

Department of Neighborhood Empowerment

Board Vote Form

NC NAME: ENCINO  
 Budget Fiscal Year: 2015-2016  
 Meeting Date: 5/25/2016  
 Agenda Item: S.E.1



USE THIS FORM FOR THE FOLLOWING FUNDING ITEMS:

- APPROVAL OF MONTHLY EXPENDITURE REPORT
- BUDGET PACKAGE APPROVAL / AMENDMENT
- APPOINTMENT OF FUNDING OFFICER / CARDHOLDER
- OTHER: NON-FUNDING ACTION ITEM

Description: March Expenditures (MER)

Vote Count

\*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
Laura Shovlowsky							X
Scott Linden		X					
Ken Silk		X					
Carolyn Richardson (Att)	Alternate						
Jess Whitehill		X					
Laurie Kelson		X					
Sherman Gamson		X					
Victoria Miller		X					
Varant Majarian		X					
Deborah George		X					
Eliot Cohen		X					
Glenn Bailey		X					
Patricia Bates		X					
Doug Kriegel		X					
Carol Levin		X					
Mark Levinson		X					
Gerald Silver		X					
Henry Eshelman		X					
Annie Keshelman		X					
Jim Esquivel							X
Diane Rosen							X
NC Quorum: <u>11</u>		Totals: <u>17 0 0</u>					<u>3</u>

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.

Treasurer's Signature: <u>[Signature]</u>	Signer's Signature: <u>[Signature]</u>
Print/Type name: <u>Patricia Bates</u>	Print/Type name: <u>Scott Linden</u>
Date: <u>5/25/16</u>	Date: <u>5-25-16</u>

NC Additional Comments

Department of Neighborhood Empowerment

Reporting Month:

MARCH

MONTHLY EXPENDITURE REPORT

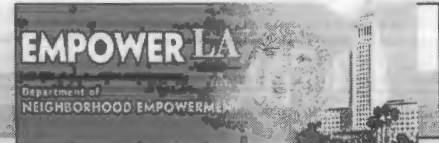
NC Name:

Encino

Submitted: 4/25/2016 13:59:01

Budget Fiscal Year:

2015-2016



**FILL IN ALL THE UNSHADED (WHITE) FIELDS** (Must be submitted to the Department within 10 days of Board Approval along with documentation and hard copy)

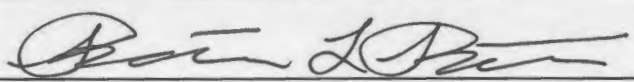
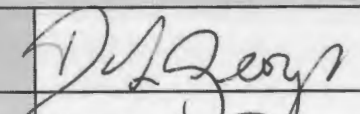
**EXPENDITURES BY LINE ITEM** (for more than 12 expenditures, you may continue entering on page 3 of this worksheet - see below)

A	Date / Item / Service Description	BUDGET CATEGORY	VENDOR	INVOICE NUMBER	OUT OF STATE VENDOR	1099 Reportable	TOTAL
1	3/1/16 ValleyAllianceNeighborhoodCouncils Check	OUTREACH	JCS catering Company				\$500.00
2	3/2/16 website maintenance electronic debit	OPERATIONS	The Web Corner				\$99.00
3	3/18/16 internet electronic debit	OPERATIONS	TimeWarnerCable				\$59.99
4	3/21/2016 email electronic debit	OPERATIONS	Vertical Response				\$28.00
5	3/24/16 drinks for board meeting debit card	OPERATIONS	Smart&Final				\$6.34
6	3/24/16 food for board meeting debit card	OPERATIONS	Fresh Brothers				\$232.82
7	3/30/16 Draught tolerance festival/kids day check	NPG	LA cactus/succulentSociety				\$2,000.00
8							
9							
10							
11							
12							
<b>SUBTOTAL: Expenditures by Line Item (May include totals on page 3, if entered)</b>							<b>\$2,926.15</b>
<b>B</b>	<b>CUMULATIVE EXPENDITURES FROM PRIOR MONTHS</b>						<b>\$26,469.04</b>
<b>C</b>	<b>OUTSTANDING COMMITMENTS</b>						
	<b>C 1. Outstanding Checks (checks that have been issued, but have not yet cleared the account)</b>						
	<b>C 2. Rent/Lease</b>						
	<b>C 3. Contractual Services</b>						
	<b>C 4. Large Purchases</b>						
	<b>C 5. Neighborhood Purpose Grants (pending or in process)</b>						<b>\$3,136.00</b>
	<b>C 6. Temporary Staffing Services</b>						
	<b>C 7. Storage</b>						
	<b>C 8. Other Outstanding Commitments</b>	<b>==&gt;</b>	<b>Description:</b>				<b>\$2,250.00</b>
<b>SUBTOTAL: Outstanding Commitments</b>							<b>\$5,386.00</b>
<b>D</b>	<b>Total Expenditures &amp; Commitments</b>						<b>\$34,781.19</b>
<b>E</b>	<b>Total Adjustments by Department (such as use taxes assessed, credits from prior fiscal years, etc) (use '+' for credits, '-' for deductions)</b>						<b>\$0.00</b>
<b>F</b>	<b>Approved Budget 2015-2016</b>						<b>\$42,000.00</b>
<b>G</b>	<b>Balance of Budget</b>						<b>\$7,218.81</b>

Reporting Month:	MARCH
NC Name:	Encho

MONTHLY CASH RECONCILIATION				
Beginning Balance (A)	Funds Deposited (B)	Total Available (C) = (A+B)	Cash Spent this Month (D)	Remaining Balance (E) = C - D
\$14,694.36		\$14,694.36	\$2,926.15	\$11,768.21

MONTHLY BUDGETARY ANALYSIS						
Category Identifier	Budget Category	Adopted Budget (A)	Total Spent this Month (B)	FY 2014-15 Expenses Cleared in FY 2015-16 (C)	Total Spent in Prior Months (D)	Unspent Budget Balance (E) = A - B + C - D
100	Operations	\$13,500.00	\$426.15		\$16,372.95	-\$3,299.10
200	Outreach	\$9,100.00	\$500.00		\$3,655.09	\$4,944.91
300	Community Improvement		\$0.00			\$0.00
400	NPG	\$11,000.00	\$2,000.00		\$5,316.00	\$3,684.00
500	Elections	\$8,400.00	\$0.00		\$1,125.00	\$7,275.00
900	Unallocated		\$0.00			\$0.00
	TOTAL	\$42,000.00	\$2,926.15	\$0.00	\$26,469.04	\$12,604.81

NEIGHBORHOOD COUNCIL DECLARATION			
We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and will furnish additional documentation to the Department of Neighborhood Empowerment upon request.			
Treasurer Signature		Signer's Signature	
Print Name	Patricia Bates	Print Name	Debra George
Date	5/25/2016	Date	5/25/2016
NC Additional Comments			

Revision Date 1-26-15

Reporting Month:	MARCH
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**Department of Neighborhood Empowerment  
Funding Request Form**



NC NAME: Encino  
 Budget Fiscal Year: 2015/2016  
 Request Date: 2-24-16  
 Meeting Date: 2-24-16  
 Agenda Item: 7b

Requestor: VANC  
 Vendor: Valley Alliance of Neighborhood Councils  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Amount: \$ 500  
 # of payments: —

- Operations     Outreach     NC Sponsored Event     Neighborhood Purpose Grant  
 Contract / Lease     Board Member Reimbursement     Community Improvement Project  
 Out of State     1099 Expense     One Time Expense     Monthly     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 Description

Encino Neighborhood Council would like to contribute \$500 to the 13th Anniversary VANC Mixer to be held on Thursday March 10, 2016

**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
Al Mass	At-Large Representative	✓					
Anni Keusseyan	Area 1 Representative	✓					
Art Sherman	Public Safety Representative						
Carol Levin	Encino Property Owners Rep.	✓					
David Hudgins	Area 7 Representative						
Debra George	Park Advocate/Environment Rep.						
Eliot Cohen	Planning and Land Use Rep.						
Gerald Silver	Homeowners of Encino Rep.	✓					
Jason Ackerman	Area 2 Representative	✓					
Kathy Moghini-Patterson	At-Large Representative	✓					
Ken Silk	Area 3 Representative	✓					
Laurie Kelson	Area 6 Representative	✓					
Mark Levinson	Encino Chamber Representative						
Sharon Brewer	Volunteer/Service Representative						
Shelley Rivlin	Education Representative			✓			
Sherman Gamson	Apartment/Condo Representative	✓					
Talar Dardarian	Religious Organization Rep.	✓					
Todd Rubinstein	Business Representative	✓					
Victoria Miller	Business Representative	✓					
Glenn Bailey	At-Large Alternate						
NC Quorum:	Grand Total (including page 2):	<u>13</u>		<u>1</u>			

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: <u>Albert Mass</u>	Signer's Signature: <u>Todd Rubinstein</u>
Print/Type name: <u>Albert Mass</u>	Print/Type name: <u>Todd Rubinstein</u>
Date (mm/dd/yy): <u>2/24/16</u>	Date (mm/dd/yy): <u>2-24-16</u>
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> > \$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Staff Initials: _____ 1st Level: _____ 2nd Level: _____ Authorization Code: _____

# Invoice

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

Date	Invoice #	Due Date
3/1/2016	13017	3/1/2016

**PAID**  
 03/01/2016

**Bill To**  
 Encino Neighborhood Council  
 P.O. Box 260439  
 Encino, CA 91426

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
	Phone Support and General Web Development	99.00	99.00
		<b>Total</b>	\$99.00
		<b>Payments/Credits</b>	-\$99.00
		<b>Balance Due</b>	\$0.00

**Smart & Final. &**  
Warehouse & Market. Friend & Neighbor.

\*\* Welcome To Our Encino Store \*\*  
Store #477

\*\*\*\*\*  
See Us On WEB [www.smartandfinal.com](http://www.smartandfinal.com)

Cashier: Selena

DATE 03/23/16

TIME 18:49:36

FS Water 4.59 F  
+CRV 1.75  
SUBTOTAL 6.34  
Sales Tax .00

MasterCard TOTAL 6.34  
TENDER 6.34  
Account Number \*\*\*\*\*6212  
APPRVL CODE 048106  
Cas Ref# 1  
Cash CHANGE .00

TOTAL NUMBER OF ITEMS THIS VISIT--> 1

\*\*\*\*\*

Smart & Final Store # 477  
16847 Ventura Blvd.  
Encino, CA 91436

Operator 23018097  
DATE 03/23/16 TIME 18:49:56

Account # \*\*\*\*\*6212

Reference # 150924

APPRVL CODE 048106

Reason Code R400

Credit

TOTAL 6.34  
BALANCE .00

\*\*\*\*\*

18:49:56 OP# 23018097 03/23/16  
Term:2 Trans # 332 Store # 477

THANK YOU FOR SHOPPING  
YOUR SMART AND FINAL  
STORE MANAGER: Robert Nicholas  
1 (818) 789-0242

\*\*\*\*\*

We want to know your thoughts  
so we can serve you better.

Complete our customer survey  
and be entered to win a

**\$500 SmartCash Card**

Please visit  
<http://www.smartandfinal.com/survey>  
Enter code 174910  
within 5 days of this shop!



Fresh Brothers - Encino  
 16060 Ventura Blvd.  
 Encino, CA 91436  
 Phone: (818) 528-2100  
 FreshBrothers.com

Delivery

Order #84

Emp1: JAMES S.

1:36 PM

4/1/2016

ANNIE KEUSSEYAN  
 4933 BALBOA BOULEVARD  
 ENCINO 91316  
 818-515-8067

\*\*\*\*\*

ORDER NOTE

plates forks napkins -50  
 PARM AND PEPPERS!!!  
 ready at 6 Del at 6:30

\*\*\*\*\*

4 LG Regular Create Your Own Pizza	63.96
Thin Crust	
Pepperoni	7.96
4 LG Regular Create Your Own Pizza	63.96
Thin Crust	
4 LG Regular Fresh Vegetable Pizza	91.96
Thin Crust	
NO Onions	
[Fresh Fan]	-22.78

Subtotal	205.06
Delivery Fee	3.95
Tax	18.81
Total	227.82

MC 6212 Payment 227.82

Tip 5.00

Addl Tip \_\_\_\_\_

Total \_\_\_\_\_





**SECTION III - PROJECT BUDGET OUTLINE**

6a) Personnel Related Expenses	Requested of NC	Total Projected Cost
Security	\$ 200.00	\$ 300.00
Entertainers (face painters, potters, artists)	\$ 300.00	\$ 500.00

6b) Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Tent and table rentals, Facility rental, temporary fencing	\$ 700.00	\$ 1,200.00
Plants, potting supplies, pots, arts and crafts supplies, clay	\$ 600.00	\$ 1,000.00
Publicity, ads, banners, flyers	\$ 200.00	\$ 400.00

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?

No  Yes, please list names of NCs: \_\_\_\_\_

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

Source of Funding	Amount	Total Projected Cost
LACSS Membership Dues	\$ 500.00	
LACSS Plant Sales	\$ 500.00	
Sponsorships	\$ 500.00	

9) What is the TOTAL amount of the grant funding requested with this application: \$ 2,000.00

10a) Start date: 03/01/16 10b) Date Funds Required: 05/01/16

10c) Expected completion date: 06/30/16 (After completion of the project, the applicant must submit a follow-up form to the Neighborhood Council and the Department of Neighborhood Empowerment)

**SECTION IV - POTENTIAL CONFLICTS OF INTEREST**

11a) Do you (applicant) have a former or existing relationship with a Board Member of the NC?

No  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 Department 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 Appendix A, "What is a Public Benefit," and Appendix B "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 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\*

Joyce Schumann President Joyce Schumann 8-31-15  
 PRINT Name Title Signature Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED\*

Cheryl White Secretary Cheryl White 9/14/15  
 PRINT Name Title Signature Date

\* If a current Board Member holds the position of Executive Director or Secretary, please contact the Department at (213) 978-1551 for instructions on completing this form

**NEIGHBORHOOD COUNCIL FUNDING PROGRAM  
FUNDING REQUEST FORM**

Please complete in full to request funding from a Neighborhood Council.

REQUEST DATE: 9/16/2015

Funding Amount:

**\$2,000**

NEIGHBORHOOD COUNCIL: Encino

Please complete the information below for the Requester/Payer:

Name of Requester: Los Angeles Cactus and Succulent Society

Are you a board member of this Neighborhood Council?  Yes  No

Is this a request for a recurring payment?  Yes  No If yes, enter term \_\_\_\_\_

Is this request a payment for services requiring a 1099?  Yes  No

Is this a request for an out of state vendor?  Yes  No

Payable to: Los Angeles Cactus and Succulent Society

Remittance Address: P.O. Box 280581

Northridge

City

ropojo@pacbell.net

Email Address

CA 91328

State

818 705-3224

Contact Number

**PUBLIC BENEFIT STATEMENT - Description and Purpose of Expenditure:**

To co-sponsor annual Drought Tolerant Plant Festival. In particular - to fund Kids' Day event during the festival. Amount is requested to cover related direct cost of materials and share of festival overhead.

**DECLARATION**

I, the Requester, understand that I am requesting public funds from the Neighborhood Council and that such funds are restricted under the guidelines set forth by the Department of Neighborhood Empowerment. I declare that this funding request does not pose any potential conflict of interest for any Board Member and will provide any documentation requested by the Department to authorize payment or review the appropriateness of the request.

Jorge Schuman

9/16/2015

REQUESTER'S SIGNATURE

DATE

**NEIGHBORHOOD COUNCIL USE ONLY**

\_\_\_\_\_  
TREASURER'S NAME AND SIGNATURE

DATE

Approved  \$ \_\_\_\_\_

Amended  \$ \_\_\_\_\_

\_\_\_\_\_  
SIGNER'S NAME AND SIGNATURE

DATE

Budget Category:

**Denied**

**DEPARTMENT USE ONLY**

AUTHORIZATION CATEGORY:

Authorization Code: \_\_\_\_\_

NPG  NIP  CONTRACT

LEASE  SPONSORED EVENT

.,500  ADVANCED PAYMENT

\_\_\_\_\_  
DEPARTMENT APPROVAL SIGNATURE

DATE



**STATEMENT  
OF ACCOUNTS**

[REDACTED]  
LOS ANGELES [REDACTED]

[REDACTED]  
For 24-hour Automated Direct Service  
800-238-4486  
800-826-7345(TDD)  
Representatives are available  
Monday through Saturday

To open additional accounts,  
or apply for loans, call your  
banking office at 310-551-8900

**ENCINO NEIGHBORHOOD COUNCIL**  
200 N SPRING ST FL 20  
LOS ANGELES CA 90012-4801

You may also access your account online  
at unionbank.com

Thank you for banking with us  
since 2014

- The Union Bank® Debit MasterCard BusinessCard® has a new look and the addition of chip technology - providing the most advanced security and fraud protection available today. For more information, visit [unionbank.com/chipcardfacts](http://unionbank.com/chipcardfacts).

**Business Basics Checking Summary**

Account Number: [REDACTED]

Days in statement period: 31

Balance on 3/1	\$		14,694.36
Additions			0.00
Subtractions			-2,926.15
		Payments	-2,500.00
		Purchases	-426.15
Balance on 3/31	\$		11,768.21
Statement Average Ledger Balance			13,870.77

We waived your service charge this statement period.

**Payments** *online and electronic banking*

Date	Description/Location	Reference	Amount
3/1	JCS CATERING COM ONLINE PMT WEB UN1682190818POS	59236516	\$ 500.00
3/30	L.A. CACTUS & S ONLINE PMT WEB UN1682190818POS	52013429	2,000.00
<b>Total</b>			<b>\$ 2,500.00</b>

**Purchases** *ATM card and Debit card™ purchases*

Date	Description/Location	Reference	Amount
3/2	THE WEB CO 08183457443 CA 08183457443 CA	72778190	\$ 99.00
3/18	TWC*TIME W 888-TWCABLE CA 888-TWCABLE CA	73264166	59.99
3/21	VERTICALRE 08666837842 CA 08666837842 CA	71751183	28.00
3/24	SMARTNFINA ENCINO CA ENCINO CA	70037553	6.34
3/24	FRESH BROT ENCINO CA ENCINO CA	70037554	232.82
<b>Total</b>			<b>\$ 426.15</b>

**Information and Banking Office Services**

For each monthly statement period your account includes:

- Unlimited free Information Services calls to 24-hour Automated Direct Service