

Monthly Expenditure Report



Reporting Month: January 2021

Budget Fiscal Year: 2020-2021

NC Name: Sherman Oaks
Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$42622.27	\$4715.26	\$37907.01	\$30.52	\$0.00	\$37876.49

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office	\$36445.00	\$15.26	\$33167.01	\$30.52	\$33136.49
Outreach		\$0.00		\$0.00	
Elections		\$0.00		\$0.00	
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Neighborhood Purpose Grants	\$14440.00	\$4700.00	\$4740.00	\$0.00	\$4740.00
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$8262.73	

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	AT&T Messaging	12/17/2020	A motion to approve the Sherman Oaks Neighborhood Councils (SONG) Annual Budget for Fiscal Year 2020-2021 as amended. Note: The amended SONC FY2021 budget includes the rollover ...	General Operations Expenditure	Office	\$15.26
2	The Valley Of Change	11/19/2020	A motion to approve a Neighborhood Purposes Grant in the amount of \$4700 to Valley of Change. Funds to be used for distribution of essential hygiene products for those in need and/or...	Neighborhood Purpose Grants		\$4700.00
Subtotal:						\$4715.26

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

2	AT&T Messaging	02/16/2021	A motion to approve the Sherman Oaks Neighborhood Councils (SONG) Annual Budget for Fiscal Year 2020-2021 as amended. Note: The amended SONC FY2021 budget includes the rollover ...	General Operations Expenditure	Office	\$15.26
Subtotal: Outstanding						\$30.52



AT&T MESSAGING
 PO BOX 480010
 CHARLOTTE, NC 28269-5300

CUSTOMER NUMBER
8607823
INVOICE DATE
12/01/2020

Bill-To Customer:

 SHERMAN OAKS NC 1097
 PO BOX 5721 T4 P1
 SHERMAN OAKS, CA 91413-5721



Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
8607823	12/01/2020 12/31/2020	12/30/2020	\$29.89	\$14.63	\$0.00	\$15.26	\$30.52

Payments - Thank You

11/17/2020 \$14.63

Description of Current Charges & Credits

Description	Qty	Unit Price	Ext. Price
UM Standard-Discount Rate 8185032399	December service	1	\$14.00
City Utility Users Tax			\$1.26

CUSTOMER NUMBER	
8607823	
INVOICE NUMBER	
7569110	
DUE DATE	AMOUNT PAID
12/30/2020	

Please detach & enclose with payment



REMIT TO:

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

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

Office of the City Clerk

Administrative Services Division

Neighborhood Council (NC) Funding Program

Board Action Certification (BAC) Form



NC Name: Sherman Oaks Neighborhood Council

Meeting Date: Sept. 14, 2020

Budget Fiscal Year: 2020-21

Agenda Item No: 6. b2

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

A motion to approve the Sherman Oaks Neighborhood Council's (SONC) Annual Budget for Fiscal Year 2020-2021 as amended. Note: The amended SONC FY2021 budget includes the rollover of \$10k from the FY2020 budget and the FY 2020 encumbered funds of \$8,885.00. The proposed SONC FY2021 amended budget is posted as a supporting document for this meeting on the SONC website.

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.

Board Member's First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Vacant	A1-CI						
Williams, Candy	A1-R	x					
Baronian, Levon	A1-B	x					
Hartsough, Jeffrey	A2-CI	x					
Manuel, Sarah	A2-R				x		
Vacant	A2-B						
Vacant	A3-CI						
Katchen, Howard	A3-R	x					
Kerzner, Fran	A3-B	x					
Cappelletti, Lisa	A4-CI	x					
Petrus, Lisa	A4-R	x					
Cappelletti, Joe	A4-B	x					
Adair, Christy	A5-CI	x					
Naseef, Alexandria	A5-R	x					
Babian, Avo	A5-B	x					
Shapiro, Harold	A6-CI	x					
Imber, Gil	A6-R	x					
Vacant	A6-B						
Kalban, Jeffrey	A7-CI	x					
Bindow, Michael	A7-R	x					
Roden, Neal	A7-B	x					
Ranshaw, Hayden	Youth Rep					x	
Zimmerman, Marcus	Youth Rep					x	

Board Quorum: Total: 16 0 0 1 2

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: Candy Williams

Print/Type Name: Candy Williams

Date: Sept. 17, 2020

Authorized Signature: Jeffrey Hartsough

Print/Type Name: Jeffrey Hartsough

Date: Sept. 17, 2020

Neighborhood Council Funding Program
APPLICATION for Neighborhood Purposes Grant (NPG)



This form is to be completed by the applicant seeking the Neighborhood Purposes Grant and submitted to the Neighborhood Council from whom the grant is being sought. All applications for grants must be reviewed and approved in a public meeting. Upon approval of the application the Neighborhood Council (NC) shall submit the application along with all required documentation to the Office of the City Clerk, NC Funding Program.

 Sherman Oaks Neighborhood Council

Name of NC from which you are seeking this grant: _____

SECTION I - APPLICANT INFORMATION

	The Valley of Change	85-2147322	California	6/29/2020
1a)	<i>Organization Name</i>	<i>Federal I.D. # (EIN#)</i>	<i>State of Incorporation</i>	<i>Date of 501(c)(3) Status (if applicable)</i>
1b)	4735 Sepulveda Blvd #107	Sherman Oaks	CA	91403
	<i>Organization Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1c)	15030 Ventura Blvd #319	Sherman Oaks	CA	91403
	<i>Business Address (if different)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1d)	PRIMARY CONTACT INFORMATION: Latora Green	818-235-6431	latora.green@gmail.com	
	<i>Name</i>	<i>Phone</i>	<i>Email</i>	

- 2) Type of Organization- Please select one:
 Public School (not to include private schools) **Attach Signed letter on School Letterhead** or 501(c)(3) Non-Profit (other than religious institutions) **Attach IRS Determination Letter**

3) _____
Name / Address of Affiliated Organization (if applicable) *City* *State* *Zip Code*

SECTION II - PROJECT DESCRIPTION

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

The purpose and intent of the grant is to continue to support the Sherman Oaks community by giving out essential kits (toothbrush, toothpaste/case, shampoo, conditioner, masks, soap, washcloth, water, hand sanitizer, etc) and food (hot meal and/or bag lunch) to those that are in need and/or unhoused. We assist the unhoused, daily, by providing water, gatorade, snacks and masks to those that are in need. We feel that it is essential to build our community up by taking care of each other by providing assistance which goes along way during this difficult time we are experiencing.

5) How will this grant be used to primarily support or serve a public purpose and benefit the public at-large. (Grants cannot be used as rewards or prizes for individuals)

This grant will be used to support those that are in need and/or unhoused in Sherman Oaks by giving that extra support that is needed in the community. By receiving this grant, my non-profit organization will be able to reach even more people that are in need.

SECTION III - PROJECT BUDGET OUTLINE

You may also provide the Budget Outline on a separate sheet if necessary or requested.

6a) Personnel Related Expenses	Requested of NC	Total Projected Cost
	\$	\$
	\$	\$
	\$	\$

6b) Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Food and Beverages	\$2,000	\$4,250
Hygiene Kits (toothbrush, toothpaste, sanitizer, soap, washcloth, etc)	\$2,500	\$3,500
Supplies	\$200	\$250

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

 No Yes

If Yes, please list names of NCs: _____

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

Source of Funding	Amount	Total Projected Cost
	\$	\$
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: \$4,700

10a) Start date: 12/1/20 10b) Date Funds Required: 12/1/20 10c) Expected Completion Date: 2/28/21
(After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)**SECTION IV - POTENTIAL CONFLICTS OF INTEREST**

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

 No Yes If 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?

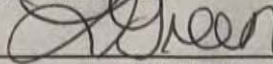
 Yes No *(Please note that if a Board Member of the NC has a conflict of interest and completes this form, or participates in the discussion and voting of this NPG, the NC Funding Program will deny the payment of this grant in its entirety.)**SECTION V - DECLARATION AND SIGNATURE**

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 the documents "What is a Public Benefit," and "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 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*

Latora Green

Exec Director



10/28/20

PRINT Name

Title

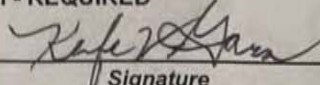
Signature

Date

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

Kyla Garcia

Secretary



10/28/20

PRINT Name

Title

Signature

Date

* If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or clerk.ncfunding@lacity.org for instructions on completing this form

