have The Kids Fitness Challenge in every neighborhood in the city within the next year, thereby allowing anyone the opportunity to have a free fitness program.

Partnering with the Neighborhood Councils sends a loud and clear message to sponsors, city officials and most importantly to the community that we care about our children and their well-being. The City of Los Angeles has 441,589 overweight children, the time has come to do something about this epidemic that has taken hold of our children!

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **MAR 23 2014**

AMERICAS HEALTHY KIDS
107 W MOUNTAIN ST APT F
GLENDALE, CA 91202-1927

Employer Identification Number:

46-3646356

DLN:

17053312338043

Contact Person:

RENEE RILEY NORTON

ID# 31172

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

December 31

Public Charity Status:

170(b)(1)(A)(vi)

Form 990 Required:

Yes

Effective Date of Exemption:

May 3 2013

Contribution Deductibility:

Yes

Addendum Applies:

No

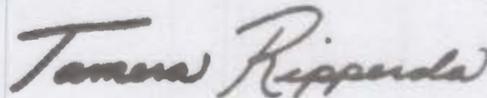
Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Sincerely,



Director, Exempt Organizations

Enclosure: Publication 4221-PC

Letter 947

ENCINO NC JUNE 2017 MER A1



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

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
\$197.85

Payment Terms	Invoice Date
Due On Receipt	04/24/2017
Invoice No.	Customer No.
26863	1510

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 04/23/2017 Ackerman, Jason E Executive Administrative Assistant	Reg	8.92	\$22.18	\$197.85
Total This Week ending:				\$197.85

Reg: 8.92 OT: 0 DT: 0	Total - This Invoice:	\$197.85
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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.

Paid again 6/5/17
Reversed 6/16/17
\$197.85

W/E

26812	4/16/17	199.62
26863	4/23/17	197.85
		<u>397.47</u>

→

Pd 5/3/17
Payment reversed 5/19/17
No Idea Why
Replaced with 2 separate
payments June 2017

ENCINO NC JUNE 2017 MER A2



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

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
\$234.47

Payment Terms	Invoice Date
Due On Receipt	05/15/2017
Invoice No.	Customer No.
27013	1510

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 05/14/2017				
Ackerman, Jason E Executive Administrative Assistant	Reg	8.25	\$22.18	\$182.99
Ackerman, Jason E Minute Taker	Reg	2.00	\$25.74	\$51.48
Total This Week ending:				\$234.47

eg: 10.25 OT: 0 DT: 0	Total - This Invoice:	\$234.47
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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.

Paid 6/5/17

Reversed 6/16/17



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

INVOICE

Invoice Amount
\$267.94

Remit to: Partners In Diversity, Inc.
ASGE Marquette Commercial Finance
NW 6333 P.O. Box 1450
Minneapolis, MN 55485-6333

Payment Terms	Invoice Date
Due On Receipt	05/22/2017
Invoice No.	Customer No.
27072	1510

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

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 05/21/2017				
Ackerman, Jason E Executive Administrative Assistant	Reg	11.50	\$22.18	\$255.07
Ackerman, Jason E Minute Taker	Reg	0.50	\$25.74	\$12.87
Total This Week ending:				\$267.94

eg: 12 OT: 0 DT: 0	Total - This Invoice:	\$267.94
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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.

Paid 6/5/17
Reversed 6/16/17

Department of Neighborhood Empowerment Funding Request Form

EMPOWER LA

NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 24-May-17

Meeting Date: 5/24/2017

Agenda Item: 5a Bale

Requestor: Patricia Bates

Vendor: Los Encinos Docent's Association

Address: _____

City: _____ State: _____

Operations Outreach NC Sponsored Event Neighborhood Purpose Grant Contract / Lease Board Member Reimbursement Community Improvement Project Out of State 1099 Expense One Time Expense Monthly Multiple # of payments _____

Zip Code: _____ Phone: _____

Amount: \$ 300.00

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:

*pd 6/30/17
rec by 6/5/17*

Public Benefit Description: Purpose is buying soil to be used to revitalize the demonstration gardens at Los Encinos State Historic Park

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS						
DEBRA GEORGE	PARK ADVOCATE						
DIANE ROSEN	AREA 5 REP						
ALEX GARAY	AT LARGE REP ALT						
ELIOT COHEN	PLU						
GERALD SILVER	HOMEOWNERS OF ENCINO						
GLENN BAILEY	PUBLIC SAFETY						
HENRY ESHELMAN	AT-LARGE REP						
JESS WHITEHILL	AREA 4 REP						
JIM ESTERLE	AREA 7 REP						
KENNETH SICK <i>M. DAVIS</i>	AREA 3 <i>REP ALT</i>	✓					
LAURA SHIMLOWSKY <i>Vacant</i>	AREA 1 REP					X	
LAURIE KELSON	AREA 6 REP	X					
MARK LEVINSON	ENCINO CHAMBER OF COMM.						
PATRICIA BATES	VOLUNTEER SERVICE	✓					
SCOTT LINDEN	AREA 2 REP					X	
SHERMAN GAMSON	APARTMENT/CONDO REP	X					
<i>SAMUEL APIKYAN</i>	BUSINESS REP						
VICTORIA MILLER	BUSINESS REP	✓					
NC Quorum: 11	Grand Total (Including page 2):	19				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 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 Signature: <i>[Signature]</i>	Signer's Signature: <i>[Signature]</i>
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): <u>5/24/17</u>	Date (mm/dd/yy): <u>5/24/17</u>
Department Use Only	<input type="checkbox"/> Contract <input type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event #1st Level: <u>5.50.17</u> #2nd Level: <u>0.00</u> Authorization Code: <u>ENC-17363</u>

**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: ENCINO NEIGHBORHOOD COUNCIL

SECTION I - APPLICANT INFORMATION

1a) LOS ENCINOS DOCENT ASSOCIATION 95-3797624 CALIFORNIA 05/15/10
Organization Name **Federal I.D. # (EIN#)** **State of Incorporation** **Date of 501(c)(3) Status (if applicable)**

1b) 16756 MOORPARK STREET ENCINO CA 91436
Organization Mailing Address **City** **State** **Zip Code**

1c)
Business Address (if different) **City** **State** **Zip Code**

1d) **PRIMARY CONTACT INFORMATION:**
AMY ZIDELL (818) 962-4962 amy@SaveLosEncinos.org
Name **Phone** **Email**

2) **Type of Organization- Please select one:**
 Public School (not to include private schools) **or** 501(c)(3) Non-Profit (other than religious institutions)
Attach Grant Request on School Letterhead Attach IRS Determination Letter

3)
Name / Address of Affiliated Organization (if applicable) **City** **State** **Zip Code**

SECTION II - PROJECT DESCRIPTION

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

This grant will help the Los Encinos Docent Association, the 501(c)3 that is the cooperating association of Los Encinos State Historic Park, revitalize the raised gardening beds in the vegetable garden by replacing the soil in the beds. This will enable new plants to be grown in the vegetable garden, which sits west of the two-story Garnier building that historically housed a kitchen.

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)

At the core of Los Encinos State Historic Park is its historic roots as a rancho. A variety of crops were grown on the rancho for commerce purposes and also to feed the families, workers, and visitors to the property. A living vegetable garden connects the community to this fundamental part of the park's heritage.

ENCINO NC JUNE 2017 MER A5

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **MAR 20 2012**

LOS ENCINOS DOCENT ASSOCIATION
16756 MOORPARK ST
ENCINO, CA 91436

Employer Identification Number:
95-3797624
DLN:
17053006326002
Contact Person:
MELISSA D TRUSTY ID# 31657
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990 Required:
Yes
Effective Date of Exemption:
May 15, 2010
Contribution Deductibility:
Yes
Addendum Applies:
Yes

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Sincerely,



Lois G. Lerner
Director, Exempt Organizations

Enclosure: Publication 4221-PC

Letter 947 (DO/CG)

ENCINO NC JUNE 2017 MER A5

**Department of Neighborhood Empowerment
Funding Request Form**



NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 24-May-17

Meeting Date: 5/24/2017

Agenda Item: boDeLo

Requestor: Patricia Bates

Vendor: Los Encinos Docent's Association

Address: 11675th Moorpark St

City: Encino State: CA

Zip Code: 91436 Phone: 818 962 4962

Amount: \$ \$700

of payments: —

- Operations
 Outreach
 NC Sponsored Event
 Neighborhood Purpose Grant
 Contract / Lease
 Board Member Reimbursement
 Community Improvement Project
 Out of State
 1099 Expense
 One Time Expense
 Monthly
 Multiple

*pd 5/30/17
rec 6/5/17*

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 Description

Purpose is to enhance the front entrance to Los Encinos State Historic Park along Ventura Blvd with planters, plants, and related clean-up costs.

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS						
DEBRA GEORGE	PARK ADVOCATE						
DIANE ROSEN	AREA 5 REP						
ALEX GARAY	AT LARGE REP ALT						
ELIOT COHEN	PLU						
GERALD SILVER	HOMEOWNERS OF ENCINO						
GLENN BAILEY	PUBLIC SAFETY						
HENRY ESHELMAN	AT-LARGE REP						
JESS WHITEHILL	AREA 4 REP						
JIM ESTERLE	AREA 7 REP						
KENNETH SILK M DAVIS	AREA 3 REP ALT						
LAURIE KELSON VACANT	AREA 1 REP					X	
LAURIE KELSON	AREA 6 REP	X					
MARK LEVINSON	ENCINO CHAMBER OF COMM.						
PATRICIA BATES	VOLUNTEER SERVICE						
SCOTT LINDEN	AREA 2 REP					X	
SHERMAN GAMSON	APARTMENT/CONDO REP	X					
SAMUEL APIKYAN	BUSINESS REP						
VICTORIA MILLER	BUSINESS REP						
NC Quorum: 11	Grand Total (Including page 2):	19				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 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 Signature: <i>[Signature]</i>	Signer's Signature: <i>[Signature]</i>
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): <u>5/24/17</u>	Date (mm/dd/yy): <u>5/24/17</u>
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> >\$2,500 <input type="checkbox"/> CIP <input type="checkbox"/> NPG <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Staff Initials: <i>[Initials]</i> 1st Level: <u>5-30-17</u> 2nd Level: <u>5-30-17</u> Authorization Code: ENC-17365

**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: ENCINO NEIGHBORHOOD COUNCIL

SECTION I - APPLICANT INFORMATION

1a) LOS ENCINOS DOCENT ASSOCIATION 95-3797624 CALIFORNIA 05/15/10
Organization Name **Federal I.D. # (EIN#)** **State of Incorporation** **Date of 501(c)(3) Status (if applicable)**

1b) 16756 MOORPARK STREET ENCINO CA 91436
Organization Mailing Address **City** **State** **Zip Code**

1c) _____
Business Address (if different) **City** **State** **Zip Code**

1d) **PRIMARY CONTACT INFORMATION:**
AMY ZIDELL (818) 962-4962 amy@SaveLosEncinos.org
Name **Phone** **Email**

2) **Type of Organization- Please select one:**
 Public School (not to include private schools) or **501(c)(3) Non-Profit** (other than religious institutions)
Attach Grant Request on School Letterhead **Attach IRS Determination Letter**

3) _____
Name / Address of Affiliated Organization (if applicable) **City** **State** **Zip Code**

SECTION II - PROJECT DESCRIPTION

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

This grant will help the Los Encinos Docent Association, the 501(c)3 that is the cooperating association of Los Encinos State Historic Park, enhance the front entrance of Los Encinos State Historic Park on Ventura Boulevard with plants and other improvements that will beautify the area.

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)

An improved appearance to the Ventura Boulevard entrance of Los Encinos State Historic Park will benefit the community. A variety of things has impacted this spot include a car that ran the curb and damaged plants. Cleaning up the entrance area will help with park visibility.

SECTION III - PROJECT BUDGET OUTLINE

6a) Personnel Related Expenses	Requested of NC	Total Projected Cost

6b) Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Various plants and related supplies	\$700.00	\$700.00

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?

No Yes, please list names of NCs: _____

8) Is the implementation of this specific program or purpose described in box 4 above contingent on any other factors or sources or funding? (Including NPG applications to other NCs) No Yes, please describe:

Source of Funding	Amount	Total Projected Cost
Project to be coordinated with State Parks		

9) What is the TOTAL amount of the grant funding requested with this application: \$700.00

10a) Start date: 05/31/17 10b) Date Funds Required: 05/31/17

10c) Expected completion date: 10/31/17 (After completion of the project, the applicant must submit a follow-up form to the Neighborhood Council and the Department of Neighborhood Empowerment)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

11a) Do you (applicant) have a former or existing relationship with a Board Member of the NC?

No Yes - Please describe below:

Name of NC Board Member	Relationship to Applicant

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application? Yes No *(Please note that if a Board Member of the NC has a conflict of interest and completes this form, or participates in the discussion and voting of this NPG, the Department will deny the payment of this grant in its entirety.)

SECTION V - DECLARATION AND SIGNATURE

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read Appendix A, "What is a Public Benefit," and Appendix B "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of Non-Profit Corporation or School Principal - REQUIRED*

Amy Zidell President *Amy Zidell* 5/18/17
 PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*

Walter Nelson VP / Secretary *Walter Nelson* 5/17/17
 PRINT Name Title Signature Date

* If a current Board Member holds the position of Executive Director or Secretary, please contact the Department at (213) 978-1551 for instructions on completing this form

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **MAR 20 2012**

LOS ENCINOS DOCENT ASSOCIATION
16756 MOORPARK ST
ENCINO, CA 91436

Employer Identification Number:
95-3797624
DLN:
17053006326002
Contact Person:
MELISSA D TRUSTY ID# 31657
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990 Required:
Yes
Effective Date of Exemption:
May 15, 2010
Contribution Deductibility:
Yes
Addendum Applies:
Yes

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Sincerely,



Lois G. Lerner
Director, Exempt Organizations

Enclosure: Publication 4221-PC

Letter 947 (DO/CG)

**Department of Neighborhood Empowerment
Funding Request Form**

EMPOWER LA

NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 24-May-17

Meeting Date: 5/24/2017

Agenda Item: 5.A.3.

Requestor: Patricia Bates

Vendor: Lanai Road School

Address: 4241 Lanai Road

City: Encino State: CA

Zip Code: 91436 Phone: 818 788 1590

- Operations
 Outreach
 NC Sponsored Event
 Neighborhood Purpose Grant
 Contract / Lease
 Board Member Reimbursement
 Community Improvement Project
 Out of State
 1099 Expense
 One Time Expense
 Monthly
 Multiple # of payments

Amount: \$ 1,000.00

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:

pd 5/30/17 rec by 6/5/17

Public Benefit Description: To assist school children in problem solving, cooperative work, writing, oral, and design skills in a Common Core-aligned program. Grant will be used for purchase of materials..

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS						
DEBRA GEORGE	PARK ADVOCATE						
DIANE ROSEN	AREA 5 REP						
ALEX GARAY	AT LARGE REP ALT						
ELIOT COHEN	PLU						
GERALD SILVER	HOMEOWNERS OF ENCINO						
GLENN BAILEY	PUBLIC SAFETY						
HENRY ESHELMAN	AT-LARGE REP						
JESS WHITEHILL	AREA 4 REP						
JIM ESTERLE	AREA 7 REP						
KENNETH M. DAVIS	AREA 3 REP ALT	✓					
LAUREL HOWE OWEN Vacant	AREA 1 REP					X	
LAURIE KELSON	AREA 6 REP	X					
MARK LEVINSON	ENCINO CHAMBER OF COMM.						
PATRICIA BATES	VOLUNTEER SERVICE	✓					
SCOTT LINDEN	AREA 2 REP					X	
SHERMAN GAMSON	APARTMENT/CONDO REP	X					
SAMUEL APIKYAN	BUSINESS REP						
VICTORIA MILLER	BUSINESS REP						
NC Quorum: 11	Grand Total (including page 2):	19				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 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 Signature: <i>[Signature]</i>	Signer's Signature: <i>[Signature]</i>
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): 5/24/17	Date (mm/dd/yy): 5/24/17
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Authorization Code ENC-17364 1st Level: 5.30.17 2nd Level: JHS.57.17

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: Encino Neighborhood Council

SECTION I - APPLICANT INFORMATION

1a)	Lanal Road Elementary	95-6001908		
	Organization Name	Federal I.D. # (EIN#)	State of Incorporation	Date of 501(c)(3) Status (if applicable)
1b)	4241 Lanal Road	Encino	CA	91438
	Organization Mailing Address	City	State	Zip Code
1c)				
	Business Address (if different)	City	State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:			
	Lisa Elan	(818) 788-1590	lje9260@lausd.net	
	Name	Phone	Email	
2)	Type of Organization- Please select one:			
	<input checked="" type="checkbox"/> Public School (not to include private school/s)	or	<input type="checkbox"/> 501(c)(3) Non-Profit (other than religious institutions)	
	Attach Grant Request on School Letterhead		Attach IRS Determination Letter	
3)				
	Name / Address of Affiliated Organization (if applicable)	City	State	Zip Code

SECTION II - PROJECT DESCRIPTION

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

Lanal Road Elementary is seeking a \$1000.00 grant for the purpose of purchasing materials and resources to support our implementation of STEAM learning for our students in grades TK-5. The student will engage in Project-based Learning and Hands-on building experiences to solve present-day problems such as our fourth graders will re-develop a park in an under-served community. The students will research the history of the area, test the soil for appropriate plantings and possible agriculture development; design a play structure for the children and provide safe lighting so the park can be enjoyed in the evening. They will present their new park using a display model complete with lights in addition to a written submission. This project is Common Core aligned and implements all aspects of the STEAM model.

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)

The students are participating in project-based multi-disciplinary units of study that utilize problems that today's engineers, scientists, and designers are engaged in. The work that our students are working on are Common Core aligned. It will help them become better problem solvers, cooperative group members, and develop skills in writing and orally while articulating their products/ presentations/solutions to an audience.

SECTION III - PROJECT BUDGET OUTLINE

6a) Personnel Related Expenses	Requested of NC	Total Projected Cost

6b) Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
	\$ 1,000.00	\$ 1,000.00

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?

No Yes, please list names of NCs: _____

8) Is the implementation of this specific program or purpose described in box 4 above contingent on any other factors or sources or funding? (Including NPG applications to other NCs) No Yes, please describe:

Source of Funding	Amount	Total Projected Cost

9) What is the TOTAL amount of the grant funding requested with this application: \$ 1,000.00

10a) Start date: 05/16/17 10b) Date Funds Required: 06/15/17

10c) Expected completion date: 10/31/17 (After completion of the project, the applicant must submit a follow-up form to the Neighborhood Council and the Department of Neighborhood Empowerment)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

11a) Do you (applicant) have a former or existing relationship with a Board Member of the NC?

No Yes - Please describe below:

Name of NC Board Member	Relationship to Applicant

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application? Yes No *(Please note that if a Board Member of the NC has a conflict of interest and completes this form, or participates in the discussion and voting of this NPG, the Department will deny the payment of this grant in its entirety.)

SECTION V - DECLARATION AND SIGNATURE

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read Appendix A, "What is a Public Benefit," and Appendix B "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of Non-Profit Corporation or School Principal - REQUIRED*

Lisa Elan Principal *Lisa Elan* 5/22/17
PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*

Phillipa Welles Assistant Principal *Phillipa Welles* 5/22/17
PRINT Name Title Signature Date

* If a current Board Member holds the position of Executive Director or Secretary, please contact the Department at (213) 978-1551 for instructions on completing this form



LOS ANGELES UNIFIED SCHOOL DISTRICT
 LOCAL DISTRICT NORTHWEST
LANAI ROAD SCHOOL
 4241 Lanai Road
 Encino, CA 91436
 PHONE (818) 788-1590
 FAX (818) 788-4263

MICHELLE KING
 SUPERINTENDENT OF SCHOOLS
VIVIAN K. EKCHIAN
 INSTRUCTIONAL AREA SUPERINTENDENT
LISA ELAN
 PRINCIPAL
PHILIPPA WELLES
 ASSISTANT PRINCIPAL



May 22, 2017

Pat Bates
 Encino Neighborhood Council
 4924 Paso Robles Ave.
 Encino, CA 91316

Dear Ms. Bates,

Lanai Road Elementary School is a small community, public school nestled among mature trees and soft rolling hills in Encino. Our student population includes 570 students in grades Transitional-Kindergarten through Fifth grade. Lanai has a High Functioning Autism (HFA) class with full inclusion students in grades K-2 and a Resource program that supports over 50 students with Individualized Education Plans (IEP). We have diversity at our school, with families speaking many languages including: Farsi, Russian, Arminian, German, Korean, Hindu, Spanish, Hebrew, French, and Chinese. Lanai has a very strong parent volunteer component which adds greatly to our instructional and arts program.

Currently, Lanai is focusing student growth in the area of S.T.E.A.M. Teachers have participated in Professional Development dedicated to Science, Technology, Engineering, Arts, and Math and need materials to implement the lessons in the classroom. Our primary grades have been given the problem of building a structure as tall as possible without anchoring it permanently using spaghetti, marshmallows, string and tape. Before they construct the building they must work in cooperative groups to review each other's drawings, plans and ideas and construct a design together. After building their structures, they continue researching other structures and share their learning. They then build it again with new knowledge gained from their initial experience. Finally, they write and reflect on their plans, implementation and learning.

Our Fourth and Fifth graders are also engaged in Multi-Disciplinary Units based on community needs. Our fourth graders, in cooperative groups research, plan, design and build a park for an underserved city. The students study soil samples to provide landscaping and potential agriculture; design a play structure for the children; and must make sure lighting is provided to insure security. Our fifth graders work on a similar project, but instead must build a colony on Mars complete with sources of oxygen, food and methods of sustainability.

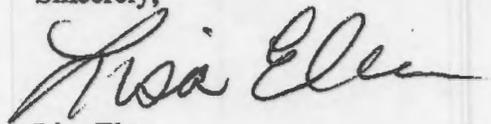
These activities are exactly what society is demanding of our students—to be creative problem solvers integrating all the technologies, arts, sciences, and math necessary to design solutions to today's and future needs. Lanai is asking for a grant of \$1,000 to help purchase the materials

S.A. 3

necessary to build structures—project boards, electrical components and art materials for the design layout and execution, and research materials.

Thank you in advance for your consideration and belief in creativity, process, and development of ideas in our students as they engage in STEAM learning.

Sincerely,



Lisa Elan

May 22, 2017

Pat Bates
Pasadena Neighborhood Council
4924 Reno Robles Ave.
Pasadena, CA 91316

Dear Ms. Bates,

Lani Road Elementary School is a small community public school nestled among mature trees and soft rolling hills in Pasadena. Our student population includes 270 students in grades Transitional-K through Fifth grade. Lani has a High Functioning Autism (HFA) class with full inclusion students in grades K-5 and a Resource program that supports over 20 students with Individualized Education Plans (IEP). We have diversity in our school, with families speaking many languages including: Persian, Russian, Armenian, German, Korean, Hindi, Spanish, Hebrew, French, and Chinese. Lani has a very strong parent volunteer component which adds greatly to our instructional and arts program.

Currently, Lani is focusing student growth in the area of S.T.E.A.M. Teachers have participated in Professional Development dedicated to Science, Technology, Engineering, Art, and Math and need materials to implement the lessons in the classroom. Our primary grades have been given the problem of building a structure as tall as possible without anchoring it permanently using spaghetti, marshmallows, string and tape. Before they construct the building they must work in cooperative groups to review each other's drawings, plans and ideas and construct a design together. After building their structure, they continue researching other structures and share their learning. They then build it again with new knowledge gained from their initial experience. Finally, they write and reflect on their plans, implementation and learning.

Our fourth and fifth graders are also engaged in Multi-Disciplinary Units based on community needs. Our fourth graders, in cooperative groups research, plan, design and build a park for an underserved city. The students study soil samples to provide landscaping and potential agriculture; design a play structure for the children; and make sure lighting is provided to insure security. Our fifth graders work on a similar project, but instead must build a colony on Mars complete with sources of oxygen, food and methods of sustainability.

These activities are exactly what society is demanding of our students—to be creative problem solvers integrating all the technologies, arts, sciences, and mathematics to design solutions to today's and future needs. Lani is asking for a grant of \$1,000 to help purchase the materials

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 24-May-17

Meeting Date: 5/24/2017

Agenda Item: S.A.I.

Requestor: Patricia Bates

Vendor: Encino Charter Elementary School

Address: 16941 Addison Street

City: Encino State: CA

Zip Code: 91316 Phone: 818 784-1762

Amount:\$ 1,000.00

of payments —

*pd 5/20/17
Arrive by 6/5/17*

- Operations Outreach NC Sponsored Event Neighborhood Purpose Grant
 Contract / Lease Board Member Reimbursement Community Improvement Project
 Out of State 1099 Expense One Time Expense Monthly Multiple

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 Description: To enable Encino Charter Elementary School teachers to introduce coding, engineering and robotics to the primary grades; grant will be used for purchase of needed supplies.

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	X					
DIANE ROSEN	AREA 5 REP	X					
ALEX GARAY	AT LARGE REP ALT	X					
ELIOT COHEN	PLU	X					
GERALD SILVER	HOMEOWNERS OF ENCINO	X					
GLENN BAILEY	PUBLIC SAFETY						
HENRY ESHELMAN	AT-LARGE REP						
JESS WHITEHILL	AREA 4 REP						
JIM ESTERLE	AREA 7 REP						
KENNETH M. DAVIS	AREA 3-REP ALT	↓					
VACANT	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					
SAMUEL ADIKYAN	BUSINESS REP						
VICTORIA MILLER	BUSINESS REP						
NC Quorum: 11	Grand Total (including page 2):	19				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 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 Signature:	Signer's Signature:
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): 5/24/17	Date (mm/dd/yy): 5/24/17
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Staff Initials: 1st Level: 5.30.17 2nd Level: JH 5.30.17 Authorization Code: ENC-17362

**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: Encino Neighborhood Council

SECTION I - APPLICANT INFORMATION

1a) Encino Charter Elementary CA
Organization Name **Federal I.D. # (EIN#)** **State of Incorporation** **Date of 501(c)(3) Status (if applicable)**

1b) 16941 Addison Street Encino CA 91316
Organization Mailing Address **City** **State** **Zip Code**

1c) same
Business Address (if different) **City** **State** **Zip Code**

1d) **PRIMARY CONTACT INFORMATION:**
Marjia Koffi (818) 784-1762 mek7422@lausd.net
Name **Phone** **Email**

2) **Type of Organization- Please select one:**
 Public School (not to include private schools) **or** **501(c)(3) Non-Profit** (other than religious institutions)
Attach Grant Request on School Letterhead **Attach IRS Determination Letter**

Encino Elementary ETeam (PTO) Encino CA 91316
Name / Address of Affiliated Organization **City** **State** **Zip Code**
(if applicable)

SECTION II - PROJECT DESCRIPTION

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

The purpose of this grant is to enable ECES teachers and staff to introduce coding, engineering and robotics to the primary grades. Our intent is to purchase a starter program of Dash & Dot Robotics and the curriculum that aligns with the robots for our Kindergarten through Second Grade students. The initial investment of approximately \$988.00 would allow us to extend our current, very successful robotics program to our K-2 students. Training elementary students in advanced technology, engineering and math is key to their future as college and career ready citizens. This robotics curriculum also aligns with the recently adopted Next Generation Science and Engineering standards for CA.

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)

Providing excellent instruction, rigorous curriculum and high interest subject matter leads to high quality education. Encino Charter Elementary strives to prepare all students to be constructive thinkers, problem solvers and productive citizens; all qualities which provide great benefits to our community, state and nation. This grant would assist us in developing young minds to be excited about math, science and engineering. The jobs these students are preparing for are beyond our present understanding and imagination.

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. Michelle Kling
Superintendent of Schools
Vivian Ekchian
Superintendent - Northwest
Marcia Koff
Principal
Tracy Sandler
APEIS

May 23, 2017

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

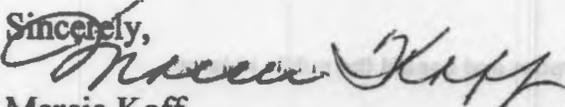
Dear ENC Council Members,

Thank you for considering Encino Charter Elementary as you review your grant proposals. We are always striving to provide the most forward thinking and innovative learning opportunities for all of our students at ECES. We currently have a very successful coding and robotics program for our upper grade students. We recently participated in a district-wide robotics and engineering competition at CSUN and took first place in one of the categories. Our goal is to bring this exciting and innovative curriculum to our primary students in grades K-2 with the Dash & Dot Robotics Program. The initial cost of this program will be \$986.00 for the starter pack, which includes 4 robots and the curriculum and lesson plans that are integral to the program.

As our Neighborhood Council, I know you share our vision for an innovative and exciting learning environment for our children, which will help them to be the creative problem solvers we will need going forward. We are proud to be an Encino school and an active part of our neighborhood. Any assistance you can give us in achieving the goals of our school community will be welcomed and greatly appreciated. If you need further information about our proposed projects, please feel free to call or email me.

Thank you for your commitment to the Encino Community.

Sincerely,


Marcia Koff

Principal

Email: mak7422@lausd.net



Encino Elementary School is a 2012 California Distinguished School

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino
 Budget Fiscal Year: 2016-2017
 Request Date: 26-Apr-17
 Meeting Date: 4/26/2017
 Agenda Item: 4.A.3

Requestor: Patricia Bates
 Vendor: Various
 Address: _____
 City: _____ State: _____
 Zip Code: _____ Phone: _____
 Amount:\$ _____ Up to \$500
 # of payments _____

- Operations Outreach NC Sponsored Event Neighborhood Purpose Grant
 Contract / Lease Board Member Reimbursement Community Improvement Project
 Out of State 1099 Expense One Time Expense Monthly Multiple

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
Description

June community get-together - permits, promotion, etc.

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP					X	
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	X					
DIANE ROSEN	AREA 5 REP					X	
ALEX GARAY	AT LARGE REP ALT	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					X	
VICTORIA MILLER	BUSINESS REP					X	
NC Quorum: 11	Grand Total (including page 2):	13				8	

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 Signature:	Signer's Signature:
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): 4/26/17	Date (mm/dd/yy): 4/26/17
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Staff Initials _____ 1st Level _____ 2nd Level _____ Authorization Code _____



NEIGHBORHOOD COUNCIL EVENT APPROVAL FORM



200 N. Spring Street, Rm 224, Los Angeles, CA 90012 • (213) 978-1551 or Toll-Free 3-1-1
E-mail: CityClerk.Funding@LACity.org www.EmpowerLA.org

Events are great opportunities for Neighborhood Councils to interact with their stakeholders. There are, however, liability and permitting issues that must be handled prior to the event. The Office of the City Clerk Administrative Services Division Funding Section must approve a Neighborhood Council sponsored event before any payments can be processed.
Please complete, sign this form and submit at least 30 days prior to your event.

Neighborhood Council: Encino

The Neighborhood Council is the Main Sponsor or Co-Sponsor for the event.

Main sponsor: Encino Neighborhood Council

Contact Person: Alex Garay

Phone: 818 262 1716 Email: alexgaray@yahoo.com

Co-Sponsor (if applicable): _____

Contact Person: _____

Phone: _____ Email: _____

Event Information

Event Description (festival, movie night, etc.): Community Get-Together

Date: 6/11/17 Time Frame: 1000-1400 Est. number of attendees: 100 Event Budget: \$500

Venue Name: City of LA Dept. of Rec/Parks/Balboa Sports Center

Venue Address: 17015 Burbank Blvd Encino CA 91316

Contact Person: Kathrynn Penny

Phone: 818 756 9642 Email: kathrynn.penny@lacity.org

Please note: If the location for the event is at City facility, e.g. park, the location approval may be easier and at little or no cost. If the location for event is not a City facility, a separate contract may be needed and can take 30 days to complete.

Documents scanned and emailed to CityClerk.Funding@lacity.org for approval PRIOR to event:

- Neighborhood Council Event Approval Form – Completed and signed by Treasurer, Second Signatory or Event Chair
- Funding Request Form – Completed and signed by Treasurer and Second Signatory
- Itemized Detailed Event Budget – Total budget with funding categories (food, entertainment, flyers, permits, etc.) and with specific vendors if available.
- If a bank card exemption of the daily \$2,500 limit is required for this event, please provide the date(s) and amount needed for the daily limit to be lifted:** _____

Please note: Missing or incomplete required documents will delay approval.

The City of Los Angeles provides Neighborhood Councils with event liability coverage in the amount of \$5 million. Depending on the type of event, there may be additional permits and liability issues that must be addressed prior to the event, or the Neighborhood Council will be liable for any penalties or injuries incurred at the event. There may be fees attached to obtaining permits and additional liability so please budget accordingly. It may be easier to partner with the City family or a community based organization or even hire a producer (will require a contract prepared by the Department) so that they can obtain/handle the necessary permits and liability issues instead. The following must be obtained **PRIOR TO THE EVENT** if they are applicable to your event:

If FOOD is being purchased/provided/distributed/served at your event, you may be required to obtain the following documents:

- LA County Public Health Department Permit – if the food is free, no permit is required. If there are tickets being sold for vendor food booths (e.g. "Taste of" type of event, which needs to have a sponsor besides the Neighborhood Council to accept the funds), a paid permit is required, but the fee will be waived if held at a City park.
- LA Fire Department – contact for a permit for use of barbeques or to determine whether a first aid station is necessary

You may need ADDITIONAL INSURANCE for your event from Vendors if they are providing the following services:

- Jumper/Bouncer (Inflatables) – the City of Los Angeles will need to be listed as an Additional Insured by the company
- Games (e.g. dunk tank, other carnival style games) – City Risk Management will need to review
- Food (purchased, provided, distributed and/or served) – City Risk Management may need to review

If RENTING a vehicle or truck to transport event materials:

- Renting and driving of vehicle/truck must be by a board member
- Additional Insurance offered by the rental company must be purchased in full

ADDITIONAL PERMITS may be required if the event has:

- Over 500 attendees, which may require LAPD presence - LAPD Special Events
- Street closures for block parties - Bureau of Street Services or LADOT for larger street closures, such as a parade
- Tents/canopies larger than 450 square feet or stages/platforms more than 30 inches above grade - Building and Safety

CONTACT INFORMATION for possible permits:

- Street Maintenance - (213) 847-2999
- Building and Safety - (213) 482-0387
- LADOT (Traffic Officers) - (323) 913-4652
- LADOT (Signs) - (213) 485-2298
- LADOT (Special Operations) - (323) 224-2124
- Risk Management - (213) 978-7475
- LAPD - (213) 486-0410
- LAFD - (213) 978-3650
- Sanitation - (213) 485-3612
- Street Services - <http://bsspermits.lacity.org/spevents/>
- LA County Public Health Dept. - <http://publichealth.lacounty.gov>

Original documents to submit with your Monthly Expenditure Report for the event:

- Neighborhood Council Event Approval Form – Signed by Treasurer, Second Signatory or Committee Chair
- Funding Request Form – Completed and signed by Treasurer and Second Signatory
- Board Vote Count Form – Completed and signed by Treasurer and Second Signatory
- Itemized Detailed Event Budget – Final total budget with funding categories and specific vendors. If final budget changed from original, please submit adjusted budget with new Board Vote Count Form.
- Original Invoices and Receipts
- Proof of Sponsorships (e.g. event flyers, webpage copy, etc.)
- Copies of Additional Permits (if applicable)
- Copies of Additional Insurance (if applicable)
- W-9 (for 1099 Individual Services if applicable)

I have read and understand the requirements set forth in this document and agree to comply with the required paperwork necessary for Neighborhood Council events.

Signature:  Date: 5/10/17
Print Name: Patricia Bates Title: Treasurer
Email: Treasurer@encino.nc.org Phone: 818 425 0962

Encino Neighborhood Council
Community Get-Together Budget
Event is 6/11/2017

Permit Fee - LA Dept of Rec/Parks	100
Printing - The Print House or other	100
Refreshments - soda, water, ice	100
Possible food truck permit	200
Total	<u>500</u>



City of Los Angeles Department of Recreation & Parks

BALBOA SPORTS CENTER

17015 Burbank Boulevard, Encino, California 91316

Telephone: 818.756-9642 balboa.sportscenter@lacity.org

DATE: Tuesday May 9, 2017
TO: Encino Neighborhood Council
Lake Balboa Neighborhood Council
FROM: Kathryn Penny, Senior Recreation Director I
RE: INVOICE: June 11 Picnic Event

Special Event Revenue:

Open Space Exclusive Use : June 11, 2017 10:00am-2:00p
South Lawn area on Burbank Side of Park
Exact Location to be determined by walk-through with Alex

Anticipated Attendance 1-250

Rates and Fees applied **\$ 100.00**

Please make check payable to "City of Los Angeles Recreation And Parks"

4/26/17
H.A.3.



City of Los Angeles Department of Recreation & Parks

BALBOA SPORTS CENTER

17015 Burbank Boulevard, Encino, California 91316

Telephone: 818.756-9642 balboa.sportscenter@lacity.org

DATE: Tuesday May 9, 2017
TO: Encino Neighborhood Council
Lake Balboa Neighborhood Council
FROM: Kathryn Penny, Senior Recreation Director I
RE: INVOICE: June 11 Picnic Event

Special Event Revenue:

Open Space Exclusive Use : June 11, 2017 10:00am-2:00p
South Lawn area on Burbank Side of Park
Exact Location to be determined by walk-through with Alex

Anticipated Attendance 1-250

Rates and Fees applied \$ 100.00

Two Food Trucks @ \$100 \$ 200.00

TOTAL FEES due \$ 300.00

— Paid 6/2/17
— Paid 6/2/17

Please make check payable to "City of Los Angeles Recreation And Parks"

Amended May 31 to add food truck fees.

**Department of Neighborhood Empowerment
Funding Request Form**



NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 24-May-17

Meeting Date: 5/24/2017

Agenda Item: 1a De 2

Requestor: Debra George

Vendor: Making the Arts Real for Youth (m.a.r.y.) Found.

Address: 18013 Duncan Street

City: Encino State: CA

Zip Code: 91316 Phone: 8189200977

Amount: \$ 750.00

of payments 1

- Operations Outreach NC Sponsored Event Neighborhood Purpose Grant
 Contract / Lease Board Member Reimbursement Community Improvement Project
 Out of State E99 Expense One Time Expense Monthly Multiple

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
Description

Grant will be used by the M.A.R.Y. Foundation to fund a portion of the preparation and promotion cost for its 9/24/17 Fifth Annual M.A.R.Y.'s Day event which will be at the SPV Arts & Cultural Center. The event is a free arts and cultural event for children and their families.

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS						
DEBRA GEORGE	PARK ADVOCATE						
DIANE ROSEN	AREA 5 REP						
ALEX GARAY	AT LARGE REP. ALT						
ELIOT COHEN	PLU		X				
GERALD SILVER	HOMEOWNERS OF ENCINO	X					
GLENN BAILEY	PUBLIC SAFETY		X				
HENRY F.SHELMAN	AT-LARGE REP.	X					
JESS WHITEHILL	AREA 4 REP						
JIM ESTERLE	AREA 7 REP						
KENNETH SILK <u>M. DAVIS</u>	AREA 3 REP <u>ALT</u>						
LACRA SHODDOWSKY <u>VACANT</u>	AREA 1 REP					X	
Laurie Kelson	AREA 6 REP	X					
MARK LEVINSON	ENCINO CHAMBER OF COMM.						
PATRICIA BATES	VOLUNTEER SERVICE				X		
SCOTT LINDEN	AREA 2 REP					X	
SHERMAN GAMSON	APARTMENT/CONDO REP	X					
<u>SAMUEL APIKYAN</u>	BUSINESS REP						
VICTORIA MILLER	BUSINESS REP						
NC Quorum: <u>11</u>	Grand Total (including page 2):	<u>16</u>	<u>2</u>		<u>1</u>	<u>2</u>	

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 Signature: <u>[Signature]</u>	Signer's Signature: <u>[Signature]</u>
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): <u>5/24/17</u>	Date (mm/dd/yy): <u>6/24/17</u>
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Dated	Staff Initials: <u>[Signature]</u> 1st Level: <u>6.5.17</u> 2nd Level: <u>6.6.17</u> Authorization Code: ENC-17366

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: Encino

SECTION I- APPLICANT INFORMATION

1a)	Making the Arts Real for Youth Foundation / m.a.r.y.	46-3682077	California	10/21/13
	Organization Name	Federal I.D. # (EIN#)	State of Incorporation	Date of 501(c)(3) Status (if applicable)
1b)	18013 Duncan Street	Encino	CA	91316
	Organization Mailing Address	City	State	Zip Code
1c)	Business Address (if different)	City	State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:			
	Krickett Jones Halpern	(818) 929-0977	krickett@mary-foundation.org	
	Name	Phone	Email	
2)	Type of Organization- Please select one:			
	<input type="checkbox"/> Public School <i>(not to include private schools)</i>	or	<input checked="" type="checkbox"/> 501(c)(3) Non-Profit <i>(other than religious institutions)</i>	
	Attach Grant Request on School Letterhead		Attach IRS Determination Letter	
3)	Name / Address of Affiliated Organization (if applicable)	City	State	Zip Code

SECTION II - PROJECT DESCRIPTION

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

The m.a.r.y. foundation is a year round program, on going, and this grant will help and enable m.a.r.y. to offer free events and workshops to the communities by helping with the cost for advertisement, supplies, art materials, etc. Your logo, will be placed on printed posters and postcards acknowledging the Neighborhood Council and announced in the newsletters via email.

A large part of the funding requested is for a September event, m.a.r.y. is incurring costs for promotion during the Summer 2017.

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)

The m.a.r.y. foundation is emerging and becoming more well known in the community. Our non-profit welcomes the general public and is here to support ALL children with their social and emotional well being through the arts. We have two events a year and workshops through out the year for children, their friends and family. The events and workshops will bring knowledge and awareness of how the arts can help young people and provide them with skills to use the arts as a vehicle to help guide with social and emotional skill building. The m.a.r.y. events and workshops bring professionals and children together to help teach and guide them. Most of the children participating in the program are residents of and/or students in (alphabetical order) Encino, Lake Balboa, Reseda, and Tarzana.

Admission and parking for the events and workshops are free making the events and workshops accessible to all.

Your funds will help m.a.r.y. to continue with our events and workshops and inspire young peoples' interest in the arts and bring family and friends together for a community that has the opportunity for expression and creativity as a outlet to build resilience for over all well-being.

SECTION III - PROJECT BUDGET OUTLINE

6a) Personnel Related Expenses	Requested of NC	Total Projected Cost

6b) Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
See attached	\$ 750.00	\$ 2,475.00

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?

No Yes, please list names of NCs: Tarzana, Reseda, Lake Balboa

8) Is the implementation of this specific program or purpose described in box 4 above contingent on any other factors or sources or funding? (Including NPG applications to other NCs) No Yes, please describe:

Source of Funding	Amount	Total Projected Cost

9) What is the TOTAL amount of the grant funding requested with this application: \$ 750.00

10a) Start date: 04/23/17 10b) Date Funds Required: 06/30/17

10c) Expected completion date: 09/24/17 (After completion of the project, the applicant must submit a follow-up form to the Neighborhood Council and the Department of Neighborhood Empowerment)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

11a) Do you (applicant) have a former or existing relationship with a Board Member of the NC?

No Yes - Please describe below:

Name of NC Board Member	Relationship to Applicant
Pat Bates	Friend

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application? Yes No *(Please note that if a Board Member of the NC has a conflict of interest and completes this form, or participates in the discussion and voting of this NPG, the Department will deny the payment of this grant in its entirety.)

SECTION V - DECLARATION AND SIGNATURE

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read Appendix A, "What is a Public Benefit," and Appendix B "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of Non-Profit Corporation or School Principal - REQUIRED*

Krickett Jones Halpern President Krickett Jones Halpern 5-9-17
 PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*

Richard Halpern VP / Secretary Richard Halpern 5/9/17
 PRINT Name Title Signature Date

* If a current Board Member holds the position of Executive Director or Secretary, please contact the Department at (213) 978-1551 for instructions on completing this form

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 26-Apr-17

Meeting Date: 4/26/2017

Agenda Item: 5.2.

Requestor: Patricia Bates

Vendor: Congress of Neighborhoods

Address: _____

City: _____ State: _____

Zip Code: _____ Phone: _____

Amount:\$ 1,000.00

- Operations
 Outreach
 NC Sponsored Event
 Neighborhood Purpose Grant
 Contract / Lease
 Board Member Reimbursement
 Community Improvement Project
 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
Description

Contribute to operations of Congress of Neighborhoods

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X				X	
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	X					
DIANE ROSEN	AREA 5 REP					X	
ALEX GARAY	AT LARGE REP ALT	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					X	
VICTORIA MILLER	BUSINESS REP					X	
NC Quorum: 11	Grand Total (including page 2):	15				8	

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 Signature: <u>[Signature]</u>	Signer's Signature: <u>[Signature]</u>
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): <u>4/26/17</u>	Date (mm/dd/yy): <u>4/26/17</u>
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> EIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Staff Initials _____ 1st Level _____ 2nd Level _____ Authorization Code _____

2017 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

President and Treasurer, respectively of the Encino Neighborhood
Council (Neighborhood Council) and that on 4/26/17 (date adopted), a Brown Act
noticed public meeting was held by the Neighborhood Council with a quorum of
11 (number) board members present and that by a vote of 13 (number) yes,
0 (number) no, and _____ (number) abstentions the Neighborhood Council adopted the
following resolution:

Resolved: That the Neighborhood Council supports:

LA Congress of Neighborhoods – September 9, 2017 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:

\$1000 \$500 \$250 *Other Amount \$ _____

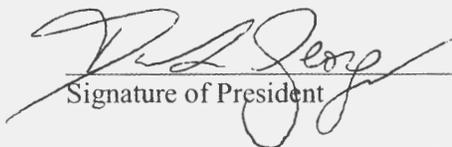
and/or

Neighborhood Council Budget Advocates in the amount of:

\$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

4-26-17
Date


Signature of Treasurer

4/26/17
Date

Submit this form by emailing jasmine.duckworth@lacity.org, faxing to (213) 978-1751, or
mailing to City Hall, 200 North Spring Street, 20th Floor, Los Angeles, CA 90012.

Form must be received by the Department no later than Thursday, June 1, 2017 in order to be
processed from Fiscal Year 2016-17 available funds.

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

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 22-Mar-17

Meeting Date: 3/22/2017

Agenda Item: 6.A.3.

Requestor: Patricia Bates

Vendor: Martin outdoor Media

Address: _____

City: _____ State: _____

Zip Code: _____ Phone: _____

Amount:\$ _____ Up to \$700

- Operations
 Outreach
 NC Sponsored Event
 Neighborhood Purpose Grant
 Contract / Lease
 Board Member Reimbursement
 Community Improvement Project
 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
Description

Bus Bench advertising to promote ENC

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	X					
DIANE ROSEN	AREA 5 REP	X					
DOUG KRIEGL Alex Goni	AT LARGE REP A1+	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 SHOVLANSKY	AREA 1 REP					X	
LURIE 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					
NC Quorum: 11	Grand Total (including page 2):	18				3	

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 Signature: <u>[Signature]</u>	Signer's Signature: <u>[Signature]</u>
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): <u>3/22/17</u>	Date (mm/dd/yy): _____

Contract
 CIP
 Advanced Payment
 Approved
 Staff Initials _____
 1st Level _____
 Authorization Code _____
 >\$2,500
 NPG
 Sponsored Event
 Denied
 2nd Level _____

Martin Outdoor Media, LLC

1990 Westwood Blvd., Suite 300
 Los Angeles, CA 90025
 310-559-1600

Invoice

Date	Invoice #
6/6/2017	25459

Bill To
Encino Neighborhood City Council Att: Alex Garay 4924 Paso Robles Ave. Encino, CA 91316

Start Date	End Date	Due Date	Rep	Account #
		6/6/2017	House	

Item	Quantity	Description	Rate	Amount
Sign Produ...	4	Production Service: Production for bus bench ads	75.00	300.00

Please include your invoice number with your payment. Thank you.

Invoice Total	\$300.00
----------------------	----------

*Payment is due on receipt of invoice. Please make checks payable to Martin Outdoor Media, LLC and return to above address. Finance charge of 1.5%/ mo. is applied to all accounts 30 days past due. Accounts 30 or more days past due are subject to removal.

Balance Due	\$300.00
--------------------	----------



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

INVOICE

Invoice Amount

\$177.44

Remit to: Partners In Diversity, Inc.
ASGE Marquette Commercial Finance
NW 6333 P.O. Box 1450
Minneapolis, MN 55485-6333

Payment Terms	Invoice Date
Due On Receipt	06/05/2017
Invoice No.	Customer No.
27180	1510

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

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 06/04/2017				
Ackerman, Jason E Executive Administrative Assistant	Reg	8.00	\$22.18	\$177.44
Total This Week ending:				\$177.44

Reg: 8 OT: 0 DT: 0	Total - This Invoice:	\$177.44
---------------------------	------------------------------	-----------------

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.

Invoice

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

Date	Invoice #	Due Date
6/1/2017	14990	6/1/2017

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

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
	Phone Support and General Web Development	99.00	99.00

Please remit payment at your earliest convenience.

Thank you for your business!

Total	\$99.00
Payments/Credits	\$0.00
Balance Due	\$99.00

Customer Name: PATRICIA L BATES ENCINO NC Shipping to: ALEJANDRO GARAY
 Account #: 82900847 5437 NEWCASTLE AVE
 Payment info: MasterCard, last 4 digits: 4209 APT 226
 ENCINO, CA 91316-2055
 Comments: Delivery Method: Standard Shipping

ITEM DESCRIPTION	QTY	AVAILABLE	B/O Qty	UNIT PRICE	UM	EXTENDED PRICE
Sharpie® Permanent Fine-Point Markers, Black, Pack Of 5 (134000)	1	1	0	\$5.000	pack	\$5.00



LEGEND

QTY: Original Quantity Ordered
 AVAILABLE: Ordered Quantity - Backorder Quantity
 B/O Qty: Backorder Quantity
 UNIT PRICE: Price per Individual Unit
 UM: Unit of Measure
 EXTENDED PRICE: Ordered Quantity x Unit Price

Subtotal: 5.00
 Tax: 0.44
 Delivery Fee: 0.00
 Misc.: 0.00

Total: \$5.44



931757091001

50% off one Reg. Price Presentation or Poster Board

Coupon Expires 06/26/17 11:59 PM ET, Valid at officedepot.com or in store, Limit 1 per Customer

Coupon Code

1FZ03RQEQRKJG



Terms and Conditions

Must present this coupon (no reproductions) at time of purchase. Cannot be combined with Reward Member or Business Select pricing. Cannot be combined with Store Purchasing, Procurement or Retail Connect Cards. Coupon is good for one-time use only and cannot be combined with other sales, offers or promotions. Quantities limited. No rainchecks. No cash value. For dollars or percent off a qualifying purchase, minimum purchase required is after discounts and before tax. No cash back.

You can now [track delivery](#) of your order online. Enter the order number shown in this email, or go to [Order Tracking](#) at OfficeDepot.com and log in to track delivery of your order by entering your order number in combination with either your telephone number or account number

Normal deliveries to business addresses are made between the hours of 8:30 AM and 5:00 PM, and to residential addresses between 8:30 AM and 7:00 PM

Got a question? We're taking care of business every day, and we are ready to help. Call [800-463-3768](tel:800-463-3768) or [email](#) us and one of our Customer Service Specialists will provide prompt answers to all your questions

Tax: 0.00
 Delivery Fee: 0.00
 Misc.: 0.00
 Total: \$5.44



ENCINO NC JUNE 2017 MER A16



Patricia Bates <batesbird@gmail.com>

Order Confirmation - Multiple Orders

1 message

OfficeDepotOrders@officedepot.com <OfficeDepotOrders@officedepot.com>
Reply-To: OfficeDepotOrders@officedepot.com
To: BATESBIRD@gmail.com

Sun, May 28, 2017 at 9:50 AM



800-463-3768
800.GO.DEPOT

Order Confirmation

Thank you for shopping with us.

We are processing your order and will send you an email notification when it ships. Due to product availability or size, your **order will arrive in multiple shipments.**

Shipping confirmation emails will provide details on all shipments.

For your reference, below is a summary of your order:

Shipment 1 Expected delivery date: **05/31/2017 8:30 AM - 5:00 PM**

Order Number:	931756786-001	Status:	In Process
Order Date:	05/28/2017	Tracking:	N/A
Customer Name:	PATRICIA L BATES ENCINO NC	Shipping to:	ALEJANDRO GARAY 5437 NEWCASTLE AVE APT 226 ENCINO, CA 91316-2055
Account #:	82900847		
Payment info:	MasterCard, last 4 digits: 4209	Delivery Method:	Standard Shipping
Comments:			

ITEM DESCRIPTION	QTY	AVAILABLE	B/O Qty	UNIT PRICE	UM	EXTENDED PRICE
C-Line Pressure Sensitive Badge - 3.50" Width x 2.25" Length - 100 / Box - Rectangle - Blue" (227074)	4	4	0	\$2.990	box	\$11.96

LEGEND

QTY: Original Quantity Ordered
 AVAILABLE: Ordered Quantity - Backorder Quantity
 B/O Qty: Backorder Quantity
 UNIT PRICE: Price per Individual Unit
 UM: Unit of Measure
 EXTENDED PRICE: Ordered Quantity x Unit Price

Subtotal: 11.96
 Tax: 1.05
 Delivery Fee: 0.00
 Misc.: 0.00

Total: \$13.01



931756786001

ENCINO NC JUNE 2017 MER A17

Shipment 2 Expected delivery date: **05/31/2017 8:30 AM - 5:00 PM**

Order Number:	931757091-001	Status:	In Process
Order Date:	05/28/2017	Tracking:	N/A

Account Number: 8448 20 001 3772834
Security Code: 6486

John Arnstein

Contact Us

Visit us at twc.com/support
Or, call us at 855-70-SPECTRUM (1-855-707-7328)
8448 2000 NO RP 28 06292017 NNNNNNNN 01 999155

Charge Details

Previous Balance		59.99
Credit Card Payment	06/03	-59.99
Remaining Balance		\$0.00

Payments received after 06/28/17 will appear on your next bill.

Service from 07/06/17 through 08/05/17

Internet Services

Internet Modem Lease	10.00
Basic Internet	49.99
	\$59.99

Internet Services Total \$59.99

Current Charges \$59.99
Total Due by Auto Pay \$59.99

Billing Information

Tax and Fees - This statement reflects the current taxes and fees for your area (including sales, excise, user taxes, etc.). These taxes and fees may change without notice.

Surcharges - Spectrum imposes surcharges to recover costs of complying with its governmental obligations.

Terms & Conditions - Spectrum's detailed standard terms and conditions for service are located at spectrum.com/policies.

Authorization to Convert your Check to an Electronic Funds Transfer Debit - 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.

Past Due Fee / Late Fee Reminder - A late fee will be assessed for past due charges for service.

Franchise Administrator - City of Los Angeles, Information Technology Agency 200 N Main St, City Hall East, 14th Floor, Los Angeles CA 90012 Telephone and TDD: 3-1-1 One Call To City Hall or <http://www.lacity.org>

Complaint Procedures - If you disagree with your charges, you have 60 days from the billing date to register a complaint. During the dispute period, we will not terminate service provided you pay the undisputed portion of your bill.



Local Spectrum Store: 9260 Topanga Canyon Blvd, Chatsworth CA 91311 Store Hours: Mon thru Fri - 9:00am to 7:00pm; Sat - 9:00am to 5:00pm



For questions or concerns, please call 1-855-707-7328.



June 28, 2017

Account Number: **8448 20 001 3772834**
Security Code: **6486**
Service At: **4924 PASO ROBLES AVE
ENCINO CA 91316-3458**

Auto Pay Notice

Contact Us

Visit us at twc.com/support
Or, call us at 855-70-SPECTRUM (1-855-707-7328)

Summary Service from 07/06/17 through 08/05/17 details on following pages

Previous Balance	59.99
Payments Received -Thank You!	-59.99
Remaining Balance	\$0.00
Internet Services	59.99
Current Charges	\$59.99
<i>YOUR AUTO PAY WILL BE PROCESSED 07/15/17</i>	
Total Due by Auto Pay	\$59.99

SPECTRUM NEWS

Time Warner Cable Entity. The Time Warner Cable entity providing the services is a subsidiary of Charter Communications Operating, LLC and uses the brand name "Spectrum".

Spectrum Customer Privacy Policy update. Effective August 1, 2017, there will be a new Spectrum Customer Privacy Policy. You can view the new privacy policy at www.spectrum.com/privacy or call 1-800-892-4357 to request a paper copy be mailed to your home.

New Spectrum Store Hours. Effective May 22, 2017, the Spectrum Store located at 9260 Topanga Canyon Blvd, Chatsworth CA 91311 will be open Monday thru Friday 9:00am - 7:00pm and Saturday 9:00am - 5:00pm. Customers may also find additional support at spectrum.net/support

STAY SECURE WHEN YOU'RE ONLINE. Get real-time protection and automatic updates with Security Suite, FREE to Spectrum Internet™ customers. Protect up to 10 devices from viruses, spyware and hackers with our easy-to-use Security Suite. Visit twc.com/securityinfo to download your free Security Suite today.

Thank you for choosing Spectrum.

To avoid a late fee, the BALANCE must be paid by the DUE DATE. We appreciate your prompt payment and value you as a customer.

Auto Pay Thank you for signing up for auto pay. Please note your payment may be drafted and posted to your Spectrum account the day after your transaction is scheduled to be processed by your bank.



9260 TOPANGA CYN BV CHATSWORTH CA 91311-5760
8448 2000 NO RP 28 06292017 NNNNNNNN 01 999155

JOHN ARNSTEIN
ENCINO NEIGHBORHOOD COUNCI
4924 PASO ROBLES AVE
ENCINO CA 91316-3458

June 28, 2017

John Arnstein

Account Number: 8448 20 001 3772834
Service At: 4924 PASO ROBLES AVE
ENCINO CA 91316-3458

Total Due by Auto Pay **\$59.99**

TIME WARNER CABLE
PO BOX 60074
CITY OF INDUSTRY CA 91716-0074

ENCINO NC JUNE 2017 MER A18

844820001377283400059998

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino
 Budget Fiscal Year: 2016-2017
 Request Date: 24-May-17
 Meeting Date: 5/24/2017
 Agenda Item: 5.C.2.

Requestor: Patricia Bates
 Vendor: Quality Logo Products
 Address: _____
 City: _____ State: _____
 Zip Code: _____ Phone: _____
 Amount: \$ 204.69
 # of payments

- Operations Outreach NC Sponsored Event Neighborhood Purpose Grant
 Contract / Lease Board Member Reimbursement Community Improvement Project
 Out of State 1099 Expense One Time Expense Monthly Multiple

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
Description

To purchase hand sanitizers with Encino NC web address to hand out at outreach events

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS						
DEBRA GEORGE	PARK ADVOCATE						
DIANE ROSEN	AREA 5 REP						
ALEX GARAY	AT LARGE REP ALT						
ELIOT COHEN	PLU		X				
GERALD SILVER	HOMEOWNERS OF ENCINO		X				
GLENN BAILEY	PUBLIC SAFETY	X					
HENRY ESHELMAN	AT-LARGE REP						
JESS WHITEHILL	AREA 4 REP						
JIM ESTERLE	AREA 7 REP						
KENNETH SILK MDAVS	AREA 3 REP ACT						
	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					
S. Apykay	BUSINESS REP						
VICTORIA MILLER	BUSINESS REP						
NC Quorum: 11	Grand Total (including page 2):	16	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 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 Signature:	Signer's Signature:
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): 5/24/17	Date (mm/dd/yy): 5/24/17
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Staff Initials: _____ 1st Level: _____ 2nd Level: _____ Authorization Code: _____



ORDER NO: 7193933ZZ
 Patricia L. Bates Encino NC - Encino Neighborhood Council

DATE:
 JUN 01, 2017

CREDIT CARD:
 ENDING IN 4209

Order #

Product Details

Total

7193933ZZ



Hand Sanitizer Spray Pump
 Item #: Q23653

\$198.31

Payment Terms

All new customers are required to prepay a 100% before production can begin on their order. By signing the provided order acknowledgment the buyer acknowledges that they are entering into a contractual agreement with Quality Logo Products, Inc. (herein referred to as QLP) and gives QLP permission to apply any outstanding balance to the payment method provided until paid in full.

Proof Policy

Quality Logo Products requires that all new orders receive a paper/electronic proof and order acknowledgment prior to releasing the order to final production. A paper proof will be provided at no cost, and is our best representation of what your final print/product will look like. Often the artwork is to size or to scale (as indicated on the artwork), and is only intended to provide an idea as to what the final product will look like when completed. The paper proof and order acknowledgment are checked for misspellings and other mistakes (such as item colors, sizing, imprint color, imprint locations), but due to order volume, there is inevitably the rare instance that an error might go unnoticed. For this reason, we strongly recommend that you take part in this process by carefully checking your paperwork before signing off and submitting your approval. IT IS NOT SAFE TO ASSUME ANYTHING. Quality Logo Products cannot be held responsible for any wrong interpretations of the artwork or order approval, so if you have any questions or if something is unclear, please contact your sales representative to clarify the matter.

QUALITY LOGO PRODUCTS IS NOT RESPONSIBLE FOR ANY TYPOGRAPHICAL MISTAKES OR ERRORS THAT ARE OVERLOOKED AND LATER APPROVED BY THE CUSTOMER. In addition, Quality Logo Products cannot be held responsible for any damages that may be incurred as a result of the error or mistake after the order has been printed and accepted by the customer.

Shipping Policy

Orders that qualify for the delivery guarantee will include (MUST HAVE XX/XX/XX) next to the shipment method. Orders that do NOT contain this notation do NOT qualify for the delivery guarantee.

Un-imprinted merchandise returns are subject to a 15% restocking fee and the necessary freight costs to return the product do apply. Incomplete or partial returns will not be accepted. Unauthorized returns are not accepted.

ENCINO NC JUNE 2017 MER A19

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino
 Budget Fiscal Year: 2016-2017
 Request Date: 24-May-17
 Meeting Date: 5/24/2017
 Agenda Item: 60 Bolo

Requestor: Patricia Bates
 Vendor: Office Depot or similar
 Address: _____
 City: _____ State: _____

- Operations Outreach NC Sponsored Event Neighborhood Purpose Grant
 Contract / Lease Board Member Reimbursement Community Improvement Project
 Out of State 1099 Expense One Time Expense Monthly Multiple

Zip Code: _____ Phone: _____
 Amount: \$ _____ up to \$750
 # 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 Description

Purchase paper, toner cartridges, and any other supplies needed for office operation

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS						
DEBRA GEORGE	PARK ADVOCATE						
DIANE ROSEN	AREA 5 REP						
ALEX GARAY	AT LARGE REP ALT						
ELIOT COHEN	PLU						
GERALD SILVER	HOMEOWNERS OF ENCINO						
GLENN BAILEY	PUBLIC SAFETY						
HENRY ESHELMAN	AT-LARGE REP						
JESS WHITEHILL	AREA 4 REP						
JIM ESTERLE	AREA 7 REP						
KENNETH SILK	AREA 3 REP ALT						
LAURA SHOVLANSKY	AREA 1 REP					X	
LAURIE KELSON	AREA 6 REP	X					
MARK LEVINSON	ENCINO CHAMBER OF COMM.						
PATRICIA BATES	VOLUNTEER SERVICE						
SCOTT LINDEN	AREA 2 REP					X	
SHERMAN GAMSON	APARTMENT/CONDO REP	X					
VICTORIA MILLER	BUSINESS REP						
NC Quorum: 11	Grand Total (including page 2):	19				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 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 Signature: <u>[Signature]</u>	Signer's Signature: <u>[Signature]</u>
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): <u>5/24/17</u>	Date (mm/dd/yy): _____
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> CLIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Staff Initials: _____ 1st Level: _____ 2nd Level: _____ Authorization Code: _____

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino
 Budget Fiscal Year: 2016-2017
 Request Date: 22-Mar-17
 Meeting Date: 3/22/2017
 Agenda Item: 6.A.5.

Requestor: Patricia Bates
 Vendor: America's Healthy Kids,
 Address: Lt Rec/Parks,
 City: _____ State: _____
 Zip Code: _____ Phone: _____
 Amount: \$ _____ Up to \$1,850
 # of payments

- Operations Outreach NC Sponsored Event Neighborhood Purpose Grant
 Contract / Lease Board Member Reimbursement Community Improvement Project
 Out of State 1099 Expense One Time Expense Monthly Multiple

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 Description: Co sponsor America's Healthy Kids event with Lake Balboa NC. Costs include flyers for promoting ENC, participation/completion ribbons
(AHK)

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.

Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	X					
DIANE ROSEN	AREA 5 REP	X					
DOUG KRIEDEL Alex Gera	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			X			
VICTORIA MILLER	BUSINESS REP	X					
NC Quorum: 11	Grand Total (including page 2):	13	4	1		3	

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 Signature: <u>[Signature]</u>	Signer's Signature: <u>[Signature]</u>
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): 3/22/17	Date (mm/dd/yy): 3/22/17
Department Use Only <input type="checkbox"/> Contract <input checked="" type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Staff Initials _____ 1st Level _____ 2nd Level _____ Authorization Code _____

Office DEPOT OfficeMax

OFFICE DEPOT #949

16571 Ventura Blvd.

Encino, CA 91436

Phone: (818) 907-1741 Fax: (818) 907-2742

06/05/2017 17.3.2 5:18 PM

STR 949 REG 3 TRN 8498 EMP 662986

SALE

Product ID	Description	Total
610840	WATER, 24PKSPRI	
3 @ 2.99		8.97
Coupon - 58944173		-1.53
Retail After Discounts		7.44
Business Solutions Prc		20.970
You Pay		7.44F
420919	PPR, ASTRO, PLSR	13.99
Coupon - 58944173		-2.38
Retail After Discounts		11.61
Business Solutions Prc		8.27
You Pay		8.27SS
593412	PIN, PUSH, 60P, A	2.99
Coupon - 58944173		-0.50
Retail After Discounts		2.49
Business Solutions Prc		2.990
You Pay		2.49SS
482047	CBL, HDMI, 6', GO	19.99SS
Business Solutions Prc		15.19
You Pay		15.19SS
984690	CARD, LSR, TENT,	26.99
Coupon - 58944173		-4.59
Retail After Discounts		22.40
Business Solutions Prc		18.39
You Pay		18.39SS
610840	WATER, 24PKSPRI	
2 @ 2.99		5.98
Coupon - 58944173		-1.00
Retail After Discounts		4.98
Business Solutions Prc		13.980
You Pay		4.98F
Coupon Number - 58944173		
Subtotal:		56.76
Sales Tax:		3.88
CA Bottle Deposit Fe		6.00
Total:		66.64
MasterCard 4209:		66.64

AUTH CODE 015912
TDS Chip Read
AID A0000000042203 Debit
TVR 8000088000
CVS Signature Verified

ENCINO NC JUNE 2017 MER A20. 21

Office DEPOT OfficeMax

OFFICE DEPOT #949

16571 Ventura Blvd.

Encino, CA 91436

Phone: (818) 907-1741 Fax: (818) 907-2742

06/05/2017 17.3.2 4:09 PM

STR 949 REG 3 TRN 8478 EMP 640372

SALE

Product ID	Description	Total
677947	PAPER, PREMIUM	
2 @ 55.99		111.98
Instant Savings		-32.00
Business Solutions Prc		111.980
You Pay		79.98SS
524912	PEN, MED, 12PK, B	
2 @ 13.29		26.58
Promotion		
Business Solutions Prc		19.54
You Pay		19.54SS
610840	WATER, 24PKSPRI	
5 @ 2.99		14.95
Business Solutions Prc		34.950
You Pay		14.95F
677947	PAPER, PREMIUM	55.99
Instant Savings		-16.00
Promotion		-39.99
Retail After Discounts		0.00
Business Solutions Prc		55.990
You Pay		0.00SS
524912	PEN, MED, 12PK, B	13.29
Promotion		-13.29
Retail After Discounts		0.00
Business Solutions Prc		9.770
You Pay		0.00SS
Subtotal:		114.47
Sales Tax:		8.71
CA Bottle Deposit Fe		6.00
Total:		129.18
MasterCard 4209:		129.18

AUTH CODE 092804
TDS Chip Read
AID A0000000042203 Debit
TVR 8000088000
CVS Sig

Water for outreach event \$39.38 (AHK)
Balance is for office

IBER.PRT

Buca di Beppo
Store#0504
Encino, CA 91316
818.995.3288

Server: Lynne
Encino Neighbor/1
Guests: 1
Order Type: Delivery

06/07/2017
4:02 PM
50004

HP Mixed Green 38.99
HP Caesar Salad 38.99
FP Baked Ziti 96.99
Lg Supremo Pizza 28.99
Lg Pepperoni Pizza 28.99
Delivery Fee 25.00

Subtotal 257.95
Tax 20.38

Total 278.33

Mastercard #XXXXXXXXXXXX4209 278.33
Auth:092724

Father Day is June 18th!
Make your reservation today!
*****Suggested Tip*****
(15%) \$0.00 (18%) \$0.00 (20%) \$0.00

--- Check Closed ---

Office DEPOT. OfficeMax®

Order Number: 933740306-001
Order Placed: 06/05/2017

Status: Picked up
Order Placed By: TREASURER@ENCINONC.ORG

Payment Method Debit/Credit Card (CARD-MC-4209) *****4209 Amount: \$408.88	Billing Address ENCINO NEIGHBORHOOD COUNCIL 200 N SPRING ST FL 2 LOS ANGELES, CA 90012 (818) 425 - 0965	Store Details Office DEPOT. ENCINO CA IL 16571 VENTURA BLVD. ENCINO, CA 91436 818-907-1741	Rewards 5602066630
---	---	---	------------------------------

Comments:

Item Description	Qty	Available Qty	Price	Total	Reorder	✓
 HP 80X (CF280X) Black Original Toner Cartridge Item # 385819 Review This Product	2	2	\$187.99 /each	\$375.98	2	✓
					Reorder Price:	
					\$187.99 / each	



Subtotal: \$375.98
Delivery Fee: \$0.00
Tax Exempt Taxes: \$32.90
Total: \$408.88

Related Orders

Order number	Total	Delivery Date	Status
933740306-001	\$408.88	06/06/2017	Completed Signature Cpt
933740132-001	\$181.60	06/07/2017	Delivered

ENCINO NC JUNE 2017 MER A23

Office DEPOT
OfficeMax

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

Phone: (818) 907-1741 Fax: (818) 907-2742
06/06/2017 17.3.2 5:00 PM
STR 949 REG 3 TRN 8602 EMP 662986

SALE

Product ID	Description	Total
1395604	Invisible Tape	4.69 SS
546537	GLUE,STICK,22G	2.59 SS

Subtotal: 7.28
Sales Tax: 0.64

PREPAID ORDER - PROOF OF PICK-UP

Order Management Invoice # 9337403060012
Approval Code: 023617

114318	JDA GMILL ORDE	0.00 E
	Total:	7.92
	MasterCard 4209:	7.92

AUTH CODE 013153
TDS Chip Read
AID A0000000042203 Debit
TVR 8000088000
CVS No Signature Required

Cleared @
\$7.81

ENCINO NEIGHBORHOOD COUNCIL 5602066630
Mobile Rewards are here! You can now
access your reward certificates
instantly on your smartphone
by visiting officedepot.com/rewards
or the Office Depot OfficeMax app.

Shop online at officedepot.com

Office DEPOT. OfficeMax®

Order Number: 933740132-001
Order Placed: 06/05/2017

Tracking #: 933740132-001
Status: Delivered
Order Placed By: TREASURER@ENCINONC.ORG



Payment Method Debit/Credit Card (CARD-MC-4209) *****4209 Amount: \$181.60	Billing Address ENCINO NEIGHBORHOOD COUNCIL 200 N SPRING ST FL 2 LOS ANGELES, CA 90012 (818) 425 - 0965	Shipping Address PATRICIA BATES ENCINO NEIGHBORHOOD COUNCIL 16811 WEDDINGTON ST C/O P BATES ENCINO, CA 91436	Rewards 5602066630
---	---	--	------------------------------

Comments:

Item Description	Qty	Shipped	Price	Total	Reorder	✓
 Office Depot® Brand OD80EHY (HP 80X / CF280X) Remanufactured Extra-High-Yield Black Toner Cartridge Item # 106796 Review This Product	1	1	\$166.99 /each	\$166.99	1	✓
					Reorder Price:	
					\$166.99 / each	



Begin Return

Subtotal: \$166.99
Delivery Fee: \$0.00
Tax Exempt Taxes: \$14.61
Total: \$181.60

Related Orders

Order number	Total	Delivery Date	Status
933740306-001	\$408.88	06/06/2017	Completed Signature Cpt
933740132-001	\$181.60	06/07/2017	Delivered

ENCINO NC JUNE 2017 MER A25



[Print](#)

Billing Activity - Invoices

Encino Neighborhood Council

Attn: Patricia Bates
200 N. Spring St FL 20
Los Angeles CA 90012-4801
 US
P: 818-971-6996

Today's Date: 06/19/2017
User Name: president@encinonc.org

Invoices from 04/20/2017 to 06/19/2017

Date	Description	Charge Amount	Credit Amount
05/27/2017	Invoice #170736604	\$20.00 USD	
04/27/2017	Invoice #169032712	\$20.00 USD	

Billing questions? [Contact Support](#)

Constant Contact - 1601 Trapelo Road - Waltham, MA 02451 US

ENCINO NC JUNE 2017 MER A26