Monthly Expenditure Report



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

NC Name: Sherman Oaks Neighborhood Council

Monthly Cash Reconciliation								
Beginning Balance	eginning Balance Total Spent Remaining Balance Outstar		Outstanding	Commitments	Net Available			
\$47365.09	\$4742.82	\$42622.27	\$4730.52	\$0.00	\$37891.75			

Monthly Cash Flow Analysis									
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available				
Office		\$15.26		\$30.52					
Outreach	\$36445.00	\$727.56	\$33182.27	\$0.00	\$33151.75				
Elections		\$0.00		\$0.00					
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00				
Neighborhood Purpose Grants	\$14440.00	\$4000.00	\$9440.00	\$4700.00	\$4740.00				
Funding Requests Und	der Review: \$0.00	Encumbrar	nces: \$0.00	Previous Expenditures: \$3519.91					

	Expenditures										
#	# Vendor Date Description E			Budget Category	Sub-category	Total					
1	AMZN MKTP US 6H62G35U3	12/09/2020	A motion to approve the Sherman Oaks Neighborhood Councirs (SONG) Annual Budget for Fiscal Year 2020-2021 as amended. Note: The amended SONC FY2021 budget includes the rollover of S10k 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 SONG website.	General Operations Expenditure	Outreach	\$625.29					
2	AMZN MKTP US RK2IN2QT3	12/10/2020	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 of S10k 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 SONG website.	General Operations Expenditure	Outreach	\$102.27					

3	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	
4	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	
	Subtotal:						

Outstanding Expenditures									
#	Vendor	Date	Description	Budget Category	Sub-category	Total			
1	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			
2	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			
3	AT&T Messaging	01/13/2021	A motion to approve the Sherman Oaks Neighborhood Council (SONG) Annual Budget for Fiscal Year 2020-2021 as amended. Note: The amended SONC FY2021 budget includes the rollover o	General Operations Expenditure	Office	\$15.26			
	Subtotal: Outstanding	g				\$4730.52			

14005 CHANDLER BLVD SHERMAN OAKS, CA 91401-5737 **United States**

Shipping Speed:

Standard Shipping

Shipped on December 8, 2020

Items Ordered

2 of: Wealuxe Cotton Bath Towels - 24x50 Inch - Lightweight Soft and Absorbent Gym

Pool Towel - 6 Pack - White Sold by: WhiteClassic (seller profile)

Condition: New

Shipping Address:

Sarah Kathryn Manuel 14005 CHANDLER BLVD SHERMAN OAKS, CA 91401-5737 United States

Shipping Speed:

Standard Shipping

Shipped on December 8, 2020

Items Ordered

2 of: Wealuxe Cotton Bath Towels - 24x50 Inch - Lightweight Soft and Absorbent Gym

Pool Towel - 6 Pack - White Sold by: WhiteClassic (seller profile)

Condition: New

Shipping Address:

Sarah Kathryn Manuel 14005 CHANDLER BLVD SHERMAN OAKS, CA 91401-5737 **United States**

Shipping Speed:

Standard Shipping

Shipped on December 8, 2020

Items Ordered

2 of: Wealuxe Cotton Bath Towels - 24x50 Inch - Lightweight Soft and Absorbent Gym

Pool Towel - 6 Pack - White Sold by: WhiteClassic (seller profile)

Condition: New

Shipping Address:

Sarah Kathryn Manuel

14005 CHANDLER BLVD SHERMAN OAKS, CA 91401-5737 United States

Shipping Speed:

Standard Shipping

Shipped on December 9, 2020

Items Ordered

2 of: Wealuxe Cotton Bath Towels - 24x50 Inch - Lightweight Soft and Absorbent Gym

Pool Towel - 6 Pack - White Sold by: WhiteClassic (seller profile)

Condition: New

Shipping Address:

Sarah Kathryn Manuel 14005 CHANDLER BLVD SHERMAN OAKS, CA 91401-5737 **United States**

Shipping Speed:

Standard Shipping

Shipping now

Items Ordered

2 of: Wealuxe Cotton Bath Towels - 24x50 Inch - Lightweight Soft and Absorbent Gym

Pool Towel - 6 Pack - White Sold by: WhiteClassic (seller profile)

Condition: New

Shipping Address:

Sarah Kathryn Manuel 14005 CHANDLER BLVD SHERMAN OAKS, CA 91401-5737 **United States**

Shipping Speed:

Standard Shipping

Payment information

Payment Method:

Item(s) Subtotal: \$664.50

MasterCard | Last digits: 4628

Shipping & Handling:

\$0.00

Billing address

Candy Williams City of Los Angeles 200 N Spring Street

Suite 224

Los Angeles, CA 90012

United States

Total before tax: \$664.50

Estimated tax to be collected:

\$63.06

Grand Total: \$727.56

amazon.com

Details for Order #114-1545524-4143457

Print this page for your records.

Order Placed: December 8, 2020

Amazon.com order number: 114-1545524-4143457

Order Total: \$727.56

Preparing for Shipment

Items Ordered

3 of: Hanes Men's 10-Pack Comfort Soft Boxer Briefs, Assorted, Meduim

Sold by: DealsN'more (seller profile)

Condition: New

Shipping Address:

Sarah Kathryn Manuel 14005 CHANDLER BLVD SHERMAN OAKS, CA 91401-5737 United States

Shipping Speed:

Standard Shipping

Shipping now

Items Ordered

3 of: Hanes Men's 10-Pack Comfort Soft Boxer Briefs, Assorted, Large

Sold by: Amazon.com Services LLC

Condition: New

Shipping Address:

Sarah Kathryn Manuel 14005 CHANDLER BLVD SHERMAN OAKS, CA 91401-5737

United States

Shipping Speed:

Standard Shipping

Shipped on December 9, 2020

Items Ordered

5 of: Mens Thermal Socks Ultra Warm Thick Boot Socks 12-pack Black By DEBRA

WEITZNER, Black, 10-15

Sold by: Classy Collection (seller profile)

Condition: New

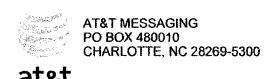
Shipping Address:

Sarah Kathryn Manuel

Price (\$

#102.27
Pay this Ompant -

Price \$ 134.95 }



CUSTOMER NUMBER 8607823 **INVOICE DATE**

> 11/01/2020 Page 1 of 1

Bill-To Customer:

SHERMAN OAKS NC PO BOX 5721 SHERMAN OAKS, CA 91413-5721 1100 T4 P1

հիշժեկիալակիկալիկիանիկայինակինալոնականակիալանինիկութ

Credits Current Charges **Billing Period Date Due** Previous Balance **Payments** TOTAL DUE Customer Number 11/01/2020 8607823 11/30/2020 \$14.63 \$0.00 \$.00 \$15.26 \$29.89 11/30/2020

Payments - Thank You

Description of Current Charges & Credits

November service

Unit Price

\$14.00

Qty

Ext. Price \$14.00

UM Standard-Discount Rate 8185032399

City Utility Users Tax

\$1.26

CUSTOMER NUMBER 8607823 INVOICE NUMBER * 7562943 **AMOUNT PAID**

DUE DATE

11/30/2020

Please detach & enclose with payment



REMIT TO:

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

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

01001 860782300000000002989

Office of the City Clerk							/ \
Administrative Services Division							of totales
Neighborhood Council (NC) Funding Prog	ram						- CC
Board Action Certification Form							Chy Cha
NC Name: Sherman Oaks			Meeting Date:	June 15, 2020			
Budget Fiscal Year: 2020-2021	r		Agenda Item N	o: 6-B			
Board Motion and/or Public Benefit Statement (CIP and NPG):	A motion to approv Fiscal Year Admini						
Method of Payment: (Select One)	☐ Check		☐ Credit Card		☐ Board	d Member Reimb	ursement
Recused Boardmembers n	nust leave the room prior to		Count on and may not re	eturn to the roo	n until after the	vote is complete	
Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Adair, Christy	Area 5 Community	х					
Babian, Avo	Area 5 Business	х					
Baronian, Lavon	Area 1 Business				х		
Binkow, Michael	Area 7 Residential	x					
Cappelletti, Joe	Area 4 Business	х					
Cappelletti, Lisa	Area 4 Community	х					
Vacant	Area 2 Residential						
. Hartsough, Jeffrey	Area 2 Community	х					
Imber, Gil	Area 6 Residential	х					
Kalban, Jeffrey	Area 7 Community	х					
Katchen, Howard	Area 3 Residential	х					
Kerzner, Fran	Area 3 Business	×					
Kim, Christine	Area 6 Business	x					
Vacant	Area 2 Business						
Olds, Sarah	Area 5 Residential	х					
Petrus, Lisa	Area 4 Residential	х					
Roden, Neal	Area 7 Business	x					
Vacant	Area 1 Community						
Shapiro, Harold	Area 6 Community	x					
Williams, Candy	Area 1 Residential	х					
Vacant	Area 3 Community						
Ranshaw, Hayden	Youth					×	
Zimmerman, Marcus	Youth				x		
Quorum: 11	Total:	16	0	0	2	1	0
We, the Treasurer and the Second Signer							//
and that a public meeting was held in acc compliant public meeting where a quorur	ordance with all laws, policie						
Treasurer's Signature			Second Signer's		Wharbon	+	
Print/Type Name:			Print/Type Nar	me: JEF	FREY HAR	TSOUGH	
Date:			Date:	06-17-	2020		

Date:

Date:

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.

lame	of NC from which you are seeking this grant	<u>. S</u>	erman Oa	ıks Ne	eighborl	hood Council
SEC	TION I- APPLICANT INFORMATION					
4.5	North Valley Caring Services	95	54444561	ca		02/1996
1a)	Organization Name	Fe	deral I.D. # (EIN#)	State of	ncorporation	Date of 501(c)(3) Status (if applicable)
1b)	15453 Rayen St	Ν	orth Hills		CA	91343
	Organization Mailing Address	Cit	у		State	Zip Code
1c)						
	Business Address (If different)	Cit	у		State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:					
	Alycia Monroy	818	3-929-2972	2 amo	nroy@i	nvcsinc.org
	Name	P	hone		Email	
2)	Type of Organization- Please select one: ☐ Public School (not to include private schools) Attach Signed letter on School Letterhead	or	501(c)(3) Non Attach IRS D			institutions)
3)	Name / Address of Affiliated Organization (if appli	cable)	City		State	Zip Code

SECTION II - PROJECT DESCRIPTION

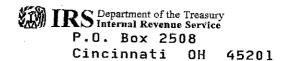
4) Please describe the purpose and intent of the grant.

Your Support will allow us to:

- 1. Aquire PPE (Personal Protective Equipment) and other necessary program supplies for our team to perform their work safely and effeciently
- 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)
 - NVCS food pantry is not only open but we have expanded our services in light of the pandemic. We now serve up to 3500 families every week as well as support 3 other food pantries. We deliver hot meals to 300 families living in motels, as well as deliver food boxes to seniors and families that are unable to leave their houses due to the pandemic. We have also opened our campus to provide childcare and online distance learning for 30 students from grades pre k to 12th using our agencies wi-fi and three classrooms, with staff and volunteers as support.

SECT	ION III - PROJECT BUDGET OUTLI	NE .			
	nay also provide the Budget Outline o				tomas as a submission of the first of the fi
6a)	Personnelikeratedi Expenses in a		and the second s	tederancuiofaus	
			\$	\$,
			\$	\$	
			\$	\$	
6b)	Non-Personnelikelapaileaterses	ann agun a sa ann agun a s		iad of NO Total G	(Cos (Cos (Cos) (Cos (Cos) (Cos (Cos)
,	Safety supplies, food container	s program supplies and co	the married winds and the character	\$4000 \$75000	Buchel thing, and bear Some Buch as district to some some some built to
	Daioty cappines, rood container	s, program supplies and co	\$	\$	·
			\$	\$	
		<u></u>	ΙΨ	<u> </u>	
	ve you (applicant) applied to any ot I No	her Neighborhood Councils ease list names of NCs: 14			?
8) Is	the implementation of this specific	orogram or purpose descrii	oed in Questic	on 4 contingent on an	v other factors or
	urces or funding? (Including NPG a			If Yes, please	-
	Someoralização de la como de la c				
	north hills east, lake balboa, arleta, sylmar, grar	ada hills, northridge neighborhood councils	\$12929	\$	
	city and emer	· · · · · · · · · · · · · · · · · · ·	\$26000	\$	
	misc gra	ints	\$8000	\$75000	
9) W	hat is the TOTAL amount of the gra	nt funding requested with t	his applicatio	n: \$<u>2000</u> \$ 40	00
(Start date: $\frac{11}{15}$ $\frac{100}{100}$ 10b) Date After completion of the project, the	applicant should submit a	_/ ²⁰²⁰ _ 10c) E Project Comp	xpected Completion I letion Report to the I	Date: 02 /01 /21 Neighborhood Council)
SECT	ION IV - POTENTIAL CONFLICTS O	FINTEREST			
11a) [o you (applicant) have a current or	former relationship with a	Board Membe	r of the NC?	
_		ease describe below:			•
<u>[</u>]	Name of NC Board Member		F	Relationship to Applic	ant
-					
-		·			
11b) II	f yes, did you request that the board	I mambar consult the Office	o of the City /	ttornov hotoro filing	this application?
		t if a Board Member of the			
	or participates in the discussion a	and voting of this NPG. th	e NC Fundir	g Program will den	v the payment of this
<u> </u>	rant in its entirety.)				<u>, p, </u>
SECT	ION V - DECLARATION AND SIGNA	TURE			
l here	by affirm that, to the best of my kı	nowledge, the information	provided he	rein and communica	ted otherwise is truly
and a	ccurately stated. I further affirm	that I have read the doc	uments "Wha	at is a Public Benef	it," and "Conflicts of
Intere	st" of this application and affirm	hat the proposed project	s) and/or pro	gram(s) fall within t	he criteria of a public
Denet	it project/program and that no co	ontlict of interest exist th	at would pre	event the awarding	of the Neighborhood
this a	oses Grant. I affirm that I am not a pplication. I further affirm that if	the grant received is not	t the Neighb	ornood Council to W	nom I am submitting
stated	here, said funds shall be returne	d immediately to the Neig	hborhood Co	ouncil	ins of the application
	Executive Director of Non-Profit Co	_		~ 11	
	Manny Flores	Exac the Director		MAN A	10/3/12-
6	MARNY Flores PRINT Name	Title	- V /3	Signature	/o/3ა/2.5 Date
	Secretary of Non-profit Corporation	•			Date
	Maryna Nowa PRINT Name	office admin			:101-
/	IMI AND INDIA	orice allmin		The state of the s	1911, < 216 2
		. Title		Signature	

^{*} 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 for instructions on completing this form



In reply refer to: 0248153327 Feb. 10, 2014 LTR 4170C 0 95-4444561 000000 00

> 00017356 BODC: TE

NORTH VALLEY CARING SERVICES 15435 RAYEN ST NORTH HILLS CA 91343



011298

Person to Contact: Ms. Espelage Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your request of Jan. 30, 2014, regarding the tax-exempt status of North Valley Caring Services.

Our records indicate that a determination letter was issued in February 1996, granting this organization exemption from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

Our records also indicate this organization is not a private foundation within the meaning of section 509(a) of the Code because it is described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to this organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to the organization or for its use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

If you have any questions, please call us at the telephone number shown above.

0248153327 Feb. 10, 2014 LTR 4170C 0 95-4444561 000000 00 00017357

NORTH VALLEY CARING SERVICES 15435 RAYEN ST NORTH HILLS CA 91343

Sincerely yours,

Susan M. d'Neill Susan M. O'Neill, Department Mgr. Accounts Management Operations

Office of the City Clerk						()	
Administrative Services Division						Lago States des	S S S ANGRE
Neighborhood Council (NC) Funding Progr	am					Å COY (
Board Action Certification (BAC) Form			T			City	ONOFO THE
NC Name:			Meeting Date:				
Budget Fiscal Year:			Agenda Item No	o:			
Board Motion and/or Public Benefit Statement (CIP and NPG):							
Method of Payment: (Select One)	☐ Check		☐ Credit Card		□ Roard	d Member Reimb	urcomont
wethou of Fayment. (Select One)	L CHECK	Vot	e Count			a Wiember Nemib	ursement
Recused Board Members	must leave the room pri	or to any discus	sion and may no	t return to the ro	oom until after t	he vote is compl	ete.
Board Member's First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Board Quorum:	Total:						
We, the authorized signers of the above r meeting was held in accordance with all I							
meeting where a quorum of the Board was	present.			a			
Authorized Signature Candy U	Villiams		Authorized Sign	ature:	Hartsough		
Print/Type Name:			Print/Type Nam	e: /	, ,		
Date:			Date:	Novem	ber 11, 20	20	

Office of the City Clerk

Administrative Services Division





NC Name:Sherman Oaks			Meeting Date:	November 9, 2	2020		
Budget Fiscal Year: 2020-2021				o: 6c (Motion 3)			
Board Motion and/or Public Benefit Statement (CIP and NPG):	A motion to approve a Neighborhood Purposes Grant in the amount of \$4700 to Valley of Change. Funds for distribution of essential hygiene products for those in need and/or unhoused in the Sherman Oaks com (Motion to Adopt 6.c.as Amended)						
Method of Payment: (Select One)	■ Check		☐ Credit Card		☐ Board	Member Reimbu	ırsement
Recused Board Member	s must leave the room prior t		ote Count ussion and may no	t return to the ro	om until after t	he vote is comple	ete.
Board Member's First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Vacant	Area 1 Community						
Williams, Candy	Area 1 Residential	X					
Baronian, Lavon	Area 1 Business				X		
Hartsough, Jeffrey	Area 2 Community	X					
Manual, Sarah	Area 2 Residential	х					
Vacant	Area 2 Business	- 1					
Vacant	Area 3 Comminity						
Katchen, Howard	Area 3 Residental		х				
Krerzner, Fran	Area 3 Business				х		
Cappelletti, Joe	Area 4 Community	X					
Petrus, Lisa	Area 4 Residential		х				
Cappelletti, Joe	Area 4 Business	Х					
Adair, Christy	Area 5 Community				Х		
Naseef, Alexandria	Area 5 Residential	Х					
Babian, Avo	Area 5 Business	Х					
Shapiro, Harold	Area 6 Community	X					
Imber, Gil	Area 6 Residential	Х					
Vacant	Area 6 Business						
Kalban, Jeffrey	Area 7 Community	х					
Binkow, Michael	Area 7 Residential	X					
Roden, Neal	Area 7 Business	Х					
Ranshaw, Hayden	Youth Rep					х	
Zimmerman, Marcus	Youth Rep					х	
Board Quorum:11	Total:	12	2	0	3	2	0
We, the authorized signers of the above meeting was held in accordance with all meeting where a quorum of the Board wa	laws, policies, and procedure						1110
Authorized Signature Candy (Villiams		Authorized Sign	111	fartsough		
Print/Type Name: Candy William:	S		Print/Type Nar	ne:Jeffrey H	lartsough		
Date: Nov. 11, 2020			Date:		1-13-202	0	