Monthly Expenditure Report



Reporting Month: March 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
\$26248.34	\$6468.05	\$19780.29	\$1740.35	\$3655.16	\$14384.78

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office		\$1237.34		\$240.35	
Outreach	\$31207.00	\$5230.71	\$11127.29	\$1500.00	\$9386.94
Elections		\$0.00		\$0.00	
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Neighborhood Purpose Grants	\$13403.00	\$0.00	\$8653.00	\$0.00	\$8653.00
Funding Requests Under Review: \$3655.16		Encumbrar	nces: \$0.00	Previous Expend	itures: \$18361.66

			Expenditures			
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	GOODWAY PRINT & COPY	03/01/2018	(Credit card transaction)	General Operations Expenditure	Office	\$15.60
2	STAPLES DIRECT	03/03/2018	(Credit card transaction)	General Operations Expenditure	Office	\$57.25
3	GOODWAY PRINT & COPY	03/09/2018	(Credit card transaction)	General Operations Expenditure	Office	\$33.67
4	GOODWAY PRINT & COPY	03/13/2018	(Credit card transaction)	General Operations Expenditure	Office	\$21.08
5	RITE AID STORE - 5569	03/12/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$14.38
6	STEVES BIGGER SUBS	03/13/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$150.25
7	AMAZON MKTPLACE PMTS	03/14/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$59.58
8	Amazon.com	03/16/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$35.55

				General		
9	AMAZON MKTPLACE PMTS	03/16/2018	(Credit card transaction)	Operations Expenditure	Outreach	\$36.76
10	GOODWAY PRINT & COPY	03/16/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$202.58
11	ARMSTRONG 722 SHERMAN	03/20/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$189.96
12	CORNER BAKERY 0210	03/25/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$290.15
13	INTUIT IN NEXGEN DJS	03/25/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$300.00
14	JCS Catering Company	01/10/2018	Approve up to \$750 to pay JCS Catering at CBS	General Operations Expenditure	Outreach	\$325.00
15	Lloyd Staffing	02/22/2018	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$87.40
16	Sherman Oaks Chamber of Commerce	02/22/2018	Approve up to \$950 for up to two pole banners	General Operations Expenditure	Outreach	\$950.00
17	LAUSD - Civic Center Permit Office	03/02/2018	Approve up to \$1,020 to pay Los Angeles Unifi	General Operations Expenditure	Office	\$657.48
18	Lloyd Staffing	03/02/2018	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$218.50
19	The Web Corner, inc.	03/02/2018	Approve up to \$1,400 to pay The Web Corner fo	General Operations Expenditure	Outreach	\$102.50
20	AT&T Messaging	03/12/2018	Approve up to \$200 to pay AT&T for SONC V	General Operations Expenditure	Office	\$15.26
21	Lloyd Staffing	03/12/2018	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$131.10
22	City of Los Angeles Dept of Recreation & Parks	03/14/2018	Motion to incease the funding request from \$6	General Operations Expenditure	Outreach	\$2574.00
	Subtotal:					\$6468.05
Ь	ı					

	Outstanding Expenditures					
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	City of Los Angeles	03/14/2018	Approve \$750 to Budget Advocates 2017-18 Budg	General Operations Expenditure	Outreach	\$750.00
2	City of Los Angeles	03/14/2018	Approve \$750 for the annual 2018 Annual LA Co	General Operations Expenditure	Outreach	\$750.00
3	Lloyds Staffing	03/23/2018	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$152.95

4	Lloyds Staffing	03/23/2018	Approve up to \$4,500 to pay Lloyd's Sta	General Operations Expenditure	Office	\$87.40
	Subtotal: Outstanding	g				\$1740.35



INVOICE LF

Goodway Print & Copy

15121 Ventura Blvd.

9

No. 40570

Sherman Oaks, CA 91403

VOICI

EΝ

Phone: (818) 783-5172

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

Date 2/28/2018

WEIGHBURHOOD COUNCIL/ form

REF: Guidelines to Enhance

Capps P.O. Box 5721

QUANTITY

5

SHERMAN OAKS

Shorman Oaks Ca 91413

Repina

Customer P.O. No.

Transaction: Sale

Date: 2/28/2018

Time: 1:16:33 PM(EST)

Invoice #: 40570

B-KP Digi CC Laser SMOO1 Customer #: 3

PO / Order #: na

'hite 24# 4.25

AMOUNT

10.00

Card Type: Master Card

Card Number: XXXXXXXXXXXX8480

Entry Method: Keyed

Total Amount: 15.60

Authorization: Approved - 092534

Ref Note:

Signature

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

Thank You!

- 2	,
SUBTOTAL	14.25
TAX	1.35
SHIPPING	
TOTAL	15.60
AMOUNT DUE	15.60
	SUBTOTAL TAX SHIPPING TOTAL

Thank you for your order, Thomas A confirmation email will be sent to you at tcapps@shermanoksnc.org with your complete order details.

Print Order Cancel

\$52.28

FREE

Order Number: 9784383761

Placed on: March 2, 2018

Shipping address Sherman Oaks Neighborhood Council Thomas Capps 5101 MAMMOTH AVE

SHERMAN OAKS, CA 91423

Estimated Tax: \$4.97 Total: \$57.25

Order sub-total:

Shipping:

\$43.99

\$8.29

Payment methods

Master Card ending in 8480

Thomas Capps, Los Angeles, CA 90012

Need to cancel this order? Note: Most orders can be cancelled within 30 minutes.

Expected delivery by March 5, 2018 5101 MAMMOTH AVE, SHERMAN OAKS, CA

Brother Toner Cartridge, Black (TN330) Qty.1 Staples® Multipurpose Paper, 8 1/2" x 11", 500/Ream Qty.1 (513099-WH)

YOU MAY ALSO LIKE



Staples® Multiuse Copy Paper, 8 1/2" x 11", 8-Ream Case

(3172)

Staples® Manila File Folders, Letter, 3 Tab, Assorted Position...

\$8.29

(4369)



Sharpie® Fine Point Permanent Markers, Black, 1/Dz (30001)

(3057)

\$11.79

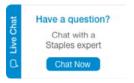


HP 950XL High Yield Black/951 Standard Tri-Color (C2P01FN140)...

(2801)

\$106.99

\$32.99 \$50.49



INVOICE LF



15121 Ventura Boulevard

Sherman Oaks, California 91403

VOICE: (818) 783-5172 • FAX: (818) 783-8649

No. 40629

EMA!L: goodway@goodwayprintcopy.com

Date 3/8/2018

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

Jolie Salter (818) 699-2922 Customer P.O. No.

QUANTITY	DESCR	IPTION	AMOUNT
25	Minutes, 8.5 x 11 White 20# B-KP Copy copied on 2 sides 25 Copy Machine Stapling	Multipurpose SMOOTH, 2 sheets,	10.25
50	25 Copy Machine Stapling agenda, 8.5 x 11 White 20# B-KP Copy copied on 2 sides 50 Copy Machine Stapling	Multipurpose SMOOTH, 2 sheets,	20.50
		Goodway Print & Copy 15121 Ventura Blvd.	
		Sherman Oaks, CA 91403 Phone: (818) 783-5172 Fax: (818) 783-8649	
		www.goodwayprintcopy.com	
	Raid Credit Card	Transaction : Sale Date : 3/8/2018	
	Credit Core	Time: 5:24:33 PM(EST)	
	«·· ·	Customer # : 3 PO / Order # : na	
Pay Every Invo	pice with Credit Card Ship Vi	Card Type : Master Card Card Number : XXXXXXXXXXXX8480	30.75
Account Type:	THOM THO MY GIOL.	Entry Method : Keyed	2.92
THANK YOU!		Total Amount: 33.67 Authorization: Approved - 083117	33.67 33.67

INVOICE LF



15121 Ventura Boulevard Sherman Oaks, California 91403

VOICE: (818) 783-5172 • FAX: (818) 783-8649

EMA!L: goodway@goodwayprintcopy.com

No. 40649

Date 3/12/2018

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

Tom Capps

Customer P.O. No.

QUANTITY	DESCF	RIPTION	AMOUNT
25	REF: SONC Treasure Report, 8.5 x 11 SMOOTH, 4 sheets, copied on 2 sides 25 Copy Machine Stapling	White 20# B-KP Copy Multipurpose	19.25
	Raid card credit card	Goodway Print & Copy 15121 Ventura Blvd. Sherman Oaks, CA 91403 Phone: (818) 783-5172 Fax: (818) 783-8649 www.goodwayprintcopy.com	
	NO.	Transaction: Sale Date: 3/12/2018 Time: 3:58:43 PM(EST) Invoice #: 40649 Customer #: 3 PO / Order #: na	041 2
Taken by: Account Type: PLEASE PAY THANK YOU!	Ship Via Charge Account FROM THIS INVOICE.	Card Type : Master Card Card Number : XXXXXXXXXXX8480 Entry Method : Keyed	19.25 1.83
		Total Amount: 21.08 Authorization: Approved - 009918	21.08 21.08

59 - 3.12.18 Water- Board Meeting on 3/12/18



With us, it's personal.

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

Register #9 Transaction #200897 Cashier #55699911 3/12/18 5:58PM

1 CRV TRANSACTION 1 ARRWHD TUXEDO .5L/24PK	5.99 1.20 5.99 1.20	F
---	------------------------------	---

2 Items

Subtotal 14.38 ,00

Tax Total 14.38

MASTER

14.38

MASTER card * #XXXXXXXXXXXXXXXX8480 App #AA APPROVAL AUTO

Ref # 034677 Entry Method: Chip

Verified by PIN Application Label: MASTERCARD

AID: A0000000041010 TVR: 0000048000

TSI: E800

ARC:

Tendered 14.38

Cash Change .00

THANK YOU FOR SHOPPING AT RITE AID



F - Food Stamp Eligible



4533 Sepulveda Blvd.
Sherman Oaks, CA 91403
Phone: 818-728-6954
Fax: 818-728-4214
Store Hours
Monday - Friday 9am-7pm
Saturday 10am-7pm
Sunday Closed
www.biggersubs.com

Owner: WED	Check 12 Steve 3/07/18	792 Guests 0 4:33pm
	'Platter Subs rvice Charge	128.97 10.00
Sub Tax	•	138.97 11.28 150.25

CREDIT CARD

150.25

Order Number O
We Deliver All Day
with a \$20.00 Minimum Order
1-151458

STEVES BIGGER SUBS

4533 SEPULVEDA BLVD SHERMAN OAKS, CA 91403 8187286954-

Cashier: ESTEBAN L XOCHITLA

Transaction 116601

Total	\$150.25
CREDIT CARD AUTH MASTERCARD 8480	\$150.25
Tip	
Totaļ	
Retain this copy fo	r statement

validation

12-Mar-2018 4:03:29P \$150.25 | Method: KEYED MASTERCARD XXXXXXXXXXXX8480 Ref #: 807100588161 Auth #: 065574 MID: *******8882 AthNtwkNm: MASTERCARD SIGNATURE VERIFIED

> Online: https://clover.com/ p/01M4GQWFM95FJ



Final Details for Order #114-6154676-5898620

Print this page for your records.

Order Placed: March 13, 2018

Amazon.com order number: 114-6154676-5898620

Seller's order number: 31416182

Order Total: \$59.58

Shipped on March 14, 2018

Items OrderedPrice1 of: 50 - 3" x 2.5" Clay Pots - Great for Plants and Crafts\$39.99

Sold by: Hirt's Gardens (seller profile)

Condition: New

NEW

Shipping Address:Item(s) Subtotal: \$39.99Sherman Oaks Neighborhood CouncilShipping & Handling: \$19.59

15624 Royal Ridge Drive

Sherman Oaks, CA 91403 Total before tax: \$59.58 United States Sales Tax: \$0.00

Shipping Speed: Total for This Shipment: \$59.58

Standard Shipping -----

Payment information

Payment Method:Item(s) Subtotal: \$39.99MasterCard | Last digits: 8480Shipping & Handling: \$19.59

Billing address Total before tax: \$59.58

Thomas Capps
200 N. Spring Street

Estimated tax to be collected: \$0.00

Los Angeles, CA 90012 United States Grand Total: \$59.58

Credit Card transactions MasterCard ending in 8480: March 14, 2018: \$59.58

To view the status of your order, return to Order Summary.

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64-SONC-CC



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Print this page for your records.

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To view the status of your order, return to Order Summary.

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amazon.com

65-SONC-CC

Final Details for Order #114-5860954-0751456

Print this page for your records.

Order Placed: March 13, 2018

Amazon.com order number: 114-5860954-0751456

Order Total: \$36.76

Shipped on March 16, 2018

Items Ordered Price

1 of: Colorations SWT16 Colorations Simply Washable Tempera Paint - 16 oz. \$24.58

(Pack of 11)

Sold by: Discount School Supply (seller profile)

Condition: New

Shipping Address: Item(s) Subtotal: \$24.58 Sherman Oaks Neighborhood Council Shipping & Handling: \$8.99

15624 Royal Ridge Drive

Sherman Oaks, CA 91403 Total before tax: \$33.57

United States

Sales Tax: \$3.19

Shipping Speed: Total for This Shipment: \$36.76

Standard Shipping -----

Payment information

Payment Method: Item(s) Subtotal: \$24.58

MasterCard | Last digits: 8480 Shipping & Handling: \$8.99

Billing address

Total before tax: \$33.57

Thomas Capps
200 N. Spring Street

Estimated tax to be collected: \$3.19

Los Angeles, CA 90012

United States Grand Total: \$36.76

Credit Card transactions MasterCard ending in 8480: March 16, 2018: \$36.76

To view the status of your order, return to Order Summary.

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INVOICE LF



15121 Ventura Boulevard Sherman Oaks, California 91403

VOICE: (818) 783-5172 • FAX: (818) 783-8649

EMA!L: goodway@goodwayprintcopy.com

No. 40669

Date 3/15/2018

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

Jolie Salter (818) 699-2922 Customer P.O. No.

QUANTITY	DESCR	IPTION	AMOUNT			
500 5	Flyer Tree Give away, 8.5 x 11 White 24# B-KP Digi CC Laser SMOOTH, copied on 1 side posters 11 x 14 card stock					
		Goodway Print & Copy 15121 Ventura Blvd. Sherman Oaks, CA 91403 Phone: (818) 783-5172 Fax: (818) 783-8649 www.goodwayprintcopy.com				
Taken by: Account Type: Charge Account PLEASE PAY FROM THIS INVOICE. THANK YOU!		Transaction: Sale Date: 3/15/2018 Time: 6:17:47 PM(EST) Invoice #: 40669 Customer #: 3 PO / Order #: na Card Type: Master Card Card Number: XXXXXXXXXXXX8480				
		Entry Method : Keyed Total Amount : 202.58 Authorization : Approved - 075853	185.00 17. 5 8 202.58			



Thank you for shopping at Armstrong Sherman Oaks (818) 761-1522

www.armstronggarden.com 1-800-55PLANT

03/20/18 12:42PM 101736 252 ORDER

SUB-TOTAL:\$ 173.48 TAX: \$ 16.48

TOTAL: \$ 189.96

BC AMT: \$ 189.96

BK CARD#: XXXXXXXXXXXXX8480

MID: 345020411889

AUTH: 015211 AMT: \$ 189.96

Host reference #:434217 Bat#

Authorizing Network: MASTERCARD

Chip Read

CARD TYPE:MASTERCARD EXPR: XXXX

AID: A000000041010

TVR: 0000048000

IAD: 0110607003220000B68B000000000000

TSI : E800 ARC : 00 MODE : Issuer

CVM : Verified by PIN

Name : MASTERCARD

ATC:0007

AC : 699598BB7E5BA424 TxnID/ValCode: 557327

Bank card

USD\$ 189.96

DEPOSIT : 189.96



Invoice No: 300481

Date: Sat, Mar 24, 2018

Store Code: 210 Store: Encino

Catering - INVOICE -

Billing/Client Information

Credit Card: MASTERCARD(...8480)

Pre-Auth #: 089959

Client: JOLIE SALTER

Client Phone: (818) 699-2922

Delivery Information

Delivery: 03/24/2018 (11:15 - 11:30 AM)

S.O.N.C (VOLUNTEERS FOR TREE GIVE AWAY)

14201 HUSTON ST

SHERMAN OAKS, CA 91423

JOLIE SALTER

Phone: (818) 699-2922 Number of Guests: 35

Order entered by: Store

Printed: 03/23/2018 03:48 PM cDT

Order Note: SHERMAN OAKS REC CENTER. ASK FOR-SUE STIENBERG

•		Price	Amount
Lunch / Dinner - Lunch Boxes			rayerandaradora sacres ono 1951
10 Tomato Mozzarella w/Chips		9.75	97.50
10 Chicken Pesto w/Chips		9.75	97.50
15 Turkey & Swiss w/Chips	:	9.75	146.25
FOOD SAFETY TIPS	All credit card payments are pre-	Subtotal:	341.25
	authorized up to 30 days in advance	Discount:	(51.10)
Consume or refrigerate below 41F/5C	and are final-processed on the day of	Tax:	0.00
within 2 hours	pick-up/delivery.	Delivery Fee:	29.02
Reheat food to 165F/74C only once		Delivery Fee Discount:	(29.02)
	\$75.	Amount:	290.15
•		Gratuity:	
		Total:	
		Sign:	
		Print Name:	. ئىخنىسىدىسى

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

) is a

Powered by MonkeyMedia Software

Payment sent

We sent a confirmation email.

Brittany Wolff

Invoice no.7152043

Invoice total \$300.00

Amount paid \$300.00

Balance Due \$0.00

Date paidMarch 24, 2018

MasterCard ●●●8480 Payment method

Transaction IDPI0152143446

Invoice #7152043





BILL TO

Tom Capps
tom.capps.sonc@gmail.com

FROM **Brittany Wolff**4957 Kester Ave, Suite 11

Sherman Oaks, CA - 91403

b.lynnwolff@gmail.com | +1 7202123671

INVOICE ITEMS AMOUNT

Say Hello To Spring Tree Giveaway DJ \$300.00

\$300.00

PAYMENT DUE MAR 25, 2018

MESSAGE

Thanks for your business.

	INVOICE #	
ICS Catoring Company	110317B	
JCS Catering Company	DATE:	2
Carla's Café at CBS Studio Center 4024 Radford	9/11/2017	
Avenue Studio City, CA 91604	BILL TO NEIGHBORHOO	140
	Sherman Oaks Neighborh	ood Council
The Neighborhood Council Supports: Please of	heck box(es):	Amount:
Valley Alliance Neighborhood Councils (VANC) Planning Forum, November 9, 2017		
Valley Alliance Neighborhood Councils (VANC) Mixer, March 8, 2018	X	325.00
DESCRIPTION	- Jr	1
Food and Beverages for Valley Alliance Neighborf (VANC) event*	nood Councils	-
^ I his amount is inclusive and includes not and col silverware, linens, coffee, tea and desserts, kitche of facility.		
	TOTAL DUE	\$ 325.00
If you have any questions regarding this invoice, please contact Vicviereck@sbcglobal.net or 818-985-9174	act Vic Viereck	
PLEASE MAKE CHECK PAYABLE TO: JCS Catering	g Company	
12702 Tiara Street		
Valley Village, CA 91607		
I understand that this invoice must include JCS Cater total event cost, and the quote must be attached and submission.	included at the time of	
Thomas R Capps, Treasurer		
Prepared By: Sherman Dake Neighborhood Council Authorized Signature	neighborhood	Courcil

Thank you for your business!

Events D' Elegance @ CBS Studio Center 4024 Radford Avenue, Studio City, CA 91604

ESTIMATE OF CHARGES

Account Name:	Valley Alliance NC- Mixer	Date:	9-Nov-17
Contact Name:	Jill Barad	Phone:	
Address:		Cell:	
		Email:	
Location	Carla's Café	# of Guests	: 130 people
INVOICE #		Guarantee:	

QUANTITY		PRICE	TOTAL
130	Hors d' oeuvres	\$ 16.95	\$ 2,203.50
	Dessert	\$ 2.50	\$ 325.00
130	Coffee	\$ 1.95	\$ 253.50
1	Bartender fee	\$ 200.00	\$ 200.00
			\$ -
1	Set Up & Breakdown Fees	\$ 150.00	\$ 150.00
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
		TOTAL	\$ 3,132.00
Service Ch	arges-21%	0.21	\$ 657.72
		SUBTOTAL	\$ 3,789.72
Sales Taxe	es- 9.50%	0.095	\$ 360.02
		TOTAL	\$ 4,149.74
Make vou	check payable to:		
	ing Company		
		Credit	
Paid By:		Orean	I
Cash:			
Cashier's	Check·		
Money Or			
Other:			
SIGNATUR	DE.		
JIGNAT UF	\		

NC NAME:	Sherman Oaks						
Budget Fiscal Year:	2017-18		Requestor:		Tom Capps T	reasurer	
Request Date: 10-Jul-17			Vendor:		JCS Cate	ring	
Meeting Date: 7/10/2017			Address:	agent on the	255		
Agenda Item:	Item 8L		City:	Studio		e:	
	C Sponsored Event Neighborhood Pur	pose Grant	Zip Code:			00000	
Name and Address of the County	per Reimbursement Community Impro	vement Project	Amount			750.00	
☐Out of State ☐1099 Expense		✓Multi	ple # of payn	nents2	•		
	daily \$1,000 limit is required for this r mount needed for the daily limit to be						
	pprove up to \$750 to pay JCS Catering at C (Planning Forum and A	BS Studios tow Anniversary Mix	ker - \$325 each e	event) during F	y Alliance of Ne iscal Year 2017-	ighborhood Co 2018	ouncil events
*Recused-Boardmember	must leave the room prior to any disc				ntil after the v	ote is comple	eted.
Board Member Name	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
Babian, Avo	Area 5 Business						1111
Banks Barad, Jill	Area 6 Residential	/					
Baronian, Levon	Area 1 Business	V.					
Binkow, Michael	Area 7 Residential						
Capps, Tom	Area 2 Residential						
larsough, Jeff	Area 2 Community Interest	V.					
alban, Jeff	Area 7 Community Interes	-					
atchen, Howard	Area 3 Residential						
ax, Sidonia	Area 4 Community Interest	V.					
oss, Garrett	Area 1 Residential						
farciniak, Richard	Area 3 Community Interest					X	
Ienard, Melissa	Area 6 Community Interest	/					
forozov, Rafael	Area 3 Business	~					
etrus, Lisa	Area 4 Residential	/					
evord, Sherri	Area 5 Community Interest	V				•	
oden, Neal	Area 7 Business			X			
ales, Kristin	Area I Community Interest						
awrence, Tish	Area 2 Business	1				X	
teinberg, Sue	Area 4 Business					×	
iff, Ron	Area 6 Business						
IC Quorum: 11	Grand Total (including page 2):	16				3	
Ve, the Treasurer and Signer of the ublic meeting was held in accorda	e above indicated Council, declare that ance with the Brown Act, where with a c	the informatio	on presented o ard Members p	n this form is resent, the C	accurate and o	complete, and	d that a action.
nce the Department approves a F ccount automatically, i.e. no addi	unding Request submitted, the Departr tional Cash Request Form is required.	ment will trans	fer the reques	ted amount i	nto the Neighb	orhood Cour	ncil's checkin
Treasurer's Signature:	Jon Capps		Signer's Sig	gnature:	V.	Howson	
	Tom Capps		Print/Typ	e name: Jeff	Harsough	1	
Print/Type name:							
Print/Type name: Date (mm/dd/yy):	7.10.17		Date (mm	/dd/yy):	0	1-10-20	17



INVOICE

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

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,

BILL TO:

SHERMAN OAKS NEIGHBORHOOD COUNCIL

P.O. BOX 5721

SHERMAN OAKS, CA 91413

Thank you for choosing Lloyd Staffing

PO#

02/11/2018 PERIOD	402116	1	1 1172/17	I Dura Haram Danasimi	L.	
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EMPLOYEE INFORMATION

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OVERTIME

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you are assorted when working a full day, the tax requires a Your funch hour will be deformined by your supervisor to whom The state of the s

ABSENCES - LATENESS Calcus immediately if you must be absent or late. Do not call the client, LCOYD STAFFING will only the client.

Employee certiles no accident or injury was australed white working contine assignment that has not been previously recorded to the Human flasticates effice at Lloyd. DR-THE-JOB SAFETY

TRAINING

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TEAMS & CONDITIONS FOR LLOYD STATISHED

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Department of Neighborhood Empowerment Funding Request Form NC NAME: Sherman Oaks **Budget Fiscal Year:** 2017-18 Tom Capps Treasurer Requestor: Request Date: 10-Jul-17 Lloyd's Staffing Vendor: Meeting Date: 7/10/2017 Address: Item 8J Agenda Item: State: City: Zip Code: Phone: ☑Operations Outreach □NC Sponsored Event ☐ Neighborhood Purpose Grant Up to \$4,500.00 Amount:\$ □Contract / Lease ☐ Board Member Reimbursement Community Improvement Project ☑ Out of State 1099 Expense One Time Expense ☑ Monthly # of payments 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 Approve up to \$4,500 to pay Lloyd's Staffing for SONC Administrative Assistant hours worked during Fiscal Year 2017-2018 Description 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** No Abstain *Recused Ineligible Yes Absent Babian, Avo Area 5 Business Banks Barad, Jill Area 6 Residential Baronian, Levon Area 1 Business Binkow, Michael Area 7 Residential 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 Ross, Garrett Area I Residential Marciniak, Richard Area 3 Community Interest 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 Sales, Kristin Area 1 Community Interest Lawrence, Tish Area 2 Business Steinberg, Sue Area 4 Business Ziff, Ron Area 6 Business Grand Total (including page 2): NC Quorum: We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action. Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically, i.e. no additional Cash Request Form is required. Treasurer's Signature: Signer's Signature: Print/Type name: Tom Capps Print/Type name: Jeff Harsough Date (mm/dd/yy): Date (mm/dd/yy): Contract ☐ Advanced Payment □ Approved Staff Initials Authorization Code T1st Level Department Use Only □NPG □Sponsored Event >\$2.500 Denied 2nd Level



February 16, 2018

Sherman Oaks Neighborhood Council

DESCRIPTION	AMOUNT	TOTAL
Sherman Oaks Chamber		\$950
Two Pole Banners		
	TOTAL NOW DUE	\$950
Make/Mail check payable to:		
Sherman Oaks Chamber of Commerce		
14827 Ventura Blvd., Suite 207 Sherman C	Oaks, CA 91403	
Charge to my Mastercard/Visa/American E	lynrace	
Card#	express	
Expiration:		
CVC:		
C v C		
	Amt. Enclosed: \$	

A commitment to business and our community Please Make Copy and return the entire invoice

14827 Ventura Blvd. Suite 207 Sherman Oaks, CA 91403

Phone (818) 906-1951 E-Mail: info@shermanoakschamber.org

Office of the City Clerk				*	1	177	are ()
Administrative Services Division						100	
Neighborhood Council (NC) Funding Prog	gram						40
Board Action Certification Form			T		40		
NC Name: Sherman Oaks			Meeting Date: F		18		·
Budget Fiscal Year: 2017-2018 Board Motion and/or Public Benefit	1		Agenda Item No	·			
Statement (CIP and NPG):	Approve up to \$9 promoting the Sh Chamber of Com	nerman Öa	aks Neighbor	hood Cour	ncil as part	of the She	
Method of Payment: (Select One)	☐ Check		☐ Credit Card		☐ Boar	d Member Rein	nbursement
Recused Boardmembers r	must leave the room prior	Vote (to any discussion		turn to the roor	n until after the	vote is comple	te.
Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Babian, Avo	Area 5 Business						
Banks-Barad, Jill	Area 6 Residential	/					
Baronian, Levon	Area 1 Business	~	1,4				
Binkow, Michael	Area 7 Residential	1	* *				
Capps, Tom	Area 2 Residential						
Hartsough, Jeffrey	Area 2 Community				,		
Kalban, Jeffrey	Area 7 Community	/					
Katchen, Howard	Area 3 Residential	V .					
Lax, Sidonia	Area 4 Community						
Marciniak, Richard	Area 3 Community	V					
Mernard, Melissa	Area 6 Community	-		<i>r</i> .	V	1	
Morozov, Rafael	Area 3 Business	V		•			
Petrus, Lisa	Area 4 Residential	V					
Revord, Sherri	Area 5 Community	1/					<u> </u>
Roden, Neal	Area 7 Business	V:				† · · · · · · · ·	
Ross, Garrett	Area 1 Residential				V		
Sales, Kristin	Area 1 Community				<u></u>		
Steinberg, Sue	Area 4 Business	W	,				
Ziff, Ron	Area 6 Business					1	
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Quorum: 11 We, the Treasurer and the Second Signer and that a public meeting was held in accordance.	_	orhood Counci	il, declare that the	•			and complete,
compliant public meeting where a quorun	· · · · · · · · · · · · · · · · · · ·		4		1.		
Print/Type Name: Tom Capps Date: 2.12	ppe		Second Signer's		M	talsof	
Print/Type Name: I om Capps			Print/Type Name	_{e:} Jeff Har	tsough	 	
Date: 2.12.	.18		Date:		02	-12-2018	

INVOICE

LOS ANGELES UNIFIED SCHOOL DISTRICT

CIVIC CENTER PERMIT OFFICE 333 S. BEAUDRY AVE., 1ST FLOOR LOS ANGELES, CA 90017

Charge to:

RON ZIFF PO BOX 5721 SHERMAN OAKS, CA 91413

Date: 01 MAR 2

Permit No. S52

SHERMAN OAKS NEIGHBORHOOD COUNCIL (RON ZIFF)

DESCRIPTION OF CHARGE	AMOUNT
USE OF THE AUDITORIUM AT Sherman Oaks El CS FOR BOARD MEETING ON MONDAYS. TIME: 5:30PM-10:00PM MAR. 12, 2018 APR. 09, 2018	\$656.00
MAY. 14, 2018 JUN. 11, 2018	
City Excise Tax	\$1.48
PLEASE MAKE CASHIER'S CHECK OR MONEY ORDER PAYABLE TO:	
LOS ANGELES UNIFIED SCHOOL DISTRICT	
Mail to: NATALIE DIRIAMONDO	
BALANCE DUE	\$657.48
	USE OF THE AUDITORIUM AT Sherman Oaks El CS FOR BOARD MEETING ON MONDAYS. TIME: 5:30PM-10:00PM MAR. 12, 2018 APR. 09, 2018 MAY. 14, 2018 JUN. 11, 2018 PERMIT SUBJECT TO CANCELLATION IF FULL PAYMENT NOT RECEIVED SEVEN DAYS IN ADVANCE OF USE. PLEASE MAKE CASHIER'S CHECK OR MONEY ORDER PAYABLE TO: LOS ANGELES UNIFIED SCHOOL DISTRICT

"PERMITEE RESPONSIBLE TO VERIFY ALL DATES ON INVOICE"

"CHANGES MADE TO THIS INVOICE WILL RESULT IN \$78 AMENDMENT FEE" *DATES ON THIS INVOICE REFLECT INSURANCE EXPIRATION DATE*

Department of Neighborhood Empowerment **Funding Request Form** NC NAME: Sherman Oaks 2017-18 **Budget Fiscal Year:** Requestor: Tom Capps Treasurer Request Date: 10-Jul-17 Los Angeles Unified School Distric Vendor: Meeting Date: 7/10/2017 Address: Agenda Item: Item 8H Los Angeles City: State: Zip Code: Phone: ☑ Operations Outreach NC Sponsored Event ☐ Neighborhood Purpose Grant Up to \$1,020 □Contract / Lease ☐ Board Member Reimbursement Amount:\$ ☐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 | Approve up to \$1,020 to pay Los Angeles Unified School District for SONC Board Meeting & PLUM space rental during Fiscal Year 2017-Description 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 Ineligible Babian, Avo Area 5 Business Banks Barad, Jill Area 6 Residential Baronian, Levon Area 1 Business Binkow, Michael Area 7 Residential 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 Ross, Garrett Area 1 Residential Marciniak, Richard Area 3 Community Interest 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 Sales, Kristin Area 1 Community Interest Lawrence, Tish Area 2 Business Steinberg, Sue Area 4 Business Ziff, Ron Area 6 Business

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.

Grand Total (including page 2):

NC Quorum:

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: Tom Capps Print/Type name: Jeff Harsough -10-2017 Date (mm/dd/yy): Date (mm/dd/yy): Contract ☐ Advanced Payment □ Approved Authorization Code Staff Initials □ 1st Level **Department Use Only** >\$2 500 NPG Sponsored Event Denied 2nd Level



INVOICE

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

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,

BILL TO:

SHERMAN OAKS NEIGHBORHOOD COUNCIL

P.O. BOX 5721

SHERMAN OAKS, CA 91413

Thank you for choosing Lloyd Staffing

PO#

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:	."	
02/18/2018	402209	1	117247	Due Upon Recei	pt	
PERIOD	DESCRIPTION & EMPLOYEE		HOURS	RATE	AMOUNT	
02/12/18-02/18/18	EXASST S	Salter, Jolie A		10.00	21.85	\$218.50
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Thank you for your part in our F	Placements with a Purpose program. E	very placement	PAY THIS A	AMOUNT >	TOTAL	\$218.50
generated by LLoyd supports J	DRF with a donation to help fight diabe	ites.		<u>.</u>		

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EMPLOYEE INFORMATION

This includes required eigentures by yoursell and authorized sepresantative of the ofens. to erold delays be sure timesheets are completely filled our

OVERTIME
You are parritted to work overfine only with the request and
approval of the clear. Approval must be obtained from us by
the clear. WORK WEEK Work in excess of (40) forty hours in a work wood (Monday-Sunday) will be paid at one and one-had (1-1/2) your regular rate.

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ABSENCES - LATENESS Cast us immediately if you must be absent or late. Do not cast

Pro client, LLOYD STAFFERS was call the client,

DA-THE-JOB SAFETY

Employee certifies no accident or injury was austained while working on the assignment that has not been previously reported to the Human Resources office at Libys.

TRAINING

You must complete the Training Orientation every lime you go So a fow assemble

TENES & CONDITIONS FOR LLOYD STAFFING

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Department of Neighborhood Empowerment Funding Request Form NC NAME: Sherman Oaks **Budget Fiscal Year:** 2017-18 Tom Capps Treasurer Requestor: Request Date: 10-Jul-17 Lloyd's Staffing Vendor: Meeting Date: 7/10/2017 Address: Item 8J Agenda Item: State: City: Zip Code: Phone: ☑Operations Outreach □NC Sponsored Event ☐ Neighborhood Purpose Grant Up to \$4,500.00 Amount:\$ □Contract / Lease ☐ Board Member Reimbursement Community Improvement Project ☑ Out of State 1099 Expense One Time Expense ☑ Monthly # of payments 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 Approve up to \$4,500 to pay Lloyd's Staffing for SONC Administrative Assistant hours worked during Fiscal Year 2017-2018 Description 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** No Abstain *Recused Ineligible Yes Absent Babian, Avo Area 5 Business Banks Barad, Jill Area 6 Residential Baronian, Levon Area 1 Business Binkow, Michael Area 7 Residential 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 Ross, Garrett Area I Residential Marciniak, Richard Area 3 Community Interest 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 Sales, Kristin Area 1 Community Interest Lawrence, Tish Area 2 Business Steinberg, Sue Area 4 Business Ziff, Ron Area 6 Business Grand Total (including page 2): NC Quorum: We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action. Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically, i.e. no additional Cash Request Form is required. Treasurer's Signature: Signer's Signature: Print/Type name: Tom Capps Print/Type name: Jeff Harsough Date (mm/dd/yy): Date (mm/dd/yy): Contract ☐ Advanced Payment □ Approved Staff Initials Authorization Code T1st Level Department Use Only □NPG □Sponsored Event >\$2.500 Denied 2nd Level

Invoice

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

Date	Invoice #	Due Date		
3/1/2018	16285	3/1/2018		

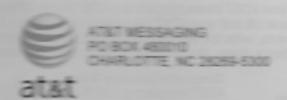
Bill To
Sherman Oaks NC
Tom Capps
PO Box 5721
Sherman Oaks, CA 91413

		P.O. No.	Terms	Project
Quantity	Description		Rate	Amount
1	Monthly Maintenance: includes up to 1 hour for; web development, requests, & website adjustme Email accounts (2 included) Total 3 for shermanoaksnc.org		99.00	99.00
	payment at your earliest convenience. your business!	Total	\$102.50	
THAIR YOU TO	, co. 200000.		Payments/Cred	dits \$0.00
			Balance Due	\$102.50

Department of Neighborhood Empowerment Funding Request Form



Budget Fiscal Yea	r.	Sherman Oaks 2017-18		Requestor:		Tom Capps Tr	easurer	
Request Date:	10-Jul-17	2017-18		Vendor:		The Web Co		
Meeting Date:	7/10/2017			Address:		THE WEB C	orner	
Agenda Item:		Item 8E		City:		State	::	
Operations 2	Outreach DNC	Sponsored Event Neighborhood Purpo	ose Grant	Zip Code:		Phone:		
Contract / Lease	☐Board Membe	er Reimbursement Community Improve	ment Project	Amount:\$		Up to \$1	,400.00	
☐Out of State	□1099 Expense	☐One Time Expense ☑Monthly	□Multip	ole # of paym	ents			
		aily \$1,000 limit is required for this re						
		nount needed for the daily limit to be ove up to \$1,400 to pay The Web Corner for		te hosting and m	aintenance and	d one extra SON	C domain ema	il during Fisca
Des	scription			ear 2017-2018				
			Marie Charle					
*Recuse	ed-Roardmember	Vote Count (Continued of must leave the room prior to any discu				intil after the v	ote is comple	eted.
Board Member N	lame	Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
Babian, Avo		Area 5 Business	/					
Banks Barad, Jill		Area 6 Residential	/					
Baronian, Levon		Area 1 Business	/					
Binkow, Michael		Area 7 Residential						
Capps, Tom		Area 2 Residential						
Harsough, Jeff	NA	Area 2 Community Interest						
Kalban, Jeff		Area 7 Community Interes						
Katchen, Howard		Area 3 Residential						
Lax, Sidonia		Area 4 Community Interest	/					
Ross, Garrett		Area 1 Residential	/_					
Marciniak, Richard	i	Area 3 Community Interest	2				X	
Menard, Melissa		Area 6 Community Interest	V					
Morozov, Rafael		Area 3 Business						
Petrus, Lisa		Area 4 Residential	/					
Revord, Sherri		Area 5 Community Interest	V.					
Roden, Neal		Area 7 Business	1		X			
Sales, Kristin		Area 1 Community Interest	·/					
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	
		e above indicated Council, declare that ance with the Brown Act, where with a c						
Control of the Contro		Funding Request submitted, the Departr tional Cash Request Form is required.	nent will tran	sfer the reque	sted amount	into the Neigh	borhood Cou	ncil's checki
Trea	surer's Signature:	Jom Capps		Signer's Si	ignature:	X	Hartson	-
				2000 CONTRACTOR (CONTRACTOR)		U		
	Print/Type name:	Tom Capps		Print/Typ	oe name: Jef	f Harsough		



CUSTOMER NUMBER

8607823

INVOICE DATE

03/01/2018 Page 1 of 1

Bill-To Customer:

SHEPBURN CHAS NO PO-BOX 5721 SHEPWAN DAKS, CA 91413-5721

Part Profession - Profession -

Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
8607823	03/01/2018 03/31/2018	03/30/2018	\$15.26	\$15.26	\$.00	\$15.26	\$15.26

Payments - Thank You

Description of Current Charges & Credits

TM Standard-Discount Rate

EDE5032399

Ching Utility Users Tax

02/21/2018

\$15.26

Qty Unit Price March service 1

Ext. Price \$14.00

\$14.00

\$1.26

CONTRACT	NAME OF THE OWNER, THE						
8607823							
WHOCE	NUNGER						
7355	635						
DUE DATE	AMOUNT PAID						
03/30/2018							

SHERMAN OAKS NO PO BOX 5721 SHERMAN OAKS, CA 91413-5721 REMIT TO:

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

01001 8607823000000000001526

Department of Neighborhood Empowerment Funding Request Form NC NAME: Sherman Oaks **Budget Fiscal Year:** 2017-18 Requestor: Tom Capps Treasurer Request Date: 10-Jul-17 Vendor: 7/10/2017 Meeting Date: Address: Agenda Item: Item 8F City: State: ☑ Operations Outreach □NC Sponsored Event Zip Code: Phone: Neighborhood Purpose Grant Contract / Lease ☐ Board Member Reimbursement Amount:\$ Up to \$200.00 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: Approve up to \$200 to pay AT&T for SONC Voice Mail messaging service during Fiscal Year 2017-2018 Public Benefit Description 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 Babian, Avo Area 5 Business Banks Barad, Jill Area 6 Residential Baronian, Levon Area 1 Business Binkow, Michael Area 7 Residential 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 Ross, Garrett Area 1 Residential Marciniak, Richard Area 3 Community Interest 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 Sales, Kristin Area 1 Community Interest Lawrence, Tish Area 2 Business Steinberg, Sue Area 4 Business Ziff, Ron Area 6 Business Grand Total (including page 2): NC Quorum: We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action. Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically, i.e. no additional Cash Request Form is required. Treasurer's Signature: Signer's Signature: Print/Type name: Tom Capps Print/Type name: Jeff Harsough Date (mm/dd/yy): Date (mm/dd/yy): Approved Staff Initials 1st Level Authorization Code Department Use Only >\$2.500 □NPG □Sponsored Event Denied 2nd Level



Please remit payment to:
LLoyd Staffing
445 Broadhollow Road, Suite 119

Melville, NY 11747 Billing inquiries: 631-370-7433 INVOICE

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

Credit cards accepted:







Attention of: Tom Capps,

BILL TO:

SHERMAN OAKS NEIGHBORHOOD COUNCIL

P.O. BOX 5721

SHERMAN OAKS, CA 91413

Thank you for choosing Lloyd Staffing

PO#

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:				
02/25/2018	402322	1	117247	Due Upon Recei	pt			
PERIOD	DESCRIPTION & E	EMPLOYEE		HOURS	RATE	AMOUNT		
02/19/18-02/25/18	EXASST	Salter, Jolie A		6.00	21.85	\$131.10		
					,			
					i I			
				C				
Thank you for your part in our F	Placements with a Purpose program. DRF with a donation to help fight dia	Every placement	PAY THIS A	MOUNT >	TOTAL	\$131.10		

AINHOHI TVS

المحدود Clerch Borches 1 the office after completing the Analysis and the state has been need and other for me. I agree that if I do concerning the upon completion of an explosion they can extract an not excludible. Which prints of a pay emercine of the form by the destructions are effected for 100M, have been event in a bish are convert in a bish of contract of the second payment of a processed by the Charles the TERMS and CHARLEST prints of prints of contract of the second contract of Wines, Temporary Assissing must indicate they have O Policy & Proceeding Series thereby early and the hear was an even by an dubly the ware and a second form, and have properly early and in with the indicated and the most by search that the best and the season of the statement of the season in so coro is call lays stating franciskip when seignment and a man managed one in the no largor analyzin for more 会にた ススタウアトニュ ファクシン "GAZ" O John Bank Straight O HOSING The following Character Patring on this sellynment. [Planes chars.] Sherman Bars ê . 1 ≢ O The Property Contract of the Party of the Pa FIRST TIME AT THIS CLEAN CONDAINT \ \ ; वाक्ष COMPANY KANE Simbonia di SOUR SECRETARY **ENTRACE** A CONTRACTOR AND A STATE OF THE Mary Mary X TO MAKE THE 1:000 Artistle Bourseaug S. 79 A. EMPLOYEE PLEASE COMPLETE - By auny to Indicate AM or I 格里 ě THEN Ž, 2 Us mando de pedeste ser emberest. Un Grinkli d'espad des endest do ann d'an filipi s'et. Une ilian des wie electrocome, messivolite cops en Z 300 ž 2 MO ž TAKE IN the part transmissal in warmer without material Mileton and the same of 2 × Mathematics. 22 E E. 7 ä

EMPLOYEE IMPORMATION

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OVERTIME

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media of wassing and by your supervisor of the modern of the control of the contr you are assigned. When working a full cay, the law recoins a

ABSENCES - LATEMESS

Oill us immediately if you must be absent or late. Do not sail the clear, LLOYD STAFFING will call the clear.

Employee certies to accident or injury was sustained while working on the assignment that has not been previously reported ON-THE-JOB SAFETY

to the Furnan Resources office at LLoyd.

You must earnpies the Training Orientation every first you go Manual Control MAINING

TERUS A COMPITIONS FOR LLOYD STAFFING

184 of the breat-series were with the work was partitioned in additionary market, which is produced to the block of the following the series of the produced o Carly of all an authorized in although on backet of the carly and Company of Department, the total boars shown on the remainder

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Department of Neighborhood Empowerment Funding Request Form NC NAME: Sherman Oaks **Budget Fiscal Year:** 2017-18 Tom Capps Treasurer Requestor: Request Date: 10-Jul-17 Lloyd's Staffing Vendor: Meeting Date: 7/10/2017 Address: Item 8J Agenda Item: State: City: Zip Code: Phone: ☑Operations Outreach □NC Sponsored Event ☐ Neighborhood Purpose Grant Up to \$4,500.00 Amount:\$ □Contract / Lease ☐ Board Member Reimbursement Community Improvement Project ☑ Out of State 1099 Expense One Time Expense ☑ Monthly # of payments 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 Approve up to \$4,500 to pay Lloyd's Staffing for SONC Administrative Assistant hours worked during Fiscal Year 2017-2018 Description 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** No Abstain *Recused Ineligible Yes Absent Babian, Avo Area 5 Business Banks Barad, Jill Area 6 Residential Baronian, Levon Area 1 Business Binkow, Michael Area 7 Residential 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 Ross, Garrett Area I Residential Marciniak, Richard Area 3 Community Interest 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 Sales, Kristin Area 1 Community Interest Lawrence, Tish Area 2 Business Steinberg, Sue Area 4 Business Ziff, Ron Area 6 Business Grand Total (including page 2): NC Quorum: We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action. Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically, i.e. no additional Cash Request Form is required. Treasurer's Signature: Signer's Signature: Print/Type name: Tom Capps Print/Type name: Jeff Harsough Date (mm/dd/yy): Date (mm/dd/yy): Contract ☐ Advanced Payment □ Approved Staff Initials Authorization Code T1st Level Department Use Only □NPG □Sponsored Event >\$2.500 Denied 2nd Level

DEPARTMENT OF RECREATION

BOARD OF COMMISSIONERS

SYLVIA PATSAOURAS PRESIDENT

LYNN ALVAREZ

MELBA CULPEPPER MISTY M. SANFORD PILAR DIAZ

ARMANDO X. BENCAMO BOARD SECRETARY (213) 202-2640

CITY OF LOS ANGELES

CALIFORNIA



MICHAEL A. SHULL GENERAL MANAGER

ANTHONY-PAUL (AP) DIAZ, ESQ. EXECUTIVE OFFICER & CHIEF OF STAFF

VICKI ISRAEL ASSISTANT GENERAL MANAGER

RAMON BARAJAS ASSISTANT GENERAL MANAGER

221 N FIGUEROA ST. 3RD FLOOR, SUITE 350, LOS ANGELES, CA 90012 (213) 202-2633, FAX (213) 202-2614

> LAPARKS.ORG PARK PROUD LA

Invoice No.	Customer ID	Invoice Date	Due Date	Amount Due
Revised 17081		7/26/2017	8/25/2017	\$2,574.00

Revised 17081 7/26/2017 8/25/2017 \$2,574.00

Line Description Line Amount

Event Name:

Movie Night

4DM 10DM

\$2,574.00

Event Date:

6/24, 7/29, 8/26/2017

4PM - 10PM

Held at:

Van Nuys Sherman Oaks R C

Permit No. :

I hereby certify that the above is correct

(Chief Accounting Employee)

Failure to remit the amount demanded may subject to penalty and interest that varies per contract agrrement.

If you have any question concerning this invoice, please contact Teresa Ge at (213) 202-4396

Email address: teresa.ge@lacity.org

Retain this portion for your records

Return this portion with your payment

Remit To:

City of Los Angeles Dept. of Recreaction and Parks Revenue Accounting Section MS 625-8A P O BOX 86328 Los Angeles, CA 90086-0328

Bill To:

Sherman Oaks Neighborhood Council Tom Capps PO BOX 5721 Sherman Oaks, CA 91413

Invoice Number	Customer II
Revised 17081	

Invoice Date	Invoice Due Date
7/26/2017	8/25/2017

Amount Due	Amount Enclosed
\$2,574.00	



City of Los Angeles

DEPARTMENT OF RECREATION AND PARKS

P O BOX 86328 Los Angeles, CA 90086

Los Angeles, CA 90086 (213) 202-4396 MS 625-8A

INVOICE NO. Revised 17081 Invoice Date: 7/26/2017 TO: Sherman Oaks Neighborhood Council ATTN: Tom Capps 8/25/2017 Due: PO BOX 5721 Sherman Oaks, CA 91413 0 Permit No. Event Name: Movie Night 4PM - 10PM TOTAL AMOUNT DUE: \$2,574.00 Event Date 6/24, 7/29, 8/26/2017 301 301 302 302 Fund 88 89 88 88 Dept MRPXX458 MRPXX965 SP89X401 **Work Order RAPX6523** 000 000 000 000 Task 000 000 000 000 Sub-Task 4155 4155 4155 4145 Dept. Revenue Source 4515 4515 4515 4512 Central Rev. Source \$ 184.32 \$ 2,092.08 \$ 27.60 \$ 270.00 Amount

Please remit payments to:

Dept. of Recreation & Parks
Revenue Accounting Section
P O BOX 86328
Los Angeles, CA 90086-0328
(Please indicate the Invoice # on your remittance)

^{*}For proper credit, please include <u>Invoice No., Dept., Fund, Dept. Rev. Source, Work Order</u> on your payment document.

DEPARTMENT OF RECREATION AND PARKS INTER-OFFICE CORRESPONDENCE

REQUEST FOR BILLING

	DATE :07/26/2017
TO : Revenue Acco Mail Stop 625-	
	NUYS SHERMAN OAKS RC ALLEYRegion #(818) 783-5121 MS #
Please issue an invoice for th	ne following event:
	S SHERMAN OAKS RC Permit #
Event Name:	MOVIE NIGHT
Event Date/s:	6/24, 7/29, 8/26 2017 Hours: 4PM-10PM
Contact Person: Address:	SHERMAN OAKS NEIGHBORHOOD COUNCIL TOM CAPPS PO BOX 5721 SHERMAN OAKS, CA 91413 (818) 503-2399 ()
	Total Amount Due: \$ 2574.00
Account Distribution:	
To General Fund 302/88	\$
To Special Fund 302/89	\$30.00 \$
To MRP Fund 301/88	\$2274.00
A copy of the Interdepartment The Internal Voucher (IV) with INVOICE/BILLING #	

Notes on Summer Series Submittal

Tuesday, March 13, 2018 11:15 AM

The SONC Series events was comprised of three movies in the VNSO Park - 6/24/17, 7/24/17 and 8/26/17. The original budget was \$11,610. The majority of the funds for the event were to be paid by SONC and the remaining balance by CD 4 discretionary funds.

As the Summer Series event overlapped fiscal year 16-17 and 17-18, a Funding Request was approved for up to \$5,000 for FYE 16-17. In Fiscal Year 17-18, two additional Funding requests were approved at the July 10,2017 -board meeting one for \$5,000 and another for \$1,000.

Overall, SONC committed \$11,000 over the two fiscal years to the event(s) as the payment of discretionary funds by CD 4 was not certain. In fact, in CD 4 did not pay any funds from the discretionary funds but by CF 17-0883, \$2,610 was credited to the SONC annual allocation. A budget revision was approved by the full board on 12/11/2017 and has been submitted to the funding portal.

The final outstanding invoice is to Department of Parks and Recreation for \$2,574 for services rendered for all three movie events, including the 6/24/17 held in FY 16-17.

As this invoice pushed the total expenses over the total amount approved by the SONC Board, a third BAC was approved on March 12, 2018 for up to \$250.

All supporting documentation is attached and I hope will assist you in understanding the flow of approvals and expenditures for this event.

Tom Capps
Treasurer
Sherman Oaks Neighborhood Council

Office of the City Clerk				- W		34	Jac ()
Administrative Services Division				Q#		91	
Neighborhood Council (NC) Funding Prog	ram					, ş	THE COLUMN
Board Action Certification Form							The state of the s
NC Name: Sherman Oaks			Meeting Date: N				
Budget Fiscal Year: 2017-2018 Board Motion and/or Public Benefit	T		Agenda Item No				
Statement (CIP and NPG):	Motion to incease t board action votes requested to pay D	for the 2017	Summer Se	ries Movies	events. Incr	ease in total	funding is
Method of Payment: (Select One)	☐ Check		☐ Credit Card		☐ Board	d Member Reimb	ursement
Recused Boardmembers n	nust leave the room prior t	Vote Co o any discussion		turn to the roo	n until after the	vote is complete	•
Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Babian, Avo	Area 5 Business						
Banks-Barad, Jill	Area 6 Residential						
Baronian, Levon	Area 1 Business						
Binkow, Michael	Area 7 Residential	<u>/</u>			-		
Capps, Tom	Area 2 Residential	/					
Hartsough, Jeffrey	Area 2 Community	V					
Kalban, Jeffrey	Area 7 Community						
Katchen, Howard	Area 3 Residential						
Lax, Sidonia	Area 4 Community				/ ·		
Marciniak, Richard	Area 3 Community						
Mernard, Melissa	Area 6 Community	/ .					
Morozov, Rafael	Area 3 Business	/					
Petrus, Lisa	Area 4 Residential						
Revord, Sherri	Area 5 Community						
Roden, Neal	Area 7 Business						
Ross, Garrett	Area 1 Residential	/					
Sales, Kristin	Area 1 Community						
Steinberg, Sue	Area 4 Business	/	•		:		
Ziff, Ron	Area 6 Business	1					
VACANT	Area 2 Business						
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Quorum: 11	Total:	13	0	0	6	0	r)

compliant public meeting where a quorum of the Board was present. 111 1 1

Treasurer Signature Comp (AQA)	Second Signer's Signature
Print/Type Name: Tom Capps	Print/Type Name: Jeff Hartsough
201 1 10 2012	Date: 03-12-2018

Department of Neighborhood Empowerment Funding Request Form NC NAME: Sherman Oaks **Budget Fiscal Year:** 2017-18 Requestor: Tom Capps Treasurer Request Date: 12-Jun-17 Vendor: Various Meeting Date: 6/12/2017 Address: Agenda Item: Item 9 C Sherman Oaks City: State: Operations **☑**Outreach Zip Code: 91403 □NC Sponsored Event Phone: Neighborhood Purpose Grant ☐ Board Member Reimbursement Amount:\$ Up to \$5,000 Contract / Lease ☐Community Improvement Project Out of State ☐1099 Expense ☑One Time Expense # of payments 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 | Approve two movie events at VNSO Park on July 29 and August 26, 2017 and expenditures of up to \$5,000 for the event costs including but not limited to screen rental, movie license fees, associated park fees and outreach material. Description 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 Babian, Avo Area 5 Business Banks Barad, Jill Area 6 Residential Baronian, Levon Area 1 Business Binkow, Michael Area 7 Residential 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 Ross, Garrett Area 1 Residential Marciniak, Richard Area 3 Community Interest 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 Sales, Kristin Area 1 Community Interest Lawrence, Tish Area 2 Business Steinberg, Sue Area 4 Business Ziff, Ron Area 6 Business Grand Total (including page 2): NC Quorum: We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action. Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically, i.e. no additional Cash Request Form is required. Treasurer's Signature: Signer's Signature: Print/Type name: Tom Capps Print/Type name: Jeff Harsough Date (mm/dd/yy): Date (mm/dd/yy): 7.18.17 Authorization Code Approved Staff Initials Department Use Only SONC-17732 >\$2,500 NPG Sponsored Event Denied JΝ

Department of Neighborhood Empowerment Funding Request Form NC NAME: Sherman Oaks **Budget Fiscal Year:** 2017-18 Requestor: Tom Capps Treasurer Request Date: 10-Jul-17 Vendor: Various Meeting Date: 7/10/2017 Address: Agenda Item: Item 8P City: Sherman Oaks State: Phone: Zip Code: Operations Outreach ☑NC Sponsored Event Neighborhood Purpose Grant □Contract / Lease Board Member Reimbursement Amount:\$ Up to \$5,000.00 Community Improvement Project Out of State ☑One Time Expense 1099 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 Re-certify the funding request for up to \$5,000 for the Summer Series events at VNSO Park on July 29 and August 26, 2017 Description 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 Ineligible Babian, Avo Area 5 Business Banks Barad, Jill Area 6 Residential Baronian, Levon Area 1 Business Binkow, Michael Area 7 Residential 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 Ross, Garrett Area 1 Residential Marciniak, Richard Area 3 Community Interest 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 Sales, Kristin Area 1 Community Interest Lawrence, Tish Area 2 Business Steinberg, Sue Area 4 Business Ziff, Ron Area 6 Business Grand Total (including page 2): NC Quorum: 11 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: Tom Capps Print/Type name: Jeff Harsough Date (mm/dd/yy): 07-10-2017 Date (mm/dd/yy): Contract Advanced Payment □ Approved Authorization Code Staff Initials T1st Level Department Use Only >\$2,500 □NPG □Sponsored Event Denied

2nd Level

Department of Neighborhood Empowerment Funding Request Form NC NAME: Sherman Oaks **Budget Fiscal Year:** 2017-18 Requestor: Tom Capps Treasurer Request Date: 10-Jul-17 Vendor: Various Meeting Date: 7/10/2017 Address: Agenda Item: Item 80 Sherman Oaks State: City: Phone: Zip Code: Operations Outreach ☑NC Sponsored Event Neighborhood Purpose Grant Up to \$1,000 □Contract / Lease ☐ Board Member Reimbursement Amount:\$ Community Improvement Project Out of State ☐1099 Expense ☑One Time Expense Monthly # of payments 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 | Approve an additional \$1,000 to the previously approved \$5,000 for the Summer Series Movie events to be held at Van Nuys-Sherman Oaks Park on July 29 and August 26, 2017 Description 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 Ineligible Absent Babian, Avo Area 5 Business Banks Barad, Jill Area 6 Residential Baronian, Levon Area 1 Business Binkow, Michael Area 7 Residential 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 Ross, Garrett Area 1 Residential Marciniak, Richard Area 3 Community Interest 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 Sales, Kristin Area 1 Community Interest Lawrence, Tish Area 2 Business Steinberg, Sue Area 4 Business Ziff, Ron Area 6 Business Grand Total (including page 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: Jeff Harsough Print/Type name: Tom Capps 07-10-2017 Date (mm/dd/yy): Date (mm/dd/yy): 7.20.17 Authorization Code Advanced Payment □ Approved Staff Initials **Department Use Only** □>\$2,500 □NPG ☑Sponsored Event Denied SONC-17732 JH

Office of the City Clerk							~()
Administrative Services Division						3	
Neighborhood Council (NC) Funding Pro	gram					5	To the
Board Action Certification Form				40/44/47			9
NC Name: Sherman Oaks			Meeting Date:				
Budget Fiscal Year: 2017-2018 Board Motion and/or Public Benefit			Agenda Item No: ^{9C}				
Statement (CIP and NPG):	Amend and incre to \$44,610 for ar event as approve	n additiona	l appropriati	on of \$2,61			
Method of Payment: (Select One)	☐ Check		☐ Credit Card		☐ Boar	d Member Reimb	ursement
Recused Boardmembers	must leave the room prior		Count on and may not re	eturn to the roor	n until after the	vote is complete.	
Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Babian, Avo	Area 5 Business	/					
Banks-Barad, Jill	Area 6 Residential				X		
Baronian, Levon	Area 1 Business				X		
Binkow, Michael	Area 7 Residential	/					
Capps, Tom	Area 2 Residential	/					
Hartsough, Jeffrey	Area 2 Community	1					
Kalban, Jeffrey	Area 7 Community	1/					
Katchen, Howard	Area 3 Residential				X		
Lax, Sidonia	Area 4 Community	1					
Marciniak, Richard	Area 3 Community	1/					
Mernard, Melissa	Area 6 Community	1/					
Morozov, Rafael	Area 3 Business				X		
Petrus, Lisa	Area 4 Residential				X		
Revord, Sherri	Area 5 Community	N					
Roden, Neal	Area 7 Business	V					
Ross, Garrett	Area 1 Residential	N					
Sales, Kristin	Area 1 Community	1					
Steinberg, Sue	Area 4 Business	70			X		
Ziff, Ron	Area 6 Business	W					
VACANT	Area 2 Business						
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18.							
Quorum: 11	Total:	13			6		
We, the Treasurer and the Second Signer and that a public meeting was held in acc	ordance with all laws, polici	es, and proced	il, declare that the ures. The above w	information pre as approved by t	sented on this fo he Neighborhoo	orm is accurate an	d complete, at a Brown Act
compliant public meeting where a quorur	n of the Board was present.				. 1	1 , ,	
Treasurer's Signature home	K Capps		Second Signer's		W	the Bough	
Print/Type Name: Tom Capps			Print/Type Nam	e: Jeff Har	tsough		
Date: 12 · 11	·17		Date:		12-	11-2017	



NEIGHBORHOOD EMPOWERMENT

200 N. Spring Street, 20th FL, Los Angeles, CA 90012 • (213) 978-1551 or Toll-Free 3-1-1

E-mail: EmpowerLA@lacity.org www.EmpowerLA.org



NEIGHBORHOOD COUNCIL EVENT APPROVAL FORM

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, and the Department of Neighborhood Empowerment must approve a Neighborhood Council sponsored event before any funding payments can be executed. Please complete and sign this form and submit to the Department at least 30 days before the day of the event. The Department will typically take 3-5 days to review and approve the event. Once approved, the Neighborhood Council can begin spending.

Neighborhood Council: Sherman Oaks	
The Neighborhood Council is the ■ Main Sponsor or □ Co-Sponsor Sherman Oaks Neighborhood Council	for the event. # 6, 000 FRF BY TWO FRFS 5 00 +1,00
Contact Person: Tom Capps	
Contact Person: Tom Capps Phone: (818) 601-7971 Email: tcap	ps@shermanoaksnc.org
Co-Sponsor (if applicable):	
Contact Person:	
Phone: Email:	
Event Information	
Type of Event (festival, movie night, etc.): Movie Night	
Date: 06/24/17 Time Frame: 6pm-10pm Est. number	of attendees:Event Amount:
Venue Name: Van Nuys/Sherman Oaks Recreation Center	
Venue Name: Van Nuys/Sherman Oaks Recreation Center Venue Address: 14201 Huston Street, Sherman Oaks, California 914	23
Contact Person: Art Gomez	
Phone: (818) 783-5121	
Please note: If the location for the event is at City facility, e.g. park, cost. If the location for event is not a City facility, a separate contract	the location approval may be easier and at little or no
Documents scanned and emailed to $\underline{EmpowerLA.Funding@lacity}$	y.org for Department approval PRIOR to event:
 Neighborhood Council Event Approval Form – Completed and signed 	ed by Treasurer or Second Signatory
 <u>Funding Request Form</u> – Completed and signed by Treasurer and S 	Second Signatory
 Itemized Detailed Event Budget – Total budget with funding categor with specific vendors if available. Once approved, the Department v Neighborhood Council account automatically, i.e. no additional Casl 	will transfer the amount of the event budget into the
□ If a bank card exemption of the daily \$1,000 limit is required for needed for the daily limit to be lifted:	r this event, please provide the date(s) and amount
Please note: Missing or incomplete required documents will delay De	epartment 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. Please contact the Department Funding Team if you are unsure what your Neighborhood Council event may need. The following must be obtained PRIOR TO THE **EVENT** if they are applicable to your event:

If FOOD is being	purchased/provided/distributed/serve	d at your event, yo	u mav be re	quired to obta	in the	following
documents:	• 50.00000					

- □ 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 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
- Risk Management (213) 978-7475
- LAPD (213) 486-0410
- LAFD (213) 978-3650
- Sanitation (213) 485-3612
- Street Services http://bsspermits.lacity.org/spevents/
- LADOT (Special Operations) (323) 224-2124 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 Completed and signed by Treasurer or Second Signatory
- □ 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 Som Capps	Date: 5-11-201'	7
Signature: Tom Capps Print Name: Tom Capps	Title: Treasurer	
Email : tcapps@shermanoaksnc.org	Phone: (818) 601-7971	
Department Use Only. Approval Code:Cash Request Process Date:	Staff:Bank Card Exemption Process Date:	Rev 01/06/15

Sherman Oaks Neighborhood Council (SONC) 2017 SONC Summer Series Movies in the Park

Working Budget June 23, 2017

Scope:

SONC will screen three (3) movies as part of the 2017 SONC Summer Series.

Movies will screen on June 24th, July 29th, and August 26th, 2017, at the Van Nuys
Sherman Oarks War Memorial Park (VNSO). The SONC mission and programs
will be highlighted and community participation invited.

Movies will be open to the community and free. Prior to the movies families are encouraged to have a picnic supper and participate in pre-movie activities. Popcorn and other refreshments will be available for purchase.

Budget:

The budget provided below is projected to be the same for each of the three movies. Expenses are broken down between SONC direct expenses and expenses that SONC anticipates will be covered by the CD4 Discretionary Fund.

Contact: Questions should be directed to: Jeffrey Hartsough

jeffrey.hartsough.SONC@gmail.com

DESCRIPTION	Amount
SONC Expenditures	
Screen and Projection	\$1,300.00
Movie and Licensing Fee	650.00
Entertainment	
On site music, characters, activities, etc	600.00
Giveaways / Branding	200.00
Promotion	150.00
Refreschments	100.00
Sub-Total SONC	\$3,000.00
CD4 Discretionary Fund Expenditures	
LA RAP Staff and Support	
Recreation Center Staff	\$320.00
Maintenance	350.00
Open Space Permit Fee	100.00
Clean-Up Deposit	100.00
Sub-Total Discretionary	\$870.00
Total Per Movie Expenditures	\$3,870.00
Total for 2017 SONC Summer Series 3 Movies	
SONC Expenditures	\$9,000.00
CD4 Discretionary Funds	2,610.00
Grand Total	\$11,610.00

SONC MOVIE BUDGET BREAKDOWN

	16-17	17-18	17-18	
	6/24/2017	7/29/2017	8/26/2017	
SONC EXPENDITURES FY 17-18	SING	MOANA	BEAUTY /BEAST	TOTAL
Screen and Projection Fee	0.00	1,300.00	1,300.00	2,600.00
Movie Licensing Fee	0.00	0.00	0.00	0.00
Entertainment				
Moana Princess	0.00	295.00	-	295.00
Best Bubbles	0.00	225.00	225.00	450.00
Give-Ways with SONC BRANDING	0.00	46.98	0.00	46.98
Promotions (Postcard / Flyer/Printed Material)	0.00	0.00	0.00	0.00
Refreshments (Bottle Water/F Volunteers)	0.00	85.33	57.68	143.01
Park Fees (BALANCE TO BE PAID)	858.00	858.00	858.00	2,574.00
TOTAL	858.00	2,810.31	2,440.68	6,108.99
TOTAL MOVIE SERIES BUDGET	858.00	2,810.31	2,440.68	6,108.99
Decard Apparent # 1 June 12 2017 FOR EV 17 16	,			F 000
Board Approval # 1- June 12, 2017 FOR FY 17-18	,			5,000
Board Approval #2 - July 10, 2017				1,000
SHORT FALL				108.99
March 12, 2018 Motion for additional Funds				
Up to \$250.00 to pay Park Fees and any additional expenditures for Summer Series				\$250.00
TOTAL ALLOCATION				6,250.00