Monthly Expenditure Report



Reporting Month: March 2023

Budget Fiscal Year: 2022-2023

NC Name: Arleta Neighborhood Council

| Monthly Cash Reconciliation | | | | | | | |
|-----------------------------|-------------|----------------------|-------------|-------------------------|------------|--|--|
| Beginning Balance | Total Spent | Remaining Balance | Outstanding | Outstanding Commitments | | | |
| \$24849.38 | \$3895.32 | \$20954.06 | \$5300.00 | \$0.00 | \$15654.06 | | |

| Monthly Cash Flow Analysis | | | | | | | | |
|----------------------------------|--------------------|---------------------------|---------------------------------------|------------------|--------------------|--|--|--|
| Budget Category | Adopted Budget | Total Spent this Month | Unspent Budget Balance Outstanding | | Net Available | | | |
| Office | | \$604.42 | | \$300.00 | | | | |
| Outreach | \$23882.36 | \$290.90 | \$10937.65 | \$0.00 | \$10637.65 | | | |
| Elections | | \$0.00 | | \$0.00 | | | | |
| Community Improvement Project | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | | |
| Neighborhood Purpose Grants | \$18000.00 | \$3000.00 | \$10000.00 | \$5000.00 | \$5000.00 | | | |
| Funding Requests Unc | ler Review: \$0.00 | Encumbrar | nces: \$0.00 | Previous Expendi | itures: \$17049.39 | | | |

| | Expenditures | | | | | | | | |
|---|---------------------------|------------|---|--------------------------------------|--------------|----------|--|--|--|
| # | Vendor | Date | Description | Budget Category | Sub-category | Total | | | |
| 1 | GOOGLE GSUITE_ARLETAN | 03/01/2023 | EMAILS for Feb, 2023 | General Operations Expenditure | Office | \$84.00 | | | |
| 2 | PRIME VIDEO TVOD | 03/02/2023 | amazon charge and credit for charge card error | General Operations Expenditure | Office | \$-5.99 | | | |
| 3 | AMAZON PRIME HD7E01KA1 | 03/02/2023 | correction for \$16.41 charged in error | General Operations Expenditure | Office | \$16.41 | | | |
| 4 | PY ARLETA SELF STORAG | 03/22/2023 | monthly rent April, 2023 | General Operations Expenditure | Office | \$510.00 | | | |
| 5 | SMART AND FINAL 460 | 03/22/2023 | snacks for Banford park Easter Event March 31. ANC will have outreach booth | General Operations Expenditure | Outreach | \$192.56 | | | |
| 6 | BIG LOTS #4623 | 03/23/2023 | snacks for Easter event at Branford Park March 31, 2023. ANC will have a outreach table at the event | General Operations Expenditure | Outreach | \$54.90 | | | |
| 7 | SMART AND FINAL 460 | 03/27/2023 | water for Easter event at Branford Park March 31st. ANC will have outreach table at the event | General Operations Expenditure | Outreach | \$43.44 | | | |

| 8 | Northridge Hospital Foundation | 03/23/2023 | To approve NPG for Victory for Victims \$3000. for 5Kwalk/Run for CATS program. Sponsored by Northridge Hospital scheduled for April 15, 2023. We will have a outreach table. | Neighborhood Purpose Grants | \$3000.00 |
|---|-----------------------------------|------------|---|--------------------------------|-----------|
| | Subtotal: | | | | \$3895.32 |

| Outstanding Expenditures | | | | | | | | |
|--------------------------|-------------------------------------|------------|---|--------------------------------------|--------|-----------|--|--|
| # | # Vendor Date Description | | Budget Category | Sub-category | Total | | | |
| 1 | Happy House | 03/08/2023 | To approve a grant for \$5,000 for Happy House. A program that provides help for children with school work | Neighborhood Purpose Grants | | \$5000.00 | | |
| 2 | AARON DEVANDRY/CONCEPT TO WEB | 03/29/2023 | TO PAY WEB MASTER MAINTENANCE, HOSTING, CREATION ND SOCIAL MEDIA MANAGEMENT | General Operations Expenditure | Office | \$150.00 | | |
| 3 | AARON DEVANDRY/CONCEPT TO WEB | 03/29/2023 | cost for web hosting, maintenance, content and social media for March, 2023 | General Operations Expenditure | Office | \$150.00 | | |
| | Subtotal: Outstanding | | | | | \$5300.00 | | |

Google

Invoice

Invoice number: 4675049307

Bill to

Loyce Lacson Arleta Neighborhood Council 9300 Laurel Canyon Arleta, CA 91331 United States

Details

| Invoice number | 4675049307 |
|----------------|----------------|
| Invoice date | Feb 28, 2023 |
| Billing ID | 9235-8536-1237 |
| Domain name | arletanc.org |

| Google LLC |
|----------------------------|
| 1600 Amphitheatre Pkwy |
| Mountain View, CA 94043 |
| United States |
| Federal Tax ID: 77-0493581 |

Google Workspace

| Total in USD | \$84.00 |
|--------------------------------------|---------|
| Summary for Feb 1, 2023 - Feb 28, 20 | 23 |
| Subtotal in USD | \$84.00 |
| Tax (0%) | \$0.00 |
| Total in USD | \$84.00 |

You will be automatically charged for any amount due.

Google Invoice

Amount(\$) Quantity interval Description Subscription 84.00 Feb 1 - Feb 28 14 Usage Google Workspace Business Starter \$84.00 Subtotal in USD Tax (0%) \$84.00 Total in USD

Need help understanding the charges on your invoice? Click here for detailed explanations https://support.google.com/a?p=gsuite-bills-and-charges

Invoice number: 4675049307

\$0.00

Details for Order # D01-0252018-0294622

Amazon.com order number: D01-0252018-0294622 Order Total: \$5.99

ong.

| Digital Order: February 25, 2023 | | | | | |
|--|--------|--|--|--|--|
| Items Ordered | Price | | | | |
| Prey for the Devil[Prime Video] | \$5.99 | | | | |
| By: Daniel Stamm, Jacqueline Byers, Colin Salmon | | | | | |
| Quantity: 1 | | | | | |
| Item(s) Subtotal: \$5.99 | | | | | |
| Total Before Tax: \$5.99 | | | | | |
| Tax Collected: \$0.00 | | | | | |
| | | | | | |
| Total for this Order: \$5.99 | | | | | |

Payment Information Payment method • ending in 2639 Billing address Raymond Duran 14219 Gain st • Arleta, CA 91331 · United States 8182983908 Item(s) Subtotal: \$5.99 Total Before Tax: \$5.99 Tax Collected: Grand Total: \$5.99

Your Account > Your Orders > Order Summary #D01-0252018-0294622

Amazon.com order number: D01-0252018-0294622 Order Total: \$5.99

Manage Your Digital Items <u>Kindle, Your Video Library, Prime Photos, Amazon Drive, Music,</u> <u>Apps & Devices</u>

| Recipient: Raymond | Items Ordered | Price | | |
|---|---|---|--|--|
| Raymond | Prey for the Devil[Prime Video] By: Daniel Stamm, Jacqueline Byers, Colin Salmon Qty: 1 | \$5.99 | | |
| | | Item(s) Subtotal: \$5.99 | | |
| | | Total Before Tax: \$5.99 Tax Collected: \$0.00 | | |
| | | Total for this Order: \$5.99 | | |
| Payment Info | rmation Need to print an in | woice? | | |
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| Payment metho | od | | | |
| | od ling in 2639 | | | |
| • 📓 end | ling in 2639 | | | |
| Billing address Raymon 14219 G | ling in 2639 d Duran ain st | | | |
| Billing address • Raymon • 14219 G • Arleta, C • United S | ling in 2639 d Duran rain st CA 91331 States | | | |
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| Billing address Raymon 14219 G Arleta, C United S | ling in 2639 d Duran ain st CA 91331 States 1908 | | | |
| Billing address Raymon 14219 G Arleta, C United S 8182983 | ling in 2639 d Duran iain st CA 91331 States 1908 | | | |

\$5.99

Refunds Refund date: March 2, 2023

Refund Amount: \$5.99



| Office of the City Clerk | | | | | | -0 | - |
|--|-----------------------------|--------------------------------------|------------------------------------|------------------------------------|-------------------------------------|--------------------------------------|--|
| Administrative Services Division | | | | | | 11 | 1 199 |
| Neighborhood Council (NC) Funding Progr | am | | | | | - Trib | |
| Board Action Certification (BAC) Form | | | | | | 10- | dial a |
| NC Name: ARLETA | | | Meeting Date: | | 1- 202 | 3 | |
| Budget Fiscal Year: 2022-2023 | | | Agenda Item N | io: 2 | -6 | | B |
| Board Motion and/or Public Benefit Statement (CIP and NPG): | to Appro | ove ex | recti | ION ON | Charg | e card | ter |
| | to Appro Accident | Al USE | , tre | sident | Kaymo | na Duri | The To |
| | Check | pay LA | City 16 | ill tor | C.MANGE I | MADE IN | Crior |
| Method of Payment: (Select One) | L) Cleak | Vot | e Count | | | - memoer memo | |
| Recused Board Member | s must leave the room pri | or to any discus | sion and may no | ot return to the ro | om until after t | he vote is compl | ete. |
| Board Member's First and Last Name | Board Position Pres/Home | Yes | No | Abstain | Absent | Ineligible | Recused |
| Raymond Duran Burton Hunter | VP/Renter | | | V | | | |
| | | V | | | | | |
| Margaret Shoemaker | Sec/At Lg | 1 | | | | | |
| Loyce Lacson | Trea/Sr. rep | | | | | | |
| Jose Pumay | Home rep | 1 | | | | | |
| Gary Gallon | Sr. rep | V | | | | | |
| Jesus Ramos | Home rep | | | | - | | |
| Jaime Gallo | Home Rep | | | | V | | |
| Brian Patton | Comm rep | ~ | | | | | |
| Jesus Torres | Comm Rep | 1 | | | | | |
| Mary Oberg | At Lg Rep | V | | | | | |
| Marco Valdez | At Lg rep | V | | | | | |
| Christiana Hartwell | Buss Rep | 1 | | | | | |
| | Youth Rep | | | | | | |
| | School Rep | | | | | | |
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| Board Quorum: | Total | 1 | 11 | | 1 | | |
| We, the authorized signers of the above meeting was held in accordance with all meeting where a quorum of the Board wa | laws, policies, and proceed | uncil, declare th fures. The abov | at the informati e was approved | on presented on by the Neighbor | this form is acc hood Council Bo | urate and comple bard, at a Brown | ete, and that a public Act compliant public |
| Authorized Signature Round | Trenta | | Authorized Sig | nature: R - | In H | to | |
| Authorized Signature Sayue Print/Type Name: Loyce Lacson | - Juest of | | Print/Type Na | me: Burton H | lunter | m | |
| Date: 3.22-2 | 3 | | Date: | 3 | -22-20 | 23 | |
| 0 22 2 | | | | | | NC | EP 101 BAC Rev02011 |

Arleta Self Storage 8918 Woodman Ave Arleta, CA 91331

818-830-3811

Arleta Neighborhood Council/LA City c/o: Loyce K Lacson 13722 Goleta St Arleta CA 91331 **Payment Receipt**

Date Printed Payment Date Unit Available Credit Current Balance Paid Thru Receipt Number By March 22, 2023 March 22, 2023 11:12 AM 08 0.00 0.00 April 30, 2023 112217 JG

| 7 | | | | Charge | Discount | Tax | Total | Payment | Method |
|---|----------|------|---------------|--------|--|------------|--------|-------------|----------------------------------|
| 1 | Date | Unit | Description | 510.00 | 0.00 | 0.00 | 510.00 | 510.00 | Master Card |
| | 04/01/23 | 08 | Rent 4/1-4/30 | 510.00 | Taxes | 6100 | | 0.00 | |
| | | | | | Payment (less | tavi | | 510.00 | |
| | | | | | Payment Subt | | | 510.00 | |
| | | | | | Credits Appli | | | 0.00 | |
| | | | | | Refunds App | | | 0.00 | |
| | | | | | Total Applied | I to Accou | unt | 510.00 | |
| | | | | | Current Acco Paid By Paid Thru Da Customer Du | ite | ice | April 30, 2 | rd *****6701 023 ach Month |
| | | | | | | | | | |

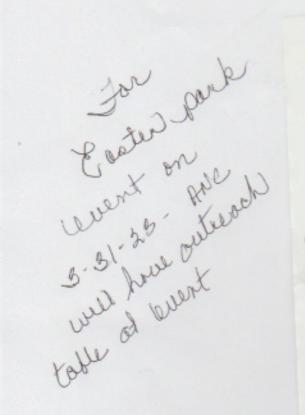
Transaction Type Sale

Authorization 081325 Reference p1_txn_641b451530264dbb862dc05

I agree to pay the above amount according to the card issuer statement.

And remember: Referrals pay off! You can get 10% or \$25 off (whichever is less) your next month's rent for referring a new customer! There is no limit to the amount of rewards you receive!

Date





Smart And Final Store 460 16210 DEVONSHIRE STREET GRANADA HILLS, CA 91344 Telephone (818) 892-3338

| Grocery Childs Play Candy Regular Price \$9.99 Mars Mixed Mini Variety Hershey Assortment Part Hershey All Time Great First Street Cotton Can First Street Sweet Salt Frito Lay Original Flav Flavor Mix MP First Street Buttered P | 9.69 F 13.99 F 12.99 F 9.99 F 9.99 F 9.99 F 9.99 F 14.99 F 13.99 F 19.99 F 19.99 F 19.99 F 19.99 F 13.99 F 13.99 F |
|--|--|
| SUBTOTAL | |
| Total # Items Sold | |
| 192.56 @ 0.000% = | 0.00 |

TOTAL

192.56 192.56

Mastercard

PURCHASE \$192.56



CITY OF LOS ANGELES DEPARTMENT OF RECREATION AND PARKS 13306 BRANFORD STREET ARLETA, CA 91331 (818) 893-4923 RAP.BRANFORDRC@LACITY.ORG

BRANFORD EASTER EGG HUNT

GAMES. ARTS & CRAFTS JOIN US AT THE PARK FOR A FUN FILLED DAY OF ACTIVITIES FOR THE WHOLE FAMILY!

> FRIDAY, MARCH 31, 2023 TIME: 4:00PM - 7:00PM

FACE PAINTING, COLORING CONTEST & PRIZES

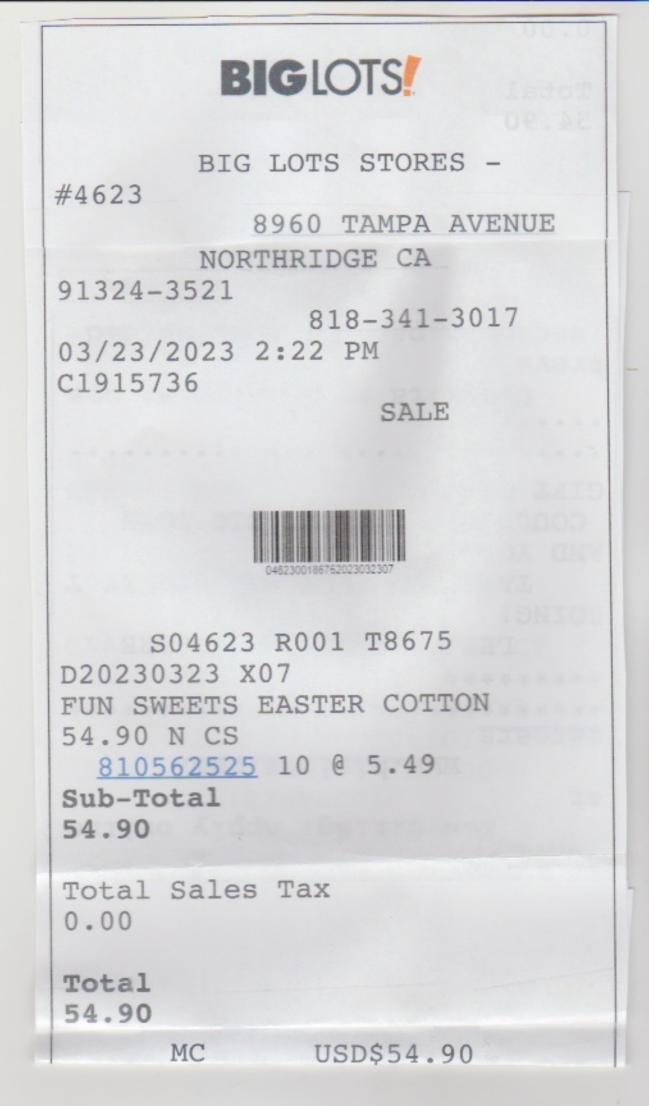
ANC

FREE/ EVENT!

PHOTOS WITH SPRING BUNNY!

INFORMATION ON THIS IN FEED IS GUILET TO CHARGE WITHOUT FROM NOTICE. PERSONS WITH DIALBUITHS ARE WITHOUT TO HARDONET TO HARDONET IN OUR PROCESS. REALONABLE ACCOMPRISED ON WITH BE MADE WITH THOSE ARRAND WOMEN IN STORES CANNER POINT THROUGH A CONTINUOUS COMPLETINGUE TO DIAL AND WOMEN IN STORES.

| Office of the City Clerk | | | | | | | |
|---|---|-------|----------------------------|---------------------|------------------|--------------------|-------------------|
| Administrative Services Division | | | | | | 1 | 1000 |
| Neighborhood Council (NC) Funding Progr | am | | | | | | |
| Board Action Certification (BAC) Form | | | | | | There | 5 VERTEN |
| NC Name: ARLETA | | | Meeting Date: | 2 - 21 | 1- 202 | 3 | |
| Budget Fiscal Year: 2022-2023 | | | Agenda Item M | vo: 26 | | | |
| Board Motion and/or Public Benefit Statement (CIP and NPG): | to Approv | e up | to s. | 500 fr | or Bra | w ford | Park |
| | to Approv EASter And | ent a | 3-31- 3 6 Ave | 2023 F | Middle ei | tom - 7+ | om. |
| Method of Payment: (Select One) | Check | | Credit Card | ~ | Boar | d Member Reimbo | ursement |
| Recused Board Members | s must leave the room prio | | e Count ision and may n | ot return to the ro | om until after t | the vote is comple | ete. |
| Board Member's First and Last Name | Board Position | Yes | No | Abstain | Absent | Ineligible | Recused |
| Raymond Duran | Pres/Home | | | V | | | |
| Burton Hunter | VP/Renter | / | | | | | |
| Margaret Shoemaker | Sec/At lg | ~ | | | | | |
| Loyce Lacson | and the second se | v / | | | | | |
| | Trea/Sr rep | V | | | | | |
| Jose Pumay | Home rep | | | | V | | |
| Gary Gallon | Sr Rep | V | | | | | |
| Jesus Ramos | Home rep | V | | | | | |
| Jaime Gallo | Home Rep | | | V | | | |
| Brian Patton | comm rep | V | | | | | |
| Jesus Torres | Comm rep | V | | | | | |
| Mary Oberg | At large rep | V | | | | | |
| | | 1 | | | | | |
| Marco Valdez | At Large | V | | - | | | |
| Provide States | At Large | | | | | | |
| | Youth rep | | | | | | |
| Christiana Hartwell | Business rep | | | | Los | | |
| | -Comm rep | | | | | | |
| | Youth rep | | | | | | |
| | School | | | | | | |
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| Board Quorum: 9 | Total: | 9 | | 2 | 0 | | |
| We, the authorized signers of the above n meeting was held in accordance with all I meeting where a quorum of the Board was | named Neighborhood Coun- aws, policies, and procedur | | | | | | |
| Authorized Signature Same | Jours | | Authorized Sig | nature: | mit t | 1 | |
| Print/Type Name: Loyce Lacson | | | Print/Type Nar | ne:Burton H | | Anth | |
| Date: 2-21.2 | 3022 | | Date: | | 22-20. | 72 | |
| 01.04 | | | | 2.1 | 20. | | P 101 BAC Rev0201 |



Account: 6701 Token: 6701 Authorization Code: 088226 CTroutd: 540100048 Card Entry Mode: ChipRead CVM:Signature CVM Results: 1E0300 AID:A000000041010 App Label:MASTERCARD App Cryptogram: 34B7D807D90DE7C6 Total Tender 54.90 Change Due 0.00 Loyalty #XXXXXXXXXXX591604

FOR BRANFord PARK EASter event MARCH 31.

ANC will have Outreach TAble



CITY OF LOS ANGELES DEPARTMENT OF RECREATION AND PARKS 13306 BRANFORD STREET ARLETA, CA 91331 (818) 893-4923 RAP.BRANFORDRC@LACITY.ORG

BRANFORD EASTED • EGG HUNT •

GAMES. ARTS & CRAFTS JOIN US AT THE PARK FOR A FUN FILLED DAY OF ACTIVITIES FOR THE WHOLE FAMILY!

FRIDAY, MARCH 31, 2023 TIME: 4:00PM - 7:00PM FACE PAINTING, COLORING CONTEST & PRIZES

ANC J LANA

FREE, EVENT! PHOTOS WITH SPRING BUNNY?

DEFORMATION ON THE FORM IN SUBJECT TO CHARGE WITHOUT PROFACT CE. PERIORS WITH DESERVITIES WE WILCOME TO PREFICIPATE TO CHARGE WITHOUT PROFACE ACCOUNTS OF PROFACE PROFACE ACCOUN

| Office of the City Clerk | | | | | | 1 | | | |
|--|----------------------------|----------------|--|---------------------|-------------------|-------------------|----------------------|--|--|
| Administrative Services Division | | | | | | 1 | | | |
| Neighborhood Council (NC) Funding Prog | ram | | | | | 1 | | | |
| Board Action Certification (BAC) Form | | | | | | | | | |
| NC Name: ARLEIA | | | Meeting Date: 2 - 21 - 2023 Agenda Item No: 4 P to \$500 For BrAN ford Park 3.31-2023 Friday April - 7 pm. Dil have booth Af event | | | | | | |
| Budget Fiscal Year:2022-2023 Board Motion and/or Public Benefit | | | Agenda Item N | 10: 4 | | 01 | 7 15 | | |
| Statement (CIP and NPG): | to Approv | e up | to " | 500 to | or Dra | wford | PARE | | |
| | EASTER 44 | cent . | 3-31-2 | 1923, F | Midday + | 1pm - 71 | om. | | |
| Method of Payment: (Select One) | Check | - Wai | Credit Card | basth | AT el | d Member Reimb | ursement | | |
| | | Vo | te Count | | | | | | |
| Recused Board Member | s must leave the room prio | r to any discu | ssion and may no | st return to the re | oom until after t | he vote is compl | ete. | | |
| Board Member's First and Last Name | Board Position | Yes | No | Abstain | Absent | Ineligible | Recused | | |
| Raymond Duran | Pres/Home | | | V | | | - | | |
| Burton Hunter | VP/Renter | V. | | | | | | | |
| Margaret Shoemaker | Sec/At lg | V | | | | | | | |
| Loyce Lacson | Trea/Sr rep | V | | | | | | | |
| Jose Pumay | Home rep | | | | | | | | |
| Gary Gallon | Sr Rep | V | | | | | | | |
| Jesus Ramos | Home rep | V | | | | | | | |
| Jaime Gallo | Home Rep | | | ~ | | | | | |
| Brian Patton | comm rep | V | | | | | | | |
| Jesus Torres | Comm rep | V | | | | | | | |
| Mary Oberg | At large rep | V | | | | | | | |
| Marco Valdez | At Large | V | | | | | | | |
| | At Large | | | | | | | | |
| 1.120 1.2 | Youth rep | | | | | | | | |
| Christiana Hartwell | Business rep | | | | 100 | | | | |
| | | | | | bar | | | | |
| North State | -Comm rep | | | | | | | | |
| | Youth rep | | | | | | | | |
| | School | | | | | | | | |
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| Board Quorum: 9 | Total: | 9 | | . A | 2 | | | | |
| We, the authorized signers of the above n | | | | | | | | | |
| meeting was held in accordance with all I meeting where a quorum of the Board was | | es. The above | was approved t | by the Neighborh | ood Council Boa | ard, at a Brown / | vct compliant public | | |
| | | | | | | | | | |
| Authorized Signature Jaye | Joesa | | Authorized Sign | iature: B | The to the | 1.11 | | | |
| Print/Type Name: Loyce Lacson | | | Print/Type Nam | Burton Hu | unter | | | | |
| Date: 2-21-3 | 2022 | | Date: | | | 72 | | | |
| or or o | 1003 - 3 | | | 1.1 | 22-20 | | P 101 BAC Rev0201 | | |

EASTER for Part EASTER ford Part At Bran ford Part At Will have ANC WILL HAVE

Smart&Final Warehouse 5 Market, Friend & Neigh

Smert And File Store 460 16210 DEVDVSFIRE STREET GRANADA HILLS, CA 91344 Telephone (818) 392-3338

Bevenade Beverage Crystal Gevser Water 5.49 32.90 F 5 8 CRV FOODSTAMP NONTRAB 10.50a F 6.0 1.75 SUBTOTAL Total # Items So d 6 43.44 @ 0.000% 43.14 IGTAL. 43.44 Mastercard PURCHASE \$43.44 CHIP FEAD REF#: 002097 APPROVED MASTERCARD Mode: Issuer TAD: 011026400162000030470000000000000FF

Legend F - food stand eligible * - non-discourtable

0010460270323001000191

You were served by: Countril

Date Time Store Term Oph Tran 05/27/23 03:58 AM 450 1 40018 0191

> Thank you for shopping at Smart and Final

We want to know your thoughts! Complete our survey and enter to win 1 of 5 \$100 SMARE & FINAL GIFT CARDS Visit www.smartshofinal com/survey within 7 days of this shop thank you!

Now kining! Visit www.smantardfinal.com/careers

> One Trip S That's It

32.94

43.44



CITY OF LOS ANGELES DEPARTMENT OF RECREATION AND PARKS 13306 BRANFORD STREET ARLETA, CA 91331 (818) 893-4923 RAP.BRANFORDRC@LACITY.ORG

BRANFORD EASTER EGG HUNT

GAMES. ARTS & CRAFTS JOIN US AT THE PARK FOR A FUN FILLED DAY OF ACTIVITIES FOR THE WHOLE FAMILY!

FRIDAY, MARCH 31, 2023 TIME: 4:00PM - 7:00PM FACE PAINTING, COLORING CONTEST & PRIZES

ANC

FREE / EVENT!

PHOTOS WITH SPRING BUNNY!

INFORMATION ON THE REPORT TO CHEMIC WITHOUT PRICE NOTICE PERSING WITH DISABILITIES ARE WELCOME TO PRETICIPATE IN OUR PROCESS. RESONANCE ACCOMMODATION WILL BE MADE WITH PRICE AREAD CENTER TO ATV THROUCH A CONTINUOUS COMMITMENT TO CHES AND WOMEN IN SHORTS.

| Office of the City Clerk | | | | | | -0 | all in |
|---|-----------------------------|--------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|-------------------|---|
| Administrative Services Division | | | | | | 11 | 1 (12) |
| Neighborhood Council (NC) Funding Progr | am | | | | | These | 5 22 |
| Board Action Certification (BAC) Form NC Name: ARLE IA | | | | 9 . 01 | - 200 | 5 | |
| NC Name: ATTELTA | | | Meeting Date: | / | - 202 | | |
| Budget Fiscal Year:2022-2023 Board Motion and/or Public Benefit | | | Agenda Item M | 10: 4 | Aug | | 2.0 |
| Statement (CIP and NPG): | to Approv. Ensterative | e up cent | to 3.31-3 | 500 to | VIDAG 1 | lon - 71 | part. |
| Method of Payment: (Select One) | Check | 2 wai | Credit Card | 200.00 | Board | d Member Reimb | ursement |
| Recused Board Member | s must leave the room prior | | te Count ssion and may no | ot return to the ro | om until after t | he vote is comple | ete. |
| Board Member's First and Last Name | Board Position | Yes | No | Abstain | Absent | Ineligible | Recused |
| Raymond Duran | Pres/Home | | | V | | | |
| Burton Hunter | VP/Renter | V | | | | | |
| Margaret Shoemaker | Sec/At lg | V | | | | | |
| Loyce Lacson | Trea/Sr rep | ./ | | | | | |
| | | V | | | ~ | | |
| Jose Pumay Gary Gallon | Home rep Sr Rep | V | | | V | | |
| Jesus Ramos | Home rep | V | - | | | | |
| Jaime Gallo | Home Rep | | | V | | | |
| Brian Patton | comm rep | 1/ | | | | | |
| Jesus Torres | Comm rep | V | | | | | |
| | | ~ | | | | | |
| Mary Oberg | At large rep | | | | | | |
| Marco Valdez | At Large | V | - | | | | |
| Himag | At Large | | | | | | |
| | Youth rep | | | | | | |
| Christiana Hartwell | Business rep | | | | 100 | | |
| Same Tarra | -Comm rep | | | | | | |
| | Youth rep | | | | | | |
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| Board Quorum: 9 | Total: | 9 | | . A | 2 | | |
| We, the authorized signers of the above meeting was held in accordance with all meeting where a quorum of the Board was | laws, policies, and procedu | cil, declare t res. The abo | hat the informati ve was approved | on presented on t by the Neighbor | this form is accu nood Council Bo | arate and comple | te, and that a publi Act compliant publi |
| Authorized Signature Jayre | Jours | | Authorized Sig | 0 | mth | ture | _ |
| Print/Type Name: Loyce Lacson | | | | me:Burton H | unter | | |
| Date: 2-21. | 2023 | | Date: | 2-3 | 22-20 | 23 | |

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.

| - | | The second se | | |
|----|--|---|--|--|
| 0 | TION I- APPLICANT INFORMATION | 23-7444901 C/ | Δ | 4/12/13 |
| a) | Northridge Hospital | | e of Incorporatio | |
| b) | 8210 Etiwanda Ave. | Reseda | CA | 91335 |
| | Organization Mailing Address | City | State | Zip Code |
| c) | 18300 Roscoe Blvd. | Northridge | CA | 91328 |
| -1 | Business Address (If different) | City | State | Zip Code |
| d) | PRIMARY CONTACT INFORMATION: Joni Novosel 818 718 5936 | joni.novosel@commor | spirit.org | |
| | Name | Phone | Email | wet the floor wor |
| | Public School (not to include private schools) | or 501(c)(3) Non-Profi | (other than religio | ous institutions) |
|) | Public School (not to include private schools) Attach Signed letter on School Letterhead Name / Address of Affiliated Organization (if ap TION II - PROJECT DESCRIPTION | d Attach IRS Determ | t (other than religio ination Letter Sta | |
| | Attach Signed letter on School Letterhead | d Attach IRS Determ | ination Letter | |
| C | Attach Signed letter on School Letterhead Name / Address of Affiliated Organization (if ap | d Attach IRS Determ oplicable) City e grant. | ination Letter | |
| C | Attach Signed letter on School Letterhead Name / Address of Affiliated Organization (if ap TION II - PROJECT DESCRIPTION Please describe the purpose and intent of th | d Attach IRS Determ | ination Letter Sta | te Zip Code |
| C | Attach Signed letter on School Letterhead Name / Address of Affiliated Organization (if ap TION II - PROJECT DESCRIPTION Please describe the purpose and intent of th Funds raised from the 2023 V4V Walk/Run w 1. The Center for Assault Treatment Services | d Attach IRS Determ oplicable) City e grant. vill benefit the following: s (CATS) provides forensic medic ault, domestic violence, and huma y program in Los Angeles that pro | ination Letter Sta al evidentiary e an trafficking. | examinations and |
| | Attach Signed letter on School Letterhead Name / Address of Affiliated Organization (if ap TION II - PROJECT DESCRIPTION Please describe the purpose and intent of th Funds raised from the 2023 V4V Walk/Run w 1. The Center for Assault Treatment Services interviews at no cost to victims of sexual assa 2. The Medical Safe Haven (MSH) is the only | d Attach IRS Determ oplicable) City te grant. vill benefit the following: s (CATS) provides forensic medic ault, domestic violence, and huma v program in Los Angeles that pro | ination Letter Sta al evidentiary e an trafficking, vides integrate | examinations and |
| C | Attach Signed letter on School Letterhead Name / Address of Affiliated Organization (if ap TION II - PROJECT DESCRIPTION Please describe the purpose and intent of th Funds raised from the 2023 V4V Walk/Run w 1. The Center for Assault Treatment Services interviews at no cost to victims of sexual assa 2. The Medical Safe Haven (MSH) is the only health treatment to human trafficking victims. How will this grant be used to primarily supp | d Attach IRS Determ oplicable) City re grant. vill benefit the following: s (CATS) provides forensic medic ault, domestic violence, and huma y program in Los Angeles that pro port or serve a public purpose an a for Individuals) Run event will be used to provide child abuse, and sex trafficking. | al evidentiary e an trafficking. vides integrate ongoing servic Both of our pro | examinations and d medical and mental public at-large. |
| | Attach Signed letter on School Letterhead Name / Address of Affiliated Organization (if ap TION II - PROJECT DESCRIPTION Please describe the purpose and intent of th Funds raised from the 2023 V4V Walk/Run w 1. The Center for Assault Treatment Services interviews at no cost to victims of sexual assa 2. The Medical Safe Haven (MSH) is the only health treatment to human trafficking victims. How will this grant be used to primarily supp (Grants cannot be used as rewards or prizes Funds raised at the Victory for Victims Walk I victims of sexual assault, domestic violence, MSH serve those that are the most vulnerable | d Attach IRS Determ oplicable) City re grant. vill benefit the following: s (CATS) provides forensic medic ault, domestic violence, and huma y program in Los Angeles that pro port or serve a public purpose an a for Individuals) Run event will be used to provide child abuse, and sex trafficking. | al evidentiary e an trafficking. vides integrate od benefit the p ongoing servic Both of our pro assiting them o | examinations and d medical and mental public at-large. |

| Personnel Related Expenses | Requested of NC | C Total Projected Con | |
|---|-----------------|-----------------------|--|
| | \$ | \$ | |
| | S | \$ | |
| | 95 | \$ | |
| Non-Personnel Related Expenses | Requested of NC | Total Projected Cos | |
| Event cost including race and timing fees, set up, park fees, port a potter | \$5,000 | \$45,000 | |
| duripaties, and all other tool | \$ | \$ | |
| | 5 | 5 | |

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project? M No Q 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? (Inclusion NPG applications to other NCs) Vis. D Yes. If Yes, please describe:

| Source of Funding | Amount | Total Projected Cost |
|-------------------|--------|----------------------|
| | 5 | ß |
| | 5 | 5 |
| | 5 | 5 |

9) What is the TOTAL amount of the grant funding requested with this application: \$ 3000, 60

10a) Start date: 411712310b) Date Funds Required: 4115128 10c) Expected Completion Date: 4117124 (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 U Yes If Yes, please describe below: | |
|---|---------------------------|
| Name of NC Board Member | Relationship to Applicant |
| | |
| | |
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| | |

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application? If Yes □ No <u>'(Please note that if a Board Member of the NC has a conflict of interest and completes this form,</u> or participates in the discussion and voting of this NPG, the NC Funding Program will deny the payment of this

grant in its entirety.)

PAGE 2

Signation every 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*
 3/1/23

 Joni Novosel
 Director

 PRINT Name
 Title

 12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*
 3/1/23

 Date
 Director

 12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*
 3/1/23

 Date
 3/1/24

 Date
 3/1/25

 Date
 3/1/24

 Date
 3/1/25

 Date
 3/1/24

¹ If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or <u>clerk.ncfunding@lacity.org</u> for instructions on completing this form

NCFP 107

IRS Internal Revenue Service P.O. Box 2508 Cincinnati OH 45201

In reply refer to: 0248222119 Apr. 12, 2013 LTR 4168C E0 23-7444901 000000 00 00018164 BODC: TE

NORTHRIDGE HOSPITAL FOUNDATION 18300 ROSCOE BLVD NORTHRIDGE CA 91325-4105



001965

Employer Identification Number: 23-7444901 Person to Contact: Kaye Keyes Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Apr. 03, 2013, 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 November, 1996.

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 509(a)(3).

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.

0248222119 Apr. 12, 2013 LTR 4168C E0 23-7444901 000000 00 00018165

Apr. 12, 2015 LTR 4168C E0 23-7644901 000000 00 00918164

37 :300

NORTHRIDGE HOSPITAL FOUNDATION 18300 ROSCOE BLVD NORTHRIDGE CA 91325-4105

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

Sincerely yours,

Receard marin

Richard McKee, Department Manager Accounts Management Operations

Richard M Accounts

Our reading plan indicate that you are not a private foundation within the meaning of section 500(s) of the cude magness you are described in section 509(al(3))

the fode. Bequests, legacist, devices, transfore, at sitts to you of for your use are deductible for federal estate and gift tax burgeses if they aget the constraints crovintone of estates 2005. 2026, and 2522 of the Code.

Places refer to our weashe www instances for information reparding filing requirements. Spacifically, section 6015(1) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-events status as of the file. We will publish a list of organizations whose tax-event status was revoked under section 6013(1) of the Code on our website beginning to serve 2011. 8210 Ethiopreta Ave., Resola, CA 91335 Occultorer (818) 718-0903

Sector for Association Services

NO FEE Expo Form

21st Annual Victory for Victims 5K/10K Walk/Run Kids Fun Run and 1-Mile Friendly Dog Walk

Saturday, April 15, 2023

Hansen Dam Park, 11770 Foothill Blvd. (area 4), Lake View Terrace 91342

5:30- 6:00 AM Set-Up Time

| 1 | EXPO BOO | TH RESER | VATION FO | DRM | _ |
|---------------------------------|-----------------------------------|----------------|----------------------|-------------|----------|
| Company Name: | Arleta | Neight | or hood | Couderl | |
| Contact Name: I+ Address: | Aymond | BurAN | - Preside | ton | |
| It - Loyc | e LACS | ON - T | reasure | | |
| | | | | | - |
| city: | <u>4</u> 4 | Sta | te: <u>CA</u> Zip | Code: 91331 | |
| Cell phone Number | 49 818-298 | 3-3908 Email A | idress: <u>Mdurk</u> | D Arleta | the org |
| Loyce - | \$18-554-6 cription of product | e178 | 11 Hes Id | @ Arleta | . NC.089 |
| most provide des | cription of product | OI DOI VIGE | | | |
| Comm | with 6 Ase | ed org. | Outread | h material | S (free) |
| 4 INform | Ation Ab | aut Deig | hborhood | Council | |

EXPO BOOTH

You must provide your own: Canopy, Table, Chairs and generator if needed.

Complete this form and mail or fax to (818) 718-5989 or email to: priscilla.lomeli@commonspirit.org

Northridge Hospital Medical/Center for Assault Treatment Services (C·A·T·S)

8

| Office of the City Clerk | | | | | | | |
|--|-----------------------------|------------------------------------|---------------------------------|---------------------------------------|---|--------------------------------------|--|
| Administrative Services Division | | | | | | 1 | 1 |
| Neighborhood Council (NC) Funding Progr | am | | | | | | 1 (]] |
| Board Action Certification (BAC) Form | | | | | | Vig Vie | - Since |
| NC Name: ARLETA | | | Meeting Date: | 521 | - 2024 | 3 | |
| Budget Fiscal Year: 2022-2023 | | | Annual a Marrie Mi | | | | |
| Board Motion and/or Public Benefit | to Appro | Ve NI | lb for | - Vie to | ry tor | Vietam | 5 |
| Statement (CIP and NPG): | to Appro 5K WAIR- | Run t Nor | to CAT | 5 progr | Schedt | ed for 1 | 1.15.23 |
| Method of Payment: (Select One) | Check | | Credit Card | | | i Member Reimb | |
| Recused Board Member | s must leave the room pric | | te Count ision and may no | t return to the ro | om until after t | he vote is compl | etc. |
| Board Member's First and Last Name | Board Position | Yes | No | Abstain | Absent | Ineligible | Recused |
| Raymond Duran | Pres/Home | | | V | | | |
| Burton Hunter | VP/Renter | V | | | | | |
| Margaret Shoemaker | Sec/At Lg | ~ | | | | | |
| Loyce Lacson | Trea/Sr. rep | ~ | | | | | |
| Jose Pumay | Home rep | V | | | | | |
| Gary Gallon | Sr. rep | V | | | | | |
| Jesus Ramos | Home rep | | | V | | | |
| Jaime Gallo | Home Rep | | | | V | | |
| Brian Patton | Comm rep | V | | | Y | | |
| Jesus Torres | Comm Rep | V | | | | | |
| Mary Oberg | At Lg Rep | V | | | | | |
| Marco Valdez | At Lg rep | V | | | | | |
| Christiana Hartwell | Buss Rep | | | | | | |
| Childrand Harthon | Youth Rep | V | | | | | |
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| Board Quorum; | Total: | 10 | | 2 | | | |
| We, the authorized signers of the above meeting was held in accordance with all meeting where a quorum of the Board wa | laws, policies, and procedi | ncil, declare th ures. The abov | at the information was approved | on presented on t by the Neighborh | this form is according to the second Council Bo | urate and comple pard, at a Brown | ete, and that a public Act compliant public |
| Authorized Signature Hay | 4 Salars | V. | Authorized Sig | nature: | Suster H | Ta | * |
| Print/Type Name: Loyce Lacson | - June | P | Print/Type Nar | me: Burton H | lunter | inne | |
| Date: 3-22-2 | 3 | | Date: | 3 | -22 | | ED 101 BAC Box 03011 |