Der	Department of Neighborhood Empowerment									
	oorting Month:	FEBRUARY			MONTHLY EXPENDITURE REPORT			EMPOWER LA		
	Name:			Submitted:	2/19/2017 13:38:25					
Bu	lget Fiscal Year:	2016-2017					Department NEIGHBOR			
FII			DS (Must be s	submitted to the Den	artmont within 10 days	of Board Approval along	with documentar	ion and hard cor		
, ,_	LL 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		ESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL	
1	The Web Corner	6/22/1938		02/10/17 Monthly Websi	te Maintenance	OUTREACH			\$102.50	
2	Ralphs	8/5/2450		02/10/17 Board Meeting	- Refreshments Water	OUTREACH			\$25.26	
3	Ralphs	109655		02/10/17 Board Meeting	- Refreshments - Food	OUTREACH			\$138.95	
4	JCS Catering	2/10/2027		02/10/17 VANC Spring E	Event - Refreshments	OUTREACH			\$375.00	
5	Lloyds	6-614419		02/10/17 Admin Asst W	E 01/22 10.0 Hrs	OPERATIONS			\$288.40	
6	Goodway Printing	9/11/2004		02/13/17 Printing - LUC	Vision Committee	OPERATIONS			\$81.56	
7	AT&T	7249954		02/24/17 Voice Mail Ser	vice - Two Months	OPERATIONS	7		\$30.52	
8	Goodway Printing			2/13/17 Printing - Agend	la Minutes Board Mtg	OPERATIONS			\$94.30	
9	LA Unified School District	S1647		02/24/17 Room Rental -	MAR - JUN 2017	OPERATIONS			\$145.48	
10	Goodway Printing			02/16/17 Printing - Agen	da Minutes LUC Mtg	OUTREACH			\$4.35	
	LA Public Library	21627		02/16/17 LUC Mtg	Overtime Chg	OPERATIONS			\$216.00	
12										
	SUBTOTAL: Expenditure	s by Line Item (May	v include totals	on page 3, if entered)					\$1,502.32	
_	CUMULATIVE EXPENDIT								\$8,829.00	
	OUTSTANDING COMMIT			,						
1			,							
2										
- 3										
4	LA Budget Advocate			09/13/16 Budget Advoca	ate Pympt 01	OUTREACH			\$625.00	
	LA Budget Advocate			02/23/17 Budget Advoca	,	OUTREACH			\$625.00	
6	L Dudger Auvolate			SZIZOITI Buuget Auvoca	ato i dynieni 02	OUTREADT			ψ020.00	
7										
8										
9										
_										
10										
	SUBTOTAL: Outstanding Total Expenditures & Cor		ciudes total on	page 3)					\$1,250.00 \$11,581.32	
	Total Adjustments (such		sed prior fisca	al vears items etc) (use	'-' for credits '+' for ded	uctions)			\$11,581.32	
	Approved Budget 2016-20			a yours items, etc) (use					\$37,000.00	
	Balance of Budget 2016-2								\$25,418.68	
-	evision Date 08/09/16									

Revision Date 08/09/16

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Reporting Month:	FEBRUARY	
NC Name:	Sherman Oaks	

	MONTHLY CASH RECONCILIATION										
Beginning Balance (A)	Funds Deposited (B)	Total Available (C) = (A+B)	Cash Spent this Month (D)	Remaining Balance (E) = C - D							
\$17,269.00	\$5,000.00	\$22,269.00	\$1,502.32	\$20,766.68							

	MONTHLY CASH FLOW ANALYSIS									
Category Identifier	Category Identifier Budget Category		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	\$12,200.00	\$856.26	\$0.00	\$3,371.60					
200	Outreach	\$13,800.00	\$646.06	\$0.00	\$3,959.22	\$9,194.72				
300	Community Improvement	\$6,000.00	\$0.00	\$0.00		\$6,000.00				
400	NPG	\$5,000.00	\$0.00	\$0.00	\$1,498.18	\$3,501.82				
500	Elections	\$0.00	\$0.00	\$0.00		\$0.00				
	TOTAL	\$37,000.00	\$1,502.32	\$0.00	\$8,829.00	\$26,668.68				

	NEIGHBORHOOD COUNCIL DECLARATION									
We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and will furnish										
	additional documentation to the Department of Neighborhood Empowerment upon request.									
Treasurer Signature	Treasurer Signature Signer's Signature									
Print Name	Tom Capps	Print Name	Jeff Hartsough							
Date		Date								
IC Additional Comments										
Revision Date 08/09/16										

		<u> </u>
Reporting Month:	FEBRUARY	
NC Name:	Sherman Oaks	

		A	DDITIONAL EX	XPENDITURES BY LINE ITEM (Optional, do	not print page 3 unless y	ou use it)		
A	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / DESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
13								
14								
15								
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31								
32								
33								
34								
35								
36								
	SUBTOTAL: Expenditures by	Line Item						\$0.00

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Reporting Month:	FEBRUARY
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		ADDITION	IAL OUTSTAN	DING COMMITTMENTS BY LINE ITEM (Option	onal, 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
11								
12								
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32								
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34								
S	SUBTOTAL: Expenditures by	Line Item						\$0.0
	ion Date 08/09/16							

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