Monthly Expenditure Report



Reporting Month: March 2021

Budget Fiscal Year: 2020-2021

NC Name: Sherman Oaks Neighborhood Council

Monthly Cash Reconciliation							
Beginning Balance Total Spent Remaining Balance Outstanding Commitments Net Availa							
\$37891.75	\$6084.07	\$31807.68	\$30.52	\$0.00	\$31777.16		

Monthly Cash Flow Analysis								
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available			
Office		\$84.07		\$30.52				
Outreach	\$36445.00	\$6000.00	\$27067.68	\$0.00	\$27037.16			
Elections		\$0.00		\$0.00				
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
Neighborhood Purpose Grants	\$14440.00	\$0.00	\$4740.00	\$0.00	\$4740.00			
Funding Requests Under Review: \$0.00		Encumbrar	nces: \$0.00	Previous Expend	itures: \$12993.25			

	Expenditures							
#	Vendor	Date	Description	Budget Category	Sub-category	Total		
1	TARGET 00021436	03/27/2021	Items purchased at Target for printer ink and printer stationery paper	General Operations Expenditure	Office	\$84.07		
2	Los Angeles Regional Food Bank	03/05/2021	A motion to approve a donation of \$3,000.00 to the Los Angeles Regional Food Bank to address food insecurity in the San Fernando Valley during the declared COVID-19 pandemic emergency. Th	General Operations Expenditure	Outreach	\$3000.00		
3	North Hollywood Interfaith Food Pantry	03/05/2021	A motion to approve a donation of \$3,000.00 to the North Hollywood Interfaith Food Pantry to address food insecurity in the San Fernando Valley during the declared COVID-19 pandemic emerg	General Operations Expenditure	Outreach	\$3000.00		
	Subtotal:		1	1 1		\$6084.07		

	Outstanding Expenditures							
#	Vendor	Date	Description	Budget Category	Sub-category	Total		

1	AT&T Messaging	02/16/2021	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	General Operations Expenditure	Office	\$15.26	
2	AT&T Messaging	03/16/2021	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	General Operations Expenditure	Office	\$15.26	
	Subtotal: Outstanding						

ENTERTAINMENT-ELECTRONICS C56070399 RETURN BY 04/26/21 STATIONERY-OFFICE 081051951 UP&UP REC#2-1086-2143-0113-8923-0 VCD#756-253-145 SUBTOTAL T = CA TAX 9.5000% on \$76.78 NOTICE: Some furniture products can expose you to chemicals known to the State of California to cause cancer, birth defects or other reproductive harm please check on-product label for warning information. Help make your Target Run better. Take a 2 minute survey about today's trip: LOS ANGELES TOPANGA - 818-746-9922 03/27/2021 06:01 PM Please take this survey within 7 days. TOTAL *4628 MASTERCARD CHARGE AID: A000000 MASTERCARD 0 <u>informtarget.com</u> User ID: 7891 3785 7988 Password: 610 770) TARGET CUENTENOS EN ESPAÑOL ----AL \$84.07 GE \$84.07 000000041010 \$70.99 \$76.78 \$7.29 \$5.79

INVOICE 20201222-01



1734 E. 41st Street Los Angeles, CA 90058 Phone (323) 234-3030 Fax (323) 234-0943

To: JEFFREY HARTSOUGH, PRESIDENT SHERMAN OAKS NEIGHBORHOOD COUNCIL PO Box 5721 Sherman Oaks, CA 91413 DATE: DECEMBER 22, 2020

DESCRIPTION	AMOUNT
Donation to the Los Angeles Regional Food Bank.	\$3000.00
ΤΟΤΑ	- \$3000.00

Make all checks payable to: Los Angeles Regional Food Bank

If you have any questions concerning this invoice, please contact Amy Hasquet, Director of Annual Giving at (323) 234-3030 ext. 140 or ahasquet@lafoodbank.org.

Thank you for your support!

The Los Angeles Regional Food Bank is a 501(c)3 organization (Tax ID# 95-3135649)

Office of the City Clerk								
Administrative Services Division								
Neighborhood Council (NC) Funding Progr	am					-5	The Clerk	
Board Action Certification Form			I					
NC Name:			Meeting Date:					
Budget Fiscal Year:	1		Agenda Item N	0:				
Board Motion and/or Public Benefit Statement (CIP and NPG):								
Method of Payment: (Select One)	Check		Credit Card		Board	d Member Reimbi	ursement	
		Vote Co						
Recused Boardmembers must leave the room prior to any discussion and may not return to the roon until after the vote is complete.								
Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused	
						++		
		ļ						
						Ţ		
<u> </u>						++		
		<u> </u>						
	ļ							
		<u> </u>						
						Ţ		
						++		
						<u> </u>	<u> </u>	
						+ +		
						++		
							}	
		ļ						
							L	
						1		
	<u> </u>					+		
						<u> </u>		
							<u> </u>	
						1		
						+		
Quorum:	Total:		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
We, the Treasurer and the Second Signer o and that a public meeting was held in acco								
compliant public meeting where a quorum					A	· · · · · · · · · · · · · · · · · · ·		
Caredull	Linciana				14 . 1	0		
Treasurer's Signature Candy U	ullams		Second Signer's	Signature	Infants	ough		
Print/Type Name:			Print/Type Nam	ie:	0			
Date:			Date:					

INVOICE NUMBER 2021-01

North Hollywood Interfaith Food Pantry

4390 Colfax Avenue, North Hollywood, CA. 91602

Contact - Lesley Clark lesley.clark.bookkeeping@gmail.com

March 1, 2021

BILL TO:

The Sherman Oaks Neighborhood Council c/o Jeffrey Hartsough

Details	AMOUNT
To provide food to those in need in our community	\$3,000.00
SUBTOTAL	\$3,000.00
TAX RATE	0.00%
OTHER	\$0.00
TOTAL	\$3,000.00

Make checks payable to North Hollywood Interfaith Food Pantry

If you have any questions concerning this invoice, use the following contact information:

Lesley Clark, Treasurer 818-585-6006

THANK YOU FOR YOUR DONATION!

Office of the City Clerk Administrative Services Division Neighborhood Council (NC) Funding Program							
Board Action Certification Form							Chy
NC Name:			Meeting Date:				
Budget Fiscal Year:			Agenda Item No	0:			
Board Motion and/or Public Benefit			-				
Statement (CIP and NPG):							
Method of Payment: (Select One)	Check	Vote C	Credit Card		L Board	d Member Reimb	ursement
Recused Boardmembers m	ust leave the room prior			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
bourd member mot and East name	bourd rosidon			/ lostalli	, ibsent	inengiore	necuseu
							<u> </u>
0	.						
Quorum: We, the Treasurer and the Second Signer o	Total:	orbood Council	doclara that the	information are	controd on this f	rm is accurate	d complete
and that a public meeting was held in acco compliant public meeting where a quorum	rdance with all laws, polici	es, and procedui					
	Cand, Williams			Second Signer's Signature			
// Print/Type Name:			Print/Type Nam	ie: (ý ::	-	
Date:			Date:				