

# Monthly Expenditure Report



Reporting Month: June 2024

Budget Fiscal Year: 2023-2024

NC Name: Encino Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$17153.66	\$2019.34	\$15134.32	\$90.00	\$0.00	\$15044.32

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office	\$17747.00	\$430.29	\$117.87	\$90.00	\$27.87
Outreach		\$1589.05		\$0.00	
Elections		\$0.00		\$0.00	
Community Improvement Project	\$10000.00	\$0.00	\$10000.00	\$0.00	\$10000.00
Neighborhood Purpose Grants	\$13250.00	\$0.00	\$5000.00	\$0.00	\$5000.00
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$23859.79	

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	THE WEB CORNER, INC	06/01/2024	Approved 2023-2024 Budget - Website maintenance and hosting	General Operations Expenditure	Office	\$199.00
2	GOOGLE GOOGLE STORAGE	06/07/2024	Extra data storage	General Operations Expenditure	Office	\$2.99
3	LINE2	06/17/2024	Approved 2023-2024 Budget - phone # and answering service	General Operations Expenditure	Office	\$22.06
4	YULOFF CREATIVE LLC	06/18/2024	The ENC's Outreach Committee recommends amending the motion to allocate up to \$2,000 for swag, covering 500 units of mints, 500 units of sanitizer spray, and 250 units of coloring books from Yuloff Creative	General Operations Expenditure	Outreach	\$1589.05
5	MSFT E0800SK9AE	06/19/2024	Approved 2023-2024 Budget - MS Office 365 software	General Operations Expenditure	Office	\$12.50
6	City of Los Angeles Department of Neighborhood Empowerment	05/24/2024	Approved 2023-2024 budget - Zoom license charge	General Operations Expenditure	Office	\$193.74
<b>Subtotal:</b>						<b>\$2019.34</b>

Outstanding Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	City of Los Angeles Department of Recreation and Parks	11/07/2023	Approve payment for the \$90 balance for the poll location during the ENC's election at the Balboa Sports Complex - billed by City of Los Angeles Dept. of Rec. & Parks, ...	General Operations Expenditure	Office	\$90.00
<b>Subtotal:</b> Outstanding						<b>\$90.00</b>

**The Web Corner, Inc.**

**Invoice**

15300 Ventura Blvd. Suite 400  
 Sherman Oaks, CA 91403  
 818-345-7443

**PAID**  
**06/01/2024**

Date	Invoice #	Terms
6/1/2024	27052	Due on Receipt

Bill To
Encino Neighborhood Council Glenn Bailey 4924 Paso Robles Encino, CA 91316

Ship To

QTY	Description	Price Each	Amount
1	June.2024 Monthly Maintenance for includes up to 1.5 hours for; phone support, web development, requests, & website adjustments	199.00	199.00
0	June.2024 Hosting for: Monthly Hosting for encinocouncil.org (Included in maintenance)	15.00	0.00
0	June.2024 Email Standard Mailboxes: 4 Accounts for encinonc.org (Included in maintenance)	3.50	0.00

Thank you for your business.	<b>Total</b>	\$199.00
	<b>Payments/Credits</b>	-\$199.00
	<b>Balance Due</b>	<b>\$0.00</b>



## Your Google Play Order Receipt from Jun 7, 2024

1 message

**Google Play** <googleplay-noreply@google.com>  
Reply-To: Google Play <googleplay-noreply@google.com>  
To: EncinoNCMedia@gmail.com

Fri, Jun 7, 2024 at 3:45 PM



# Thank you

Your subscription from Google on Google Play continues and you've been charged. Manage your subscriptions

**Order number:** SOP.3302-9257-1198-80760..63  
**Order date:** Jun 7, 2024 6:45:26 PM EDT  
**Your account:** EncinoNCMedia@gmail.com

Item	Price
200 GB (Google One) (by Google LLC) Auto-renewing subscription	\$2.99/month
	Tax: \$0.00
	Total: \$2.99/month
<b>Payment method:</b>	Mastercard-6750

By subscribing, you authorize us to charge you the subscription cost (as described above) automatically, charged to the payment method provided until canceled. Learn how to cancel. Keep this for your records.

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Google, 1600 Amphitheatre Pkwy, Mountain View, CA, 94043, United States

Please don't reply to this email, as we are unable to respond from this email address. If you need support, visit the [Google Play Help Center](#).



# Invoice



**PATRICIA BATES**  
200 North Spring Street  
Los Angeles  
-90012  
US

**Contact Number : +18184250962**  
**Bill Date : 06/16/2024**  
**Period : 05/16/2024 - 06/15/2024**  
**Invoice No : C339426-39**

## Account Summary

### Current Activity

Current Bill Amount(USD)	
Fixed Charges - Line2 - Starter Monthly (USD)	15.99
Campaign Registration Fee. (USD)	1.50
Usage Charges(USD)	0.00
<b>Current Bill Total(USD)</b>	<b>17.49</b>
<b>Net Charges</b>	<b>17.49</b>
Other Charges(USD)	
<b>Other Charges Total(USD)</b>	<b>0.00</b>
Total Taxes, Charges & Fees(USD)	4.57
Current Amount(USD)	22.06
Payment(s) Received(USD)	22.06
<b>Total Amount Due(USD)</b>	<b>0.00</b>

## Taxes, Charges, & Fees

FCC Regulatory Fee (Federal)	0.02
FUSF (Federal)	1.66
P.U.C. Fee NF (State)	0.03
Utility Users Tax (Local)	0.86
Compliance & Administrative Cost Recovery Fee	2.00
<b>Total Taxes, Charges, &amp; Fees(USD)</b>	<b>4.57</b>

## Billing Summary for Company - PATRICIA BATES

### Description of Charge

#### Fixed Charges

Company 17.49

#### Other Recurring Charges

**Total Charges (USD): 17.49**



**Campaign Fee**

Campaign Id	Amount
CQP6G8T	1.50



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**Transaction Receipt**

1 message

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no\_reply@cardx.com <no\_reply@cardx.com>  
To: batesenc@gmail.com

Tue, Jun 18, 2024 at 3:50 PM

Hello, Patricia Bates

Receipt from Yuloff Creative LLC

You Paid

\$1,589.05

**Amount**

\$1,542.77

**3.0% Credit Card Fee**

+ \$46.28

**Order Summary**

DATE

June 18, 2024

ORDER ID

2024061822503382031

INVOICE IDENTIFIER

2824038

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**Billing Information**

PAYMENT METHOD

•••• 6750

CREDIT

EMAIL

batesenc@gmail.com

Powered by



**401 N. Michigan Ave., Suite 1610**  
**Chicago, IL 60611**  
**CardX.com**

Patent pending. © 2023 CardX, LLC.

The CardX logo is a trademark.

"CardX" is a registered trademark of CardX, LLC.

**Yuloff Creative Marketing Solutions**

*If everything happens for a reason, be the reason things happen!*

**INVOICE**

Remittance Web Address: YuloffCreative.com/ThankYou

11510 Somerset Ave  
Princess Anne, MD 21853

Phone: 800-705-4265

INVOICE # 2824038

DATE: 5/24/24

**TO:**  
**Encino Neighborhood Council**

**SHIP TO:**

**COMMENTS OR SPECIAL INSTRUCTIONS:**

SALESPERSON	P.O. NUMBER	REQUISITIONER	SHIPPED VIA	F.O.B. POINT	TERMS
Yuloff			Fed Ex Grnd		

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
500	Breath Mints	\$1.41	705
	Set up		\$45
250	Hand Sanitizer dispenser with carabiner clip	1.59	397.50
	Set up		\$45
250	Crime Prevention coloring books	.55	137.50
	Set up		\$25
	CC Fee		<b>46.28</b>
<b>SUBTOTAL</b>			<b>1355.00</b>
SALES TAX			138.89
SHIPPING & HANDLING			48.88
TOTAL DUE			1589.05

If you have any questions concerning this invoice, contact Hank Yuloff 800-705-4265

MAILING ADDRESS FOR CHECKS: Yuloff Creative 11510 Somerset Ave. 3<sup>rd</sup> Floor, Princess Anne, MD 21853

**THANK YOU FOR YOUR BUSINESS!**

Office of the City Clerk

Administrative Services Division

Neighborhood Council (NC) Funding Program

Board Action Certification (BAC) Form



NC Name: Meeting Date:

Budget Fiscal Year: Agenda Item No:

Board Motion and/or Public Benefit Statement (CIP and NPG):

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

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

Table with 8 columns: Board Member's First and Last Name, Board Position, Yes, No, Abstain, Absent, Ineligible, Recused. Multiple empty rows for data entry.

Board Quorum: Total:

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

Authorized Signature: [Signature]

Authorized Signature: Alex Garay

Print/Type Name:

Print/Type Name:

Date:

Date:

\*\*Voted on this item but has not completed the City's Anti-Bias (ABLE) training requirement according to the EmpowerLA webpage for Encino NC as of the meeting start time.



# Invoice

June 2024  
Invoice Date: 06/18/2024  
Invoice Number: E0800SK9AE  
Due Date: 06/18/2024

**12.50 USD**

**Sold-To**  
Encino Neighborhood Council  
200 N Spring St  
Los Angeles ca 90012-4801  
United States

**Bill-To**  
Encino Neighborhood Council  
200 N Spring St  
Los Angeles ca 90012-4801  
United States

**Service Usage Address**  
Encino Neighborhood Council  
200 N Spring St  
Los Angeles ca 90012-4801  
United States

Order Details		Billing Summary	
Product:	Online Services	Charges:	12.50
Customer PO Number:		Discounts:	0.00
Order Number:	1432bbe6-fd7e-426c-a1d8-223540fcff7f	Credits:	0.00
Billing Period:	05/18/2024 - 06/17/2024	Tax:	0.00
Due Date:	06/18/2024	<b>Total:</b>	<b>12.50</b>

**Payment Instructions:** Please DO NOT PAY. You will be charged the amount due through your selected method of payment.



# Invoice

June 2024

Invoice Date: 06/18/2024

Invoice Number: E0800SK9AE

Due Date: 06/18/2024

**12.50 USD**

## Microsoft 365 Business Standard

### Formula for charges

Licenses in service period X Monthly (or Yearly) price per license X (Days in service period /Total in service period) = Charge

### New charges

These are your charges for the next billing period for your current number of licenses.

Service period	Details	Licenses in service period	Monthly price/license	Days in service period	Charges	Discounts	Credits	Subtotal	Tax %	Tax	Total
05/18/2024 - 06/17/2024	Monthly subscription charges	1	12.50	31	12.50	0.00	0.00	12.50	0.00 %	0.00	12.50
Subtotal					12.50	0.00	0.00	12.50		0.00	12.50
<b>Grand Total</b>					<b>12.50</b>	<b>0.00</b>	<b>0.00</b>	<b>12.50</b>		<b>0.00</b>	<b>12.50</b>

Billing or service question? Call 1-800-865-9408 or visit <https://aka.ms/Office365Billing>

Microsoft Corporation, One Microsoft Way, Redmond, WA 98052, United States

US FEIN 91-1144442



Office of the City Clerk

Administrative Services Division

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Authorized Signature: [Signature]

Print/Type Name:

Date:

Authorized Signature: [Signature]

Print/Type Name:

Date:

\*\*Voted on this item but has not completed the City's Anti-Bias (ABLE) training requirement according to the EmpowerLA webpage for Encino NC as of the meeting start time.

# CITY OF LOS ANGELES

## BOARD OF NEIGHBORHOOD COMMISSIONERS

VACANT  
PRESIDENT

JOY ATKINSON  
VICE PRESIDENT

LEONARD SHAFFER  
DEBBIE WEHBE  
MAGGIE QUIROZ  
KEREN WATERS  
RANDELL ERVING  
DOUGLAS EPPERHART

Email: [commission@empowerla.org](mailto:commission@empowerla.org)

## CALIFORNIA



KAREN BASS  
MAYOR

NEIGHBORHOOD COUNCILS  
**EMPOWER LA**  
Department of  
NEIGHBORHOOD EMPOWERMENT

20<sup>th</sup> FLOOR, CITY HALL  
200 NORTH SPRING STREET  
LOS ANGELES, CA 90012

TELEPHONE (213) 978-1551  
TOLL-FREE 3-1-1  
FAX: (213) 978-1751  
E-MAIL: [EmpowerLA@lacity.org](mailto:EmpowerLA@lacity.org)

VANESSA SERRANO  
INTERIM GENERAL MANAGER

ERICK MUÑOZ  
COMMISSION EXECUTIVE ASSISTANT

[www.EmpowerLA.org](http://www.EmpowerLA.org)

## **BILL TO: Encino Neighborhood Council**

Address: 4924 Paso Robles Avenue

Encino, CA 91316

Email: [Batesenc@gmail.com](mailto:Batesenc@gmail.com)

## **INVOICE # 25-021**

**DATE:** April 25, 2024

**DUE DATE: Upon Received**

Quantity	Item Description	Unit Price	Amount
1.00	Commodity Code 4316: Software-Zoom Enterprise host 05062024-05052025	\$140.57	\$140.57
1.00	Commodity Code 4316: Software-Zoom Audio 05062024-05052025	\$53.17	\$53.17
<b>Total Cost</b>			<b>\$193.74</b>

Please make Checks Payable to:

**City of Los Angeles - Department of Neighborhood Empowerment**

200 N. Spring Street, Suite 2005

Los Angeles, CA 90012

Office of the City Clerk

Administrative Services Division

Neighborhood Council (NC) Funding Program

Board Action Certification (BAC) Form



NC Name: Meeting Date:

Budget Fiscal Year: Agenda Item No:

Board Motion and/or Public Benefit Statement (CIP and NPG):

The board approves the 2nd revision of the 2024-2025 budget

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

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Authorized Signature: [Signature]
Print/Type Name:
Date:

Authorized Signature: Alex Garay
Print/Type Name:
Date:

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