

# Monthly Expenditure Report



Reporting Month: November 2020 Budget Fiscal Year: 2020-2021

NC Name: Sherman Oaks  
Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$49238.97	\$1873.88	\$47365.09	\$8730.52	\$0.00	\$38634.57

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office	\$36445.00	\$123.88	\$33925.09	\$30.52	\$33894.57
Outreach		\$750.00		\$0.00	
Elections		\$0.00		\$0.00	
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Neighborhood Purpose Grants	\$14440.00	\$1000.00	\$13440.00	\$8700.00	\$4740.00
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$1646.03	

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	Lloyd Staffing, Inc.	10/26/2020	A motion to approve the payment of Lloyd Staffing, Inc., Invoice 407829, dated 01/06/2019, in the amount of \$109.25.	General Operations Expenditure	Office	\$109.25
2	Sherman Oaks Chamber of Commerce	09/18/2020	A motion to approve the expenditure of up to \$750 to support the Sherman Oaks Chamber of Commerce and the community's Grand Re-Opening Promotion scheduled as allowed by the coronavir...	General Operations Expenditure	Outreach	\$750.00
3	AT&T Messaging	10/27/2020	A motion to approve the Sherman Oaks Neighborhood Council (SONC) Annual Budget for Fiscal Year 2020-2021 as amended. Note: The amended SONC FY2021 budget includes the rollover o...	General Operations Expenditure	Office	\$14.63
4	Los Angeles Responsible Pit Bull Owners, Inc.	11/04/2020	A motion to approve Neighborhood Purpose Grant in the amount for a \$1,000 to the Los Angeles Responsible Pit Bull Owners Inc. (LARPBO). The amend NPG submitted by the LARPBO has...	Neighborhood Purpose Grants		\$1000.00

<b>Subtotal:</b>	<b>\$1873.88</b>
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<b>Outstanding Expenditures</b>						
<b>#</b>	<b>Vendor</b>	<b>Date</b>	<b>Description</b>	<b>Budget Category</b>	<b>Sub-category</b>	<b>Total</b>
1	AT&T Messaging	11/16/2020	A motion to approve the Office of the City Clerk, Neighborhood Council Funding Program, Fiscal Year Administrative Packet for the fiscal year 2020-2021 as presented.	General Operations Expenditure	Office	\$15.26
2	The Valley Of Change	11/19/2020	A motion to approve a Neighborhood Purposes Grant in the amount of \$4700 to Valley of Change. Funds to be used for distribution of essential hygiene products for those in need and/or...	Neighborhood Purpose Grants		\$4700.00
3	North Valley Caring Services	11/20/2020	A motion to approve a Neighborhood Purposes Grant in the amount of \$4,000 to North Valley Caring Services (NVCS). Funds (Motion to to be Adopt) used by	Neighborhood Purpose Grants		\$4000.00
4	AT&T Messaging	12/17/2020	A motion to approve the Sherman Oaks Neighborhood Councils (SONG) Annual Budget for Fiscal Year 2020-2021 as amended. Note: The amended SONC FY2021 budget includes the rollover ...	General Operations Expenditure	Office	\$15.26
<b>Subtotal: Outstanding</b>						<b>\$8730.52</b>



# INVOICE

You may pay by ACH/wire to:  
Wells Fargo Bank, N.A.  
Routing #: 121000248  
Account #: 4060542594

**Please remit payment to:**  
LLoyd Staffing, Inc.  
PO Box 780994  
Philadelphia, PA 19178-0994  
**Billing inquiries: 631.370.7434**

**Credit Cards Accepted**



**BILL TO:** Attention of: Tom Capps,  
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:		
04/07/2019	409571	1	117247	Due Upon Receipt		
PERIOD	DESCRIPTION & EMPLOYEE		HOURS	RATE	AMOUNT	
04/01/19-04/07/19	EXASST	Salter, Jolie A	5.00	21.85	\$109.25	
<b>Thank you for your part in our Placements with a Purpose program. Every placement generated by LLoyd supports JDRF with a donation to help fight diabetes.</b>				<b>PAY THIS AMOUNT &gt;</b>	<b>TOTAL</b>	<b>\$109.25</b>







Sherman Oaks Chamber of Commerce  
14827 Ventura Boulevard, Suite 207  
Sherman Oaks, CA 91403 US  
(818) 906-1951  
www.shermanoakschamber.org

# Invoice



**BILL TO**

Sherman Oaks Neighborhood Council  
P.O.Box 5721  
Sherman Oaks, CA 91413  
Attn: Jeffrey Hartsough

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
6362	06/17/2020	\$750.00	06/19/2020	Due on receipt	

ACTIVITY	QTY	RATE	AMOUNT
<b>Outside Benefit</b> Marketing for Grand Reopening of Sherman Oaks & Studio City	1	750.00	750.00

COBRA Coalition

**BALANCE DUE**

**\$750.00**



City of Los Angeles - Office of the City Clerk  
 Neighborhood Council Funding Program  
 Encumbrance Request Form - Fiscal Year 2019-2020



Neighborhood Council: Sherman Oaks Neighborhood Council +

To encumber NC funds, please provide the following information and follow the instructions below:

Vendor Name	Purpose of the encumbered funds	Amount
1. The Web Corner	SONC website development and upgrade	\$ 5,250.00
2. Sherman Oaks Chamber of Commerce	Outreach - support of the Sherman Oaks Grand Re-Opening Event	\$ 750.00
3. Pro Outdoor Movies Inc	Projection of SONC Movies in the Park scheduled for June, 2020 or when COVID allows	\$ 1,200.00
4. Swank Movies	Movie License for SONC Movies in the Park scheduled for June, 2020 or when COVID allows	\$ 685.00
5. North Hollywood Interfaith Food Pantry	Donation to address food insecurity during the declared COVID-19 pandemic emergency	\$ 1,000.00
6.		
7.		
8.		
9.		
10.		
<b>Total</b>		<b>\$ 8,885.00</b>

**BOARD AFFIRMATION:**

THE NC BOARD AFFIRMS THAT SERVICES/PROJECTS RELATED TO THE ENCUMBRANCES LISTED ABOVE ARE INTENDED TO BE IN PLACE THIS CURRENT FISCAL YEAR OR HAVE BEEN AGREED UPON WITH THE VENDOR TO BEGIN WITHIN A REASONABLE TIME PERIOD DEPENDING ON COVID-19 PUBLIC HEALTH CIRCUMSTANCES.

Jeffrey Hartsough +

NC President or Treasurer Name

Signature

June 30, 2020 +

Date

Instructions:

No later than Tuesday, June 30, 2020, please submit the following via email to [Clerk.NCFunding@lacity.org](mailto:Clerk.NCFunding@lacity.org):

1. Encumbrance Request Form, completed and signed
2. Payment request document from vendors listed, i.e., invoice, estimate, completed NPG application, etc.
3. The Board Action Certification (BAC) Form approving the Encumbrance Request Form







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

CUSTOMER NUMBER
<b>8607823</b>
INVOICE DATE
<b>10/01/2020</b>

Page 1 of 1

Bill-To Customer:

 SHERMAN OAKS NC 1106  
 PO BOX 5721  
 SHERMAN OAKS, CA 91413-5721 T3 P1



Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
8607823	10/01/2020 10/31/2020	10/30/2020	\$30.52	\$30.52	\$0.00	\$14.63	\$14.63

Payments - Thank You

09/24/2020 \$15.26  
 08/31/2020 \$15.26

Description of Current Charges & Credits

		Qty	Unit Price	Ext. Price
UM Standard-Discount Rate	October service	1	\$14.00	\$14.00
8185032399				
County Utility Users Tax				\$.63

CUSTOMER NUMBER	
<b>8607823</b>	
INVOICE NUMBER	
<b>7557535</b>	
DUE DATE	AMOUNT PAID
<b>10/30/2020</b>	

Please detach & enclose with payment



REMIT TO:

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

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

01001 8607823000000000001463

Messaging service is provided by Southwestern Bell Telephone Company, Pacific Bell Telephone Company, Illinois Bell Telephone Company, Indiana Bell Telephone Company, Inc., Michigan Bell Telephone Company, Nevada Bell Telephone Company, The Ohio Bell Telephone Company, or Wisconsin Bell, Inc. based on service location (collectively referred to as "AT&T or "AT&T Messaging").

### How to pay your bill

You may mail your payment or send it by overnight mail. You may not pay this bill at AT&T Authorized Payment Locations. You may not send your other AT&T bills and this bill for messaging service together because these bills are generated from and processed by different accounting centers. When making your payments, write the amount paid in the box on the remittance stub. Also, write your account number on your check, money order or cashier's check. Mail your check and remittance stub in the return envelope provided or mail a standard envelope to:

**AT&T Messaging**  
Western Region  
P.O. Box 840486  
Dallas, TX 75284-0486

**AT&T Messaging**  
Southwest & Midwest Regions  
P.O. Box 849883  
Dallas, TX 75284-9883

**Overnight Delivery Only**  
AT&T Messaging - LB 849883  
BOA Lockbox Svc-Infomart  
1950 N Stemmons Fwy - Ste 5010  
Dallas, TX 75207

### When to pay your bill

Your payment is due when you receive your bill. If we do not receive payment for your bill by the "DUE BY" date, your account will become past due.

In the event your account becomes past due, we will lock or suspend your service for a period of seven calendar days. If after seven calendar days payment in full has not been received; your service will be disconnected. In order to reconnect service, you must pay the full amount owed plus charges to reconnect your service. Your basic telephone service will not be disconnected for non-payment of information services.

### Questions about your bill

If you have questions about your bill, please call your service representative at 1-877-677-3770. Office hours are Monday through Friday, 8:00 AM to 6:00 PM Central Time.

### Late Payment Charge


If we do not receive your payment and you have a past due balance plus current charges, AT&T will add a late payment charge of 1.5% to your total previous balance.

The late payment charge does not relieve you of the obligation to pay the total amount due by the "DUE BY" date.

If you subscribe to a voicemail and/or the Call Forwarding feature, local usage charges apply when retrieving mailbox messages and/or each time the Call Forwarding feature is activated. If you subscribe to a series 50+/series 100+ or a business call-in-one product, these products include Call Forwarding. The Call Forwarding monthly price is included in the monthly mailbox charge.

Don't let your voicemail security be compromised, use these simple tips: 1. If you have a temporary password, change it now & use a minimum of 6 digits. 2. Ensure your password by not using repeated or sequential digits. 3. Do not use your phone or mailbox number or numbers that are easily identifiable. 4. Treat your password as you would your ATM pin. 5. Change your password and greeting periodically.

### How to understand your bill



at&t


Bill-To Customer:

CUSTOMER NUMBER
1
INVOICE DATE
2

Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
3	4	5	6	7	8	9	10
11 - Payment - Thank you		12 - 6/19/03		13 - 20.95CR			
14 - Description of Current Charges & Credits				15 - Qty.	16 - Unit Price	17 - Ext. Price	

Please detach & enclose with payment

CUSTOMER NUMBER
18
INVOICE NUMBER
19
DUE DATE
20
AMOUNT PAID
21



at&t

22 - REMIT TO

1. Your account number
  2. Date invoice was created
  3. Your account number
  4. Current billing period
  5. When your payment is to be received by AT&T
  6. Past due balance
  7. Summary of any payments received in prior month
  8. Credits issued in the prior month
  9. Account total due (previous and current balances)
  10. Total of current charges
  11. Payment description
  12. Date payment was credited to account
  13. Amount of payment
  14. Description of current charges
  15. Quantity of items you are being charged for
  16. Amount of each item
  17. Total amount for all items in that category
- Remittance Slip**
18. Your account number
  19. Number assigned to this invoice
  20. Due date for current charges
  21. Amount of payments being made to AT&T
  22. The address to send your payment to

Office of the City Clerk

Administrative Services Division

Neighborhood Council (NC) Funding Program

Board Action Certification (BAC) Form



NC Name: Sherman Oaks Neighborhood Council Meeting Date: Sept. 14, 2020

Budget Fiscal Year: 2020-21 Agenda Item No: 6. b2

Board Motion and/or Public Benefit Statement (CIP and NPG): A motion to approve the Sherman Oaks Neighborhood Council's (SONC) Annual Budget for Fiscal Year 2020-2021 as amended. Note: The amended SONC FY2021 budget includes the rollover of \$10k from the FY2020 budget and the FY 2020 encumbered funds of \$8,885.00. The proposed SONC FY2021 amended budget is posted as a supporting document for this meeting on the SONC website.

Method of Payment: (Select One)  Check  Credit Card  Board Member Reimbursement

Vote Count

Recused Board Members must leave the room prior to any discussion and may not return to the room until after the vote is complete.

Board Member's First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Vacant	A1-CI						
Williams, Candy	A1-R	x					
Baronian, Levon	A1-B	x					
Hartsough, Jeffrey	A2-CI	x					
Manuel, Sarah	A2-R				x		
Vacant	A2-B						
Vacant	A3-CI						
Katchen, Howard	A3-R	x					
Kerzner, Fran	A3-B	x					
Cappelletti, Lisa	A4-CI	x					
Petrus, Lisa	A4-R	x					
Cappelletti, Joe	A4-B	x					
Adair, Christy	A5-CI	x					
Naseef, Alexandria	A5-R	x					
Babian, Avo	A5-B	x					
Shapiro, Harold	A6-CI	x					
Imber, Gil	A6-R	x					
Vacant	A6-B						
Kalban, Jeffrey	A7-CI	x					
Bindow, Michael	A7-R	x					
Roden, Neal	A7-B	x					
Ranshaw, Hayden	Youth Rep					x	
Zimmerman, Marcus	Youth Rep					x	

Board Quorum: Total: 16 0 0 1 2

We, the authorized signers of the above named Neighborhood Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with all laws, policies, and procedures. The above was approved by the Neighborhood Council Board, at a Brown Act compliant public meeting where a quorum of the Board was present.

Authorized Signature: Candy Williams  
 Print/Type Name: Candy Williams  
 Date: Sept. 17, 2020

Authorized Signature: Jeffrey Hartsough  
 Print/Type Name: Jeffrey Hartsough  
 Date: Sept. 17, 2020

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



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

Name of NC from which you are seeking this grant: Sherman Oaks Neighborhood Council

**SECTION I - APPLICANT INFORMATION**

1a)	<u>Los Angeles Responsible Pit Bull Owners, Inc</u> <i>Organization Name</i>	<u>46-2563118</u> <i>Federal I.D. # (EIN#)</i>	<u>California</u> <i>State of Incorporation</i>	<u>09/22/14</u> <i>Date of 501(c)(3) Status (if applicable)</i>
1b)	<u>6310 Canoga Avenue #1700</u> <i>Organization Mailing Address</i>	<u>Woodland Hills</u> <i>City</i>	<u>CA</u> <i>State</i>	<u>91367</u> <i>Zip Code</i>
1c)	<u></u> <i>Business Address (If different)</i>	<u></u> <i>City</i>	<u></u> <i>State</i>	<u></u> <i>Zip Code</i>
1d)	<b>PRIMARY CONTACT INFORMATION:</b>			
	<u>Sammi Maon</u> <i>Name</i>	<u>310-382-0079</u> <i>Phone</i>	<u>sammi@larpbo.org</u> <i>Email</i>	
2)	<b>Type of Organization- Please select one:</b>			
	<input type="checkbox"/> <b>Public School</b> <i>(not to include private schools)</i> <b>Attach Signed letter on School Letterhead</b>	<b>or</b>	<input type="checkbox"/> <b>501(c)(3) Non-Profit</b> <i>(other than religious institutions)</i> <b>Attach IRS Determination Letter</b>	
3)	<u></u> <i>Name / Address of Affiliated Organization (if applicable)</i>	<u></u> <i>City</i>	<u></u> <i>State</i>	<u></u> <i>Zip Code</i>

**SECTION II - PROJECT DESCRIPTION**

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

Los Angeles Responsible Pit Bull Owners (LARPBO) requests funding to perform needed maintenance on the LARPBO vehicle which it uses to transport dogs from the East Valley Animal Shelter (EVAS) to LARPBO training classes. The LARPBO vehicle, a 2004 Ford Ecoline, needs repairs to its doors, locks, and other safety items to ensure the safe transportation of EVAS dogs, trainers, and equipment.

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

The EVAS serves homeless animals in the Sherman Oaks area. LARPBO trainers use the vehicle to transport EVAS shelter dogs to LARPBO training classes and trails to participate in dog training and socialization exercises -- a free service that LARPBO provides to EVAS. A socialized dog with basic obedience training will have a better chance of getting adopted, which frees up space at the EVAS shelter which serves Sherman Oaks.

Furthermore, the vehicle is used to transport training equipment to classes held at the Van Nuys/Sherman Oaks Park, which are provided to Sherman Oaks dog owners. Dogs that are well-behaved are less likely to be surrendered to the overburdened City shelters.

**SECTION III - PROJECT BUDGET OUTLINE**

You may also provide the Budget Outline on a separate sheet if necessary or requested.

6a)	<b>Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
		\$	\$
		\$	\$
		\$	\$

6b)	<b>Non-Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
	Vehicle maintenance including operational doors, locks, and safety items	\$1,000.00	\$1,000.00
		\$	\$
		\$	\$

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?  
 No  Yes If Yes, please list names of NCs: \_\_\_\_\_

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

Source of Funding	Amount	Total Projected Cost
	\$	\$
	\$	\$
	\$	\$

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

10a) Start date: 12/01/20 10b) Date Funds Required: 12/01/20 10c) Expected Completion Date: 06/30/21  
 (After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)

**SECTION IV - POTENTIAL CONFLICTS OF INTEREST**


11a) Do you (applicant) have a current or former relationship with a Board Member of the NC?  
 No  Yes If Yes, please describe below:

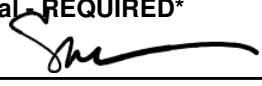
Name of NC Board Member	Relationship to Applicant

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

**SECTION V - DECLARATION AND SIGNATURE**

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

12a) Executive Director of Non-Profit Corporation or School Principal - **REQUIRED\***  
Troy Smith                      President                                            10 / 29 / 2020  
 PRINT Name                      Title                      Signature                      Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - **REQUIRED\***  
Sammi Maon                      Secretary                                            10 / 28 / 2020  
 PRINT Name                      Title                      Signature                      Date

\* If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or [clerk.ncfunding@lacity.org](mailto:clerk.ncfunding@lacity.org) for instructions on completing this form

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

DEPARTMENT OF THE TREASURY

Date: SEP 22 2014

LARPBO LOS ANGELES RESPONSIBLE PIT  
BULL OWNERS INC  
16633 VENTURA BLVD STE 600  
ENCINO, CA 91436

Employer Identification Number:  
46-2563118  
DLN:  
17053128336014  
Contact Person:  
CUSTOMER SERVICE ID# 31954  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
509(a)(2)  
Form 990 Required:  
Yes  
Effective Date of Exemption:  
February 21, 2013  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

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

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

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,



Director, Exempt Organizations

Letter 947

