Monthly Expenditure Report



Reporting Month: January 2018

Budget Fiscal Year: 2017-2018

NC Name: Sherman Oaks Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance Total Spent Remaining Balance Outstanding Commitments Net Available					Net Available
\$30011.31	\$2062.89	\$27948.42	\$704.96	\$0.00	\$27243.46

Monthly Cash Flow Analysis					
Budget Category	Outstanding	Net Available			
Office		\$1859.13		\$277.46	
Outreach	\$36360.00	\$203.76	\$24448.42	\$427.50	\$23743.46
Elections		\$0.00		\$0.00	
Community Improvement Project	\$3500.00	\$0.00	\$3500.00	\$0.00	\$3500.00
Neighborhood Purpose Grants	\$4750.00	\$0.00	\$0.00	\$0.00	\$0.00
Funding Requests Under Review: \$0.00		Encumbrar	nces: \$0.00	Previous Expendi	itures: \$14598.69

	Expenditures					
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	GOODWAY PRINT & COPY	01/06/2018	(Credit card transaction)	General Operations Expenditure	Office	\$41.17
2	LA PUBLIC LIBRARY	01/09/2018	(Credit card transaction)	General Operations Expenditure	Office	\$216.00
3	GOODWAY PRINT & COPY	01/25/2018	(Credit card transaction)	General Operations Expenditure	Office	\$95.05
4	OFFICE DEPOT #902	01/25/2018	(Credit card transaction)	General Operations Expenditure	Office	\$9.02
5	RITE AID STORE - 5569	01/26/2018	(Credit card transaction)	General Operations Expenditure	Office	\$15.53
6	CORNER BAKERY 0210	01/28/2018	(Credit card transaction)	General Operations Expenditure	Office	\$302.50
7	CORNER BAKERY 0210	01/28/2018	(Credit card transaction)	General Operations Expenditure	Office	\$159.50
8	RITE AID STORE - 5569	01/08/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$9.38

9	7889 Dominos Pizza	01/08/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$91.88
10	Lloyd Staffing	12/07/2017	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$393.30
11	Lloyd Staffing	12/13/2017	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$87.40
12	The Web Corner, inc.	01/09/2018	Approve up to \$1,400 to pay The Web Corner fo	General Operations Expenditure	Outreach	\$102.50
13	Lloyd Staffing	01/09/2018	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$393.30
14	Lloyd Staffing	01/16/2018	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$65.55
15	AT&T Messaging	01/22/2018	Approve up to \$200 to pay AT&T for SONC V	General Operations Expenditure	Office	\$15.26
16	Lloyd Staffing	01/22/2018	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$65.55
	Subtotal:					

	Outstanding Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total	
1	JCS Catering Company	01/10/2018	Approve up to \$750 to pay JCS Catering at CBS	General Operations Expenditure	Outreach	\$325.00	
2	Lloyd Staffing	01/31/2018	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$152.95	
3	AT&T Messaging	02/12/2018	Approve up to \$200 to pay AT&T for SONC V	General Operations Expenditure	Office	\$15.26	
4	Lloyd Staffing	02/12/2018	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$109.25	
5	The Web Corner, inc.	02/12/2018	Approve up to \$1,400 to pay The Web Corner fo	General Operations Expenditure	Outreach	\$102.50	
	Subtotal: Outstanding	9		· ·		\$704.96	

Goodway Print & Copy

15121 Ventura Blvd.

Sherman Oaks, CA 91403

Phone: (818) 783-5172 Fax: (818) 783-8649 www.goodwayprintcopy.com

Transaction : Sale

Date: 1/5/2018

Time: 7:25:50 PM(EST)

Invoice # : 40284

Customer #: 3

PO / Order # : na

Card Type : Master Card

Card Number : XXXXXXXXXXX8480

Entry Method : Keyed

Total Amount: 41.17

Authorization : Approved - 074842

Ref Note:

Signature

Х

I Agree to pay the above amount according to the card issuer agreement

Thank You !

INVOICE LF



15121 Ventura Boulevard Sherman Oaks, California 91403 VOICE: (818) 783-5172 • FAX: (818) 783-8649 EMAIL: goodway@goodwayprintcopy.com

No. 40284

Date 1/5/2018

Customer P.O. No.

SHERMAN OAKS NEIGHBORHOOD COUNCIL/Tom Capps P.O. Box 5721 Sherman Oaks Ca 91413

Jolie Salter (818) 699-2922

QUANTITY	DESCRIPTION	AMOUNT
35	Agenda one redo for change, 8.5 x 11 White 20# B-KP Copy Multipurpose SMOOTH, 2 sheets,	12.60
25	copied on 2 sides Minutes, 8.5 x 11 White 20# B-KP Copy Multipurpose SMOOTH, 2 sheets, copied on 2 sides	10.25
25	25 Copy Machine Stapling	14.75
20	budget, 8.5 x 11 White 20# B-KP Copy Multipurpose SMOOTH, 3 sheets, copied on 2 sides 25 Copy Machine Stapling	14.75
aken by: ccount Type: C	Charge Account SUBTOTAL	37.60
EASE PAY F	ROM THIS INVOICE.	
IANK YOU!	TAX	3.57
	SHIPPING	41.17
	TOTAL	41.17
	AMOUNT DUE	8447

LOS ANGELES PUBLIC LIBRARY 630 W. Fifth Street Los Angeles, CA 90071

Tel: (213) 228-7467 Fax: (213) 228-7449

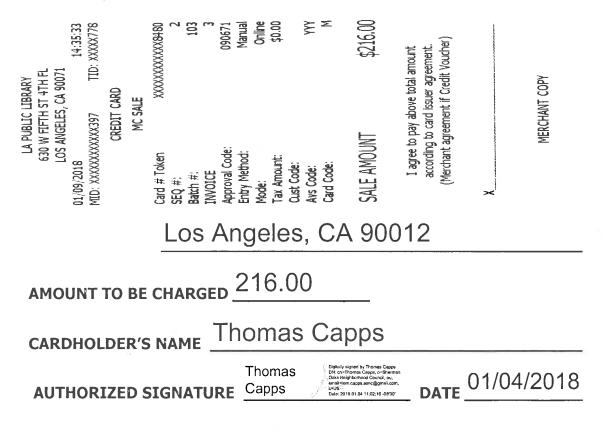
AUTHORIZATION TO CHARGE CREDIT CARD

TO:	Library Business Office	

FROM: Tom Capps

NAME OF EVENT SONC PLUM MTGLOCATION / BRANCHSherman OaksEVENT DATE:01/18/2018TIME:6PM - 10 PM

IN ORDER FOR US TO HANDLE YOUR REQUEST, WE NEED THE FOLLOWING INFORMATION FROM YOUR VISA OR MASTERCARD CHARGE CARD:



INVOICE LF



15121 Ventura Boulevard Sherman Oaks, California 91403 VOICE: (818) 783-5172 • FAX: (818) 783-8649

EMAIL: goodway@goodwayprintcopy.com

JILL BARAD

818 990 4002

818 990 4066

No. 40392

Date 1/24/2018

Customer P.O. No

SHERMAN OAKS NEIGHBORHOOD COUNCIL/Tom Capps P.O. Box 5721 Sherman Oaks Ca 91413

QUANTITY	DESC	RIPTION	AMOUN
20	Board Meeting Agenda, 8.5 x 11 White 20# B-KP Copy Multipurpose		
20	SMOOTH, copied on 1 side Standing Rules for all Committees, 8.5 Multipurpose SMOOTH, copied on 1 si		1.80
20	Standing Rules-Policies and Procedure Multipurpose SMOOTH, 3 sheets, cop	es, 8.5 x 11 White 20# B-KP Copy	11.80
20	20 Copy Machine Stapling Policies and Procedures, 8.5 x 11 Whit SMOOTH, 3 sheets, copied on 2 sides	Coodyray Duint 9.0	11.80
20	20 Copy Machine Stapling Bylaws, 8.5 x 11 White 20# B-KP Copy	15121 Ventura Blvd.	40.60
20	copied on 2 sides 20 Copy Machine Stapling Brown Act Guide, 8.5 x 11 White 20# F	Sherman Oaks, CA 91403 Phone: (818) 783-5172 Fax: (818) 783-8649	19.00
	sheets, copied on 2 sides 20 Copy Machine Stapling	www.goodwayprintcopy.com	
	Paid Credit Card	Transaction : Sale	_
	taia	Date: 1/24/2018	
	Card Card	Time : 2:29:02 PM(EST)	
	head of	Invoice # : 40392	
		Customer # : 3 PO / Order # : na	
Taken by: Account Type	Charge Account	Card Type : Master Card	L 86.80
	FROM THIS INVOICE.	Card Number : XXXXXXXXXXX8480	× 8.25
THANK YOU!		Entry Method : Keyed	G
		Total Amount : 95.05	AL 95.05
		Authorization : Approved - 013253	IE 95.05



Taking care of business

Thank you for your order

We appreciate your business and are now processing your order. You will receive an order confirmation email shortly. Please save this email for your records. Your Credit Card will be charged when the order is picked up. Please allow 1 hour for store pickup. Orders placed after 5PM may be picked up the following morning.

- Create a Loyalty Account



Simple to use. Simple to save.

Simply for you.

Get 2% back in rewards on your favorite supplies, furniture, technology & more.

+ Designate a school Designate a School to Receive 5% of Your Purchase

Not applicable to schools in Puerto Rico

+ Order Summary example: Order number, Pickup date, view Order details

Pick up 1 Order Number: 102010856-001 Pick Up Date: 01/25/2018 View Order Details

+ Delivery Information / Payment Information example: Address, city, state, Payment Method etc.

Payment Information	Payment Method	ster.
TOM CAPPS	Debit/Credit Card	2.
200 N SPRING ST	(CARD-MC-8480)	
LOS ANGELES,	***************************************	,
CA	Amount: \$9.02	
90012-4801		
USA		
In-store Pickup	Who will pick up	o this order?
Office pepor. #902	Ron Ziff	<i>e</i> .,
(Store Hours:)	rziff@shermanoaks	nc.org
6440 C SEPULVEDA BLVD.	Show them the pric	e? Yes
SEPULVEDA BLVD & VICTORY		
VAN NUYS, CA 91411		
(818) 780-9916	•	
Order Details		

Store pickup 2 Items

Ready for pickup on 01/25/2018

Office Depot® Brand Leatherette Twin-Pocket Portfolios, Dark Blue, Pack Of 10 Qty: 2

\$8.24 \$4.12 each

https://www.officedepot.com/checkout/checkoutProcess.do

Office DEPOT Taking care of business

Shipping Address TOM CAPPS 200 N SPRING ST LOS ANGELES, CA 90012-4801

Additional Information--Carton: 1 of 1

*** PACKING LIST ***

Order Number 102010856-001

Billing Address TOM CAPPS 200 N SPRING ST LOS ANGELES, CA 90012-4801 Phone #: 888-000-0000

Customer Information Customer #: 02417216 Contact: TOM CAPPS

OFFICE DEPOT OFFICE MAX 1-800-GO-DEPOT 3366 EAST WILLOW STREET SIGNAL HILL, CA 90755



1020108560019*

Order Date: 01/25/2018

Qty Units	Item Number	Description
2	433664	PORTFOLIO, POCKET, TWIN, 10PK, BLU

Order Type:	In-Store Pick Up
Order ID:	102010856-001
Customer:	TOM CAPPS
Customer Phone:	888-000-0000
Customer Proxy:	
Additional Customer Data:	,
Order Placement Date/Time:	01/25/2018 03:24 PM
Order Pick Date/Time:	01/25/2018 03:40 PM
Return to Stock Date:	02/01/2018
Hold Area:	OMNI STATION
Package Number:	1 of 1

Customer notes:

Return to Stock Instructions (OD Associates Only):

1. Log into GMIL

- 2. Search order ID
- 3. Click Place Return/Credit
- 4. Select from drop downs "Credit Only", "Customer Related","Customer Refused Delivery"
- 5. Click Return Items Selected
- 6. Click Place Order

Store Associate Instructions:

- 1. Select "GMIL Import"
- 2. Select "Import GMIL Order"
- 3. Scan Order barcode.



4. Scan attach items to the transaction



With us, it's personal.

Store #05569 13333 RIVERSIDE DR. SHERMAN OAKS, CA 91423 (818) 907-1431

Register #3 Transaction #1119888 Cashier #55699585 1/26/18 4:03PM

	BRONZE SAVINGS Dscnt Card#: 95XXXXX7882	
1 1	COKE CLSC 12Z 12PK CN CRV TRANSACTION COKE CLSC 12Z 12PK CN CRV TRANSACTION	6.49 TF 0.60 TF 6.49 TF 0.60 TF

2	Items	Subtotal	14.18
		Tax	1.35
		Total	15.53
	MASTER		15.53
	MASTER	card * #XXXXXX	XXXXXX8480
	App #A	A APPROVAL AUTO	
		045191	

Entry Method: Chip

Verified by PIN Application Label: MASTERCARD AID: A000000041010 TVR: 0000048000 TSI: E800 ARC:

> Tendered 15.53 Cash Change .00

wellness+ Status Points: wellness+ Status:

0 Bronze

Not a member of wellness+ with Plenti? Join for free in-store or at riteaid.com/plenti and be on-your way to savings! Plenti is a rewards program where you can earn points at one place and use them at another all with a



Invoice No: 187937 Invoice Date: Sat, Jan 27, 2018 Store Code: 210 Store: Encino

INVOICE

Billing/Client Information	Delivery Information Delivery: 01/27/2018 (11:30 - 11:45 AM)
Credit Card: MASTERCARD(8480) Client: RON ZIFF Client Phone: (818) 693-5561	SHERMAN OAKS HOSPITAL 4929 VAN NUYS SHERMAN OAKS, CA 91403 RON ZIFF Phone: (818) 693-5561 Number of Guests: 20
External Client Message: SOMEONE IN THE FRONT WILL GUI	DE YOU TO THE DR CONFERENCE RM

Order entered by: Store Printed: 01/28/2018 03:16 AM cST

Price Amount

Lunch / Dinner - Corner Classic Combos

Choose Your First Side*	Bakery Chips - Lg		
Choose Your Second Side*	Mixed Greens Salad - Lg		
Choose Your Dessert:*	Large Cookie Basket		
Total for all items ordered			
OOD SAFETY TIPS	All credit card payments are	Subtotal:	275.
	All credit card payments are pre-authorized up to 30 days in advance	Tavi	0

FOOD SAFETY TIPS	All credit card payments are	Subtotal: 275.00
	pre-authorized up to 30 days in advance	Tax: 0.00
Consume or refrigerate below 41F/5C within 2 hours	and are final-processed on the day of pick-up/delivery.	Delivery Fee: 27.50
Reheat food to 165F/74C only once	pick-up/delivery.	Total: 302.50
, , ,		Payment: 302.50
		(Master Card)
		Balance Due: 0.00

Corner Bakery | 15626 Ventura Blvd | Encino, CA 91436 | Phone: 818-981-7514 Please remit House Account payments to: CBC Restaurant Corp | PO Box 203881 | Dallas, TX 75320-3881

Powered by MonkeyMedia Software



Invoice No: 187949 Invoice Date: Sat, Jan 27, 2018 Store Code: 210 Store: Encino

INVOICE

Billing/Client Information	Delivery Information Delivery: 01/27/2018 (8:00 - 8:15 AM)
Credit Card: MASTERCARD(8480) Client: RON ZIFF Client Phone: (818) 693-5561	SHERMAN OAKS HOSPITAL 4929 VAN NUYS SHERMAN OAKS, CA 91403 RON ZIFF Phone: (818) 693-5561 Number of Guests: 20
External Client Message: SOMEONE IN THE FRONT WILL	

SOMEONE IN THE FRONT WILL GUIDE Y CONFERENCE RM Client Message Printed: 01/28/2018 03:16 AM cST Order entered by: Store

Price Amount

Breakfast - Corner Breakfast	: Combo		
1 LG Corner Breakfast w/ Breakfa	ast Basket	125.00	125.00
Fruit Choice*	Large Fresh Fruit Tray		
Add Coffee?*	1 Small Box Bakers Blend	+10.00	+10.00
	1 Small Box Sumatra Decaf	+10.00	+10.00
*Total for all items ordered			
FOOD SAFETY TIPS	All credit card payments are	Subtotal:	145.00
	pre-authorized up to 30 days in advance	Tax:	0.00
Consume or refrigerate below 41F/5C within 2 hours	and are final-processed on the day of pick-up/delivery.	Delivery Fee:	14.50
Reheat food to 165F/74C only once	pick up/delivery.	Total:	159.50
, , , ,		Payment:	159.50
		(Ma	ster Card)
		Balance Due:	0.00

 Corner Bakery | 15626 Ventura Blvd | Encino, CA 91436 | Phone: 818-981-7514

 Please remit House Account payments to: CBC Restaurant Corp | PO Box 203881 | Dallas, TX 75320-3881

Powered by MonkeyMedia Software 🧐

47 - REFRESH MENTS - WATER BOARD NEETING - 01.08.2018



With us, it's personal.

Store #05569 13333 RIVERSIDE DR. SHERMAN OAKS, CA 91423 (818) 907-1431

Register #3 Transaction #1116330 Cashier #55699585 1/08/18 5:46PM

1 BW PURIFIED 1 CRV TRANSACT 1 BW PURIFIED 1 CRV TRANSACT	ION WATER 24/16.9	3.49 1.20 3.49 1.20	
2 Items	Subtotal Tax	9.38	

Total 9.38 *MASTER* 9.38 MASTER card * #XXXXXXXXXX8480 App #AA APPROVAL AUTO Ref # 038691 Entry Method: Chip

> Verified by PIN Application Label: MASTERCARD AID: A0000000041010 TVR: 0000048000 TSI: E800 ARC:

> > Tendered 9.38 Cash Change .00

THANK YOU FOR SHOPPING AT RITE AID



F - Food Stamp Eligible

	and the second sec
CREDIT	
ORDE	R
Payment Status	: Approved
789	
Domino's	
(818) 78	3-3900
1/8/2018	11:18 AM
Order 655707	Server 2111
Deliv	ery
RON Z	IFF
14755 GREENLEAF ST	T # RECEIPTAUDITORIUM
GO TO AUDITORIUM (
NAPKINS ITEMI	ZED RECEIPT
(818) 693	3-5561
Master	card
CREDIT CARD # XX	
	65111751801
APPROVAL CODE	068906
THE T CONTRACTOR AND AN	000700
Amount	\$91.38
THEORY	471.00
Tip	
144	9188
Total	7/00
10/01	
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AMOUNT ACCORDING 1	IT FARM TOSHER
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Join our Piece	ENT

Rewards Program at dominos.com

ANY DELIVERY CHARGE IS NOT A TIP

#46- REFRESHMENTS SONC BOARD NEETING 01/08/18

RE-PRI	T
Delivery	
PAID	
Domino's Piz	72
7889	
(818) 783-39	200
1/8/2018	6:30 PM
Server 0289	
Order 65570	
TIMED * TIME	D
Thank you for Orde Sherman Oaks Dom	
RON ZIFF	
14755 GREENLEAF ST # GO TO AUDITORIUM ON D NAPKINS ITEMIZED (818) 693-556	ICKENS BRING RECEIPT 1
Order 3 14" HandToss Pizza	
Pepperoni	\$30,41
12 CUT	
2 14" HandToss Pizza	\$22.73
Sandwich Salami 12 CUT	422.10
2 14" HandToss Pizza 12 CUT	\$20.98
2 14" HandToss Pizza	\$27.98
Mushrooms	
Onions	
Green Peppers	
Black Olives 12 CUT	
Set the price	\$28,24-
(STP)	\$20.24-
1 Delivery Charge	\$3.99
Sub Total	\$83.91
Tax 1	\$7.97
	# (±) {
Total	\$91.88
Payments	
Amount Tendered	\$91.88
Balance Due	\$0.00
Join our Piece of t	he Pie

You may pay by ACH/wire to: Sterling National Bank Routing # - 026007773 Account # - 3852541548

Credit cards accepted:

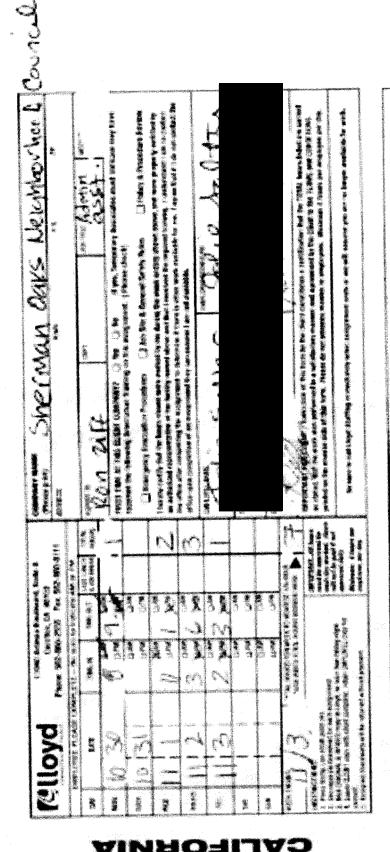


CONNECTING VALENT Please remit payment to: LLoyd Staffing 445 Broadhollow Road, Suite 119 Melville, NY 11747 Billing inquiries: 631-370-7433

BILL TO:

TOM CAPPS, TREASURER SHERMAN OAKS NEIGHBORHOOD COUNCIL BOX 5721 SHERMAN OAKS, CA 91413

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:		
11/05/2017	400556	1	117247	Due Upon Receipt		
PERIOD	DESCRIPTION &	EMPLOYEE		HOURS	RATE	AMOUNT
0/30/17-11/05/17	EXASST	Salter, Jolie	4	7.00	21.85	\$152.95
		•				
					}	
					1	
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				1. 1		
Thank you for your part in o generated by LLoyd support				IS AMOUNT >	TOTAL	\$152.9



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You may pay by ACH/wire to: Sterling National Bank Routing # - 026007773 Account # - 3852541548

Credit cards accepted:



Celloyd Please remit payment to: LLoyd Staffing 445 Broadhollow Road, Suite 119 Melville, NY 11747 Billing inquiries: 631-370-7433

Attention of: Tom Capps Sherman Oaks Neighborhood council BILL TO: P.O. Box 5721 Sherman Oaks, CA 91413

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:		
11/12/2017	400664	1	117247	Due Upon Receipt		
	DESCRIPTION &		<u></u>	HOURS	RATE	AMOUNT
PERIOD			Δ	4.00	21.85	\$87.40
1/06/17-11/12/17	EXASST	Salter, Jolie	~			
	our Placements with a Purpose prog rts JDRF with a donation to help fig			IS AMOUNT >	TOTAL	\$87.40

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You may pay by ACH/wire to: Sterling National Bank Routing # - 026007773 Account # - 3852541548

Credit cards accepted:



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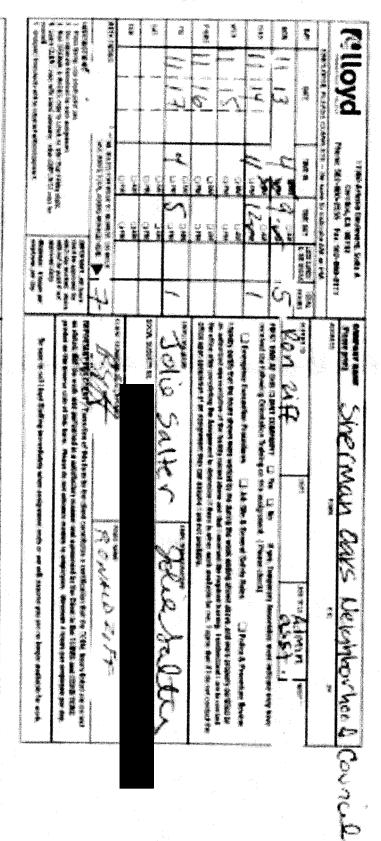
CONNECTING TALENT Please remit payment to: LLoyd Staffing 445 Broadhollow Road, Suite 119 Melville, NY 11747 Biffling inquiries: 631-370-7433

Attention of: Tom Capps, BILL TO: SHERMAN OAKS NEIGHBORHOOD COUNCIL P.O. BOX 5721 SHERMAN OAKS, CA 91413

Thank you for choosing Lloyd Staffing

ATE INVOICE NO. PAGE		ACCOUNT NO.	TERMS:			
1/19/2017	400788	1	117247	Due Upon Receipt		
PERIOD	DESCRIPTION &			HOURS	RATE	AMOUNT
1/13/17-11/19/17	EXASST	Salter, Jolie	A	7.00	21.85	\$152.95
k vou for vour part in our l	Placements with a Purpose progra DRF with a donation to help fight	m Even alsoement	PAY THIS A	AMOUNT >	TOTAL	\$152.95

FOR NIA



EMPLOYIC INFRANKATION

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Department of Neighbork	nood Empowerment					No.	i and the second se
Funding Request Form			E)	MPOW	ER LA	(may	
			NEI	GHEORHOOD 1	MPOWERMENN		16
	herman Oaks						
Budget Fiscal Year:	2017-18		Requestor:		Tom Capps Tr		
Request Date: 10-Jul-17 Meeting Date: 7/10/2017			Vendor: _ Address:		Lloyd's Sta	iffing	
Agenda Item:	Item 8J		City:		State		
	onsored Event Neighborhood Purp	ose Grant	Zip Code:		Phone:		
Contract / Lease Board Member R			Amount:		Up to \$4	,500.00	
☑Out of State □1099 Expense	One Time Expense Monthly	Multip	e # of paym	ents			
If a bank card exemption of the dail please provide the date(s) and amo Public Benefit Description		lifted:	Administrative /	Assistant hour	s worked during	Fiscal Year 20	17-2018
*Recused-Boardmember mu	Vote Count (Continued of ust leave the room prior to any discu				intil after the v	ote is comple	eted.
Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
Babian, Avo	Area 5 Business						
Banks Barad, Jill	Area 6 Residential						
Baronian, Levon	Area 1 Business	V.					
Binkow, Michael	Area 7 Residential	1					
Capps, Tom	Area 2 Residential						
Harsough, Jeff	Area 2 Community Interest						
Kalban, Jeff	Area 7 Community Interes						
Katchen, Howard	Area 3 Residential						
Lax, Sidonia	Area 4 Community Interest	V.					
Ross, Garrett	Area I Residential						
Marciniak, Richard	Area 3 Community Interest					X	
Menard, Melissa	Area 6 Community Interest	~					
Morozov, Rafael	Area 3 Business						
Petrus, Lisa	Area 4 Residential						
Revord, Sherri	Area 5 Community Interest						
Roden, Neal	Area 7 Business			X			
Sales, Kristin	Area 1 Community Interest	V					
Lawrence, Tish	Area 2 Business					X	
Steinberg, Sue	Area 4 Business					X	-
Ziff, Ron	Area 6 Business						
NC Quorum: 11	Grand Total (including page 2):	16				3	
We, the Treasurer and Signer of the a public meeting was held in accordanc							
Once the Department approves a Fun account automatically, i.e. no addition		nent will trans	sfer the reques	sted amount	into the Neighl	borhood Cou	ncil's checkin
Treasurer's Signature:	Jom Capps		Signer's Si	gnature:		Wartson	-
Print/Type name: To	om Capps			e name: Jef	f Harsough	11 - 1	
Date (mm/dd/yy):	7.10.17		Date (mm	/dd/yy):	0	7-10-2	017
	Contract CIP Advanced Payment >\$2,500 NPG Sponsored Event	Approved Denied	Staff Initials		Lst Level	Authoriz	ation Code —

You may pay by ACH/wire to: Stering National Bank Routing # - 026007773 Account # - 3852541548

Credit cards accepted:



PO#

CONNECTING VIALENT Please remit payment to: LLoyd Staffing 445 Broadhollow Road, Suite 119 Melville, NY 11747 Billing inquiries: 631-370-7433

Attention of: Tom Capps, BILL TO: SHERMAN OAKS NEIGHBORHOOD COUNCIL P.O. BOX 5721 SHERMAN OAKS, CA 91413

Thank you for choosing Lloyd Staffing

DATE	TE INVOICE NO. PAGE		ACCOUNT NO.	TERMS:		
12/03/2017	401002	1	117247	Due Upon Receipt	:	
PERIOD	DESCRIPTION &	EMPLOYEE	-	HOURS	RATE	AMOUNT
1/27/17-12/03/17	EXASST	Salter, Jolie A	L .	4.00	21.85	\$87.40
	Placements with a Purpose program JDRF with a donation to help fight of			AMOUNT >	TOTAL	\$87.40

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Department of Neighbork	nood Empowerment					No.	i and the second se
Funding Request Form			E)	MPOW	ER LA	(may	
			NEI	GHEORHOOD 1	MPOWERMENN		16
	herman Oaks						
Budget Fiscal Year:	2017-18		Requestor:		Tom Capps Tr		
Request Date: 10-Jul-17 Meeting Date: 7/10/2017			Vendor: _ Address:		Lloyd's Sta	iffing	
Agenda Item:	Item 8J		City:		State		
	onsored Event Neighborhood Purp	ose Grant	Zip Code:		Phone:		
Contract / Lease Board Member R			Amount:		Up to \$4	,500.00	
☑Out of State □1099 Expense	One Time Expense Monthly	Multip	e # of paym	nents			
If a bank card exemption of the dail please provide the date(s) and amo Public Benefit Description		lifted:	Administrative /	Assistant hour	s worked during	Fiscal Year 20	17-2018
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Banks Barad, Jill	Area 6 Residential						
Baronian, Levon	Area 1 Business	V.					
Binkow, Michael	Area 7 Residential	1					
Capps, Tom	Area 2 Residential						
Harsough, Jeff	Area 2 Community Interest						
Kalban, Jeff	Area 7 Community Interes						
Katchen, Howard	Area 3 Residential						
Lax, Sidonia	Area 4 Community Interest	V.					
Ross, Garrett	Area I Residential						
Marciniak, Richard	Area 3 Community Interest					X	
Menard, Melissa	Area 6 Community Interest	~					
Morozov, Rafael	Area 3 Business						
Petrus, Lisa	Area 4 Residential						
Revord, Sherri	Area 5 Community Interest	V					
Roden, Neal	Area 7 Business			X			
Sales, Kristin	Area 1 Community Interest	V					
Lawrence, Tish	Area 2 Business					X	
Steinberg, Sue	Area 4 Business					X	-
Ziff, Ron	Area 6 Business						
NC Quorum: 11	Grand Total (including page 2):	16				3	
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Treasurer's Signature:	Jom Capps		Signer's Si	gnature:		Wartson	-
Print/Type name: To	om Capps			e name: Jef	f Harsough	11 - 1	
Date (mm/dd/yy):	7.10.17		Date (mm	/dd/yy):	0	7-10-2	017
	Contract CIP Advanced Payment >\$2,500 NPG Sponsored Event	Approved Denied	Staff Initials		Lst Level	Authoriz	ation Code —

Invoice

The Web Corner, Inc.

19509 Ventura Blvd. Tarzana CA 91356 (818) 345-7443

Date	Invoice #	Due Date
1/1/2018	15975	1/1/2018

Bill To
Sherman Oaks NC
Tom Capps
PO Box 5721
Sherman Oaks, CA 91413

		P.O. No.	Terms	Project
Quantity	Description	<u> </u>	Rate	Amount
	Monthly Maintenance: includes up to 1 hour for; web development, requests, & website adjustme Email accounts (2 included) Total 3 for shermanoaksnc.org	phone support, ents	99.00 3.50	99.00 3.50
	payment at your earliest convenience. your business!		Total	\$102.5
nank you lor	•			
inank you ior			Payments/Credit	s \$0.00

Department of Neighbor	rhood Empowerment					1943 P.	24
Funding Request Form			1	MPOW	ERLA		13
			NE	GHBORHOOD E	MPOWERMENT	Martin .	1.00
NC NAME:	Sherman Oaks						
Budget Fiscal Year:	2017-18				Tom Capps Tr		
Request Date: 10-Jul-17 Meeting Date: 7/10/2017			Vendor: Address:		The Web C	orner	
Agenda Item:	Item 8E		City:		State	e:	
			Zip Code:				
	Sponsored Event Neighborhood Purp r Reimbursement Community Improve		Amount:		Up to \$1		
Contract / Lease Board Membe	□One Time Expense ☑Monthly	Multip		-			
	aily \$1,000 limit is required for this re						
please provide the date(s) and am Public Benefit Description	Nount needed for the daily limit to be ove up to \$1,400 to pay The Web Corner fo Vote Count (continued	r SONC websit Ye	ear 2017-2018	We consider the second s	d one extra SON	C domain ema	il during Fiscal
*Recused-Boardmember r	must leave the room prior to any discu Board Position				ntil after the v	ote is comple Absent	ineligible
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Banks Barad, Jill	Area 6 Residential	1					
Baronian, Levon	Area 1 Business	1					
Binkow, Michael	Area 7 Residential	1					
Capps, Tom	Area 2 Residential	1					
Harsough, Jeff	Area 2 Community Interest	1					
Kalban, Jeff	Area 7 Community Interes	1					
Katchen, Howard	Area 3 Residential	/					
Lax, Sidonia	Area 4 Community Interest	1					
Ross, Garrett	Area 1 Residential						
Marciniak, Richard	Area 3 Community Interest	2				X	
Menard, Melissa	Area 6 Community Interest	V					
Morozov, Rafael	Area 3 Business	1					
Petrus, Lisa	Area 4 Residential	~					
Revord, Sherri	Area 5 Community Interest	V					
Roden, Neal	Area 7 Business			X			
Sales, Kristin	Area 1 Community Interest	1					
Lawrence, Tish	Area 2 Business					X	
Steinberg, Sue	Area 4 Business					X	
Ziff, Ron	Area 6 Business	V					
NC Quorum: 11	Grand Total (including page 2):	16				3	
We, the Treasurer and Signer of the public meeting was held in accorda	e above indicated Council, declare that ince with the Brown Act, where with a	quorum of Bo	ard Members	present, the	Council approv	ed the above	action.
	unding Request submitted, the Depart tional Cash Request Form is required.	ment will tran	ster the reque	ested amount	into the Neigh	bornood Cou	ncii s checking
Treasurer's Signature:	Im Canno		Signer's S	Signature:	1	Startsont	_
Print/Type name:	Tom Canns			pe name: Jet	f Harsough	the start	
	7.11.17			n/dd/yy):		1-10-201	7
Date (mm/dd/yy): Department Use Only	Contract CIP Advanced Payment >\$2,500 NPG Sponsored Event	Approved	Staff Initials		1st Level	and the second se	ation Code

You may pay by ACH/wire to: Sterling National Bank Routing # - 026007773 Account # - 3852541548

Credit cards accepted:



PO#

CONNECTING TALENT Please remit payment to: LLoyd Staffing 445 Broadhollow Road, Suite 119 Melville, NY 11747 Billing inquiries: 631-370-7433

Attention of: Tom Capps, BILL TO: SHERMAN OAKS NEIGHBORHOOD COUNCIL P.O. BOX 5721 SHERMAN OAKS, CA 91413

Thank you for choosing Lloyd Staffing

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:		
12/17/2017	401226	1	117247	Due Upon Receip	t	
PERIOD	DESCRIPTION 8	EMPLOYEE		HOURS	RATE	AMOUNT
2/04/17-12/10/17	EXASST	Salter, Jolie A		4.00	21.85	\$87.40
2/11/17-12/17/17	EXASST	Salter, Jolie A		7.00	21.85	\$152.95
	r Placements with a Purpose progr		DAV TUO	AMOUNT >	TOTAL	\$240.35

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You may pay by ACH/wire to: Sterling National Bank Routing # - 026007773 Account # - 3852541548

PO#

Credit cards accepted:



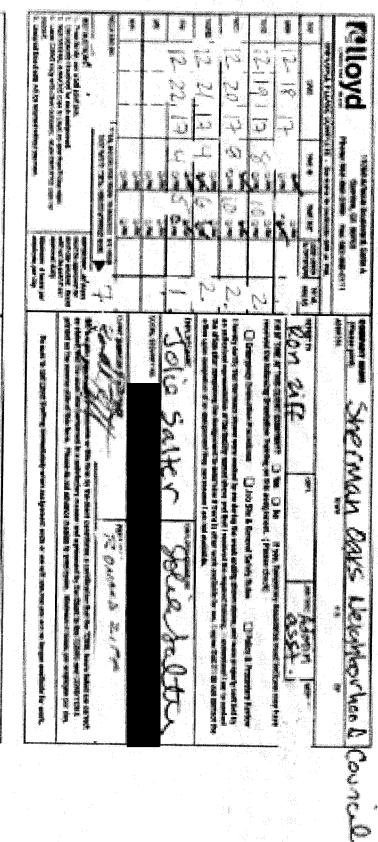
CONNECTING TALENT Please remit payment to: LLoyd Staffing 445 Broadhollow Road, Suite 119 Melville, NY 11747 Billing inquiries: 631-370-7433

Attention of: Tom Capps, BILL TO: SHERMAN OAKS NEIGHBORHOOD COUNCIL P.O. BOX 5721 SHERMAN OAKS, CA 91413

Thank you for choosing Lloyd Staffing

	ank you for choosing cloyd Starring				F 0 #				
DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:					
12/24/2017	401336	1	117247	Due Upon Receip	ot				
PERIOD	DESCRIPTION & EN	IPLOYEE		HOURS	RATE	AMOUNT			
12/18/17-12/24/17	EXASST	Salter, Jolie A		7.00	21.85	\$152.95			
					ş				
						- -			
Thank you for your part in our Pla generated by LLoyd supports JD	acements with a Purpose program. E RF with a donation to help fight diabe	very placement	PAY THIS A	MOUNT >	TOTAL	\$152.95			

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Department of Neighbork	nood Empowerment					No.	i and the second se
Funding Request Form			E)	MPOW	ER LA	(may	
			NEI	GHEORHOOD 1	MPOWERMENN		16
	herman Oaks						
Budget Fiscal Year:	2017-18		Requestor:		Tom Capps Tr		
Request Date: 10-Jul-17 Meeting Date: 7/10/2017			Vendor: _ Address:		Lloyd's Sta	iffing	
Agenda Item:	Item 8J		City:		State		
	onsored Event Neighborhood Purp	ose Grant	Zip Code:		Phone:		
Contract / Lease Board Member R			Amount:		Up to \$4	,500.00	
☑Out of State □1099 Expense	One Time Expense Monthly	Multip	e # of paym	ents			
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*Recused-Boardmember mu	Vote Count (Continued of ust leave the room prior to any discu				intil after the v	ote is comple	eted.
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	Contract CIP Advanced Payment >\$2,500 NPG Sponsored Event	Approved Denied	Staff Initials		Lst Level	Authoriz	ation Code —

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PO#

Credit cards accepted:



Please remit payment to: LLoyd Staffing 445 Broadhollow Road, Suite 119 Melville, NY 11747 Billing inquiries: 631-370-7433

Attention of: Tom Capps, SHERMAN OAKS NEIGHBORHOOD COUNCIL BILL TO: P.O. BOX 5721 SHERMAN OAKS, CA 91413

Thank you for choosing Llovd Staffing

Thank you for choosing Lloyd Staffing				P0#					
DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:					
12/31/2017	401451	1	117247	Due Upon Receipt					
PERIOD	DESCRIPTION	& EMPLOYEE		HOURS	RATE	AMOUNT			
12/25/17-12/31/17	EXASST	Salter, Jolie	A	3.00	21.85	\$65.55			
Thank you for your part in ou	r Placements with a Purpose pro	gram. Every placeme	nt PAY THI	S AMOUNT >	TOTAL	\$65.55			



To save to call Uoyd Statting Louinsfahildy when assignment onds or we will assume you are no longer available for werk.	ayaranad daa'y Alawaara 4 Aaare per Mayalana, per dap		d wheelpapers.	t Learn (11611) capp with start constant, in tain EVPLOYEE capp for proved 1. Under all trackeds will be returned without pay safe.
is rund, with the work was performed in a satisfactory manner and agreement by the Client to the TERMS and COMDITIONS printed on the revenue side of the form. Presse so and advance mession to unplayees. Misimum 4 hours per employee per day.	MACTINIT, AILANT Read in Approved by Mathing Mathing Room			INSTRUCTIONS 1. Free finite un abul point per 2. Un appared line abul point per 3. Free finite un abul point per 4. Free finite un abul point per 5. Free finite un abul per 5. Free finite un abul per 5. Free finite un abul point per 5. Free finite un abul per 5. Free finite un a
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MINING Sherman BAKS Netghborhood	lerard, Suilt: A 1. 00703 Fax: 052-000-01111	5 C I	11060 Artesia Bo Cerritos, C Phene: 562-860-2355	relloyd

Department of Neighborh	nood Empowerment					No.	in the second
Funding Request Form			E)	MPOW	ER LA	(may	
			NEI	GHEORHOOD 1	MPOWERMENN		16
	herman Oaks						
Budget Fiscal Year:	2017-18		Requestor:		Tom Capps Tr		
Request Date: 10-Jul-17 Meeting Date: 7/10/2017			Vendor: _ Address:		Lloyd's Sta	iffing	
Agenda Item:	Item 8J		City:		State		
	onsored Event Neighborhood Purpo	ose Grant	Zip Code:		Phone:		
Contract / Lease Board Member R	C. P. S. M. C. M. C M. C. M. C. M		Amount:		Up to \$4	,500.00	
☑Out of State	One Time Expense Monthly	Multip	e # of paym	ents			
If a bank card exemption of the dail please provide the date(s) and amo Public Benefit Description		lifted:	Administrative /	Assistant hour	s worked during	Fiscal Year 20	17-2018
*Recused-Boardmember mu	Vote Count (Continued of ust leave the room prior to any discu				intil after the v	ote is comple	eted.
Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
Babian, Avo	Area 5 Business						
Banks Barad, Jill	Area 6 Residential	~					
Baronian, Levon	Area 1 Business	V.					
Binkow, Michael	Area 7 Residential	1					
Capps, Tom	Area 2 Residential						
Harsough, Jeff	Area 2 Community Interest						
Kalban, Jeff	Area 7 Community Interes						
Katchen, Howard	Area 3 Residential						
Lax, Sidonia	Area 4 Community Interest	V.					
Ross, Garrett	Area I Residential						
Marciniak, Richard	Area 3 Community Interest					X	
Menard, Melissa	Area 6 Community Interest	/					
Morozov, Rafael	Area 3 Business						
Petrus, Lisa	Area 4 Residential						
Revord, Sherri	Area 5 Community Interest	V					
Roden, Neal	Area 7 Business			X			
Sales, Kristin	Area 1 Community Interest	V					
Lawrence, Tish	Area 2 Business					X	
Steinberg, Sue	Area 4 Business					X	-
Ziff, Ron	Area 6 Business						
NC Quorum: 11	Grand Total (including page 2):	16				3	
We, the Treasurer and Signer of the a public meeting was held in accordanc							
Once the Department approves a Fun account automatically, i.e. no addition		nent will trans	sfer the reques	sted amount	into the Neighl	borhood Cou	ncil's checkin
Treasurer's Signature:	Jom Cappos		Signer's Si	gnature:		Wartson	-
Print/Type name: To	om Capps			e name: Jef	f Harsough	- Il mul	
Date (mm/dd/yy):	7.10.17		Date (mm			7-10-2	017
	Contract CIP Advanced Payment >\$2,500 NPG Sponsored Event	Approved Denied	Staff Initials		Lst Level	Authoriz	ation Code —



AT&T MESSAGING PO BOX 480010 CHARLOTTE, NC 28269-5300

CUSTOMER NUMBER	1
8607823	
INVOICE DATE	
01/01/2018	

Page 1 of 1

Bill-To Customer:

 SHERMAN OAKS NC	456
PO BOX 5721 SHERMAN OAKS, CA 91413-5721	T3 P1

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Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
8607823	01/01/2018 01/31/2018	01/30/2018	\$15.26	\$15.26	\$.00	\$15.26	\$15.26

.

Payments - Thank You	12/21/20	Ļ7	\$15.26	
Description of Current Charges & Credits		Qty	Unit Price	Ext. Price
UM Standard-Discount Rate 8185032399	January service	1	\$14.00	\$14.00
City Utility Users Tax				\$1.26

CUSTOME	RNUMBER
8607	7823
INVOICE	NUMBER
7341	1448
DUE DATE	AMOUNT PAID
01/30/2018	

Please detach & enclose with payment



REMIT TO:

AT&T MESSAGING PO BOX 840486 DALLAS, TX 75284-0486

SHERMAN OAKS NC PO BOX 5721 SHERMAN OAKS, CA 91413-5721

01001 860285300000000012556

Department of Neighb	orhood Empowerment						
Funding Request Form			E	MPOW	ER LA	Calles .	
			2	EIGHBORHOOD	EMPOWERMENT		
NC NAME:	Sherman Oaks		_				
Budget Fiscal Year:	2017-18	-	Requestor		Tom Capps T	reasurer	
Request Date: 10-Jul-17		-	Vendor		A.T.&	Г.	
Meeting Date: 7/10/2017		-	Address	:			
Agenda Item:	Item 8F	-	City:		Stat	e:	CA
	NC Sponsored Event Neighborhood Pu		Zip Cod		Phone:		
	iber Reimbursement Community Impro		Amount		Up to \$	200.00	
		Mult	iple # of pay	ments	-		
If a bank card exemption of the please provide the date(s) and a	daily \$1,000 limit is required for this amount needed for the daily limit to b	request,					
Public Benefit	Approve up to \$200 to pay AT		Voice Mail mes	saging service	during Fiscal Yea	ar 2017-2018	
Description							
						Concerned to the second	a dave provide av
*Recused-Reardmember	Vote Count (Continue					1.200	
Recused-boardinember	r must leave the room prior to any disc	cussion and m	ay not return	to the room i	Intil after the v	ote is compl	eted.
Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
Babian, Avo	Area 5 Business						
Banks Barad, Jill	Area 6 Residential	V.,					
Baronian, Levon	Area 1 Business						
Binkow, Michael	Area 7 Residential						
Capps, Tom	Area 2 Residential	\checkmark					
Harsough, Jeff	Area 2 Community Interest						
Kalban, Jeff	Area 7 Community Interes	1					
Katchen, Howard	Area 3 Residential	1					
Lax, Sidonia	Area 4 Community Interest						1
Ross, Garrett	Area 1 Residential						
Marciniak, Richard	Area 3 Community Interest					X	
Menard, Melissa	Area 6 Community Interest					~	
Morozov, Rafael	Area 3 Business	1					
Petrus, Lisa	Area 4 Residential						
Revord, Sherri	Area 5 Community Interest	1					
Roden, Neal	Area 7 Business	· ·		\mathbf{V}			
Sales, Kristin	Area 1 Community Interest	1					
Lawrence, Tish	Area 2 Business	V				X	
Steinberg, Sue	Area 4 Business					X	
Ziff, Ron	Area 6 Business	V				~	
NC Quorum: 11	Grand Total (including page 2):	16		1		3	
	(10		1		0	
We, the Treasurer and Signer of th	e above indicated Council, declare that	the information	on presented	on this form is	accurate and o	complete, an	d that a
public meeting was held in accorda	ance with the Brown Act, where with a	quorum of Boa	ard Members	present, the C	Council approve	d the above	action.
Once the Department approves a l	Funding Request submitted, the Depart	ment will tran	sfer the reque	sted amount	into the Neighb	orhood Cour	ncil's checkin
account automatically, i.e. no addi	itional Cash Request Form is required.		1				
Treasurer's Signature:	Tom Capps		Signer's S	ignature:		Stateral	L
Print/Type name:			Print/Ty	pe name: Jeff	Harsough		
Date (mm/dd/yy):	7.10.17		Date (mr	n/dd/yy):	(7-10-20	1
Department lies Only	Contract CIP Advanced Payment	Approved	Staff Initials		st Level		ation Code
Department Use Only	>\$2,500 NPG Sponsored Event	Denied		Г 2	nd Level		

I

You may pay by ACH/wire to: Sterling National Bank Routing # - 026007773 Account # - 3852541548

Credit cards accepted:

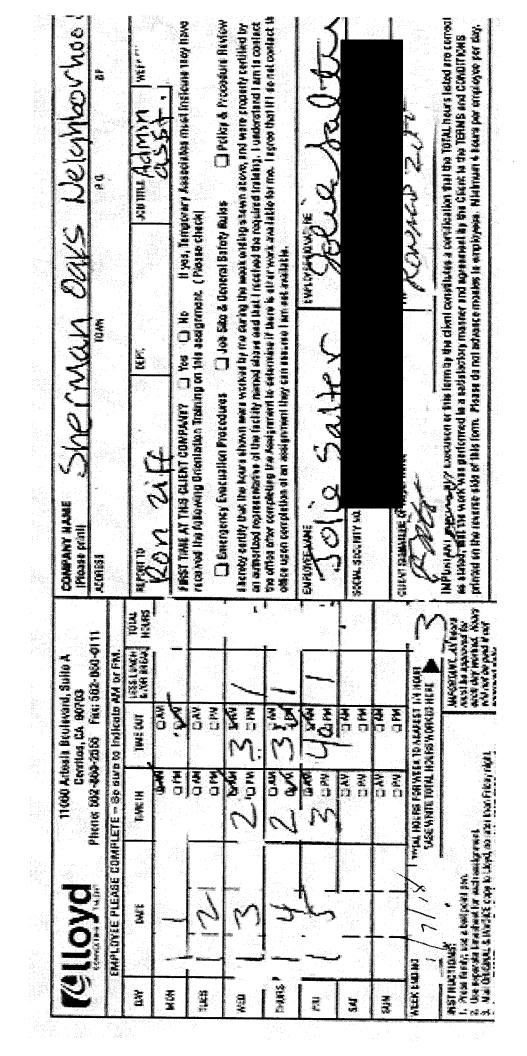


Cellov cmacPlease remit payment to: LLoyd Staffing 445 Broadhollow Road, Suite 119 Melville, NY 11747 **Billing inquiries:** 631-370-7433

Attention of: Tom Capps, SHERMAN OAKS NEIGHBORHOOD COUNCIL BILL TO: P.O. BOX 5721 SHERMAN OAKS, CA 91413

Thank you for choosing Lloyd Staffing

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:		
01/07/2018	401546	1	117247	Due Upon Receipt		
PERIOD	DESCRIPTION & EMPLOYEE		11/21/	HOURS	AMOUNT	
					RATE	
01/01/18-01/07/18	EXASST	Salter, Jolie A	A	3.00	21.85	\$65.55
	lacements with a Purpose program DRF with a donation to help fight di		PAY THIS /		TOTAL	\$65.55



Department of Neighborh	nood Empowerment					No.	in the second
Funding Request Form			E)	MPOW	ER LA	(may	
			NEI	GHEORHOOD 1	MPOWERMENN		16
	herman Oaks						
Budget Fiscal Year:	2017-18		Requestor:		Tom Capps Tr		
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	onsored Event Neighborhood Purpo	ose Grant	Zip Code:		Phone:		
Contract / Lease Board Member R	C. P. S. M. C. M. C M. C. M. C. M		Amount:		Up to \$4	,500.00	
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*Recused-Boardmember mu	Vote Count (Continued of ust leave the room prior to any discu				intil after the v	ote is comple	eted.
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Treasurer's Signature:	Jom Cappos		Signer's Si	gnature:		Wartson	-
Print/Type name: To	om Capps			e name: Jef	f Harsough	- Il mul	
Date (mm/dd/yy):	7.10.17		Date (mm			7-10-2	017
	Contract CIP Advanced Payment >\$2,500 NPG Sponsored Event	Approved Denied	Staff Initials		Lst Level	Authoriz	ation Code —