

Office of the City Clerk		MONTHLY EXPENDITURE REPORT	
Reporting Month:	APRIL	Submitted: 5/14/2017 12:46:11	
NC Name:	Encino		
Budget Fiscal Year:	2016-2017		



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	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / DESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
1	Quality Logo Products	7193932		4/3/17 Magnifiers for OneGeneration Outreach Event	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$317.09
2	Encino Community Center			4/5/17 Daddy-Daughter Dance Food Reimb	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$1,000.00
3	OneGeneration	17-02		4/5/17 Senior Symposium Outreach event	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$750.00
4	TWC			4/17/17Cable/Internet	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$59.99
5	Office Depot			4/19/17 Printing	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$15.33
6	Partners in Diversity	See attached		4/20/17 Staffing w/e 3/12/17-4/9/17	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$1,256.30
7	The Web Corner	14721		4/20/17 Website maintenance	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$99.00
8	Constant contact	167293675		4/24/2017 emailing program	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$20.00
9	Corner Bakery	1104413		4/24/17 Food for Homeless Outreach event	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$659.38
#	Office Depot			4/27/17 Printing for general meeting	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$4.84
#	Smart & Final			4/27/17 Water for general meeting	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$5.26
#	Office Depot			4/27/17 Printing for General Meeting	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$5.49
SUBTOTAL: Expenditures by Line Item (May include totals on page 3, if entered)								\$4,467.96
B	CUMULATIVE EXPENDITURES FROM PRIOR MONTHS (CURRENT FISCAL YR)							\$20,018.65
C	OUTSTANDING COMMITMENTS (OBLIGATIONS)							
1	Partners in Diversity			Staffing w/e 4/17/17-4/24/17	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$397.47
2	Partners in Diversity			Staffing w/e 4/30/17-5/7/17	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$602.98
3	Friends of Encino-Tarz lib		TNC-16926	NPG	NPG	<input type="checkbox"/>	<input type="checkbox"/>	\$850.00
4	Americas Healthy Kids			fund AHK event	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$1,850.00
5	PS Print			Windo decals	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$70.00
6	Various			Community get-together	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$500.00
7	Congress of Neigh.			Donation	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$1,000.00
8	Reimburse print cost			Outreach expenses	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$38.00
9	Encino Farmers Market			Outreach table	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$100.00
10	Martin Outdoor Media			Bus Bench advertising	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$700.00
SUBTOTAL: Outstanding Commitments (Includes total on page 3)								\$9,728.45
D	Total Expenditures & Commitments							\$34,215.06
E	Total Adjustments (such as use taxes assessed, prior fiscal years items, etc) (use '-' for credits, '+' for deductions)							\$0.00
F	Approved Budget 2016-2017							\$42,000.00
G	Balance of Budget 2016-2017							\$7,784.94

Reporting Month:	APRIL
NC Name:	Encino

MONTHLY CASH RECONCILIATION				
Beginning Balance (A)	Funds Deposited (B)	Total Available (C) = (A+B)	Cash Spent this Month (D)	Remaining Balance (E) = C - D
\$12,245.35	\$9,736.00	\$21,981.35	\$4,467.96	\$17,513.39

MONTHLY CASH FLOW ANALYSIS						
Category Identifier	Budget Category	Adopted Budget (A)	Total Spent this Month (B)	FY 2015-16 Expenses Cleared in FY 2016-17 (C)	Total Spent in Prior Months (D)	Unspent Budget Balance (E) = A - B - D
100	Operations	\$14,300.00	\$1,271.63	\$0.00	\$7,681.25	\$5,347.12
200	Outreach	\$11,000.00	\$3,196.33	\$0.00	\$5,771.91	\$2,031.76
300	Community Improvement	\$4,200.00	\$0.00	\$0.00		\$4,200.00
400	NPG	\$12,500.00	\$0.00	\$0.00	\$6,565.49	\$5,934.51
500	Elections		\$0.00	\$0.00		\$0.00
	TOTAL	\$42,000.00	\$4,467.96	\$0.00	\$20,018.65	\$17,513.39

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 Office of the City Clerk, Neighborhood Council Funding Section upon request.			
Treasurer Signature		Signer's Signature	
Print Name	PATRICIA BATES	Print Name	DEBRA GEORGE
Date		Date	
NC Additional Comments			

Reporting Month:	APRIL
NC Name:	Encino

ADDITIONAL EXPENDITURES BY LINE ITEM (Optional, do not print page 3 unless you use it)								
A	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / DESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
#	Buca di Beppo			4/27/17 Food for general meeting	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$275.28
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
SUBTOTAL: Expenditures by Line Item								\$275.28

Reporting Month:	APRIL
NC Name:	Encino

ADDITIONAL OUTSTANDING COMMITMENTS BY LINE ITEM (Optional, do not print page 3 unless you use it)								
A	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / DESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
#	Partners in Diversity			Expected balance of staffing for year	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$2,400.00
#	TWC			Expected balance for year	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$120.00
#	The Web Corner			Expected balance for year	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$350.00
#	Mycablemart.xcom			Cables & AV Equipment	OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>	\$150.00
#	Various food vendors			Meeting cost - May & June	OUTREACH	<input type="checkbox"/>	<input type="checkbox"/>	\$600.00
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
#						<input type="checkbox"/>	<input type="checkbox"/>	
SUBTOTAL: Expenditures by Line Item								\$3,620.00

Revision Date 10/14/16



STATEMENT OF ACCOUNTS

UNION BANK
CENTURY CITY 0206
PO BOX 512380
LOS ANGELES CA 90051-0380

Telephone Banking
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

You may also access your account online
at unionbank.com

Thank you for banking with us
since 2014

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

Business Basics Checking Summary

Account Number: [REDACTED]

Days in statement period: 28

Balance on 4/1	\$	12,245.35
Additions		9,736.00
Subtractions		-4,467.96
	Checks	-99.00
	Payments	-3,006.30
	Purchases	-1,362.66
Balance on 4/28	\$	17,513.39

Statement Average Ledger Balance 18,187.14

We waived your service charge this statement period.

Additions

Date	Description/Location	Reference	Amount
4/5	Los Angeles City EDI PYMNTS PPD *****2852	51968625 \$	9,736.00

Checks

Number	Date	Reference	Amount
5083	4/20	06805274	99.00

Payments *online and electronic banking*

Date	Description/Location	Reference	Amount
4/5	ONE GENERATION ONLINE PMT WEB UN1682190818POS	52040984 \$	750.00
4/5	ENCINO COMMUNITY ONLINE PMT WEB UN1682190818POS	52039371	1,000.00
4/20	PARTNERS IN DIVE ONLINE PMT WEB UN1682190818POS	58028239	1,256.30
Total		\$	3,006.30

Purchases *ATM card and Debit card™ purchases*

Date	Description/Location	Reference	Amount
4/3	QUALITY LO 08663125646 IL 08663125646 IL	73806577 \$	317.09
4/17	TWC*TIME W 888-TWCABLE CA 888-TWCABLE CA	73395850	59.99

Purchases ATM card and Debit card™ purchases

<i>Date</i>	<i>Description/Location</i>	<i>Reference</i>	<i>Amount</i>
4/19	OFFICE DEP 800-463-3768 CA 800-463-3768 CA	70871522	15.33
4/24	CTC*CONSTA 855-2295506 MA 855-2295506 MA	70688102	20.00
4/24	CORNER BAK ENCINO CA ENCINO CA	73659278	659.38
4/27	OFFICE DEP ENCINO CA ENCINO CA	72761453	4.84
4/27	SMARTNFINA ENCINO CA ENCINO CA	72761454	5.26
4/27	OFFICE DEP ENCINO CA ENCINO CA	72761455	5.49
4/27	BUCA DI BE ENCINO CA ENCINO CA	72761457	275.28
Total			\$ 1,362.66

Information and Banking Office Services

For each monthly statement period your account includes:

- Unlimited free Information Services calls to 24-hour Automated Direct Service
- Banking office Information Services calls are \$0.00
- Banking office deposits are \$0.00

Your account was not charged for information and banking office services during the statement period.

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino
 Budget Fiscal Year: 2016-2017
 Request Date: 22-Mar-17
 Meeting Date: 3/22/2017
 Agenda Item: 6.A.1.

Requestor: Patricia Bates
 Vendor: Quality Logo Products
 Address: _____
 City: _____ State: _____
 Zip Code: _____ Phone: _____
 Amount: \$ _____ Up to \$400
 # 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: Promotional materials for outreach event at ONEgeneration 2017 Senior Symposium to be held 5/20/17; Credit Card Magnifiers with 'Encino Neighborhood Council' website & phone #

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
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	✓					
DIANE ROSEN	AREA 5 REP	X					
DOUG KRIEGEL <i>Alex Gary</i>	A1 LARGE REP	X					
ELIOT COHEN	PLU		X				
GERALD SILVER	HOMEOWNERS OF ENCINO		X				
GLENN BAILEY	PUBLIC SAFETY	X					
HENRY ESHELMAN	AT-LARGE REP	X					
JESS WHITEHILL	AREA 4 REP					X	
JIM ESTERLE	AREA 7 REP	X					
KENNETH SILK	AREA 3 REP	X					
LAURA SHOVLOWSKY	AREA 1 REP					X	
LAURIE KELSON	AREA 6 REP	X					
MARK LEVINSON	ENCINO CHAMBER OF COMM.		X				
PATRICIA BATES	VOLUNTEER SERVICE	X					
SCOTT LINDEN	AREA 2 REP					X	
SHERMAN GAMSON	APARTMENT/CONDO REP	X					
VARANT MAJARIAN	BUSINESS REP	X					
VICTORIA MILLER	BUSINESS REP	X					
NC Quorum: 11	Grand Total (Including page 2):	15	3			3	

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: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): 3/22/17	Date (mm/dd/yy):
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"/> NCR <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied 1st Level _____ 2nd Level _____ Authorization Code _____

ENCINO NC APRIL 2017 MER ITEM A1

NC Quorum:

11

Totals (this page only):

ENCINO NC APRIL 2017 MER ITEM A 1



QUALITY LOGO PRODUCTS

724 North Highland Ave.
Aurora, IL 60506

Online Orders
customerservice@qualitylogoproducts.com

Phone: (866) 312-5646 Ext. 4
Fax: (866) 314-5646

ORDER CONFIRMATION - 7193932ZZ

Customer Number: 719393

Shipping Method: UPS Ground

Estimated In-Hand Date: 4/11/2017

Bill To: Encino Neighborhood Council
200 N. Spring Street FL20
Los Angeles, CA 90012
PAYMENT TYPE: Credit Card

Ship To: Encino Neighborhood Council
5437 Newcastle Ave. #226
Encino, CA 91316
~~Attention: Alex Garay~~
SHIPPING METHOD: UPS Ground
(Residential Address)

Item #	Quantity	Description	Imprint Color	Item Size	Unit Cost	Total Cost
Q45717	300	BLUE Credit Card Magnifiers		3.375" High x 2.125" Wide	\$0.88	\$264.00
LOCATION	300	Imprint Front			\$0.00	\$0.00
RUN	300	Run Charge #1	White (White)		\$0.00	\$0.00
SETUP	1	Setup Charge #1			\$31.25	\$31.25
FIRM	1	MUST Complete ALL Steps/Approvals of Order Process Before 4:00 PM (CST) on 03/27/2017 to Guarantee the 4/11 In-Hands Date			\$0.00	\$0.00
ADDR	1	** This is a RESIDENTIAL Address **			\$0.00	\$0.00
SHIP	1	Estimated Shipping & Handling			\$21.84	\$21.84
TOTAL		Estimated Order Grand Total				\$317.09

Signing this form enters the buyer into a contractual agreement with Quality Logo Products, Inc. (herein referred to as QLP) to begin immediate production of this order in accordance to the policies and procedures set forth at <https://www.qualitylogoproducts.com/faq/privacy-policy-and-security-statement.htm>. Orders that are cancelled will be assessed a \$30 service fee plus any production charges accrued up until the point of cancellation. No return of goods will be accepted without prior authorization. Incomplete or partial returns will not be accepted. Samples may not be returned. Unless stated otherwise, applicable taxes, duties, and/or tariffs are additional and are the responsibility of the customer. QLP is not responsible for delays due to carrier error or acts of God. In accordance with manufacturing standards under runs of up to 10% may occur. All measurements are approximate. If exact item specifications are required then we highly recommend you request a sample of the product before ordering. In the event buyer's account must be referred to attorneys for collection, buyer agrees to pay reasonable attorney's fees, court costs, and full collection costs. Buyer also agrees to submit to the jurisdiction of the federal and state courts of DuPage County, Illinois and to waive any objection to venue in such courts. This contractual agreement is deemed entered into in DuPage County, Illinois and shall be construed as to its fair meaning and not strictly for or against either party.

ENCINO NC APRIL 2017 MER ITEM A 1

APPROVAL: _____

DATE: _____

Authorized Signature (Buyers Agent)



ORDER NO: 7193932ZZ
 Patricia L. Bates Encino NC - Encino Neighborhood Council

DATE:
 MAR 24, 2017

CREDIT CARD:
 ENDING IN 4209

Product Details

7193932ZZ

Credit Card Magnifiers
 Item #: Q45717

\$317.09

Payment Terms

All new customers are required to prepay a 100% before production can begin on their order. By signing the provided order acknowledgment the buyer acknowledges that they are entering into a contractual agreement with Quality Logo Products, Inc. (herein referred to as QLP) and gives QLP permission to apply any outstanding balance to the payment method provided until paid in full.

Proof Policy

Quality Logo Products requires that all new orders receive a paper/electronic proof and order acknowledgment prior to releasing the order to final production. A paper proof will be provided at no cost, and is our best representation of what your final print/product will look like. Often the artwork is to size or to scale (as indicated on the artwork), and is only intended to provide an idea as to what the final product will look like when completed. The paper proof and order acknowledgment are checked for misspellings and other mistakes (such as item colors, sizing, imprint color, imprint locations), but due to order volume, there is inevitably the rare instance that an error might go unnoticed. For this reason, we strongly recommend that you take part in this process by carefully checking your paperwork before signing off and submitting your approval. IT IS NOT SAFE TO ASSUME ANYTHING. Quality Logo Products cannot be held responsible for any wrong interpretations of the artwork or order approval, so if you have any questions or if something is unclear, please contact your sales representative to clarify the matter.

QUALITY LOGO PRODUCTS IS NOT RESPONSIBLE FOR ANY TYPOGRAPHICAL MISTAKES OR ERRORS THAT ARE OVERLOOKED AND LATER APPROVED BY THE CUSTOMER. In addition, Quality Logo Products cannot be held responsible for any damages that may be incurred as a result of the error or mistake after the order has been printed and accepted by the customer.

Shipping Policy

Orders that qualify for the delivery guarantee will include (MUST HAVE XX/XX/XX) next to the shipment method. Orders that do NOT contain this notation do NOT qualify for the delivery guarantee.

Un-imprinted merchandise returns are subject to a 15% restocking fee and the necessary freight costs to return the product do apply. Incomplete or partial returns will not be accepted. Unauthorized returns are not accepted.

ENCINO NC APRIL 2017 MER ITEM A 1



City of Los Angeles, Department of Recreation and Parks

Encino Community Center

4935 Balboa Blvd. • Encino, CA 91316 • Phone: (818) 995-1690 Fax: (818) 990-8467



Invoice

BILL TO
Encino Neighborhood Council

INVOICE DATE
March 21, 2017

ITEM DESCRIPTION	ITEM PRICE
Reimbursement to facility for Daddy Daughter Dance food/dinner	\$1,000.00
TOTAL DUE	\$1,000.00

NOTES
Make payment payable to LA City Department of Recreation and Parks.

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 22-Feb-17

Meeting Date: 2/22/2017

Agenda Item: 8C1

Requestor: Patricia Bates

Vendor: Encino community Center (LA Recreation & Parks)

Address: _____

City: Encino State: CA

Zip Code: 91436 Phone: _____

Amount: \$ 1,000.00

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: Reimburse food cost for Daddy-Daughter event

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
ANNIE KEUSSEYAN	RELIGIOUS REP					X	
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	X					
DIANE ROSEN	AREA 5 REP	X					
DIANE ROSEN Alex Gary	AT LARGE REP - A11	X					
ELIOT COHEN	PLU	X					
GERALD SILVER	HOMEOWNERS OF ENCINO					X	
GLENN BAILEY	PUBLIC SAFETY	X					
HENRY ESHELMAN	AT-LARGE REP	X					
JESS WHITEHILL	AREA 4 REP	X					
JIM ESTERLE	AREA 7 REP	X					
KENNETH SILK	AREA 3 REP	X					
LAURA SHOVLOWSKY	AREA 1 REP					X	
LAURIE KELSON	AREA 6 REP	X					
MARK LEVINSON	ENCINO CHAMBER OF COMM.	X					
PATRICIA BATES	VOLUNTEER SERVICE	X					
SCOTT LINDEN	AREA 2 REP					X	
SHERMAN GAMSON	APARTMENT/CONDO REP	X					
VARANT MAJARIAN	BUSINESS REP	X					
VICTORIA MILLER	BUSINESS REP	X					
NC Quorum: 11	Grand Total (including page 2):	16				5	

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: [Signature] Signer's Signature: [Signature]
 Print/Type name: Patricia Bates Print/Type name: Debra George
 Date (mm/dd/yy): 2/22/17 Date (mm/dd/yy): 2/22/17

Department Use Only: >\$2,500 NPG Sponsored Event Denied
 Authorization Code: _____
 2nd Level: _____

ENCINO NC APRIL 2017 MER ITEM A 2

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 7-Dec-16

Meeting Date: 12/7/2016

Agenda Item: 6-A-3

Requestor: Patricia Bates

Vendor: Encino Community Center

Address: _____

City: _____ State: _____

Zip Code: _____ Phone: _____

Amount: \$ 16.68

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: Up to \$700 For Encino Community Center Daddy-Daughter Dance Fundraiser, to be used for purchase of food. Changed in February 22, 2017 meeting to reimburse cost of food.
 \$ 6,000

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
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	X					
DIANE ROSEN	AREA 5 REP					X	
DOUG KRIEDEL	AT LARGE REP	X					
ELIOT COHEN	PLU	X					
GERALD SILVER	HOMEOWNERS OF ENCINO	X					
GLENN BAILEY	PUBLIC SAFETY	X					
HENRY ESHELMAN	AT-LARGE REP	X					
JESS WHITEHILL	AREA 4 REP	X					
JIM ESTERLE	AREA 7 REP	X					
KENNETH SILK	AREA 3 REP	X					
LAURA SHOVLANSKY	AREA 1 REP	X					
LAURIE KELSON	AREA 6 REP					X	
MARK LEVINSON	ENCINO CHAMBER OF COMM.	X					
PATRICIA BATES	VOLUNTEER SERVICE	X					
SCOTT LINDEN	AREA 2 REP			X			
SHERMAN GAMSON	APARTMENT/CONDO REP	X					
VARANT MAJARIAN	BUSINESS REP	X					
VICTORIA MILLER	BUSINESS REP	X					
NC Quorum: 11	Grand Total (including page 2):	18		1		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: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): 3/22/17	Date (mm/dd/yy):
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> CIP <input checked="" type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> NC Sponsored Event <input type="checkbox"/> Denied	Staff Initials: _____ 1st Level: _____ 2nd Level: _____ Authorization Code: _____

ENCINO NC APRIL 2017 MER ITEM A 2

NC NAME: Encino
 Meeting Date: 42711
 Agenda Item: 6-A-3

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
Adriohn Richardson	Education	x					
NC Quorum: 11	Totals (this page only):	1					

ENCINO NC APRIL 2017 MER ITEM A 2



INVOICE

Invoice # 17-02

January 20, 2017

Encino Neighborhood Council
Attn: Debra George

REMIT PAYMENT TO:
ONEgeneration Senior Enrichment Center
18255 Victory Blvd.
Reseda, CA 91335
818-705-2345

Senior Symposium

Item	Amount
Senior Symposium Participation – booth, canopy, table with 2 chairs, and inclusion of logo on flyers, banners, programs and other outreach materials for the May 20, 2017 Senior Symposium.	\$750.00
Balance Due	\$750.00

Payment Due By April 20, 2017

**Department of Neighborhood Empowerment
Funding Request Form**



NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 22-Feb-17

Meeting Date: 2/22/2017

Agenda Item: 8 B2

- 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

Requestor: Patricia Bates

Vendor: ONEgeneration

Address: _____

City: _____ State: _____

Zip Code: _____ Phone: _____

Amount:\$ 750.00

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
Description

Outreach event at ONEgeneration 2017 Senior Symposium to be held 5/20/17; Encino NC outreach will participate

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
ANNIE KEUSSEYAN	RELIGIOUS REP					X	
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	X					
DIANE ROSEN	AREA 5 REP	X					
DOUG KRIEGL Alex Gary	AT LARGE REP <u>A14</u>	X					
ELIOT COHEN	PLU	X					
GERALD SILVER	HOMEOWNERS OF ENCINO					X	
GLENN BAILEY	PUBLIC SAFETY	X					
HENRY ESHELMAN	AT-LARGE REP	X					
JESS WHITEHILL	AREA 4 REP	X					
JIM ESTERLE	AREA 7 REP	X					
KENNETH SILK	AREA 3 REP	X					
LAURA SHOVLOWSKY	AREA 1 REP					X	
LAURIE KELSON	AREA 6 REP	X					
MARK LEVINSON	ENCINO CHAMBER OF COMM.	X					
PATRICIA BATES	VOLUNTEER SERVICE	X					
SCOTT LINDEN	AREA 2 REP					X	
SHERMAN GAMSON	APARTMENT/CONDO REP	X					
VARANT MAJARIAN	BUSINESS REP	X					
VICTORIA MILLER	BUSINESS REP	X					
NC Quorum: 11	Grand Total (Including page 2):	<u>16</u>				<u>5</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, ~~NC no additional Cash Request Form is required.~~

Treasurer's Name: <u>Patricia Bates</u>	Signer's Name: <u>Debra George</u>
Date (mm/dd/yy): <u>2/22/17</u>	Date (mm/dd/yy): <u>2/22/17</u>
<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: _____

NC NAME: _____ Encino
 Meeting Date: _____ 42788
 Agenda Item: _____ 8.B. 2

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	
Adriohn Richardson	Education					X		
NC Quorum:	11	Totals (this page only):						

March 28, 2017

Auto Pay Notice

Account: **8448 20 001 3772834**
Phone Number: (818) 971-6996
Security Code: **6486**
Service At: 4924 PASO ROBLES AVE
ENCINO CA 91316-3458

Contact Us

Visit us at twc.com/support
Or, call us at 855-70-SPECTRUM (1-855-707-7328)

Summary

*Service from 04/06/17 through 05/05/17
details on following pages*

Previous Balance	59.99
Payments Received -Thank You!	-59.99
Remaining Balance	0.00
Internet Services	59.99
Current Charges	59.99
<i>YOUR AUTO PAY WILL BE PROCESSED 04/14/17</i>	
Total Due by Auto Pay	\$59.99

SPECTRUM NEWS

Reminder. The terms and conditions applicable to your services contain a binding arbitration provision, which includes a waiver of class actions and provisions for opting out of arbitration and affects your rights with respect to all services.

Reminder: Spectrum product & services are now available. Spectrum offers more choice & value with equipment prices to help you make the most of your services. Spectrum TV has more FREE HD, Internet with the fastest starting speeds plus no modem fees & Voice service with no added taxes or fees. For more info, visit Spectrum.com/TVpackages or call 855-70-SPECTRUM (1-855-707-7328).



Thank you for choosing Spectrum.

To avoid a late fee, the BALANCE must be paid by the DUE DATE. We appreciate your prompt payment and value you as a customer.

Auto Pay Thank you for signing up for auto pay. Please note your payment may be drafted and posted to your Spectrum account the day after your transaction is scheduled to be processed by your bank.

March 28, 2017

John Arnstein

Account: 8448 20 001 3772834
Phone Number: (818) 971-6996
Service At: 4924 PASO ROBLES AVE
ENCINO CA 91316-3458



9260 TOPANGA CYN BV CHATSWORTH CA 91311-5760
8448 2000 NO RP 28 03292017 NNNNNNNN 01 998113

JOHN ARNSTEIN
ENCINO NEIGHBORHOOD COUNCI
4924 PASO ROBLES AVE
ENCINO CA 91316-3458

Total Due by Auto Pay **\$59.99**

TIME WARNER CABLE
PO BOX 60074
CITY OF INDUSTRY CA 91716-0074

844820001377283400059998

ENCINO NC APRIL 2017 MER ITEM A 4

Account: John Arnstein
Security Code: 8448 20 001 3772834
6486

Contact Us

Visit us at twc.com/support
Or, call us at 855-70-SPECTRUM (1-855-707-7328)
8448 2000 NO RP 28 03292017 NNNNNNNN 01 998113

Charge Details

Previous Balance		59.99
Credit Card Payment	03/18	-59.99
Remaining Balance		\$0.00

Payments received after 03/28/17 will appear on your next bill.

Service from 04/06/17 through 05/05/17

Internet Services

Internet Modem Lease	10.00
Basic Internet	49.99
	\$59.99

Internet Services Total \$59.99

Current Charges **\$59.99**
Total Due by Auto Pay **\$59.99**

Billing Information

Tax and Fees - This statement reflects the current taxes and fees for your area (including sales, excise, user taxes, etc.). These taxes and fees may change without notice.

Surcharges - Spectrum imposes surcharges to recover costs of complying with its governmental obligations.

Terms & Conditions - Spectrum's detailed standard terms and conditions for service are located at spectrum.com/policies.

Authorization to Convert your Check to an Electronic Funds Transfer Debit - If your check is returned, you expressly authorize your bank account to be electronically debited for the amount of the check plus any applicable fees. The use of a check for payment is your acknowledgment and acceptance of this policy and its terms and conditions.

Past Due Fee / Late Fee Reminder - A late fee will be assessed for past due charges for service.

Local Store: 9260 Topanga Canyon Blvd., Chatsworth CA 91311 Store Hours: Mon thru Fri - 8:30am to 6:30pm; Sat - 9:00am to 5:00pm



For questions or concerns, please call 1-855-707-7328.



ENCINO NC APRIL 2017 MER ITEM A 4



Office DEPOT.**Customer Information**

Customer Name: ENCINO NEIGHBORHOOD COUNC
 Customer Ph# : 818-971-6996
 Customer ID: 77204157

Order Information

Order Number: 921727177-001
 Order Date: 4/18/17 2:26 pm
 Invoice Date: 4/18/17 3:07 pm
 Store: 0949
 Payment: Master *4209

Order Details

SKU	Description	Qty Ordered	Qty Filled	Price/Unit	Extended Price
0870284	COPIES, FLYERS 2017 03 31 MER OD COPY.pdf	5	5		
0798626	FS B&W LTR DBLSD 20#	140	140	.10	14.00
0903314	STAPLING MACH PER ST	5	5	.02	.10



9217271770019

Subtotal:	\$14.10
Other Charges:	
Del Charge:	
Tax:	\$1.23
Total:	\$15.33

PAID

Signature (required) _____

Please Print Name _____

This order is PAID. Log in to GMIL and perform a Return/ Credit to refund the customer if necessary. Refer to SOP 9.04 for more details.

ENCINO NC APRIL 2017 MER ITEM A 5

Thank you for shopping at
 Office DEPOT

Customer Name: PATRICIA BATES
Job Name: 2017 03 31 MER OD COPY.pdf



GMIL
921727177-001
Print Center: 00949

Print Ticket Summary
1 of 1 Items in Order
Created: 04/18/2017 2:26 PM
Customer pickup time: 04/18/2017 4:26 PM

Item Summary	Quantity
Product Type: Copies	
Product: STAPLEDSETS	5
Impressions: B/W (Double Sided)	140 of 140
Color	0 of 0

Recipient
PATRICIA BATES
200 N SPRING ST
LOS ANGELES, CA 900124801
attn: PATRICIA BATES
phone: 18189716996
email: TREASURER@ENCINONC.ORG

Production and Fulfillment	Quantity
	5
Print File: 2017 03 31 MER OD COPY.pdf	
Paper: Letter - Standard Whites - 20lb - White (195)	
Impressions: Double Sided	
B & W	
Pages: 28	
Original Size: 8.5000 x 11.0000	
Final Size: 8.500 x 11.000	
Finishing: (portrait)	
Binding: BIND SKU: 903314 upper left or right machine staple - UPPER_LEFT_OR_RIGHT	
BIND SIDE: left	

ENCINO NC APRIL 2017 MER ITEM A 5

This order is prepaid

Ship Date: _____



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

Remit to: Partners In Diversity, Inc.
ASGE Marquette Commercial Finance
NW 6333 P.O. Box 1450
Minneapolis, MN 55485-6333

Neighborhood Council/Encino
4924 Paso Robles Ave
Encino, CA 91316

INVOICE

Invoice Amount
\$25.74

Payment Terms	Invoice Date
Due On Receipt	04/10/2017
Invoice No.	Customer No.
26743	1510

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 04/09/2017 Ackerman, Jason E Minute Taker	Reg	1.00	\$25.74	\$25.74
Total This Week ending:				\$25.74

Reg: 1 OT: 0 DT: 0	Total - This Invoice:	\$25.74
---------------------------	------------------------------	----------------

Partners In Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, age, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms in policy and practice to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all applicable federal, state and municipal laws.

25.74
 188.53
 112.67
 310.32
 423.19
 195.85
1256.30

w/e 4/9/17 26743
 ✓ -26763
 4/2/17 26709
 3/27/17 26642
 3/19/17 26549
 3/12/17 26498

In B, 11 pay 4/10/17, Arrive 4/20/17

ENCINO NC APRIL 2017 MER ITEM A 6



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

Remit to: Partners In Diversity, Inc.
ASGE Marquette Commercial Finance
NW 6333 P.O. Box 1450
Minneapolis, MN 55485-6333

Neighborhood Council/Encino
4924 Paso Robles Ave
Encino, CA 91316

INVOICE

Invoice Amount
\$188.53

Payment Terms	Invoice Date
Due On Receipt	04/10/2017
Invoice No.	Customer No.
26763	1510

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 04/09/2017				
Ackerman, Jason E Executive Administrative Assistant	Reg	8.50	\$22.18	\$188.53
Total This Week ending:				\$188.53

Reg: 8.5 OT: 0 DT: 0	Total - This Invoice:	\$188.53
-----------------------------	------------------------------	-----------------

Partners In Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, age, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms in policy and practice to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all applicable federal, state and municipal laws.

ENCINO NC APRIL 2017 MER ITEM A 6



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

Remit to: Partners In Diversity, Inc.
ASGE Marquette Commercial Finance
NW 6333 P.O. Box 1450
Minneapolis, MN 55485-6333

Neighborhood Council/Encino
4924 Paso Robles Ave
Encino, CA 91316

INVOICE

Invoice Amount
\$112.67

Payment Terms	Invoice Date
Due On Receipt	04/03/2017
Invoice No.	Customer No.
26709	1510

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 04/02/2017				
Ackerman, Jason E Executive Administrative Assistant	Reg	5.08	\$22.18	\$112.67
Total This Week ending:				\$112.67

Reg: 5.08 OT: 0 DT: 0	Total - This Invoice:	\$112.67
------------------------------	------------------------------	-----------------

Partners In Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, age, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms in policy and practice to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all applicable federal, state and municipal laws.

ENCINO NC APRIL 2017 MER ITEM A 6



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

Remit to: Partners In Diversity, Inc.
ASGE Marquette Commercial Finance
NW 6333 P.O. Box 1450
Minneapolis, MN 55485-6333

Neighborhood Council/Encino
4924 Paso Robles Ave
Encino, CA 91316

INVOICE

Invoice Amount
\$310.32

Payment Terms	Invoice Date
Due On Receipt	03/27/2017
Invoice No.	Customer No.
26642	1510

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 03/26/2017				
Ackerman, Jason E Executive Administrative Assistant	Reg	6.25	\$22.18	\$138.63
Ackerman, Jason E Minute Taker	Reg	6.67	\$25.74	\$171.69
Total This Week ending:				\$310.32

g: 12.92 OT: 0 DT: 0	Total - This Invoice:	\$310.32
-----------------------------	------------------------------	-----------------

Partners In Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, age, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms in policy and practice to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all applicable federal, state and municipal laws.

ENCINO NC APRIL 2017 MER ITEM A 6



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

INVOICE

Invoice Amount
\$423.19

Remit to: Partners In Diversity, Inc.
ASGE Marquette Commercial Finance
NW 6333 P.O. Box 1450
Minneapolis, MN 55485-6333

Payment Terms	Invoice Date
Due On Receipt	03/20/2017
Invoice No.	Customer No.
26549	1510

Neighborhood Council/Encino
4924 Paso Robles Ave
Encino, CA 91316

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 03/19/2017				
Ackerman, Jason E Executive Administrative Assistant	Reg	19.08	\$22.18	\$423.19
Total This Week ending:				\$423.19

Reg: 19.08 OT: 0 DT: 0	Total - This Invoice:	\$423.19
-------------------------------	------------------------------	-----------------

Partners In Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, age, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms in policy and practice to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all applicable federal, state and municipal laws.

ENCINO NC APRIL 2017 MER ITEM A 6



PARTNERS IN DIVERSITY, INC.
A Small Business, Women Owned Enterprise

Remit to: Partners In Diversity, Inc.
ASGE Marquette Commercial Finance
NW 6333 P.O. Box 1450
Minneapolis, MN 55485-6333

Neighborhood Council/Encino
4924 Paso Robles Ave
Encino, CA 91316

INVOICE

Invoice Amount
\$195.85

Payment Terms	Invoice Date
Due On Receipt	03/13/2017
Invoice No.	Customer No.
26498	1510

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/Encino	Corporate	1510	Due On Receipt

Description	Type	Units	Rate	Amount
Week ending: 03/12/2017				
Ackerman, Jason E Executive Administrative Assistant	Reg	8.83	\$22.18	\$195.85
Total This Week ending:				\$195.85

Reg: 8.83 OT: 0 DT: 0	Total - This Invoice:	\$195.85
------------------------------	------------------------------	-----------------

Partners In Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, age, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms in policy and practice to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all applicable federal, state and municipal laws.

ENCINO NC APRIL 2017 MER ITEM A 6

Invoice

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

Date	Invoice #	Due Date
4/1/2017	14721	4/1/2017

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
		Total	\$99.00
		Payments/Credits	\$0.00
		Balance Due	\$99.00

[Print](#)

Billing Activity

Encino Neighborhood Council

*Attn: Patricia Bates
200 N. Spring St FL 20
Los Angeles CA 90012-4801
US
P: 818-971-6996*

Today's Date: 04/26/2017
User Name: president@encinonc.org

Billing Activity from 01/26/2017 to 04/26/2017

Date	Description	Charge Amount	Credit Amount
04/22/2017	Payment - Credit Card (MasterCard) *****4209		\$20.00 USD
03/27/2017	Invoice #167293675	\$20.00 USD	
03/22/2017	Payment - Credit Card (MasterCard) *****4209		\$20.00 USD
02/27/2017	Invoice #166026913	\$20.00 USD	
02/22/2017	Payment - Credit Card (MasterCard) *****4209		\$20.00 USD
01/27/2017	Invoice #164854548	\$20.00 USD	

Billing questions? [Contact Support](#)

Constant Contact - 1601 Trapelo Road - Waltham, MA 02451 US

Corner Bakery Cafe # 210

15626 Ventura Blvd.
Encino, CA 91436
(818)981-7514

CTR Delivery # K TAYLOR 2137133148

4/14/2017 1:54:02 PM
Order 1104413 Cashier: CATERING -

1 Surcharge	59.94
15 Lunch Bag	104.25
Chicken Pesto LB	
Chips Bag CTR	
AST CKIE CT	
No Drink	
15 Lunch Bag	104.25
Tomato Mozzarella LB	
Chips Bag CTR	
AST CKIE CT	
No Drink	
15 Lunch Bag	104.25
Roast Beef & Cheddar LB	
Chips Bag CTR	
AST CKIE CT	
No Drink	
15 Lunch Bag	104.25
Turkey Swiss LB	
Chips Bag CTR	
AST CKIE CT	
No Drink	
15 Lunch Bag	104.25
Ham & Swiss Pretzel LB	
Chips Bag CTR	
AST CKIE CT	
No Drink	
15 Lunch Bag	104.25
Uptown Turkey LB	
Chips Bag CTR	
AST CKIE CT	

Chips Bag tik	
AST CKIE CT	
No Drink	
15 Lunch Bag	104.25
Chicken Pesto LB	
Chips Bag CTR	
AST CKIE CT	
No Drink	

Comp Green QA Catering (199.81)

SubTotal	659.38
Tax	0.00

* WIN \$1000 *

Tell us how we're doing.
Visit www.cafefeedback.com
or call 866-306-6162
within 72 hours and you could
win our monthly drawing.

Code: 02104413113

Total 659.38

Mastercard 659.38

Acct:XXXXXXXX4209

Approval:

Corner Bakery Corporate Office
1 (800) 309-4642
Visit us at : www.CornerBakeryCafe.com

INVOICE



Invoice #: 11044137110210
Event Date/Time:
04/20/2017 10:00AM

STORE USE ONLY	
Order Number: 1104413	
Date Ordered: 3/15/2017 1:13:43 PM	
CTR Delivery	
Contact: KEVIN TAYLOR	
Address: WOODLEY PARK	
Address:	
Address:	
City, State, Zip:	
Contact#:	
Directions:	

Bill To:

Company:
Customer: KEVIN TAYLOR
Address:
Address:
City, State Zip:
Bus#: 2137133148 Cell#: Home#:
HA#: Not Applicable

Quantity	Description	Cost
15	Lunch Bag	\$104.25
15	Lunch Bag	\$104.25
15	Lunch Bag	\$104.25
15	Lunch Bag	\$104.25
15	Lunch Bag	\$104.25
15	Lunch Bag	\$104.25
10	Lunch Bag	\$69.50
15	Lunch Bag	\$104.25

Sign up for our eCafe
to receive all the latest
on what's happening at
Corner Bakery Cafe.
www.cornerbakerycafe.com

Your opinion is important!
Go to www.cafefeedback.com
or call 866-306-6162 within 72
hours and tell us about your visit. You could
win \$1000.00 in our monthly drawing.
Code: 02104413113

Total Sales:	\$799.25
Adjustments:	(\$199.81)
Delivery Fee:	\$59.94
Sales Tax:	\$0.00
Sub-Total:	\$659.38

Gratuity:	
Final Total:	

Payments:
Mastercard(4209) \$659.38

GUEST SIGNATURE

X

Print Name

<p>Store Information</p> <p>Encino 15626 Ventura Blvd. - Encino, CA 91436 Tele: (818)981-7514 Fax: (818)981-7569 Email: cb0210@cornerbakerycafe.com</p>	<p>Food Safety Tips</p> <p>Consume or Refrigerate below 41F/5C within 2 hours -reheat food to at least 165F/74C only once</p> <p>Discard after 48 hours</p>	<p>All Credit Card Payments are Pre-authorized up to 30 Days in Advance and processed on the day of Delivery</p> <p>Please remit House Account payments to:</p> <p>CBC Restaurant Corp P.O Box 203881 Dallas, TX 75320-3881</p>
---	--	--

ENCINO NC APRIL 2017 MER ITEM A 9

Department of Neighborhood Empowerment Funding Request Form



NC NAME: Encino

Budget Fiscal Year: 2016-2017

Request Date: 22-Mar-17

Meeting Date: 3/22/2017

Agenda Item: 7.1.

Requestor: Patricia Bates

Vendor: Corner Bakery or similar

Address: _____

City: _____ State: _____

Zip Code: _____ Phone: _____

Amount: \$ _____ Up to \$700

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

Purchase of breakfast meals to be distributed at April Sepulveda Basin Homeless outreach Event

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
ANNIE KEUSSEYAN	RELIGIOUS REP	X					
CAROL LEVIN	ENCINO PROPERTY OWNERS	X					
DEBRA GEORGE	PARK ADVOCATE	X					
DIANE ROSEN	AREA 5 REP	X					
DOUG KRIBGEL Alex	AT LARGE REP	X					
ELIOT COHEN	PLU			X			
GERALD SILVER	HOMEOWNERS OF ENCINO		X				
GLENN BAILEY	PUBLIC SAFETY	X					
HENRY ESHELMAN	AT-LARGE REP	X					
JESS WHITEHILL	AREA 4 REP					X	
JIM ESTERLE	AREA 7 REP	X					
KENNETH SILK	AREA 3 REP			X			
LAURA SHOVLowsky	AREA 1 REP					X	
LAURIE KELSON	AREA 6 REP	X					
MARK LEVINSON	ENCINO CHAMBER OF COMM.	X					
PATRICIA BATES	VOLUNTEER SERVICE	X					
SCOTT LINDEN	AREA 2 REP					X	
SHERMAN GAMSON	APARTMENT/CONDO REP	X					
VARANT MAJARIAN	BUSINESS REP		X				
VICTORIA MILLER	BUSINESS REP	X					
NC Quorum: 11	Grand Total (including page 2):	14	2	2		3	

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: <u>Debra George</u>
Print/Type name: Patricia Bates	Print/Type name: Debra George
Date (mm/dd/yy): <u>3/22/2017</u>	Date (mm/dd/yy): _____
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> >\$2,500 <input checked="" type="checkbox"/> Outreach <input type="checkbox"/> NPG <input type="checkbox"/> NC Sponsored Event <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Neighborhood Purpose Grant <input type="checkbox"/> Denied <input type="checkbox"/> Board Member Reimbursement <input type="checkbox"/> Approved Staff Expense <input type="checkbox"/> Community Improvement Project <input type="checkbox"/> 1st Level <input type="checkbox"/> Out of State <input type="checkbox"/> 1099 Expense <input type="checkbox"/> One Time Expense <input type="checkbox"/> Monthly <input type="checkbox"/> Multiple # of payments _____ <input type="checkbox"/> Multiple # of payments _____ <input type="checkbox"/> 2nd Level _____	Authorization Code _____

ENCINO NC APRIL 2017 MER ITEM A 9

NC NAME: Encino
 Meeting Date: 4/20/16
 Agenda Item: 7.1.

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
Adriohn Richardson	Education	X					
NC Quorum:	11	Totals (this page only):	1				

Office DEPOT OfficeMax®

OFFICE DEPOT #949
16571 Ventura Blvd.
Encino, CA 91436

Phone: (818) 907-1741 Fax: (818) 907-2742
04/26/2017 16.9.3 4:13 PM
STR 949 REG 4 TRN 5647 EMP 582758

SALE

Product ID	Description	Total
167060	BW SS Letter	
145 @ 0.14		20.30
	Bulk @0.020	-2.90
	Retail After Discounts	17.40
	Business Solutions Prc	2.90
	You Pay	2.90SS
861775	STAPLING MACHI	
5 @ 0.03		0.15
	Business Solutions Prc	0.05
	You Pay	0.05SS
166633	Drilling1-3Hol	3.99SS
	Business Solutions Prc	1.50
	You Pay	1.50SS
	Subtotal:	4.45
	Sales Tax	0.39
	Total:	4.84
	MasterCard 4209:	4.84

AUTH CODE 058614
TDS Chip Read
AID A0000000042203 Debit
TVR 8000088000
CVS No Signatur

*****1 *****

Office DEPOT OfficeMax®

OFFICE DEPOT #949
16571 Ventura Blvd.
Encino, CA 91436

Phone: (818) 907-1741 Fax: (818) 907-2742
04/25/2017 16 9.3 8:12 PM
STR 949 REG 4 TRN 5580 EMP 657964

SALE

Product ID	Description	Total
167060	BW SS Letter	
225 @ 0.14		31.50
	Bulk @0.020	-4.50
	Retail After Discounts	27.00
	Business Solutions Prc	4.50
	You Pay	4.50SS
861775	STAPLING MACHI	
55 @ 0.03		1.65
	Business Solutions Prc	0.55
	You Pay	0.55SS
	Subtotal:	5.05
	Sales Tax:	0.44
	Total:	5.49
	MasterCard 4209:	5.49

AUTH CODE 066901
TDS Chip Read
AID A0000000042203 Debit
TVR 8000088000
CVS No Signatur

*****1 *****

data
app
acc
Pun
for
Tec
oni
ga
fu
te
al
w
o
c
l

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

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

See Us On WEB www.smartandfinal.com

Cashier: Maria

DATE 04/26/17 TIME 16:29:20

Thirst Puncher Lem	1.89	F
+CRV	.10	
3 @ .99		
Crystal Geyser	2.97	F
3 @ .10		
+CRV	.30	
SUBTOTAL	5.26	
Sales Tax	.00	
TOTAL	5.26	
MasterCard	TENDER	5.26
Cash	CHANGE	.00

TOTAL NUMBER OF ITEMS THIS VISIT--> 4

***** Electronic Payment Activity *****
04/26/2017 16:31:58
Total: USD\$ 5.26
Debit MasterCard Entry Method: Chip
CARD #: XXXXXXXXXXXX4209
PURCHASE - APPROVED
AUTH CODE:023587

Mode:	Issuer
AID:	A0000000041010
TVR:	0000003000
IAD:	01106070032200002304000000000000
TSI: E800	ARC: 00
MID: 288106	TID: 001
	RRN: 044110

***** Electronic Payment Activity *****

16:32:05 OP# 810020439 04/26/17
Term:4 Trans # 236 Store # 477

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

A Walk Down First Street
*0000

ENCINO NC APRIL 2017 MER ITEM A 11

Buca di Beppo
Store#0504
Encino, CA 91316
818.995.3288

Server: Sarah 04/26/2017
Encinocouncil/1 5:27 PM
Guests: 50 50026
Order Type: Delivery

HP Mixed Green 38.99
HP Caesar Salad 38.99
FP Spaghetti Meat Sauce 79.99
FP Baked Ziti 96.99
Delivery Fee 25.00

Offer Manager -25.00

We value your opinion.
Visit bucafeedback.com to complete
a brief survey and enter our weekly
drawing for a chance to win a
\$100 digital promotional certificate.
See bucadibeppo.com/buca-feedback-rules
for Official Rules and restrictions.

674 254 000 060 216

Subtotal 254.96
Tax 20.32

Total 275.28

Mastercard #XXXXXXXXXXXX4209 275.28
Auth:054306
Balance Due 0.00

Mother's Day is May 14th!
Make your reservation today!
*****Suggested Tip*****
(15%) \$0.00 (18%) \$0.00 (20%) \$0.00

Buca di Beppo
Store#0504
Encino, CA 91316
818.995.3288

Server: Sarah DOB: 04/26/2017
05:26 PM 04/26/2017
Encinocouncil/1 5/50026

SALE

Mastercard 5242889
Card #XXXXXXXXXXXX4209
Card Entry Method: K

Approval: 054306

Amount: \$ 275.28

+ Gratuity: _____

= Total: _____

I agree to pay the above
total amount according to the
card issuer agreement.

*** GUEST COPY ***