

Monthly Expenditure Report



Reporting Month: June 2020

Budget Fiscal Year: 2019-2020

NC Name: Sherman Oaks
Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$37660.69	\$14752.65	\$22908.04	\$3880.52	\$0.00	\$19027.52

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office	\$38000.40	\$341.04	\$17563.04	\$30.52	\$14532.52
Outreach		\$11736.61		\$3000.00	
Elections		\$0.00		\$0.00	
Community Improvement Project	\$4000.00	\$0.00	\$4000.00	\$0.00	\$4000.00
Neighborhood Purpose Grants	\$7520.00	\$2675.00	\$1345.00	\$850.00	\$495.00
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$11859.71	

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	EIG CONSTANTCONTACT.CO	06/15/2020	A motion to approve the Administration Package for Fiscal Year 2019-2020	General Operations Expenditure	Outreach	\$663.00
2	EIG CONSTANTCONTACT.CO	06/18/2020	SONC Board Motion Item 9A, March 9, 2020, approving up to \$3000 for the purchase of SONC branded promotional items to advertise SONC's presence in the community. This Constant Contact invoice covers the period 06/08/20-07/07/20.	General Operations Expenditure	Outreach	\$95.00
3	ANYPROMO INC	06/19/2020	SONC Board Motion Item 9A, March 9, 2020, approving up to \$3000 for the purchase of SONC branded promotional items to advertise SONC's presence in the community.	General Operations Expenditure	Outreach	\$25.00
4	TARGET 00013078	06/19/2020	A motion to approve the Administrative Packet for Fiscal Year 2019-2020	General Operations Expenditure	Office	\$104.00

5	ANYPROMO INC	06/20/2020	SONC Board Motion Item 9A, March 9, 2020, approving up to \$3000 for the purchase of SONC branded promotional items to advertise SONC's presence in the community.	General Operations Expenditure	Outreach	\$391.46
6	ANYPROMO INC	06/20/2020	SONC Board Motion Item 9A, March 9, 2020, approving up to \$3000 for the purchase of SONC branded promotional items to advertise SONC's presence in the community.	General Operations Expenditure	Outreach	\$355.88
7	ANYPROMO INC	06/20/2020	SONC Board Motion Item 9A, March 9, 2020, approving up to \$3000 for the purchase of SONC branded promotional items to advertise SONC's presence in the community.	General Operations Expenditure	Outreach	\$404.60
8	ANYPROMO INC	06/20/2020	SONC Board Motion Item 9A, March 9, 2020, approving up to \$3000 for the purchase of SONC branded promotional items to advertise SONC's presence in the community.	General Operations Expenditure	Outreach	\$932.83
9	ANYPROMO INC	06/20/2020	SONC Board Motion Item 9A, March 9, 2020, approving up to \$3000 for the purchase of SONC branded promotional items to advertise SONC's presence in the community.	General Operations Expenditure	Outreach	\$509.18
10	ANYPROMO INC	06/20/2020	SONC Board Motion Item 9A, March 9, 2020, approving up to \$3000 for the purchase of SONC branded promotional items to advertise SONC's presence in the community.	General Operations Expenditure	Outreach	\$147.83
11	ANYPROMO INC	06/25/2020	SONC Board Motion Item 9A, March 9, 2020, approving up to \$3000 for the purchase of SONC branded promotional items to advertise SONC's presence in the community. This transaction is the result of a discount available on SA3219424 \$932.83.	General Operations Expenditure	Outreach	-\$54.75
12	AT&T Messaging	05/13/2020	A motion to approve the Administration Packet for Fiscal Year 2019-2020.	General Operations Expenditure	Office	\$15.26
13	AT&T Messaging	05/13/2020	A motion to approve the Administration Packet for Fiscal Year 2019-2020.	General Operations Expenditure	Office	\$15.26
14	AT&T Messaging	05/13/2020	A motion to approve the Administration Packet for Fiscal Year 2019-2020.	General Operations Expenditure	Office	\$15.26
15	Sarah Kathryn Manuel	05/21/2020	A motion to approve a board member reimbursement totaling \$266.58 to Sarah Manuel for various purchases in support of the SONC Face Mask program. The Face Mask program was initiated durin...	General Operations Expenditure	Outreach	\$73.96

16	Sarah Kathryn Manuel	05/21/2020	A motion to approve a board member reimbursement totaling \$266.58 to Sarah Manuel for various purchases in support of the SONC Face Mask program. The Face Mask program was initiated durin...	General Operations Expenditure	Outreach	\$87.56
17	Sarah Kathryn Manuel	05/21/2020	A motion to approve a board member reimbursement totaling \$266.58 to Sarah Manuel for various purchases in support of the SONC Face Mask program. The Face Mask program was initiated durin...	General Operations Expenditure	Outreach	\$105.06
18	Sherman Oaks Chamber Foundation	05/19/2020	A motion to approve a Neighborhood Purposes Grant (NPG) to the Sherman Oaks Chamber Foundations of \$2,675.00 in support of graffiti proofing the Sherman Oaks branded painted uti...	Neighborhood Purpose Grants		\$2675.00
19	City of Los Angeles Budget Advocates	05/21/2020	A motion to approve a contribution of up to \$2,000.00 to the Neighborhood Council Budget Advocates to support operation, outreach and work done on behalf of the neighborhood councils to p...	General Operations Expenditure	Outreach	\$2000.00
20	THE WEB CORNER, INC.	06/11/2020	A motion to approve the an Administration Package for Fiscal Year 20190-2020	General Operations Expenditure	Office	\$102.50
21	Candy Williams	05/20/2020	A motion to approve a Board member reimbursement totaling \$88.76 to Candy Williams for SONC Board Meeting July 8, 2019 a) Refreshments and water (\$30.63 Ralph) b)...	General Operations Expenditure	Office	\$88.76
22	Los Angeles Regional Food Bank	06/15/2020	m.) A motion to approve a donation of up to \$3,000.00 to the Los Angeles Regional Food which is supporting the Department of Regional Food Bank which distributes food the those facin...	General Operations Expenditure	Outreach	\$3000.00
23	Hope of the Valley	06/15/2020	n.) A motion to approve a donation of up to \$3,000.00 to the Hope of the Valley which is operating a the experiencing homelessness at the Van Nuys Sherman Oaks Recreation Center due ...	General Operations Expenditure	Outreach	\$3000.00
Subtotal:						\$14752.65

Outstanding Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	Southern California Preparedness Foundation	06/12/2020	A motion to approve a Neighborhood Purposes Grant to the Southern California Preparedness Foundation of up to \$850.00 to participate in the 13th Annual Valley Preparedness Foundation Fair...	Neighborhood Purpose Grants		\$850.00

2	AT&T Messaging	06/15/2020	A motion to approve the Administration Package for Fiscal Year 2019-2020	General Operations Expenditure	Office	\$15.26
3	AT&T Messaging	06/15/2020	A motion to approve the Administration Package for Fiscal Year 2019-2020	General Operations Expenditure	Office	\$15.26
4	Los Angeles Parks Foundation	06/15/2020	I.) A motion to approve a donation of up to \$3,000.00 to the Los Angeles Park Foundation which is supporting the Department of Recreation and Park efforts to provide shelters for tho...	General Operations Expenditure	Outreach	\$3000.00
Subtotal: Outstanding						\$3880.52



[Print](#)

Pre-payment Deposit Invoice

Sherman Oaks Neighborhood Council

Attn: Candy Williams

200 N Spring St

Los Angeles , CA US 90012

8186065352

Invoice Number: 6OGQTLABB16920

Invoice Date: Wed Jun 17 13:32:05 EDT 2020

User Name: sonc.newsletter@gmail.com

Terms: Due upon receipt

Next Billing Date: Jul 08, 2020

Description	Amount
Constant Contact - Email	\$663.00
Prepay for 15% Off 2501 - 5000 Contacts	
Estimated Tax	\$0.00
AMOUNT DUE: \$663.00	

Please make checks payable in **USD funds** to *Constant Contact, Inc.* noting your **Invoice Number or Constant Contact User Name** on the check.

Constant Contact, Inc. is a corporation with a Federal Tax ID number of: 04-3285398.

Note:

1. Payments under a prepayment plan are non-refundable deposits on account with Constant Contact that will be used to settle future monthly invoices.
2. Pre-payment amounts are estimated based on your current selection of services and may not be sufficient to last the discount period you choose.
3. Actual charges and discounts will be calculated at the time of your monthly invoice based on products and add-on services to which you subscribe and related usage.
4. When your prepayment runs out we'll attempt to charge your account under the same prepayment terms. If we are not able to, we'll convert your account to a standard monthly payment plan.

Billing questions? Contact Support

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

Please detach and return the following portion with your check payment.



Detach and return this portion

Invoice Number: 6OGQTLABB16920

Invoice Date: Wed Jun 17 13:32:05 EDT 2020

User Name: sonc.newsletter@gmail.com

Terms: Due upon receipt

Billing Address: Sherman Oaks Neighborhood Council
Candy Williams
200 N Spring St
Los Angeles , CA US 90012
8186065352

Payment Plan: Prepay for 15% Off

Services: Constant Contact - Email \$663.00
(2501 - 5000 Contacts)

Estimated Tax \$0.00

AMOUNT DUE:	\$663.00
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Please send check to:
Constant Contact, Inc.
Attn: Accounts Receivable
1601 Trapelo Road
Waltham, MA 02451



NC Name: Sherman Oaks Meeting Date: June 10, 2019

Budget Fiscal Year: 2019-2020 Agenda Item No: 13

Board Motion and/or Public Benefit Statement (CIP and NPG): A motion to approve the Administrative Packet for Fiscal Year 2019-2020

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

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

Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Babian, Avo	Area 5 Business	✓					
Imber, Gil	Area 6 Residential	✓					
Baronian, Lavon	Area 1 Business					✓	
Binkow, Michael	Area 7 Residential	✓				✓	
Gilford, Lisa	Area 2 Residential					✓	
Hartsough, Jeffrey	Area 2 Community	✓					
Kalban, Jeffrey	Area 7 Community	✓					
Katchen, Howard	Area 3 Residential	✓					
Cappelletti, Lisa	Area 4 Community	X <i>CR</i>				✓	
Adair, Christy	Area 5 Community	✓					
Shapiro, Harold	Area 6 Community	✓					
Kerzner, Fran	Area 3 Business	✓					
Petrus, Lisa	Area 4 Residential	✓					
Roden, Neal	Area 7 Business	✓					
Sales, Kristin	Area 1 Community	✓					
Cappelletti, Joe	Area 4 Business				✓	✓	
Williams, Candy	Area 1 Residential	✓					
Yatman, Deatra	Area 3 Community				✓		
Kim, Christine	Area 6 Business				✓	✓	
Mulenthorn, Cathy	Area 2 Business	✓					
Olds, Sarah	Area 5 Residential	✓					
Quorum: 11		Total: 15	0	0	3	5	0

We, the Treasurer and the Second Signer 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.

Treasurer's Signature <i>Candy Williams</i>	Second Signer's Signature <i>JHartsough</i>
Print/Type Name: Candy Williams	Print/Type Name: JEFFREY HARTSOUGH
Date: June 10 2019	Date: 06-11-2019

**NEIGHBORHOOD COUNCIL FUNDING PROGRAM
FINANCIAL OFFICERS LETTER OF ACKNOWLEDGEMENT & AGREEMENT**

We, the undersigned, do hereby declare that as a result of an official action of the Governing Body of the Neighborhood Council (NC) named below:

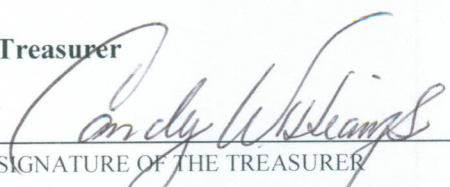
- (1) we are authorized to request City funding to support NC general operations,
- (2) all items or services described or included in any related funding requests are exclusively intended to further the goals and objectives of the Neighborhood Council, and
- (3) all reasonable precautions shall be exercised by the undersigned to fully safeguard, control and account for all use of funds. Proper accountability of all City funds is critical to the success of the NC Funding Program.

Therefore, by the signature(s) below, and on behalf of the Neighborhood Council named below, WE HEREBY AGREE to the terms and conditions as set forth in this Letter of Acknowledgement and all related documents as provided by the City, agree to expend funds in accordance with any applicable City rules, policies or procedures, and specifically agree to expend monies received by the Office of the City Clerk solely for public purposes relating to the goals and purposes of the Neighborhood Council named below, consistent with the scope and authority under the City Charter, the Plan for a Citywide System of Neighborhood Councils and any implementing ordinances. We have attended and participated in the City-provided training relating to the NC Funding Program.

WE FURTHER ACKNOWLEDGE and WE AGREE to comply with any requirements regarding use of the NC funds. WE AGREE to provide NC financial reports and/or supporting documentation to the Office of the City Clerk, Neighborhood Council Funding Program as requested and at monthly meetings to the Governing Body and stakeholders of the NC named below. WE AGREE that the Office of the City Clerk and other City representatives may make on-site visits to inspect and review all NC financial records, upon providing reasonable advance notice to the NC Treasurer or designated representatives.

WE ACKNOWLEDGE THAT A NEW LETTER OF ACKNOWLEDGEMENT MUST BE FILED IF THERE IS ANY CHANGE OF FINANCIAL OFFICERS.

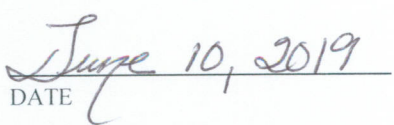
Neighborhood Council Financial Officers - Names and Signatures:

Treasurer


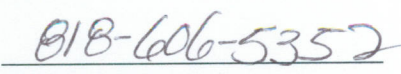
 SIGNATURE OF THE TREASURER
Candy Williams

 PRINT NAME OF THE TREASURER
Area 1 - Residential

 BOARD POSITION



 DATE
 candy.williams.sonc@gmail.com

 EMAIL


 PHONE NUMBER

CONTINUES OTHER SIDE

<h2 style="margin: 0;">SHERMAN OAKS</h2> <hr style="width: 50%; margin: 0 auto;"/> <h3 style="margin: 0;">Neighborhood Council Annual Budget for Fiscal Year 2019-2020</h3>	
Annual Budget Funds	\$ 42,000.00
Rollover Funds***	
Total Annual Budget Funds	\$ 42,000.00

Office/Operational Expenditures Category	
Voice Mail Service	\$ 185.00
Copies & Printing - Board & Committee Business	\$ 1,500.00
PLUM - Overtime Charges LAPL (3X)	\$ 650.00
Board Meeting Rental	\$ 750.00
Administrative Assistant - 17 Hrs/Month	\$ 4,400.00
Minutes Transcription - 100 Hrs (10/mnth)	\$ 2,600.00
Bookkeeping Services - 120 Hrs (10/mnth)	\$ 3,120.00
Social Media / Content Manager 5Hrs/Wk	\$ 6,230.00
Office Supplies	\$ 750.00
PLUM / Vision Printing	\$ 450.00
Board Retreat	\$ 750.00
Post Office Box Rental USPS	\$ 115.00
Stamps for Operations	\$ 120.00
Meeting Refreshments	\$ 1,900.00
Website Hosting, Maintenance & Development	\$ 3,280.00
Business Cards - Board Members	\$ 800.00
Software Licensing Fees (Office 365, Adobe Acrobat)	\$ 300.00
Total Office/Operational Expenditures	\$ 27,900.00

***The Funding Program will notify each NC of their Fiscal Year closing balance including available rollover funds, if any, on August 1st or next business day. Depending on when an NC submits its Admin Packet/annual budget, the NC may need to revise and resubmit its annual budget to account for any rollover funds received.

Outreach Expenditures Category	
Movie Series at VNSO Park	\$ 5,000.00
Sherman Oaks Street Fair	\$ 750.00
Spring Tree Give A Way	\$ 350.00
Public Safety Events	\$ 750.00
LA Congress & Budget Advocate	\$ 1,500.00
VANC - Two Events	\$ 500.00
Branded Materials (Polo Shirts, Name Tags, etc)	\$ 1,250.00
Total Outreach Expenditures	\$ 10,100.00

Election Expenditures Category	
Total Election Expenditures	\$ 0.00



[Print](#)

Billing Activity - Invoices

Not applicable

Attn: Candy Williams
 200 N Spring St
 Los Angeles CA 90012
 US
P: 8186065352

Today's Date: 07/09/2020

User Name: sonc.newsletter@gmail.com

Invoices from 06/08/2020 to 06/08/2020

Date	Description	Charge Amount	Credit Amount
06/08/2020 Invoice #281891130	Constant Contact Toolkit - Email		\$95.00
	Contacts		
	5,001 - 10,000 Contacts		
	Maximum Number of Contacts This Billing Period:	\$95.00	
	5026		
	Period from 06/08/2020 to 07/07/2020		

Billing questions? [Contact Support](#)

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



[Print](#)

Billing Activity - Payments

Not applicable

*Attn: Candy Williams
200 N Spring St
Los Angeles CA 90012
US
P: 8186065352*

Today's Date: 07/09/2020

User Name: *sonc.newsletter@gmail.com*

Payments from 06/18/2020 to 06/18/2020

Date	Description	Charge Amount	Credit Amount
06/18/2020	Payment - Credit Card (MasterCard) *****4628		\$95.00

Billing questions? [Contact Support](#)

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



ANYPROMO.COM
 AnyPromo Inc.
 1511 E Holt Blvd
 Ontario, California 91761
 Tel: 877-368-5678

INVOICE

INVOICE#: CV0063884
Invoice Date: 06/18/2020
Customer#: 250547

Bill To:
 Candy Williams
 200 North Spring Street
 LOS ANGELES, CA 90012
 MasterCard *4628

Ship To:
 SONC
 ATTN: Jeffrey Hartsough
 15624 ROYAL RIDGE RD
 SHERMAN OAKS, CA 91403

Ship Via:
 Other
 Ship Date: 06/18/2020)



Digital Platinum Membership
 #753594

QTY	Item	Price	Total
Product Options:			
1	#753594 - Digital Platinum Membership	\$25.00	\$25.00
			Subtotal: \$25.00
			Shipping: \$0.00
			Tax @0%: \$0.00
			TOTAL: \$25.00

Zero Balance, DO NOT PAY

Orders

	Amount	Paid
CV0063884	\$25.00	\$25.00
	Total	\$25.00

Payments

	Amount	Used
*4628	\$25.00	\$25.00
	Total	\$25.00



VAN NUYS - 818-779-0163
06/19/2020 11:25 AM



ENTERTAINMENT-ELECTRONICS		
056070074	EPSON INK	T \$56.99
	RETURN BY 07/19/20	
056070076	EPSON INK	T \$37.99
	RETURN BY 07/19/20	

	SUBTOTAL	\$94.98
T = CA TAX 9.5000% on	\$94.98	\$9.02

	TOTAL	\$104.00
*4628 MASTERCARD CHARGE		\$104.00
AID: A0000000041010		
MASTERCARD		

REC#2-0171-1307-0126-1276-5 VCD#754-255-647

NOTICE: Some furniture products can expose you to chemicals known to the State of California to cause cancer, birth defects or other reproductive harm. Please check on-product label for warning information.

Help make your Target Run better.
Take a 2 minute survey about today's trip:

informtarget.com
User ID: 7982 8869 3987
Password: 387 235

CUÉNTENOS EN ESPAÑOL

Please take this survey within 7 days.

AnyPromo.com
 AnyPromo Inc.
 1511 E Holt Blvd
 Ontario, California 91761
 Tel: 877-368-5678

INVOICE

INVOICE#: CV0064647
Invoice Date: 06/24/2020
Customer#: 250547

Bill To:
 Candy Williams
 200 North Spring Street
 LOS ANGELES, CA 90012
 MasterCard *4628

Ship To:
 SONC
 ATTN: Jeffrey Hartsough
 15624 ROYAL RIDGE RD
 SHERMAN OAKS, CA 91403

Ship Via:
 FDX Ground
 Tracking: [179835374070](#)
 Ship Date: 06/22/2020)

Virtual Proof Link:

https://www.anypromo.com/SwfUpload/BoxLogo.aspx?fileID=DFS_2161497&pass=d9ef69cc0461344ae17e86947cee59d8



Round Blinking Light With Back Clip
 #653766

QTY	Item	Price	Total
Product Options:			
250	#653766 - Round Blinking Light With Back Clip	\$1.27	
1	Rush Free	\$0.00	
250	Color: Red	\$0.00	\$317.50

Front, Pad Print:

White

250	Run	\$0.00	
1	Setup	\$40.00	\$40.00

Subtotal: \$357.50
 Shipping: \$20.99
 VIP Shipping Discount: **-\$20.99**
 Tax @9.5%: \$33.96
TOTAL: \$391.46

Zero Balance, DO NOT PAY

Orders

	Amount	Paid
CV0064647	\$391.46	\$391.46
Total		\$391.46

Payments

	Amount	Used
*4628	\$391.46	\$391.46
Total		\$391.46

ANYPROMO.COM
 AnyPromo Inc.
 1511 E Holt Blvd
 Ontario, California 91761
 Tel: 877-368-5678

INVOICE

INVOICE#: CV0065056
Invoice Date: 06/28/2020
Customer#: 250547

Bill To:
 Candy Williams
 200 North Spring Street
 LOS ANGELES, CA 90012
 MasterCard *4628

Ship To:
 SONC
 ATTN: Jeffrey Hartsough
 15624 ROYAL RIDGE RD
 SHERMAN OAKS, CA 91403

Ship Via:
 FDX Ground
 Tracking: [133867465634](#)
 Ship Date: 06/25/2020)

Virtual Proof Link:

https://www.anypromo.com/SwfUpload/BoxLogo.aspx?fileID=DFS_2162071&pass=4cb470539c5f8919636836e1aee435c9



Post-it® Custom Printed Notes Value Priced Program 3" X 4", 50-sheets
 #623540

QTY	Item	Price	Total
Product Options:			
500	#623540 - Post-it® Custom Printed Notes Value Priced Program 3" X 4", 50-sheets	\$0.65	
500	Color: Standard White Paper	\$0.00	\$325.00
Surface, 4 Color Process:			
500	Run	\$0.00	
1	Setup	\$0.00	\$0.00
			Subtotal: \$325.00
			Shipping: \$49.87
			VIP Shipping Discount: -\$49.87
			Tax @9.5%: \$30.88
			TOTAL: \$355.88

Zero Balance, DO NOT PAY

Orders

	Amount	Paid
CV0065056	\$355.88	\$355.88
Total		\$355.88

Payments

	Amount	Used
*4628	\$355.88	\$355.88
Total		\$355.88

INVOICE

INVOICE#: CV0064569
Invoice Date: 06/23/2020
Customer#: 250547

Bill To:
 Candy Williams
 200 North Spring Street
 LOS ANGELES, CA 90012
 MasterCard *4628

Ship To:
 SONC
 ATTN: Jeffrey Hartsough
 15624 ROYAL RIDGE RD
 SHERMAN OAKS, CA 91403

Ship Via:
 FDX Ground
 Tracking: [174954156851](#)
 Ship Date: 06/23/2020)

Virtual Proof Link:

https://www.anypromo.com/SwfUpload/BoxLogo.aspx?fileID=DFS_2162019&pass=f735121ec7ce9dc72ec8593d7c44d1ab



Carabiner Flashlight
 #736050

QTY	Item	Price	Total
Product Options:			
250	#736050 - Carabiner Flashlight	\$1.35	
250	Color: Blue	\$0.00	\$337.50

Front, Pad Print:

White

250	Run	\$0.00	
1	Setup	\$32.00	\$32.00

Subtotal: \$369.50

Shipping: \$20.42

VIP Shipping Discount: **-\$20.42**

Tax @9.5%: \$35.10

TOTAL: \$404.60

Zero Balance, DO NOT PAY

Orders

	Amount	Paid
CV0064569	\$404.60	\$404.60
Total		\$404.60

Payments

	Amount	Used
*4628	\$404.60	\$404.60
Total		\$404.60

ANYPROMO.com
 AnyPromo Inc.
 1511 E Holt Blvd
 Ontario, California 91761
 Tel: 877-368-5678

Order#: SA3219424
Order Date: 06/18/2020
Customer#: 250547

Production*

Order Processing: 1 Day
 Production Time*: 5-Day Service
 When do you need it by: ASAP

* excludes weekends & holidays

Shipping

SONC
 ATTN: Jeffrey Hartsough
 15624 ROYAL RIDGE RD
 SHERMAN OAKS, CA 91403

Ship Via:
 FDX Ground

Virtual Proof Link:

https://www.anypromo.com/SwfUpload/BoxLogo.aspx?fileID=DFS_2161894&pass=591abe9ac11d1afb032ebd619c352a99



Large Non-Woven Reflective Hit Sports Pack
 #654187

QTY	Item	Price	Total
Product Options:			
300	#654187	\$2.60	
300	Color: Yellow	\$0.00	\$780.00
Front, Screen Print:			
	■ Black		
300	Run	\$0.00	
1	Setup	\$50.00	\$50.00
			Subtotal: \$830.00
			Shipping: \$86.90
			VIP Shipping Discount: -\$50.00
			AnyPromo Bucks Savings: -\$15.00
			Tax @9.5%: \$80.93
			TOTAL: \$932.83

ANYPROMO.COM
 AnyPromo Inc.
 1511 E Holt Blvd
 Ontario, California 91761
 Tel: 877-368-5678

INVOICE

INVOICE#: CV0064542
Invoice Date: 06/23/2020
Customer#: 250547

Bill To:
 Candy Williams
 200 North Spring Street
 LOS ANGELES, CA 90012
 MasterCard *4628

Ship To:
 SONC
 ATTN: Jeffrey Hartsough
 15624 ROYAL RIDGE RD
 SHERMAN OAKS, CA 91403

Ship Via:
 FDX Ground
 Tracking: [168618372818](#)
 Ship Date: 06/22/2020)

Virtual Proof Link:

https://www.anypromo.com/SwfUpload/BoxLogo.aspx?fileID=DFS_2161500&pass=adbfa7172f952c0dd40130acc8263212



Flashing Reflector Light With Hook Clip
 #656407

QTY	Item	Price	Total
Product Options:			
250	#656407 - Flashing Reflector Light With Hook Clip	\$1.64	
1	Rush Free	\$0.00	
250	Color: Red	\$0.00	\$410.00

Centered On Reflector, Front, Pad Print:

White

QTY	Item	Price	Total
250	Run	\$0.00	
1	Setup	\$55.00	\$55.00

Subtotal: \$465.00

Shipping: \$32.24

VIP Shipping Discount: **-\$32.24**

Tax @9.5%: \$44.18

TOTAL: \$509.18

Zero Balance, DO NOT PAY

Orders

	Amount	Paid
CV0064542	\$509.18	\$509.18
Total		\$509.18

Payments

	Amount	Used
*4628	\$509.18	\$509.18
Total		\$509.18

ANYPROMO.com
AnyPromo Inc.
1511 E Holt Blvd
Ontario, California 91761
Tel: 877-368-5678

Order#: SA3219430
Order Date: 06/18/2020
Customer#: 250547

Production*

Order Processing: 1 Day
Production Time*: 1-Day Rush
When do you need it by: ASAP

* excludes weekends & holidays

Shipping

SONC
ATTN: Jeffrey Hartsough
15624 ROYAL RIDGE RD
SHERMAN OAKS, CA 91403

Ship Via:
FDX Ground

Virtual Proof Link:


https://www.anypromo.com/SwfUpload/BoxLogo.aspx?fileID=DFS_2161498&pass=fabbfef6022c9329e014cee620fa69a4



Archer 2 Crown Design Click Ballpoint Pen
#669698

QTY	Item	Price	Total
Product Options:			
500	#669698	\$0.24	
1	Rush Free	\$0.00	
500	Color: White with Green Trim Black Refill	\$0.00	\$120.00

Barrel, Screen Print:

 Emerald Green 354			
500	Run	\$0.00	
1	Setup	\$15.00	\$15.00

Subtotal: \$135.00
Shipping: \$29.90
VIP Shipping Discount: **-\$29.90**
Tax @9.5%: \$12.83
TOTAL: \$147.83



AnyPromo Inc.
1511 E Holt Blvd
Ontario, California 91761
Tel: 877-368-5678

Refund - Approved

Transaction Information

Date	06/24/2020	Time 17:38:29
Method of Payment	MasterCard	
Name	Candy Williams	
Account #	5*****4628	

Approval Code

Amount **-\$54.75**

Order ID SA3219424

Customer Copy



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

CUSTOMER NUMBER
8607823
INVOICE DATE
01/01/2020

Bill-To Customer:



SHERMAN OAKS NC
 PO BOX 5721
 SHERMAN OAKS, CA 91413--0000

Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
8607823	01/01/2020 01/31/2020	01/30/2020	\$61.04	\$61.04	\$.00	\$15.26	\$15.26

Payments - Thank You

12/24/2019 \$15.26
 12/13/2019 \$45.78

Description of Current Charges & Credits

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

CUSTOMER NUMBER	
8607823	
INVOICE NUMBER	
7505855	
DUE DATE	AMOUNT PAID
01/30/2020	

Please detach & enclose with payment



REMIT TO:

SHERMAN OAKS NC
 PO BOX 5721
 SHERMAN OAKS, CA 91413--0000

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

01001 860782300000000001526

Messaging service is provided by Southwestern Bell Telephone Company, Pacific Bell Telephone Company, Illinois Bell Telephone Company, Indiana Bell Telephone Company, Inc., Michigan Bell Telephone Company, Nevada Bell Telephone Company, The Ohio Bell Telephone Company, or Wisconsin Bell, Inc. based on service location (collectively referred to as "AT&T or "AT&T Messaging").

How to pay your bill

You may mail your payment or send it by overnight mail. You may not pay this bill at AT&T Authorized Payment Locations. You may not send your other AT&T bills and this bill for messaging service together because these bills are generated from and processed by different accounting centers. When making your payments, write the amount paid in the box on the remittance stub. Also, write your account number on your check, money order or cashier's check. Mail your check and remittance stub in the return envelope provided or mail a standard envelope to:

AT&T Messaging
Western Region
P.O. Box 840486
Dallas, TX 75284-0486

AT&T Messaging
Southwest & Midwest Regions
P.O. Box 849883
Dallas, TX 75284-9883

Overnight Delivery Only
AT&T Messaging - LB 849883
BOA Lockbox Svc-Infomart
1950 N Stemmons Fwy - Ste 5010
Dallas, TX 75207

When to pay your bill

Your payment is due when you receive your bill. If we do not receive payment for your bill by the "DUE BY" date, your account will become past due.

In the event your account becomes past due, we will lock or suspend your service for a period of seven calendar days. If after seven calendar days payment in full has not been received; your service will be disconnected. In order to reconnect service, you must pay the full amount owed plus charges to reconnect your service. Your basic telephone service will not be disconnected for non-payment of information services.

Questions about your bill

If you have questions about your bill, please call your service representative at 1-877-677-3770. Office hours are Monday through Friday, 8:00 AM to 6:00 PM Central Time.

Late Payment Charge


If we do not receive your payment and you have a past due balance plus current charges, AT&T will add a late payment charge of 1.5% to your total previous balance.

The late payment charge does not relieve you of the obligation to pay the total amount due by the "DUE BY" date.

If you subscribe to a voicemail and/or the Call Forwarding feature, local usage charges apply when retrieving mailbox messages and/or each time the Call Forwarding feature is activated. If you subscribe to a series 50+/series 100+ or a business call-in-one product, these products include Call Forwarding. The Call Forwarding monthly price is included in the monthly mailbox charge.

Don't let your voicemail security be compromised, use these simple tips: 1. If you have a temporary password, change it now & use a minimum of 6 digits. 2. Ensure your password by not using repeated or sequential digits. 3. Do not use your phone or mailbox number or numbers that are easily identifiable. 4. Treat your password as you would your ATM pin. 5. Change your password and greeting periodically.

How to understand your bill



Bill-To Customer:

CUSTOMER NUMBER
1
INVOICE DATE
2


Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
3	4	5	6	7	8	9	10

11 - Payment - Thank you 12 - 5/19/03 13 - 20.95CR

14 - Description of Current Charges & Credits 15 - Qty. 16 - Unit Price 17 - Ext. Price

Please detach & enclose with payment

CUSTOMER NUMBER
18
INVOICE NUMBER
19
DUE DATE
20
AMOUNT PAID
21



22 - REMIT TO:

1. Your account number
 2. Date invoice was created
 3. Your account number
 4. Current billing period
 5. When your payment is to be received by AT&T
 6. Past due balance
 7. Summary of any payments received in prior month
 8. Credits issued in the prior month
 9. Account total due (previous and current balances)
 10. Total of current charges
 11. Payment description
 12. Date payment was credited to account
 13. Amount of payment
 14. Description of current charges
 15. Quantity of items you are being charged for
 16. Amount of each item
 17. Total amount for all items in that category
- Remittance Slip**
18. Your account number
 19. Number assigned to this invoice
 20. Due date for current charges
 21. Amount of payments being made to AT&T
 22. The address to send your payment to



NC Name: Sherman Oaks Meeting Date: June 10, 2019

Budget Fiscal Year: 2019-2020 Agenda Item No: 13

Board Motion and/or Public Benefit Statement (CIP and NPG): A motion to approve the Administrative Packet for Fiscal Year 2019-2020

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

Vote Count

Recused Boardmembers must leave the room prior to any discussion and may not return to the room until after the vote is complete.

Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Babian, Avo	Area 5 Business	✓					
Imber, Gil	Area 6 Residential	✓					
Baronian, Lavon	Area 1 Business					✓	
Binkow, Michael	Area 7 Residential	✓				✓	
Gilford, Lisa	Area 2 Residential					✓	
Hartsough, Jeffrey	Area 2 Community	✓					
Kalban, Jeffrey	Area 7 Community	✓					
Katchen, Howard	Area 3 Residential	✓					
Cappelletti, Lisa	Area 4 Community	X <i>Recused</i>				✓	
Adair, Christy	Area 5 Community	✓					
Shapiro, Harold	Area 6 Community	✓					
Kerzner, Fran	Area 3 Business	✓					
Petrus, Lisa	Area 4 Residential	✓					
Roden, Neal	Area 7 Business	✓					
Sales, Kristin	Area 1 Community	✓					
Cappelletti, Joe	Area 4 Business				✓	✓	
Williams, Candy	Area 1 Residential	✓					
Yatman, Deatra	Area 3 Community				✓		
Kim, Christine	Area 6 Business				✓	✓	
Mulenthorn, Cathy	Area 2 Business	✓					
Olds, Sarah	Area 5 Residential	✓					
Quorum: 11	Total:	15	0	0	3	5	0

We, the Treasurer and the Second Signer 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.

Treasurer's Signature: *Candy Williams*
 Print/Type Name: Candy Williams
 Date: June 10 2019

Second Signer's Signature: *Jeffrey Hartsough*
 Print/Type Name: JEFFREY HARTSOUGH
 Date: 06-11-2019

**NEIGHBORHOOD COUNCIL FUNDING PROGRAM
FINANCIAL OFFICERS LETTER OF ACKNOWLEDGEMENT & AGREEMENT**

We, the undersigned, do hereby declare that as a result of an official action of the Governing Body of the Neighborhood Council (NC) named below:

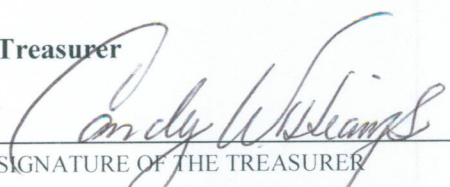
- (1) we are authorized to request City funding to support NC general operations,
- (2) all items or services described or included in any related funding requests are exclusively intended to further the goals and objectives of the Neighborhood Council, and
- (3) all reasonable precautions shall be exercised by the undersigned to fully safeguard, control and account for all use of funds. Proper accountability of all City funds is critical to the success of the NC Funding Program.

Therefore, by the signature(s) below, and on behalf of the Neighborhood Council named below, WE HEREBY AGREE to the terms and conditions as set forth in this Letter of Acknowledgement and all related documents as provided by the City, agree to expend funds in accordance with any applicable City rules, policies or procedures, and specifically agree to expend monies received by the Office of the City Clerk solely for public purposes relating to the goals and purposes of the Neighborhood Council named below, consistent with the scope and authority under the City Charter, the Plan for a Citywide System of Neighborhood Councils and any implementing ordinances. We have attended and participated in the City-provided training relating to the NC Funding Program.

WE FURTHER ACKNOWLEDGE and WE AGREE to comply with any requirements regarding use of the NC funds. WE AGREE to provide NC financial reports and/or supporting documentation to the Office of the City Clerk, Neighborhood Council Funding Program as requested and at monthly meetings to the Governing Body and stakeholders of the NC named below. WE AGREE that the Office of the City Clerk and other City representatives may make on-site visits to inspect and review all NC financial records, upon providing reasonable advance notice to the NC Treasurer or designated representatives.

WE ACKNOWLEDGE THAT A NEW LETTER OF ACKNOWLEDGEMENT MUST BE FILED IF THERE IS ANY CHANGE OF FINANCIAL OFFICERS.

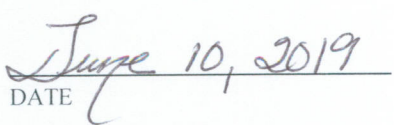
Neighborhood Council Financial Officers - Names and Signatures:

Treasurer


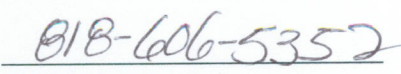
 SIGNATURE OF THE TREASURER
Candy Williams

 PRINT NAME OF THE TREASURER
Area 1 - Residential

 BOARD POSITION



 DATE
 candy.williams.sonc@gmail.com

 EMAIL


 PHONE NUMBER

CONTINUES OTHER SIDE

2nd Signer



SIGNATURE OF THE 2nd SIGNER

Jeffrey Hartsough

PRINT NAME OF THE 2ND SIGNER

Area 2 - Community Interest

BOARD POSITION

06-10-2019

DATE

jeffrey.hartsough.SONC@gmail.com

EMAIL

310-614-9804

PHONE NUMBER

Alternate Signer (If not applicable, please indicate "N/A")

SIGNATURE OF THE ALTERNATE SIGNER

DATE

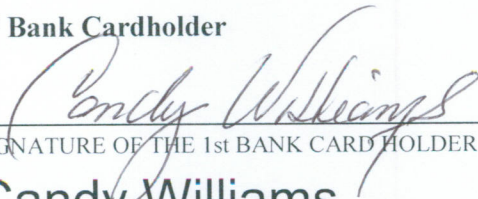
PRINT NAME OF THE ALTERNATE SIGNER

EMAIL

BOARD POSITION

PHONE NUMBER

1st Bank Cardholder



SIGNATURE OF THE 1st BANK CARD HOLDER

Candy Williams

PRINT NAME OF THE 1st BANK CARD HOLDER

Area 1 - Residential

BOARD POSITION

DATE

candy.williams.sonc@gmail.com

EMAIL

818-606-5352

PHONE NUMBER

2nd Bank Cardholder

SIGNATURE OF THE 2nd BANK CARD HOLDER

DATE

PRINT NAME OF THE 2nd BANK CARD HOLDER

EMAIL

BOARD POSITION

PHONE NUMBER

***** Bank Cardholders, please read further next page *****

Outreach Expenditures Category	
Movie Series at VNSO Park	\$ 5,000.00
Sherman Oaks Street Fair	\$ 750.00
Spring Tree Give A Way	\$ 350.00
Public Safety Events	\$ 750.00
LA Congress & Budget Advocate	\$ 1,500.00
VANC - Two Events	\$ 500.00
Branded Materials (Polo Shirts, Name Tags, etc)	\$ 1,250.00
Total Outreach Expenditures	\$ 10,100.00

Election Expenditures Category	
Total Election Expenditures	\$ 0.00

Storage Facility:

<input type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input checked="" type="checkbox"/> NA	
Facility Name/Owner	
Facility Address:	
Facility Owner Phone Number:	
Facility Owner Email:	
Name on Facility Account:	
Monthly Cost:	

P.O. Box:

<input checked="" type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input type="checkbox"/> NA	
Property Name/Owner:	Sherman Oaks Neighborhood Council
NC P.O. Box Address	PO Box 5721 S.O. 91413
Property Owner Address:	U.S. Postal Service
Property Owner Phone Number:	RENEWS ANNUALLY ON AUG 01 - ~ \$120.00
Property Owner Email:	
Name on P.O. Box Account:	
Monthly Cost:	

Website Services:

<input type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input type="checkbox"/> NA	
Name of Website Services Provider:	The Web Corner
Service Provider Address:	19509 Ventura Bl., Tarzana 91256
Service Provider Phone Number:	
Service Provider Email:	
Type of Services Provided:	Monthly maintenance: includes up to 1 hour for: phone support, web development, requests & website adjustments. Three (email accounts - shermanoaksnc.org
Monthly Cost:	\$ 102.50



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

CUSTOMER NUMBER
8607823
INVOICE DATE
02/01/2020

Bill-To Customer:



SHERMAN OAKS NC
 PO BOX 5721
 SHERMAN OAKS, CA 91413--0000

Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
8607823	02/01/2020 02/29/2020	02/29/2020	\$15.26	\$0.00	\$.00	\$15.26	\$30.52

Payments - Thank You

Description of Current Charges & Credits

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

CUSTOMER NUMBER	
8607823	
INVOICE NUMBER	
7511818	
DUE DATE	AMOUNT PAID
02/29/2020	

Please detach & enclose with payment



REMIT TO:

SHERMAN OAKS NC
 PO BOX 5721
 SHERMAN OAKS, CA 91413--0000

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

01001 8607823000000000003052

Messaging service is provided by Southwestern Bell Telephone Company, Pacific Bell Telephone Company, Illinois Bell Telephone Company, Indiana Bell Telephone Company, Inc., Michigan Bell Telephone Company, Nevada Bell Telephone Company, The Ohio Bell Telephone Company, or Wisconsin Bell, Inc. based on service location (collectively referred to as "AT&T or "AT&T Messaging").

How to pay your bill

You may mail your payment or send it by overnight mail. You may not pay this bill at AT&T Authorized Payment Locations. You may not send your other AT&T bills and this bill for messaging service together because these bills are generated from and processed by different accounting centers. When making your payments, write the amount paid in the box on the remittance stub. Also, write your account number on your check, money order or cashier's check. Mail your check and remittance stub in the return envelope provided or mail a standard envelope to:

AT&T Messaging
Western Region
P.O. Box 840486
Dallas, TX 75284-0486

AT&T Messaging
Southwest & Midwest Regions
P.O. Box 849883
Dallas, TX 75284-9883

Overnight Delivery Only
AT&T Messaging - LB 849883
BOA Lockbox Svc-Infomart
1950 N Stemmons Fwy - Ste 5010
Dallas, TX 75207

When to pay your bill

Your payment is due when you receive your bill. If we do not receive payment for your bill by the "DUE BY" date, your account will become past due.

In the event your account becomes past due, we will lock or suspend your service for a period of seven calendar days. If after seven calendar days payment in full has not been received; your service will be disconnected. In order to reconnect service, you must pay the full amount owed plus charges to reconnect your service. Your basic telephone service will not be disconnected for non-payment of information services.

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If you have questions about your bill, please call your service representative at 1-877-677-3770. Office hours are Monday through Friday, 8:00 AM to 6:00 PM Central Time.

Late Payment Charge


If we do not receive your payment and you have a past due balance plus current charges, AT&T will add a late payment charge of 1.5% to your total previous balance.

The late payment charge does not relieve you of the obligation to pay the total amount due by the "DUE BY" date.

If you subscribe to a voicemail and/or the Call Forwarding feature, local usage charges apply when retrieving mailbox messages and/or each time the Call Forwarding feature is activated. If you subscribe to a series 50+/series 100+ or a business call-in-one product, these products include Call Forwarding. The Call Forwarding monthly price is included in the monthly mailbox charge.

Don't let your voicemail security be compromised, use these simple tips: 1. If you have a temporary password, change it now & use a minimum of 6 digits. 2. Ensure your password by not using repeated or sequential digits. 3. Do not use your phone or mailbox number or numbers that are easily identifiable. 4. Treat your password as you would your ATM pin. 5. Change your password and greeting periodically.

How to understand your bill



Bill-To Customer:

CUSTOMER NUMBER
1
INVOICE DATE
2


Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
3	4	5	6	7	8	9	10

11 - Payment - Thank you 12 - 5/19/03 13 - 20.95CR

14 - Description of Current Charges & Credits 15 - Qty. 16 - Unit Price 17 - Ext. Price

Please detach & enclose with payment

CUSTOMER NUMBER
18
INVOICE NUMBER
19
DUE DATE
20
AMOUNT PAID
21



22 - REMIT TO:

1. Your account number
 2. Date invoice was created
 3. Your account number
 4. Current billing period
 5. When your payment is to be received by AT&T
 6. Past due balance
 7. Summary of any payments received in prior month
 8. Credits issued in the prior month
 9. Account total due (previous and current balances)
 10. Total of current charges
 11. Payment description
 12. Date payment was credited to account
 13. Amount of payment
 14. Description of current charges
 15. Quantity of items you are being charged for
 16. Amount of each item
 17. Total amount for all items in that category
- Remittance Slip**
18. Your account number
 19. Number assigned to this invoice
 20. Due date for current charges
 21. Amount of payments being made to AT&T
 22. The address to send your payment to

Office of the City Clerk
 Administrative Services Division
 Neighborhood Council (NC) Funding Program
 Board Action Certification Form



NC Name: Sherman Oaks Meeting Date: June 10, 2019

Budget Fiscal Year: 2019-2020 Agenda Item No: 13

Board Motion and/or Public Benefit Statement (CIP and NPG): A motion to approve the Administrative Packet for Fiscal Year 2019-2020

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

Vote Count

Recused Boardmembers must leave the room prior to any discussion and may not return to the room until after the vote is complete.

Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused	
Babian, Avo	Area 5 Business	✓						
Imber, Gil	Area 6 Residential	✓						
Baronian, Lavon	Area 1 Business					✓		
Binkow, Michael	Area 7 Residential	✓				✓		
Gilford, Lisa	Area 2 Residential					✓		
Hartsough, Jeffrey	Area 2 Community	✓						
Kalban, Jeffrey	Area 7 Community	✓						
Katchen, Howard	Area 3 Residential	✓						
Cappelletti, Lisa	Area 4 Community	X <i>CR</i>				✓		
Adair, Christy	Area 5 Community	✓						
Shapiro, Harold	Area 6 Community	✓						
Kerzner, Fran	Area 3 Business	✓						
Petrus, Lisa	Area 4 Residential	✓						
Roden, Neal	Area 7 Business	✓						
Sales, Kristin	Area 1 Community	✓						
Cappelletti, Joe	Area 4 Business				✓	✓		
Williams, Candy	Area 1 Residential	✓						
Yatman, Deatra	Area 3 Community				✓			
Kim, Christine	Area 6 Business				✓	✓		
Mulenforth, Cathy	Area 2 Business	✓						
Olds, Sarah	Area 5 Residential	✓						
Quorum: 11		Total:	15	0	0	3	5	0

We, the Treasurer and the Second Signer 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.

Treasurer's Signature: *Candy Williams*
 Print/Type Name: Candy Williams
 Date: June 10 2019

Second Signer's Signature: *Jeffrey Hartsough*
 Print/Type Name: JEFFREY HARTSOUGH
 Date: 06-11-2019

**NEIGHBORHOOD COUNCIL FUNDING PROGRAM
FINANCIAL OFFICERS LETTER OF ACKNOWLEDGEMENT & AGREEMENT**

We, the undersigned, do hereby declare that as a result of an official action of the Governing Body of the Neighborhood Council (NC) named below:

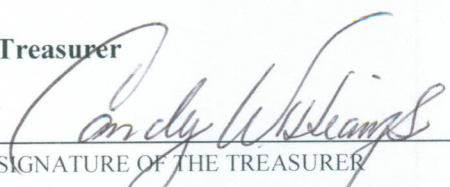
- (1) we are authorized to request City funding to support NC general operations,
- (2) all items or services described or included in any related funding requests are exclusively intended to further the goals and objectives of the Neighborhood Council, and
- (3) all reasonable precautions shall be exercised by the undersigned to fully safeguard, control and account for all use of funds. Proper accountability of all City funds is critical to the success of the NC Funding Program.

Therefore, by the signature(s) below, and on behalf of the Neighborhood Council named below, WE HEREBY AGREE to the terms and conditions as set forth in this Letter of Acknowledgement and all related documents as provided by the City, agree to expend funds in accordance with any applicable City rules, policies or procedures, and specifically agree to expend monies received by the Office of the City Clerk solely for public purposes relating to the goals and purposes of the Neighborhood Council named below, consistent with the scope and authority under the City Charter, the Plan for a Citywide System of Neighborhood Councils and any implementing ordinances. We have attended and participated in the City-provided training relating to the NC Funding Program.

WE FURTHER ACKNOWLEDGE and WE AGREE to comply with any requirements regarding use of the NC funds. WE AGREE to provide NC financial reports and/or supporting documentation to the Office of the City Clerk, Neighborhood Council Funding Program as requested and at monthly meetings to the Governing Body and stakeholders of the NC named below. WE AGREE that the Office of the City Clerk and other City representatives may make on-site visits to inspect and review all NC financial records, upon providing reasonable advance notice to the NC Treasurer or designated representatives.

WE ACKNOWLEDGE THAT A NEW LETTER OF ACKNOWLEDGEMENT MUST BE FILED IF THERE IS ANY CHANGE OF FINANCIAL OFFICERS.

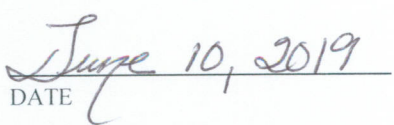
Neighborhood Council Financial Officers - Names and Signatures:

Treasurer


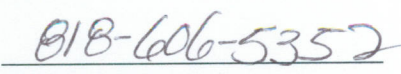
 SIGNATURE OF THE TREASURER
Candy Williams

 PRINT NAME OF THE TREASURER
Area 1 - Residential

 BOARD POSITION



 DATE
 candy.williams.sonc@gmail.com

 EMAIL


 PHONE NUMBER

CONTINUES OTHER SIDE

2nd Signer



SIGNATURE OF THE 2nd SIGNER

Jeffrey Hartsough

PRINT NAME OF THE 2ND SIGNER

Area 2 - Community Interest

BOARD POSITION

06-10-2019

DATE

jeffrey.hartsough.SONC@gmail.com

EMAIL

310-614-9804

PHONE NUMBER

Alternate Signer (If not applicable, please indicate "N/A")

SIGNATURE OF THE ALTERNATE SIGNER

DATE

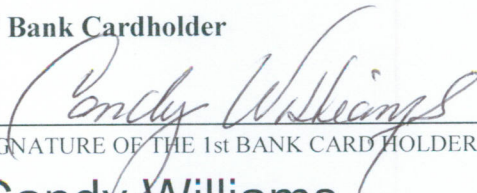
PRINT NAME OF THE ALTERNATE SIGNER

EMAIL

BOARD POSITION

PHONE NUMBER

1st Bank Cardholder



SIGNATURE OF THE 1st BANK CARD HOLDER

Candy Williams

PRINT NAME OF THE 1st BANK CARD HOLDER

Area 1 - Residential

BOARD POSITION

June 10 2019

DATE

candy.williams.sonc@gmail.com

EMAIL

818-606-5352

PHONE NUMBER

2nd Bank Cardholder

SIGNATURE OF THE 2nd BANK CARD HOLDER

DATE

PRINT NAME OF THE 2nd BANK CARD HOLDER

EMAIL

BOARD POSITION

PHONE NUMBER

***** Bank Cardholders, please read further next page *****

Outreach Expenditures Category	
Movie Series at VNSO Park	\$ 5,000.00
Sherman Oaks Street Fair	\$ 750.00
Spring Tree Give A Way	\$ 350.00
Public Safety Events	\$ 750.00
LA Congress & Budget Advocate	\$ 1,500.00
VANC - Two Events	\$ 500.00
Branded Materials (Polo Shirts, Name Tags, etc)	\$ 1,250.00
Total Outreach Expenditures	\$ 10,100.00

Election Expenditures Category	
Total Election Expenditures	\$ 0.00

Storage Facility:

<input type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input checked="" type="checkbox"/> NA	
Facility Name/Owner	
Facility Address:	
Facility Owner Phone Number:	
Facility Owner Email:	
Name on Facility Account:	
Monthly Cost:	

P.O. Box:

<input checked="" type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input type="checkbox"/> NA	
Property Name/Owner:	Sherman Oaks Neighborhood Council
NC P.O. Box Address	PO Box 5721 S.O. 91413
Property Owner Address:	U.S. Postal Service
Property Owner Phone Number:	RENEWS ANNUALLY ON AUG 01 - ~ \$120.00
Property Owner Email:	
Name on P.O. Box Account:	
Monthly Cost:	

Website Services:

<input type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input type="checkbox"/> NA	
Name of Website Services Provider:	The Web Corner
Service Provider Address:	19509 Ventura Bl., Tarzana 91256
Service Provider Phone Number:	
Service Provider Email:	
Type of Services Provided:	Monthly maintenance: includes up to 1 hour for: phone support, web development, requests & website adjustments. Three (email accounts - shermanoaksnc.org
Monthly Cost:	\$ 102.50



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

CUSTOMER NUMBER
8607823
INVOICE DATE
03/01/2020

Bill-To Customer:



SHERMAN OAKS NC
 PO BOX 5721
 SHERMAN OAKS, CA 91413--0000

Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
8607823	03/01/2020 03/31/2020	03/30/2020	\$30.52	\$0.00	\$.00	\$15.26	\$45.78

Payments - Thank You

Description of Current Charges & Credits

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

CUSTOMER NUMBER	
8607823	
INVOICE NUMBER	
7517748	
DUE DATE	AMOUNT PAID
03/30/2020	

Please detach & enclose with payment



REMIT TO:

SHERMAN OAKS NC
 PO BOX 5721
 SHERMAN OAKS, CA 91413--0000

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

01001 8607823000000000004578

Messaging service is provided by Southwestern Bell Telephone Company, Pacific Bell Telephone Company, Illinois Bell Telephone Company, Indiana Bell Telephone Company, Inc., Michigan Bell Telephone Company, Nevada Bell Telephone Company, The Ohio Bell Telephone Company, or Wisconsin Bell, Inc. based on service location (collectively referred to as "AT&T or "AT&T Messaging").

How to pay your bill

You may mail your payment or send it by overnight mail. You may not pay this bill at AT&T Authorized Payment Locations. You may not send your other AT&T bills and this bill for messaging service together because these bills are generated from and processed by different accounting centers. When making your payments, write the amount paid in the box on the remittance stub. Also, write your account number on your check, money order or cashier's check. Mail your check and remittance stub in the return envelope provided or mail a standard envelope to:

AT&T Messaging
Western Region
P.O. Box 840486
Dallas, TX 75284-0486

AT&T Messaging
Southwest & Midwest Regions
P.O. Box 849883
Dallas, TX 75284-9883

Overnight Delivery Only
AT&T Messaging - LB 849883
BOA Lockbox Svc-Infomart
1950 N Stemmons Fwy - Ste 5010
Dallas, TX 75207

When to pay your bill

Your payment is due when you receive your bill. If we do not receive payment for your bill by the "DUE BY" date, your account will become past due.

In the event your account becomes past due, we will lock or suspend your service for a period of seven calendar days. If after seven calendar days payment in full has not been received; your service will be disconnected. In order to reconnect service, you must pay the full amount owed plus charges to reconnect your service. Your basic telephone service will not be disconnected for non-payment of information services.

Questions about your bill

If you have questions about your bill, please call your service representative at 1-877-677-3770. Office hours are Monday through Friday, 8:00 AM to 6:00 PM Central Time.

Late Payment Charge


If we do not receive your payment and you have a past due balance plus current charges, AT&T will add a late payment charge of 1.5% to your total previous balance.

The late payment charge does not relieve you of the obligation to pay the total amount due by the "DUE BY" date.

If you subscribe to a voicemail and/or the Call Forwarding feature, local usage charges apply when retrieving mailbox messages and/or each time the Call Forwarding feature is activated. If you subscribe to a series 50+/series 100+ or a business call-in-one product, these products include Call Forwarding. The Call Forwarding monthly price is included in the monthly mailbox charge.

Don't let your voicemail security be compromised, use these simple tips: 1. If you have a temporary password, change it now & use a minimum of 6 digits. 2. Ensure your password by not using repeated or sequential digits. 3. Do not use your phone or mailbox number or numbers that are easily identifiable. 4. Treat your password as you would your ATM pin. 5. Change your password and greeting periodically.

How to understand your bill



Bill-To Customer:

CUSTOMER NUMBER
1
INVOICE DATE
2


Customer Number	Billing Period	Date Due	Previous Balance	Payments	Credits	Current Charges	TOTAL DUE
3	4	5	6	7	8	9	10

11 - Payment - Thank you 12 - 5/19/03 13 - 20.95CR

14 - Description of Current Charges & Credits 15 - Qty. 16 - Unit Price 17 - Ext. Price

Please detach & enclose with payment

CUSTOMER NUMBER
18
INVOICE NUMBER
19
DUE DATE
20
AMOUNT PAID
21



22 - REMIT TO:

1. Your account number
 2. Date invoice was created
 3. Your account number
 4. Current billing period
 5. When your payment is to be received by AT&T
 6. Past due balance
 7. Summary of any payments received in prior month
 8. Credits issued in the prior month
 9. Account total due (previous and current balances)
 10. Total of current charges
 11. Payment description
 12. Date payment was credited to account
 13. Amount of payment
 14. Description of current charges
 15. Quantity of items you are being charged for
 16. Amount of each item
 17. Total amount for all items in that category
- Remittance Slip**
18. Your account number
 19. Number assigned to this invoice
 20. Due date for current charges
 21. Amount of payments being made to AT&T
 22. The address to send your payment to



NC Name: Sherman Oaks Meeting Date: June 10, 2019

Budget Fiscal Year: 2019-2020 Agenda Item No: 13

Board Motion and/or Public Benefit Statement (CIP and NPG):
 A motion to approve the Administrative Packet for Fiscal Year 2019-2020

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

Vote Count

Recused Boardmembers must leave the room prior to any discussion and may not return to the room until after the vote is complete.

Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Babian, Avo	Area 5 Business	✓					
Imber, Gil	Area 6 Residential	✓					
Baronian, Lavon	Area 1 Business					✓	
Binkow, Michael	Area 7 Residential	✓				✓	
Gilford, Lisa	Area 2 Residential					✓	
Hartsough, Jeffrey	Area 2 Community	✓					
Kalban, Jeffrey	Area 7 Community	✓					
Katchen, Howard	Area 3 Residential	✓					
Cappelletti, Lisa	Area 4 Community	X <i>CR</i>				✓	
Adair, Christy	Area 5 Community	✓					
Shapiro, Harold	Area 6 Community	✓					
Kerzner, Fran	Area 3 Business	✓					
Petrus, Lisa	Area 4 Residential	✓					
Roden, Neal	Area 7 Business	✓					
Sales, Kristin	Area 1 Community	✓					
Cappelletti, Joe	Area 4 Business				✓	✓	
Williams, Candy	Area 1 Residential	✓					
Yatman, Deatra	Area 3 Community				✓		
Kim, Christine	Area 6 Business				✓	✓	
Mulenthorn, Cathy	Area 2 Business	✓					
Olds, Sarah	Area 5 Residential	✓					

Quorum: 11 Total: 15 0 0 3 5 0

We, the Treasurer and the Second Signer 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.

Treasurer's Signature *Candy Williams* Second Signer's Signature *Jeffrey Hartsough*
 Print/Type Name: Candy Williams Print/Type Name: JEFFREY HARTSOUGH
 Date: June 10 2019 Date: 06-11-2019

**NEIGHBORHOOD COUNCIL FUNDING PROGRAM
FINANCIAL OFFICERS LETTER OF ACKNOWLEDGEMENT & AGREEMENT**

We, the undersigned, do hereby declare that as a result of an official action of the Governing Body of the Neighborhood Council (NC) named below:

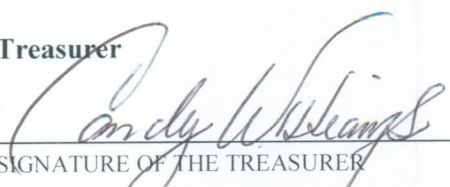
- (1) we are authorized to request City funding to support NC general operations,
- (2) all items or services described or included in any related funding requests are exclusively intended to further the goals and objectives of the Neighborhood Council, and
- (3) all reasonable precautions shall be exercised by the undersigned to fully safeguard, control and account for all use of funds. Proper accountability of all City funds is critical to the success of the NC Funding Program.

Therefore, by the signature(s) below, and on behalf of the Neighborhood Council named below, WE HEREBY AGREE to the terms and conditions as set forth in this Letter of Acknowledgement and all related documents as provided by the City, agree to expend funds in accordance with any applicable City rules, policies or procedures, and specifically agree to expend monies received by the Office of the City Clerk solely for public purposes relating to the goals and purposes of the Neighborhood Council named below, consistent with the scope and authority under the City Charter, the Plan for a Citywide System of Neighborhood Councils and any implementing ordinances. We have attended and participated in the City-provided training relating to the NC Funding Program.

WE FURTHER ACKNOWLEDGE and WE AGREE to comply with any requirements regarding use of the NC funds. WE AGREE to provide NC financial reports and/or supporting documentation to the Office of the City Clerk, Neighborhood Council Funding Program as requested and at monthly meetings to the Governing Body and stakeholders of the NC named below. WE AGREE that the Office of the City Clerk and other City representatives may make on-site visits to inspect and review all NC financial records, upon providing reasonable advance notice to the NC Treasurer or designated representatives.

WE ACKNOWLEDGE THAT A NEW LETTER OF ACKNOWLEDGEMENT MUST BE FILED IF THERE IS ANY CHANGE OF FINANCIAL OFFICERS.

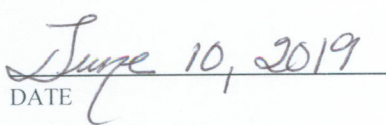
Neighborhood Council Financial Officers - Names and Signatures:

Treasurer


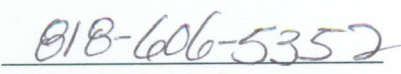
 SIGNATURE OF THE TREASURER
Candy Williams

 PRINT NAME OF THE TREASURER
Area 1 - Residential

 BOARD POSITION



 DATE
 candy.williams.sonc@gmail.com

 EMAIL


 PHONE NUMBER

CONTINUES OTHER SIDE

2nd Signer



SIGNATURE OF THE 2nd SIGNER

Jeffrey Hartsough

PRINT NAME OF THE 2ND SIGNER

Area 2 - Community Interest

BOARD POSITION

06-10-2019

DATE

jeffrey.hartsough.SONC@gmail.com

EMAIL

310-614-9804

PHONE NUMBER

Alternate Signer (If not applicable, please indicate "N/A")

SIGNATURE OF THE ALTERNATE SIGNER

DATE

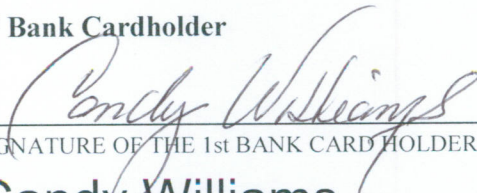
PRINT NAME OF THE ALTERNATE SIGNER

EMAIL

BOARD POSITION

PHONE NUMBER

1st Bank Cardholder



SIGNATURE OF THE 1st BANK CARD HOLDER

Candy Williams

PRINT NAME OF THE 1st BANK CARD HOLDER

Area 1 - Residential

BOARD POSITION

June 10 2019

DATE

candy.williams.sonc@gmail.com

EMAIL

818-606-5352

PHONE NUMBER

2nd Bank Cardholder

SIGNATURE OF THE 2nd BANK CARD HOLDER

DATE

PRINT NAME OF THE 2nd BANK CARD HOLDER

EMAIL

BOARD POSITION

PHONE NUMBER

***** Bank Cardholders, please read further next page *****

Outreach Expenditures Category	
Movie Series at VNSO Park	\$ 5,000.00
Sherman Oaks Street Fair	\$ 750.00
Spring Tree Give A Way	\$ 350.00
Public Safety Events	\$ 750.00
LA Congress & Budget Advocate	\$ 1,500.00
VANC - Two Events	\$ 500.00
Branded Materials (Polo Shirts, Name Tags, etc)	\$ 1,250.00
Total Outreach Expenditures	\$ 10,100.00

Election Expenditures Category	
Total Election Expenditures	\$ 0.00

Storage Facility:

<input type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input checked="" type="checkbox"/> NA	
Facility Name/Owner	
Facility Address:	
Facility Owner Phone Number:	
Facility Owner Email:	
Name on Facility Account:	
Monthly Cost:	

P.O. Box:

<input checked="" type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input type="checkbox"/> NA	
Property Name/Owner:	Sherman Oaks Neighborhood Council
NC P.O. Box Address	PO Box 5721 S.O. 91413
Property Owner Address:	U.S. Postal Service
Property Owner Phone Number:	RENEWS ANNUALLY ON AUG 01 - ~ \$120.00
Property Owner Email:	
Name on P.O. Box Account:	
Monthly Cost:	

Website Services:

<input type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input type="checkbox"/> NA	
Name of Website Services Provider:	The Web Corner
Service Provider Address:	19509 Ventura Bl., Tarzana 91256
Service Provider Phone Number:	
Service Provider Email:	
Type of Services Provided:	Monthly maintenance: includes up to 1 hour for: phone support, web development, requests & website adjustments. Three (email accounts - shermanoaksnc.org
Monthly Cost:	\$ 102.50



Details for Order #112-9258384-3075459

[Print this page for your records.](#)

Order Placed: March 30, 2020

Amazon.com order number: 112-9258384-3075459

Order Total: \$73.96

Shipped on April 1, 2020

Items Ordered

1 of: *Morex Ribbon 2219.16/25-609 Polyester Herringbone Craft Supplies, 5/8" by 25 yd, Red* \$9.21

Sold by: Amazon.com Services LLC

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

Two-Day Shipping

Shipping now

Items Ordered

1 of: *Morex Ribbon 2219.16/25-609 Polyester Herringbone Craft Supplies, 5/8" by 25 yd, Red* \$9.21

Sold by: Amazon.com Services LLC

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

Two-Day Shipping

Shipped on April 1, 2020

Items Ordered

1 of: *Morex Ribbon 2219.16/25-609 Polyester Herringbone Craft Supplies, 5/8" by 25 yd, Red* \$9.21

Sold by: Amazon.com Services LLC

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

Two-Day Shipping

Shipped on April 1, 2020

Items Ordered**Price**

1 of: *Morex Ribbon 2219.16/25-630 Polyester Herringbone Craft Supplies, 5/8" by 25 yd, \$9.98*
Citrus

Sold by: Ribbon Curl ([seller profile](#))

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

Two-Day Shipping

Shipped on April 1, 2020

Items Ordered**Price**

1 of: *Morex Ribbon 2219.16/25-630 Polyester Herringbone Craft Supplies, 5/8" by 25 yd, \$9.98*
Citrus

Sold by: Ribbon Curl ([seller profile](#))

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

Two-Day Shipping

Shipped on March 31, 2020

Items Ordered**Price**

2 of: *Morex Ribbon 2219.16/25-630 Polyester Herringbone Craft Supplies, 5/8" by 25 yd, \$9.98*
Citrus

Sold by: Ribbon Curl ([seller profile](#))

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

Two-Day Shipping

Payment information

Payment Method:

Visa | Last digits: 3778

Item(s) Subtotal: \$67.55
Shipping & Handling: \$0.00

Total before tax: \$67.55

Estimated tax to be collected: \$6.41

Grand Total: \$73.96

Billing address

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Credit Card transactions

Visa ending in 3778: April 1, 2020: \$13.48
Visa ending in 3778: April 1, 2020: \$30.24

To view the status of your order, return to [Order Summary](#).

[Conditions of Use](#) | [Privacy Notice](#) © 1996-2020, Amazon.com, Inc. or its affiliates

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: May 11, 2020

Budget Fiscal Year: 2019-20 Agenda Item No: 4D

Board Motion and/or Public Benefit Statement (CIP and NPG): A motion to approve a board member reimbursement totaling \$266.58 to Sarah Manuel for various purchases in support of the SONC Face Mask program. The Face Mask program was initiated during the LA City declared emergency as provided for by the Neighborhood Council Funding Program. Details of purchases, receipts on SONC website. Amazon 03/24/2020 \$87.58; Amazon 03/30/3030 73.96; Amazon 03/30/2020 105.06; Total \$266.58

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

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 columns: Board Member's First and last Name, Board Position, Yes, No, Abstain, Absent, Ineligible, Recused. Rows include members like Williams, Candy, Baronian, Levon, Hartsough, Jeffrey, Gilford, Lisa, etc.

Board Quorum: Total: 12 0 1 5 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 Jeffrey Hartsough
Print/Type Name: Candy Williams Jeffrey Hartsough
Date: May 13, 2020 May 16, 2020



done ncfunding <cityclerk.funding@lacity.org>

SONC - Approval of Emergency Funding

1 message

Semee Park <semee.park@lacity.org>

Thu, May 21, 2020 at 1:28 PM

To: Jeffrey Hartsough <jeffrey.hartsough.sonc@gmail.com>

Cc: Betty Wong Oyama <Betty.Wong@lacity.org>, Clerk NCFunding <clerk.ncfunding@lacity.org>, Candy Williams <candy.williams.sonc@gmail.com>

Thank you Jeffrey for the response (and apologies for missing your call).

The Department is formally approving SONC's emergency funding request for \$746.25 to the manufacturing of masks to be distributed to local organizations in response to COVID19.

I believe you can utilize this approval email to reconcile the funding (reimbursement) matter. However, I am deferring to the City Clerk's Office for further clarification.

Hope this is helpful and please reach out if there are any questions. Thank you.

Semee Park

Director of Neighborhood Council Operations

Department of Neighborhood Empowerment

14410 Sylvan St. 3rd Floor

Los Angeles, CA 91401

Office | 818-374-6851

Email | Semee.Park@lacity.org

Trailblazing the largest civic engagement system, virtually

www.EmpowerLA.org/EVG

On Thu, May 21, 2020 at 1:17 PM Jeffrey Hartsough <jeffrey.hartsough.sonc@gmail.com> wrote:

Semee,

This message is in response to your email subject RE: SONC - Emergency Funding Follow Ups, regarding the pending SONC Neighborhood Council COVID-19 Emergency Funding Plan.

Items 1 - 4

Items numbers 1 through 4 on the SONC submitted Neighborhood Council COVID-19 Emergency Funding Plan are not to be considered. The Sherman Oaks Neighborhood Council (SONC) will not be expending funds for those items under the Addendum to Program Policy 5.0 - Expenditures During the Covid-19 Declared Emergency.

Item 5

The only item on the submitted Neighborhood Council COVID-19 Emergency Funding Plan that is in question is item 5, which is copied into this email here:

(5) Various vendors of sewing materials and other supplies used by volunteers to make fabric face masks and face shields that are being provided to organizations in the Sherman Oaks area (e.g., Sherman Oaks Hospital, Homeless Shelter at the Van Nuys Sherman Oaks park, etc.) as PPE in response to the COVID-19 emergency. To date more than 400 masks have been supplied.

Your email of May 20, 2020, addressed item 5 as follows: **My responses in blue.**

Reimbursement for manufacturing of masks - Various vendors of sewing materials and other supplies used by volunteers to make fabric face masks and face shields that are being provided to organizations in the Sherman Oaks area (e.g., Sherman Oaks Hospital, Homeless Shelter at the Van Nuys Sherman Oaks park, etc.) as PPE in response to the COVID-19 emergency. To date more than 400 masks have been supplied.

The SONC Face Mask program was started before the Addendum to Program Policy 5.0 was published. Expenditures for this ongoing program were governed by the policy prior to the Addendum being issued.

-
- How much of the emergency funding would SONC like to approve? **\$746.25 see SONC BACs Agenda Item 4D and Item 4E, attached. These BACs provide approval by the SONC board for funds expended during the COVID-19 emergency prior to SONC board approval.**
- Can you confirm no conflict of interest exists between you and the vendors? Please also list the vendors. **Yes, no conflict of interest exists; vendors: Amazon, Joann.**
- I recognize funds have already been expended for this expense, the Department is willing to approve this emergency funding request to allow for reimbursements to move forward. **Again, expenditures for the SONC Face Mask program began under the original Policy 5.0 which did not require DONE review or approval.**
- Can you confirm social distancing and other healthy/safety protocols have been followed in the distribution? **Yes.**

Currently the City Clerk is delaying payment for the board member reimbursement to Sarah Manuel which has been approved by the SONC board, see BAC, Agenda Item 4D, May 11, 2020, SONC Board Meeting.

Please provide DONE's approval and direction to the City Clerk to make payment to Sarah Manuel.

I appreciate your attention to this request. If you have any questions please let me know.

Please stay Safer at Home.

Jeffrey

--

Jeffrey Hartsough

jeffrey.hartsough.sonc@gmail.com

President

Area 2 - Community Interest

Sherman Oaks Neighborhood Council

=====
On Wed, May 20, 2020 at 4:28 PM Semee Park <semee.park@lacity.org> wrote:

Dear Jeffrey,

Thank you for Sherman Oak NC's submission of the COVID-19 Emergency Funding Plan. Apologies for the delay in response.

The Department of Neighborhood Empowerment (Department) is reviewing your submissions on behalf of SONC. Final approval will be provided upon confirmation no conflict of interest exists, and follow up questions answered. Attached is/are your submission(s) for your reference. I will send another email to the Board informing them of the Department's approval, once approved.

Couple of follow up questions needed to approve your proposal:

Mayor's Fund for Los Angeles- SONC will not be able to contribute to the Mayor's Fund. (but let me confirm).

Los Angeles Parks Foundation - to support LA Parks providing Shelters during the COVID-19 emergency for those experiencing homelessness.

- How much of the emergency funding would SONC like to approve?
- Can you confirm no conflict of interest exists between you and the organization?
- Now that SONC has been meeting virtually, is this something the Board can take action on to approve instead? If not, can you provide a reason why?

Los Angeles Regional Food Bank - to support for those experiencing food insecurity during the COVID-19 emergency

- How much of the emergency funding would SONC like to approve?

- Can you confirm no conflict of interest exists between you and the organization?
- Now that SONC has been meeting virtually, is this something the Board can take action on to approve instead? If not, can you provide a reason why?

Hope of the Valley - to Homeless Shelter established at the Van Nuys Sherman Oaks RC Park (VNSO) as a result of the COVID-19 emergency.

- How much of the emergency funding would SONC like to approve?
- Can you confirm no conflict of interest exists between you and the organization?
- Now that SONC has been meeting virtually, is this something the Board can take action on to approve instead? If not, can you provide a reason why?

Reimbursement for manufacturing of masks - Various vendors of sewing materials and other supplies used by volunteers to make fabric face masks and face shields that are being provided to organizations in the Sherman Oaks area (e.g., Sherman Oaks Hospital, Homeless Shelter at the Van Nuys Sherman Oaks park, etc.) as PPE in response to the COVID-19 emergency. To date more than 400 masks have been supplied.

-
- How much of the emergency funding would SONC like to approve?
- Can you confirm no conflict of interest exists between you and the vendors? Please also list the vendors.
- I recognize funds have already been expended for this expense, the Department is willing to approve this emergency funding request to allow for reimbursements to move forward.
- Can you confirm social distancing and other healthy/safety protocols have been followed in the distribution?

Finally, as soon as the NC board or quorum of the board is able to hold a meeting via teleconference or other method approved by DONE, the President/Chair shall report the expenditure to the governing board, including the details surrounding the emergency which gave rise to the expenditure. The expenditure shall be ratified by the governing board through a Board Action Certification (BAC) entered into the minutes of the meeting.

We hope this is helpful, and look forward to your reply.

Semee Park

Director of Neighborhood Council Operations

Department of Neighborhood Empowerment

14410 Sylvan St. 3rd Floor

Los Angeles, CA 91401

Office | 818-374-6851

Email | Semee.Park@lacity.org

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www.EmpowerLA.org/EVG



Final Details for Order #112-8412079-8237863

[Print this page for your records.](#)

Order Placed: March 24, 2020

Amazon.com order number: 112-8412079-8237863

Order Total: \$87.56

Shipped on March 26, 2020

Items Ordered

1 of: *Mandala Crafts Maxi Piping Trim, Single Fold Bias Tape, Welting Cord from Cotton Polyester for Sewing, Trimming, Upholstery (Pink, 2.5mm 0.5 inch 55 Yards)* **Price** \$19.99

Sold by: Mandala Crafts ([seller profile](#)) | Product question? [Ask Seller](#)

Condition: New

1 of: *Mandala Crafts Maxi Piping Trim, Single Fold Bias Tape, Welting Cord from Cotton Polyester for Sewing, Trimming, Upholstery (Purple, 2.5mm 0.5 inch 55 Yards)* **Price** \$19.99

Sold by: Mandala Crafts ([seller profile](#)) | Product question? [Ask Seller](#)

Condition: New

1 of: *Mandala Crafts Maxi Piping Trim, Single Fold Bias Tape, Welting Cord from Cotton Polyester for Sewing, Trimming, Upholstery (Gray, 2.5mm 0.5 inch 55 Yards)* **Price** \$19.99

Sold by: Mandala Crafts ([seller profile](#)) | Product question? [Ask Seller](#)

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

Two-Day Shipping

Shipped on March 26, 2020

Items Ordered

1 of: *Mandala Crafts Maxi Piping Trim, Single Fold Bias Tape, Welting Cord from Cotton Polyester for Sewing, Trimming, Upholstery (Orange, 2.5mm 0.5 inch 55 Yards)* **Price** \$19.99

Sold by: Mandala Crafts ([seller profile](#)) | Product question? [Ask Seller](#)

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

Two-Day Shipping

Payment information

Payment Method:

Visa | Last digits: 3778

Item(s) Subtotal: \$79.96
Shipping & Handling: \$0.00

Billing address

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Total before tax: \$79.96
Estimated tax to be collected: \$7.60

Grand Total: \$87.56

Credit Card transactions

Visa ending in 3778: March 26, 2020: \$43.78
Visa ending in 3778: March 26, 2020: \$43.78

To view the status of your order, return to [Order Summary](#).

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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: May 11, 2020

Budget Fiscal Year: 2019-20 Agenda Item No: 4D

Board Motion and/or Public Benefit Statement (CIP and NPG):
 A motion to approve a board member reimbursement totaling \$266.58 to Sarah Manuel for various purchases in support of the SONC Face Mask program. The Face Mask program was initiated during the LA City declared emergency as provided for by the Neighborhood Council Funding Program. Details of purchases, receipts on SONC website. Amazon 03/24/2020 \$87.58; Amazon 03/30/3030 73.96; Amazon 03/30/2020 105.06; Total \$266.58

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					
Gilford, Lisa	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		
Manuel, Sarah	A5-R			x			
Babian, Avo	A5-B				x		
Shapiro, Harold	A6-CI	x					
Imber, Gil	A6-R	x					
Kim, Christine	A6-B				x		
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:	12	0	1	5	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: Authorized Signature:

Print/Type Name: Candy Williams Print/Type Name: Jeffrey Hartsough

Date: May 13, 2020 Date: May 16, 2020



done ncfunding <cityclerk.funding@lacity.org>

SONC - Approval of Emergency Funding

1 message

Semee Park <semee.park@lacity.org>

Thu, May 21, 2020 at 1:28 PM

To: Jeffrey Hartsough <jeffrey.hartsough.sonc@gmail.com>

Cc: Betty Wong Oyama <Betty.Wong@lacity.org>, Clerk NCFunding <clerk.ncfunding@lacity.org>, Candy Williams <candy.williams.sonc@gmail.com>

Thank you Jeffrey for the response (and apologies for missing your call).

The Department is formally approving SONC's emergency funding request for \$746.25 to the manufacturing of masks to be distributed to local organizations in response to COVID19.

I believe you can utilize this approval email to reconcile the funding (reimbursement) matter. However, I am deferring to the City Clerk's Office for further clarification.

Hope this is helpful and please reach out if there are any questions. Thank you.

Semee Park

Director of Neighborhood Council Operations

Department of Neighborhood Empowerment

14410 Sylvan St. 3rd Floor

Los Angeles, CA 91401

Office | 818-374-6851

Email | Semee.Park@lacity.org

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www.EmpowerLA.org/EVG

On Thu, May 21, 2020 at 1:17 PM Jeffrey Hartsough <jeffrey.hartsough.sonc@gmail.com> wrote:

Semee,

This message is in response to your email subject RE: SONC - Emergency Funding Follow Ups, regarding the pending SONC Neighborhood Council COVID-19 Emergency Funding Plan.

Items 1 - 4

Items numbers 1 through 4 on the SONC submitted Neighborhood Council COVID-19 Emergency Funding Plan are not to be considered. The Sherman Oaks Neighborhood Council (SONC) will not be expending funds for those items under the Addendum to Program Policy 5.0 - Expenditures During the Covid-19 Declared Emergency.

Item 5

The only item on the submitted Neighborhood Council COVID-19 Emergency Funding Plan that is in question is item 5, which is copied into this email here:

(5) Various vendors of sewing materials and other supplies used by volunteers to make fabric face masks and face shields that are being provided to organizations in the Sherman Oaks area (e.g., Sherman Oaks Hospital, Homeless Shelter at the Van Nuys Sherman Oaks park, etc.) as PPE in response to the COVID-19 emergency. To date more than 400 masks have been supplied.

Your email of May 20, 2020, addressed item 5 as follows: **My responses in blue.**

Reimbursement for manufacturing of masks - Various vendors of sewing materials and other supplies used by volunteers to make fabric face masks and face shields that are being provided to organizations in the Sherman Oaks area (e.g., Sherman Oaks Hospital, Homeless Shelter at the Van Nuys Sherman Oaks park, etc.) as PPE in response to the COVID-19 emergency. To date more than 400 masks have been supplied.

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- How much of the emergency funding would SONC like to approve? **\$746.25 see SONC BACs Agenda Item 4D and Item 4E, attached. These BACs provide approval by the SONC board for funds expended during the COVID-19 emergency prior to SONC board approval.**
- Can you confirm no conflict of interest exists between you and the vendors? Please also list the vendors. **Yes, no conflict of interest exists; vendors: Amazon, Joann.**
- I recognize funds have already been expended for this expense, the Department is willing to approve this emergency funding request to allow for reimbursements to move forward. **Again, expenditures for the SONC Face Mask program began under the original Policy 5.0 which did not require DONE review or approval.**
- Can you confirm social distancing and other healthy/safety protocols have been followed in the distribution? **Yes.**

Currently the City Clerk is delaying payment for the board member reimbursement to Sarah Manuel which has been approved by the SONC board, see BAC, Agenda Item 4D, May 11, 2020, SONC Board Meeting.

Please provide DONE's approval and direction to the City Clerk to make payment to Sarah Manuel.

I appreciate your attention to this request. If you have any questions please let me know.

Please stay Safer at Home.

Jeffrey

--

Jeffrey Hartsough

jeffrey.hartsough.sonc@gmail.com

President

Area 2 - Community Interest

Sherman Oaks Neighborhood Council

=====
On Wed, May 20, 2020 at 4:28 PM Seme Park <seme.park@lacity.org> wrote:

Dear Jeffrey,

Thank you for Sherman Oak NC's submission of the COVID-19 Emergency Funding Plan. Apologies for the delay in response.

The Department of Neighborhood Empowerment (Department) is reviewing your submissions on behalf of SONC. Final approval will be provided upon confirmation no conflict of interest exists, and follow up questions answered. Attached is/are your submission(s) for your reference. I will send another email to the Board informing them of the Department's approval, once approved.

Couple of follow up questions needed to approve your proposal:

Mayor's Fund for Los Angeles- SONC will not be able to contribute to the Mayor's Fund. (but let me confirm).

Los Angeles Parks Foundation - to support LA Parks providing Shelters during the COVID-19 emergency for those experiencing homelessness.

- How much of the emergency funding would SONC like to approve?
- Can you confirm no conflict of interest exists between you and the organization?
- Now that SONC has been meeting virtually, is this something the Board can take action on to approve instead? If not, can you provide a reason why?

Los Angeles Regional Food Bank - to support for those experiencing food insecurity during the COVID-19 emergency

- How much of the emergency funding would SONC like to approve?

- Can you confirm no conflict of interest exists between you and the organization?
- Now that SONC has been meeting virtually, is this something the Board can take action on to approve instead? If not, can you provide a reason why?

Hope of the Valley - to Homeless Shelter established at the Van Nuys Sherman Oaks RC Park (VNSO) as a result of the COVID-19 emergency.

- How much of the emergency funding would SONC like to approve?
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-
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- Can you confirm social distancing and other healthy/safety protocols have been followed in the distribution?

Finally, as soon as the NC board or quorum of the board is able to hold a meeting via teleconference or other method approved by DONE, the President/Chair shall report the expenditure to the governing board, including the details surrounding the emergency which gave rise to the expenditure. The expenditure shall be ratified by the governing board through a Board Action Certification (BAC) entered into the minutes of the meeting.

We hope this is helpful, and look forward to your reply.

Semee Park

Director of Neighborhood Council Operations

Department of Neighborhood Empowerment

14410 Sylvan St. 3rd Floor

Los Angeles, CA 91401

Office | 818-374-6851

Email | Semee.Park@lacity.org

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www.EmpowerLA.org/EVG



Details for Order #112-3967527-8289064

[Print this page for your records.](#)

Order Placed: March 30, 2020

Amazon.com order number: 112-3967527-8289064

Order Total: \$105.06

Shipped on April 1, 2020

Items Ordered

2 of: *Topenca Supplies 1/2 Inches x 50 Yards Double Face Solid Grosgrain Ribbon Roll, Olive Green* \$15.99

Sold by: Topenca ([seller profile](#)) | Product question? [Ask Seller](#)

Condition: New

2 of: *Topenca Supplies 1/2 Inches x 50 Yards Double Face Solid Grosgrain Ribbon Roll, Orange* \$15.99

Sold by: Topenca ([seller profile](#)) | Product question? [Ask Seller](#)

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

One-Day Shipping

Preparing for Shipment

Items Ordered

1 of: *Topenca Supplies 1/2 Inches x 50 Yards Double Face Solid Grosgrain Ribbon Roll, Purple* \$15.99

Sold by: Topenca ([seller profile](#)) | Product question? [Ask Seller](#)

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

One-Day Shipping

Shipped on April 1, 2020

Items Ordered

1 of: *Topenca Supplies 1/2 Inches x 50 Yards Double Face Solid Grosgrain Ribbon Roll, Purple* \$15.99

Sold by: Topenca ([seller profile](#)) | Product question? [Ask Seller](#)

Condition: New

Shipping Address:

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Shipping Speed:

One-Day Shipping

Payment information**Payment Method:**

Visa | Last digits: 3778

Item(s) Subtotal: \$95.94
Shipping & Handling: \$0.00

Billing address

Sarah Kathryn Manuel
14005 CHANDLER BLVD
SHERMAN OAKS, CA 91401-5737
United States

Total before tax: \$95.94
Estimated tax to be collected: \$9.12

Grand Total: \$105.06

Credit Card transactions

Visa ending in 3778: April 1, 2020: \$70.04

To view the status of your order, return to [Order Summary](#).

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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: May 11, 2020
 Budget Fiscal Year: 2019-20 Agenda Item No: 4D
 Board Motion and/or Public Benefit Statement (CIP and NPG):
 A motion to approve a board member reimbursement totaling \$266.58 to Sarah Manuel for various purchases in support of the SONC Face Mask program. The Face Mask program was initiated during the LA City declared emergency as provided for by the Neighborhood Council Funding Program. Details of purchases, receipts on SONC website. Amazon 03/24/2020 \$87.58; Amazon 03/30/3030 73.96; Amazon 03/30/2020 105.06; Total \$266.58

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					
Gilford, Lisa	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		
Manuel, Sarah	A5-R			x			
Babian, Avo	A5-B				x		
Shapiro, Harold	A6-CI	x					
Imber, Gil	A6-R	x					
Kim, Christine	A6-B				x		
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:	12	0	1	5	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* Authorized Signature: *J Hartsough*
 Print/Type Name: Candy Williams Print/Type Name: Jeffrey Hartsough
 Date: May 13, 2020 Date: May 16, 2020



done ncfunding <cityclerk.funding@lacity.org>

SONC - Approval of Emergency Funding

1 message

Semee Park <semee.park@lacity.org>

Thu, May 21, 2020 at 1:28 PM

To: Jeffrey Hartsough <jeffrey.hartsough.sonc@gmail.com>

Cc: Betty Wong Oyama <Betty.Wong@lacity.org>, Clerk NCFunding <clerk.ncfunding@lacity.org>, Candy Williams <candy.williams.sonc@gmail.com>

Thank you Jeffrey for the response (and apologies for missing your call).

The Department is formally approving SONC's emergency funding request for \$746.25 to the manufacturing of masks to be distributed to local organizations in response to COVID19.

I believe you can utilize this approval email to reconcile the funding (reimbursement) matter. However, I am deferring to the City Clerk's Office for further clarification.

Hope this is helpful and please reach out if there are any questions. Thank you.

Semee Park

Director of Neighborhood Council Operations

Department of Neighborhood Empowerment

14410 Sylvan St. 3rd Floor

Los Angeles, CA 91401

Office | 818-374-6851

Email | Semee.Park@lacity.org

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Items 1 - 4

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I appreciate your attention to this request. If you have any questions please let me know.

Please stay Safer at Home.

Jeffrey

--

Jeffrey Hartsough

jeffrey.hartsough.sonc@gmail.com

President

Area 2 - Community Interest

Sherman Oaks Neighborhood Council

=====
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We hope this is helpful, and look forward to your reply.

Semee Park

Director of Neighborhood Council Operations

Department of Neighborhood Empowerment

14410 Sylvan St. 3rd Floor

Los Angeles, CA 91401

Office | 818-374-6851

Email | Semee.Park@lacity.org

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www.EmpowerLA.org/EVG

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.

Name of NC from which you are seeking this grant: Sherman Oaks N.C.

SECTION I - APPLICANT INFORMATION

	Sherman Oaks Chamber Foundation	46-3144630	CA	
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)	14827 Ventura Blvd Suite 207	Sherman Oaks	CA	6/13 91403
	<i>Organization Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1c)	<i>Business Address (if different)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
1d)	PRIMARY CONTACT INFORMATION:			
	Vicki Nussbaum	310-985-8284	vickicarrnussbaum@gmail.com	
	<i>Name</i>	<i>Phone</i>	<i>Email</i>	
2)	Type of Organization- Please select one:			
	<input type="checkbox"/> Public School <i>(not to include private schools)</i> Attach Signed letter on School Letterhead	or	<input checked="" type="checkbox"/> 501(c)(3) Non-Profit <i>(other than religious institutions)</i> Attach IRS Determination Letter	
3)	<i>Name / Address of Affiliated Organization (if applicable)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

SECTION II - PROJECT DESCRIPTION

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

This funding is to help graffiti proof the utility boxes in Sherman Oaks. We also will use the funds to monitor the boxes and remove any graffiti. The utility boxes brand, unify and beautify Sherman Oaks.

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 money will specifically be used to help keep Sherman Oaks clean from graffiti on the painted utility boxes

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
graffiti proofing 50 utility boxes at \$50 each	\$ 750	\$ 1500
monthly cleaning of boxes, 12 months at \$200/month	\$ 1200	\$ 2400
	\$	\$

6b) Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Graffiti proof paint - \$135/each for 10 gallons	\$ 625	\$ 1250
paint brushes and cleansers	\$ 100	\$ 200
	\$	\$

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: \$ 2675

10a) Start date: 01/01/2020 10b) Date Funds Required: 03/01/2020 10c) Expected Completion Date: 10/3/2020
 (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
Fran Kerzner	board member

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*

Vicki Nussbaum

PRINT Name

Board Member

Title

Vicki Nussbaum

Signature

11/21/2020

Date

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

Whitney Rosenson

PRINT Name

Board Member

Title

Whitney Rosenson

Signature

11/21/2020

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

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAY 28 2015

SHERMAN OAKS CHAMBER FOUNDATION
14827 VENTURA BLVD SUITE 207
SHERMAN OAKS, CA 91403-0000

Employer Identification Number:
46-3144630
DLN:
26053546003905
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
June 17, 2013
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 5436

SHERMAN OAKS CHAMBER FOUNDATION

Sincerely,

Tamera Ripperda

Director, Exempt Organizations

Office of the City Clerk
 Administrative Services Division
 Neighborhood Council (NC) Funding Program
 Board Action Certification Form



NC Name: Sherman Oaks Meeting Date: March 9, 2020

Budget Fiscal Year: 2019-2020 Agenda Item No: 8E

Board Motion and/or Public Benefit Statement (CIP and NPG): A motion to approve a Neighborhood Purposes Grant (NPG) to the Sherman Oaks Chamber Foundations of \$2,675.00 in support of graffiti proofing the Sherman Oaks branded painted utility boxes in Sherman Oaks.

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

Vote Count

Recused Boardmembers must leave the room prior to any discussion and may not return to the room until after the vote is complete.

Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Babian, Avo	Area 5 Business				✓		
Imber, Gil	Area 6 Residential	✓					
Baronian, Lavon	Area 1 Business	✓					
Binkow, Michael	Area 7 Residential				✓		
Gilford, Lisa	Area 2 Residential				✓		
Hartsough, Jeffrey	Area 2 Community	✓					
Kalban, Jeffrey	Area 7 Community	✓					
Katchen, Howard	Area 3 Residential	✓					
Cappelletti, Lisa	Area 4 Community	✓					
Adair, Christy	Area 5 Community	✓					
Shapiro, Harold	Area 6 Community	✓					
Kerzner, Fran	Area 3 Business				✓		
Petrus, Lisa	Area 4 Residential	✓					
Roden, Neal	Area 7 Business	✓					
Sales, Kristin	Area 1 Community	✓					
Cappelletti, Joe	Area 4 Business	✓					
Williams, Candy	Area 1 Residential	✓					
Vacant	Area 3 Community						
Kim, Christine	Area 6 Business	✓					
Vacant	Area 2 Business						
Manuel, Sarah	Area 5 Residential	✓					
Hayden Ranshaw	Youth				✓		
Marcus Zimmerman	Youth					✓	
Quorum: 11	Total:	15	0	0	5	1	0

We, the Treasurer and the Second Signer 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.

Treasurer's Signature <i>Candy Williams</i>	Second Signer's Signature <i>Jeffrey Hartsough</i>
Print/Type Name: Candy Williams	Print/Type Name: JEFFREY HARTSOUGH
Date: March 9, 2020	Date: 03-11-2020

**Neighborhood Council Funding Contribution Form – Fiscal Year 2019-2020
Congress of Neighborhoods / Budget Advocates Special Accounts**

I, Howard M. Katchen (President or Vice-President [VP] name),
declare that I am the President or VP of the Howard M. Katchen
Neighborhood Council (NC) and that on Monday, May 11, 20220 (meeting date), a Brown Act-
noticed public meeting was held by the NC with a quorum of 15 (number) board members
present and that by a vote of 13 (number) Yea, 0 (number) Nay, and 0 (number)
Abstentions, the NC approved funding contribution(s) for the following NC Special Account(s):

L.A. Congress of Neighborhoods – Event in the amount of:

*\$ _____

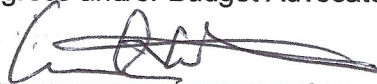
L.A. Congress of Neighborhoods – Networking/EmpowerLA Awards in the amount of:

*\$ _____

Neighborhood Council Budget Advocates in the amount of:

*\$ 2,000.00

Therefore, the Neighborhood Council requests that the Office of the City Clerk, NC Funding Program issue payment from our checking account to the Department of Neighborhood Empowerment for the Congress and/or Budget Advocates Special Account(s).



Signature of President or VP

May 20, 2020

Date

=====

To request payment, the Neighborhood Council Treasurer must submit this completed form through the NC Funding System portal as the "Payment Request Document" along with the respective Board Action Certification (BAC) form. Forms must be submitted no later than June 1, 2020 in order to process the payment from current Fiscal Year available funds.

Make checks payable to each respective Special Account as approved by your NC Board:

"City of Los Angeles Congress of Neighborhoods - Event" or
"City of Los Angeles Congress of Neighborhoods - Awards" or
→ "City of Los Angeles Budget Advocates" ←

Address: 200 N. Spring St., Suite 224, Los Angeles, CA 90012

You may also search the respective Special Account in the Vendor section of the Funding System portal when submitting the payment request(s).

Please submit separate payment requests for each Special Account contribution.

*Please indicate a specific funding contribution amount; Statements such as "unused funding for this fiscal year" will disqualify the payment request.

Procedure for Neighborhood Councils to Contribute Funds to The Budget Advocates

- 1) Neighborhood council will place an agenda item for a board meeting to contribute a **specific amount** to the Budget Advocates.
- 2) When the neighborhood council board approves the contribution, a “**Neighborhood Council Funding Support Statement**,” which will serve as the payment request and “**Board Action Certification (BAC)**” form must be completed.
- 3) Neighborhood council Treasurer will submit both the “**Neighborhood Council Funding Support Statement**” and the “**Board Action Certification (BAC)**” forms into the Funding System Portal to request a check payment **payable to the City of Los Angeles Budget Advocates, 200 N. Spring Street, Suite 224, Los Angeles, CA. 90012.**
- 4) City Clerk’s Funding Section will receive the request through the portal and process it.
- 5) A check will be mailed by Union Bank to the City Clerk’s Funding Section.
- 6) The City Clerk’s Funding Section will collect checks and deliver them to the Department of Neighborhood Empowerment (DONE) Accounting Staff who will deposit the checks and credit the Budget Advocates neighborhood council funds account on DONE’s books

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: May 11, 2020

Budget Fiscal Year: 2019-20

Agenda Item No: 4P

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

A motion to approve a contribution of up to \$2,000 to the Neighborhood council budget Advocates to support their operation, outreach and work done on behalf of the neighborhood councils to present to the City Council and the Mayor annual priorities for the city budget.

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					
Gilford, Lisa	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		
Manuel, Sarah	A5-R	x					
Babian, Avo	A5-B				x		
Shapiro, Harold	A6-CI	x					
Imber, Gil	A6-R	x					
Kim, Christine	A6-B				x		
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:	13	0	0	5	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:	Authorized Signature:
Print/Type Name: Candy Williams	Print/Type Name: Jeffrey Hartsough
Date: May 13, 2020	Date: May 16, 2020

Invoice

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

Date	Invoice #	Due Date
6/1/2020	20389	6/1/2020

Bill To
Sherman Oaks NC PO Box 5721 Sherman Oaks, CA 91413

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
1	Monthly Maintenance: includes up to 1 hour for; phone support, web development, requests, & website adjustments	99.00	99.00
1	Email accounts (2 included) Total 3 for shermanoaksnc.org	3.50	3.50
0	Monthly Hosting for shermanoaksnc.org (Included in maintenance)	15.00	0.00

Please remit payment at your earliest convenience. Thank you for your business!	Total	\$102.50
	Payments/Credits	\$0.00
	Balance Due	\$102.50



NC Name: Sherman Oaks Meeting Date: June 10, 2019
 Budget Fiscal Year: 2019-2020 Agenda Item No: 13
 Board Motion and/or Public Benefit Statement (CIP and NPG): A motion to approve the Administrative Packet for Fiscal Year 2019-2020

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

Vote Count

Recused Boardmembers must leave the room prior to any discussion and may not return to the room until after the vote is complete.

Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Babian, Avo	Area 5 Business	✓					
Imber, Gil	Area 6 Residential	✓					
Baronian, Lavon	Area 1 Business					✓	
Binkow, Michael	Area 7 Residential	✓				✓	
Gilford, Lisa	Area 2 Residential					✓	
Hartsough, Jeffrey	Area 2 Community	✓					
Kalban, Jeffrey	Area 7 Community	✓					
Katchen, Howard	Area 3 Residential	✓					
Cappelletti, Lisa	Area 4 Community	X <i>CR</i>				✓	
Adair, Christy	Area 5 Community	✓					
Shapiro, Harold	Area 6 Community	✓					
Kerzner, Fran	Area 3 Business	✓					
Petrus, Lisa	Area 4 Residential	✓					
Roden, Neal	Area 7 Business	✓					
Sales, Kristin	Area 1 Community	✓					
Cappelletti, Joe	Area 4 Business				✓	✓	
Williams, Candy	Area 1 Residential	✓					
Yatman, Deatra	Area 3 Community				✓		
Kim, Christine	Area 6 Business				✓	✓	
Mulenforth, Cathy	Area 2 Business	✓					
Olds, Sarah	Area 5 Residential	✓					
Quorum: 11		Total: 15	0	0	3	5	0

We, the Treasurer and the Second Signer 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.

Treasurer's Signature: *Candy Williams*
 Print/Type Name: Candy Williams
 Date: June 10 2019
 Second Signer's Signature: *Jeffrey Hartsough*
 Print/Type Name: JEFFREY HARTSOUGH
 Date: 06-11-2019

**NEIGHBORHOOD COUNCIL FUNDING PROGRAM
FINANCIAL OFFICERS LETTER OF ACKNOWLEDGEMENT & AGREEMENT**

We, the undersigned, do hereby declare that as a result of an official action of the Governing Body of the Neighborhood Council (NC) named below:

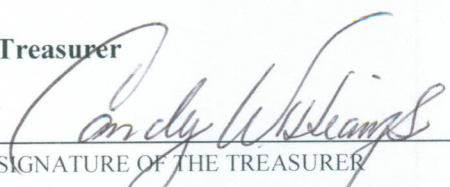
- (1) we are authorized to request City funding to support NC general operations,
- (2) all items or services described or included in any related funding requests are exclusively intended to further the goals and objectives of the Neighborhood Council, and
- (3) all reasonable precautions shall be exercised by the undersigned to fully safeguard, control and account for all use of funds. Proper accountability of all City funds is critical to the success of the NC Funding Program.

Therefore, by the signature(s) below, and on behalf of the Neighborhood Council named below, WE HEREBY AGREE to the terms and conditions as set forth in this Letter of Acknowledgement and all related documents as provided by the City, agree to expend funds in accordance with any applicable City rules, policies or procedures, and specifically agree to expend monies received by the Office of the City Clerk solely for public purposes relating to the goals and purposes of the Neighborhood Council named below, consistent with the scope and authority under the City Charter, the Plan for a Citywide System of Neighborhood Councils and any implementing ordinances. We have attended and participated in the City-provided training relating to the NC Funding Program.

WE FURTHER ACKNOWLEDGE and WE AGREE to comply with any requirements regarding use of the NC funds. WE AGREE to provide NC financial reports and/or supporting documentation to the Office of the City Clerk, Neighborhood Council Funding Program as requested and at monthly meetings to the Governing Body and stakeholders of the NC named below. WE AGREE that the Office of the City Clerk and other City representatives may make on-site visits to inspect and review all NC financial records, upon providing reasonable advance notice to the NC Treasurer or designated representatives.

WE ACKNOWLEDGE THAT A NEW LETTER OF ACKNOWLEDGEMENT MUST BE FILED IF THERE IS ANY CHANGE OF FINANCIAL OFFICERS.

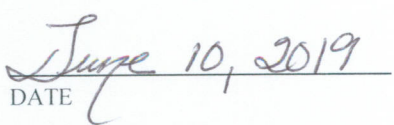
Neighborhood Council Financial Officers - Names and Signatures:

Treasurer


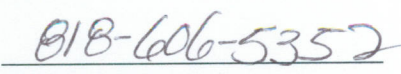
 SIGNATURE OF THE TREASURER
Candy Williams

 PRINT NAME OF THE TREASURER
Area 1 - Residential

 BOARD POSITION



 DATE
 candy.williams.sonc@gmail.com

 EMAIL


 PHONE NUMBER

CONTINUES OTHER SIDE

2nd Signer



SIGNATURE OF THE 2nd SIGNER

Jeffrey Hartsough

PRINT NAME OF THE 2ND SIGNER

Area 2 - Community Interest

BOARD POSITION

06-10-2019

DATE

jeffrey.hartsough.SONC@gmail.com

EMAIL

310-614-9804

PHONE NUMBER

Alternate Signer (If not applicable, please indicate "N/A")

SIGNATURE OF THE ALTERNATE SIGNER

DATE

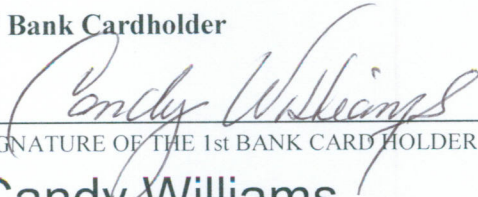
PRINT NAME OF THE ALTERNATE SIGNER

EMAIL

BOARD POSITION

PHONE NUMBER

1st Bank Cardholder



SIGNATURE OF THE 1st BANK CARD HOLDER

Candy Williams

PRINT NAME OF THE 1st BANK CARD HOLDER

Area 1 - Residential

BOARD POSITION

DATE

candy.williams.sonc@gmail.com

EMAIL

818-606-5352

PHONE NUMBER

2nd Bank Cardholder

SIGNATURE OF THE 2nd BANK CARD HOLDER

DATE

PRINT NAME OF THE 2nd BANK CARD HOLDER

EMAIL

BOARD POSITION

PHONE NUMBER

***** Bank Cardholders, please read further next page *****

Outreach Expenditures Category	
Movie Series at VNSO Park	\$ 5,000.00
Sherman Oaks Street Fair	\$ 750.00
Spring Tree Give A Way	\$ 350.00
Public Safety Events	\$ 750.00
LA Congress & Budget Advocate	\$ 1,500.00
VANC - Two Events	\$ 500.00
Branded Materials (Polo Shirts, Name Tags, etc)	\$ 1,250.00
Total Outreach Expenditures	\$ 10,100.00

Election Expenditures Category	
Total Election Expenditures	\$ 0.00

Storage Facility:

<input type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input checked="" type="checkbox"/> NA	
Facility Name/Owner	
Facility Address:	
Facility Owner Phone Number:	
Facility Owner Email:	
Name on Facility Account:	
Monthly Cost:	

P.O. Box:

<input checked="" type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input type="checkbox"/> NA	
Property Name/Owner:	Sherman Oaks Neighborhood Council
NC P.O. Box Address	PO Box 5721 S.O. 91413
Property Owner Address:	U.S. Postal Service
Property Owner Phone Number:	RENEWS ANNUALLY ON AUG 01 - ~ \$120.00
Property Owner Email:	
Name on P.O. Box Account:	
Monthly Cost:	

Website Services:

<input type="checkbox"/> Existing(may need to renew agreement) <input type="checkbox"/> New(new agreement may be needed) <input type="checkbox"/> Donated <input type="checkbox"/> NA	
Name of Website Services Provider:	The Web Corner
Service Provider Address:	19509 Ventura Bl., Tarzana 91256
Service Provider Phone Number:	
Service Provider Email:	
Type of Services Provided:	Monthly maintenance: includes up to 1 hour for: phone support, web development, requests & website adjustments. Three (email accounts - shermanoaksnc.org
Monthly Cost:	\$ 102.50

Board Mtg July 8 2019
DUPLICATE MAY NOT BE VALID FOR REFUND



14440 Burbank Blvd. Refreshments
(818) 989-5640
Your cashier was Jose C. Bottled Water

.....	RALPHS/KRO. WATER	3.49 F
.....	CA. REDEM. VAL	1.20 F
.....	RALPHS/KRO. WATER	3.49 F
.....	CA. REDEM. VAL	1.20 F
.....	RLPH. SPRNG. WATER. XP	2.99 F
.....	CA. REDEM. VAL	1.20 F
SC	RALPHS. SAVED. YOU	1.00
.....	BFG. JMB. CHC. CP. CKY	3.99 F
.....	BKRY. APL. CKY	4.99 F
.....	SUGAR. COOKIE. 10CT	3.99 F
.....	BFG. JMB. CHC. CP. CKY	3.99 F
MR	BAG. FEE	NP 0.10
.....	RALPHS. rewards. CUSTOMER	*****7606
.....	TAX	0.00
.....	**** BALANCE	30.63

Debit Purchase
*****2683...C
REF#:.....000000.....TOTAL: 30.63
PURCHASE: 30.63.....CASHBACK: 0.00
AID: A0000000042203
IC: 62B8C908692AF208
VERIFIED BY PIN

.....	DEBIT	30.63
.....	CHANGE	0.00
TOTAL NUMBER OF ITEMS SOLD = 10		
RALPHS. rewards. SAVINGS	\$ 1.00
TOTAL COUPONS	\$ 1.00
07/08/19.06:23pm.702.16.67.352		

...Tell Us How We Are Doing!
.....Earn 50 BONUS FUEL POINTS!
Plus, enter our monthly Sweepstakes:
for ONE OF 100 \$100 gift cards and
ONE \$5,000 gift card grand prize!
Go to www.krogerfeedback.com
Enter the information below:

Date: 07/08/19
Time: 06:23pm
Entry ID: 703-342-67-702-16-83
Limit one 50 fuel pt. bonus per 7 days.
No purchase necessary to enter
sweepstakes. See website for official
sweepstakes rules.

JUL. FUEL POINTS
REDEEM 100PTS. TO SAVE .10 PER GAL.
ON ONE PURCHASE OF UP TO 35 GAL.
SAVE UP TO \$1 PER GAL. AT RALPHS
OR SHELL ON 1 FILL-UP.

FUEL POINTS THIS ORDER = .37
FUEL POINTS THIS MONTH = .51

THIS MONTHS POINTS EXPIRE 8/31/19.
VISIT WWW.RALPHS.COM FOR DETAILS
NEAREST PARTICIPATING LOCATIONS
SHELL COMPANY (0.75 mi.)
5161 VAN NUYS BLVD
SHERMAN OAKS, CA. 91403
SHELL COMPANY (1.03 mi.)
5600 WOODMAN AVE
VAN NUYS, CA. 91401
Participating locations subject
to change

With Card & Coupons
VERIFIED TOTAL SAVINGS \$ 1.

MGR: STEVE GASPARYAN (818) 989-5640
THANK YOU FOR SHOPPING AT RALPHS!

.....www.ralphs.com
DUPLICATE MAY NOT BE VALID FOR REFUND



Some Office Supply Junk

VAN NUYS - 818-779-0163
07/07/2019 09:17 PM



ENTERTAINMENT-ELECTRONICS T \$19.99
056070042 EPSON INK
Regular Price \$23.49
RETURN BY 08/06/19

SUBTOTAL \$19.99
REDCard Savings \$1.00-
T = CA TAX 9.5000% on \$18.99 \$1.80

TOTAL \$20.79
*4310 TARGET DEBIT CARD TOTAL \$20.79

Questions about this
Target Debit Card transaction?
Call 1-888-729-7331 or write
PO Box 673
Minneapolis, MN 55440-0673



*Used for Fin Committee
Mtg Print
Landscape Exp Lists
Minutes*

Today's REDCard Savings \$1.00

TOTAL SAVINGS THIS TRIP \$1.00

REC#2-9188-1307-0114-1635-3 VCD#752-151-842

NOTICE: Some furniture products can
expose you to chemicals known to the
State of California to cause cancer,
birth defects or other reproductive harm
Please check on-product label for
warning information.

Help make your Target Run better.
Take a 2 minute survey about today's trip:

informtarget.com
User ID: 7081 1869 3988
Password: 583 647

CUENTENOS EN ESPAÑOL

Please take this survey within 7 days.



*SONC
office
supply
Ink*

VAN NUYS NORTH - 818-922-1001
08/04/2019 08:04 PM



ENTERTAINMENT-ELECTRONICS
056070001 EPSON INK T \$35.89
Regular Price \$36.49
RETURN BY 09/03/19

SUBTOTAL \$35.89
REDCard Savings \$1.79
T = CA TAX 9.5000% on \$34.10 \$3.24

TOTAL \$37.34
*4310 TARGET DEBIT CARD TOTAL \$37.34

Questions about this
Target Debit Card transaction?
Call 1-888-729-7331 or write
PO Box 673
Minneapolis, MN 55440-0673



*Ink Used for
Printing out
in Committee
books
by
minutes*

Today's REDCard Savings \$1.79

TOTAL SAVINGS THIS TRIP \$1.79

REC#2-9216-1309-0114-1283-7 VCD#750-155-441

NOTICE: Some furniture products can
expose you to chemicals known to the
State of California to cause cancer,
birth defects or other reproductive harm.
Please check on-product label for
warning information.

Help make your Target Run better.
Take a 2 minute survey about today's trip:

informtarget.com
User ID: 7078 3869 1988
Password: 587 163

CUENTENOS EN ESPAÑOL

Please take this survey within 7 days.

Office of the City Clerk
 Administrative Services Division
 Neighborhood Council (NC) Funding Program
 Board Action Certification Form



NC Name: Sherman Oaks Meeting Date: March 9, 2020

Budget Fiscal Year: 2019-2020 Agenda Item No: **9E**

Board Motion and/or Public Benefit Statement (CIP and NPG):
 A motion to approve a board member reimbursement totaling \$88.76 to Candy Williams for: a) SONC Board Meeting July 8, 2019: a) Refreshments and water (\$30.63 Ralphs)
 b) Finance Committee administrative printing expenses: toner ink (\$58.13 Target).
 (Previously approved, SONC Board Meeting September 9, 2019)

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

Vote Count

Recused Boardmembers must leave the room prior to any discussion and may not return to the room until after the vote is complete.

Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Babian, Avo	Area 5 Business				✓		
Imber, Gil	Area 6 Residential	✓					
Baronian, Lavon	Area 1 Business	✓					
Binkow, Michael	Area 7 Residential	✓					
Gilford, Lisa	Area 2 Residential				✓		
Hartsough, Jeffrey	Area 2 Community	✓					
Kalban, Jeffrey	Area 7 Community	✓					
Katchen, Howard	Area 3 Residential	✓					
Cappelletti, Lisa	Area 4 Community	✓					
Adair, Christy	Area 5 Community	✓					
Shapiro, Harold	Area 6 Community	✓					
Kerzner, Fran	Area 3 Business				✓		
Petrus, Lisa	Area 4 Residential	✓					
Roden, Neal	Area 7 Business	✓					
Sales, Kristin	Area 1 Community	✓					
Cappelletti, Joe	Area 4 Business	✓					
Williams, Candy	Area 1 Residential	✓					
Vacant	Area 3 Community						
Kim, Christine	Area 6 Business	✓					
Vacant	Area 2 Business						
Manuel, Sarah	Area 5 Residential	✓					
Hayden Ranshaw	Youth				✓		
Marcus Zimmerman	Youth					✓	
Quorum: 11	Total:	16	0	0	4	1	0

We, the Treasurer and the Second Signer 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.

Treasurer's Signature: *Candy Williams*
 Print/Type Name: Candy Williams
 Date: March 9, 2020
 Second Signer's Signature: *JHartsough*
 Print/Type Name: JEFFREY HARTSOUGH
 Date: 03-11-2020



Board Action Certification Form

NC Name: Sherman Oaks

Meeting Date: March 9, 2020

Budget Fiscal Year: 2019-2020

Agenda Item No: 8D

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

A motion to approve the revision of the approved July 2019 Administrative budget of the Sherman Oaks Neighborhood Council based on anticipated expenditures for the 2019-2020 fiscal year as follows: Office & Administration \$27,900, \$18,000, -\$9,900; Outreach 10,100, 20,000, +9,900
CIP \$0, 4,000, +4,000; NPG \$4,000, 7,520, +3,520; Total \$42,000 \$49,520 \$7,520;

Method of Payment: (Select One)

Check

Credit Card

Board Member Reimbursement

Vote Count

Recused Boardmembers must leave the room prior to any discussion and may not return to the room until after the vote is complete.

Board Member First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Babian, Avo	Area 5 Business				✓		
Imber, Gil	Area 6 Residential	✓					
Baronian, Lavon	Area 1 Business	✓					
Binkow, Michael	Area 7 Residential	✓					
Gilford, Lisa	Area 2 Residential				✓		
Hartsough, Jeffrey	Area 2 Community	✓					
Kalban, Jeffrey	Area 7 Community	✓					
Katchen, Howard	Area 3 Residential	✓					
Cappelletti, Lisa	Area 4 Community	✓					
Adair, Christy	Area 5 Community	✓					
Shapiro, Harold	Area 6 Community	✓					
Kerzner, Fran	Area 3 Business	✓					
Petrus, Lisa	Area 4 Residential	✓					
Roden, Neal	Area 7 Business	✓					
Sales, Kristin	Area 1 Community	✓					
Cappelletti, Joe	Area 4 Business	✓					
Williams, Candy	Area 1 Residential	✓					
Vacant	Area 3 Community						
Kim, Christine	Area 6 Business	✓					
Vacant	Area 2 Business						
Manuel, Sarah	Area 5 Residential	✓					
Hayden Ranshaw	Youth				✓		
Marcus Zimmerman	Youth					✓	
Quorum: 11		Total: 17	0	0	3	1	0

We, the Treasurer and the Second Signer 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.

Treasurer's Signature: Candy Williams
Second Signer's Signature: Jeffrey Hartsough
Print/Type Name: Candy Williams; JEFFREY HARTSOUGH
Date: March 9, 2020; 03-11-2020

LOS ANGELES REGIONAL



Fighting Hunger. Giving Hope.

INVOICE

#20-100

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

DATE: JUNE 12, 2020

TO:
JEFFREY HARTSOUGH, PRESIDENT
SHERMAN OAKS NEIGHBORHOOD COUNCIL
PO Box 5721
Sherman Oaks, CA 91413

DESCRIPTION	AMOUNT
General Donation - to support of families affected by the COVID-19 pandemic	\$3,000
TOTAL	\$3,000

Make all checks payable to: Los Angeles Regional Food Bank
If you have any questions concerning this invoice, please contact Roger Castle, Chief Development Officer at (323) 234-3030 ext. 147 or rcastle@lafoodbank.org

Thank you for your support!
The Los Angeles Regional Food Bank is a 501(c)3 organization (Tax ID# 95-3135649)

OGDEN UT 84201-0038

In reply refer to: 0438040417
Mar. 28, 2012 LTR 4168C E0
95-3135649 000000 00

00031981
BODC: TE

LOS ANGELES REGIONAL FOOD BANK
1734 E 41ST ST
LOS ANGELES CA 90058-1502



005365

Employer Identification Number: 95-3135649
Person to Contact: D Adkins
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Mar. 19, 2012, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in September 1977.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

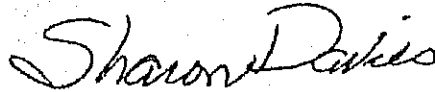
Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0438040417
Mar. 28, 2012 LTR 4168C E0
95-3135649 000000 00
00031982

LOS ANGELES REGIONAL FOOD BANK
1734 E 41ST ST
LOS ANGELES CA 90058-1502

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,



Sharon Davies
Accounts Management I

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: May 11, 2020

Budget Fiscal Year: 2019-20

Agenda Item No: 4M

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

A motion to approve a donation of up to \$3,000 to the Los Angeles Regional Food Bank which distributes food to those facing food insecurity due to the COVID-19 pandemic emergency. This expenditure is consistent with the NC Funding Program Policy 5.0 – Expenditures of NC Funds in a Declared Emergency.

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					
Gilford, Lisa	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		
Manuel, Sarah	A5-R	x					
Babian, Avo	A5-B				x		
Shapiro, Harold	A6-CI	x					
Imber, Gil	A6-R	x					
Kim, Christine	A6-B				x		
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:	12	1	0	5	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

Authorized Signature:

Print/Type Name:

Candy Williams

Print/Type Name:

Jeffrey Hartsough

Date:

May 13, 2020

Date:

May 16, 2020



Hope of the Valley Rescue Mission
P.O. Box 7609
Mission Hills, CA 91346
8183920020

BILL TO

Sherman Oaks Neighborhood
Council
Attn: Jeffrey Hartsough
PO Box 5721
Sherman Oaks, CA 91413

SONH_06.11.2020

DATE 06/11/2020 TERMS Due on receipt

DUE DATE 06/11/2020

DESCRIPTION	QTY	RATE	AMOUNT
Donations Donation to support COVID-19 Homeless Shelters in LA Parks	1	3,000.00	3,000.00

Hope of the Valley Rescue Mission Tax ID #27-2053273

TOTAL DUE

\$3,000.00

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: APR 06 2010

HOPE OF THE VALLEY RESCUE MISSION
C/O KEN CRAFT
PO BOX 248
SUN VALLEY, CA 91353

Employer Identification Number:
27-2053273
DLN:
17053084315000
Contact Person:
RENEE RAILEY NORTON ID# 31172
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
December 22, 2009
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

HOPE OF THE VALLEY RESCUE MISSION

Sincerely,

A handwritten signature in cursive script that reads "Robert Choi". The signature is written in dark ink and is positioned above the typed name and title.

Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosure: Publication 4221-PC

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: May 11, 2020

Budget Fiscal Year: 2019-20

Agenda Item No: 4N

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

A motion to approve a donation of up to \$3,000 to the Hope of the Valley which is operating a shelter for those experiencing homelessness at the Van Nuys Sherman Oaks Recreation Center due to the COVID-19 pandemic emergency. This expenditure is consistent with the NC Funding Program Policy 5.0 -- Expenditures of NC Funds in a Declared Emergency

Method of Payment: (Select One)

Check

Credit Card

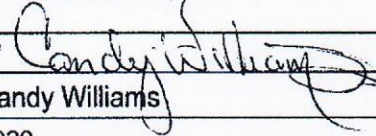
Board Member Reimbursement

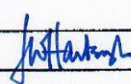
Vote Count

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					
Gilford, Lisa	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		
Manuel, Sarah	A5-R	x					
Babian, Avo	A5-B				x		
Shapiro, Harold	A6-CI	x					
Imber, Gil	A6-R	x					
Kim, Christine	A6-B				x		
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:	13	0	0	5	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: 
 Print/Type Name: Candy Williams
 Date: May 13, 2020

Authorized Signature: 
 Print/Type Name: Jeffrey Hartsough
 Date: May 16, 2020