



LEGALLY REQUIRED OFFICIAL POSTING
PLEASE DO NOT REMOVE UNTIL AFTER BELOW DATE AND TIME

North Hills West Neighborhood Council

FINAL General Board Meeting Agenda

Thursday, April 15th, 2021 7:00–9:00 PM

FINAL Agenda shall be Posted 72 Hours Prior to Meeting – All Meetings are open to the Public
(You're welcome to join 15 minutes early to ensure connection setup)

Zoom Meeting online or by telephone. Dial Toll Free (877) 853-5257 or (833) 548-0282 to join the meeting then enter this webinar ID #: 979 3677 6899 and press #

Please click this link to join the webinar by computer: <https://zoom.us/j/97936776899>

Every person wishing to address the Board must dial (669) 900-6833 (San Jose) or for Toll-Free dial: (833) 548-0282, 877-853-5257, 888-475-4499, or 833-548-0276 then press # to join the meeting. Instructions on how to sign up for public comment will be given to listeners at the start of the meeting.

NHWNC Executive Officers:

Carol Hart – President, Pat Crone – Vice President, Dan Gibson – Treasurer, Dave Brown – Secretary

Board Members:

Maggie Elliott, Punam Gohel, David Hyman, Madlena Minasian, Carlos Pelaez, Kreshell Ramey

IN CONFORMITY WITH THE GOVERNOR'S EXECUTIVE ORDER N-29-20 (MARCH 17, 2020) AND DUE TO CONCERNS OVER COVID-19, THE BOARD OF NORTH HILLS WEST NEIGHBORHOOD COUNCIL MEETING WILL BE CONDUCTED ENTIRELY TELEPHONICALLY.

Every person wishing to address the Board must dial **(877) 853-5257** (or any of the other Toll-Free Numbers listed above) and enter the meeting ID **979 3677 6899** and then press # to join the meeting. Instructions on how to sign up for public comment will be given to listeners at the start of the meeting.

PUBLIC INPUT AT NEIGHBORHOOD COUNCIL MEETINGS The public is requested dial *9, when prompted by the presiding officer, to address the Board on any agenda item before the Board takes an action on an item. Comments from the public on agenda items will be heard only when the respective item is being considered. Comments from the public on other matters not appearing on the agenda - *which are within the Board's jurisdiction* - will be heard during the General Public Comment period. Please note that under the Brown Act, the Board is prevented from acting on a matter that you bring to its attention during the General Public Comment period; however, the issue raised by a member of the public may become the subject of a future Board meeting.

Public comment is limited to 2 minutes per speaker, unless adjusted by the presiding officer of the Board.

The Neighborhood Council system enables meaningful civic participation for all Angelenos and serves as a voice for improving government responsiveness to local communities and their needs. We are an advisory body to the City of Los Angeles, comprised of stakeholder volunteers who are devoted to the mission of improving our communities.

Supporting documents available on our website at: www.nhwnc.net

ALL AGENDA ITEMS ARE SUBJECT TO DISCUSSION AND POSSIBLE ACTION BY THE BOARD

1. **Welcome & Call Meeting to Order** (7:00 pm)

2. **Roll Call, Determination of Quorum, and Voting Eligibility**

3. **Announcements and Opening Comments** – President – These may include but are not limited to:

a. Join the Neighborhood Council Budget Advocates for their annual Budget Day event! Everyone interested in learning more about how the City spends its money - and how to create influence regarding spending decisions in Los Angeles are welcome to attend. [Save the date Flier to be posted soon]

b. By popular demand we'll request an ongoing update of the **West Valley Animal Shelter** (After last month's announcement about re-opening, additional study and oversight has been requested by concerned citizens. Discussion and possible action later in tonight's meeting. Please stay with us to participate. [Possible motion]

c. Notice of one additional Board Seat vacancy – residential stakeholders are encouraged to apply. Residential seat will be filled by confirmation after the April 27th election is certified.

d. Empower LA's General Manager, Raquel Beltran, has recommended that all newly elected Board Members take the oath of office and begin their service at the first meeting of the new FY. This would be July 15th, 2021.

4. **Public Agency Speakers and Announcements**

5. General Public Comments (2 minute per speaker) NOTE: This time is set aside for *non-agendized* items.

6. Discussion and possible action: **Motion to approve the March 18, 2021 Meeting Minutes.**

7. Discussion and possible action: **Motion to approve the MER** (Monthly Expenditure Report) for March 2021.

8. **Report from Budget Advocates** – Glenn Bailey and/or NHWNC Budget Representative Pat Crone

9. **City Budget Priorities** – Discussion as needed: Recommendations have been completed and their annual White Paper has been submitted but the Budget Advocates welcome additional budget priority suggestions all year long!

Items 10 – 15 are recommendations for approval forwarded from the Budget & Finance Committee (No 2nd needed)

10. Discussion and possible action: **Motion to approve payment of \$1,959.81 to the LAPD for monthly meeting security services provided by off-duty LAPD officers from July – December of 2019.** (See Attached sheets)

Note: Expenditure of “up to \$350 monthly” for Board meeting security was authorized at the June 20th, 2019 General Board Meeting. An invoice in the total amount of \$1,959.81 was submitted to DONE in April of 2020 and forwarded to NHWNC in September of 2020, in the following Fiscal Year 2020-2021 with its own separate budget.

11. Discussion and possible action: **Motion to approve a ‘Friends of the Mid-Valley Library’ Neighborhood Purpose Grant for up to \$1,497.99.** Funding of this grant is requested to assist with the purchase of a laminator for use in producing durable signage for classes, workshops, and special community events. (See Attached sheets)

12. Discussion and possible action: **Motion to approve ‘Devonshire is S.O.L.I.D.’ Neighborhood Purpose Grant for up to the requested amount of \$5000.** **Note:** This is in lieu of their previous NPG request. Funding of this grant is requested to assist with the costs of a gym renovation at LAPD's Devonshire Division. It is for the purpose of maintaining officers' physical fitness training, which is vital for the overall physical and mental health needed in the performance of their duties. In addition to improvements to the room itself, some of the gym equipment will be refurbished and additional equipment will be installed. The closure of public gyms has necessitated these crucial improvement plans. (Full details attached with NPG & Tax Docs)

13. Discussion and possible action: **Motion to approve ‘LAPD Devonshire P.A.L.S.’ Neighborhood Purpose Grant for up to the requested amount of \$2,500.** Funding of this grant is requested to assist with the purchase of supplies for PALS Youth Center agricultural (\$500), robotics (\$1000), and auto shop programs (\$1000) for a total grant request in the amount of \$2,500. (Full details attached with NPG & Tax Docs)

14. Discussion and possible action: to approve **Motion to approve ‘Community Disaster Preparedness Foundation’ Neighborhood Purpose Grant** not to exceed, \$2680 to purchase a Community Emergency Response Team (CERT) Staging Area Kit to be placed within the North Hills West NC boundaries. (Full details attached with NPG & Tax Docs)

15. Discussion and possible action: **Motion to approve a NHWNC Expenditure of \$4,974.00 for a 20’ one-trip shipping container, for storage of the CERT Staging Area Kit as detailed in item 14, above.** This includes **taxes plus Shipping & Handling.** (Full details attached with NPG & Tax Docs)

16. Discussion and possible action: Motion to approve adjustments to the 2020-2021 NHWNC Budget and Administrative Packet. (See revised Budget & Administrative Packet submitted for Board approval attached)

17. Discussion and possible action: **Motion to support Emergency Preparedness & Public Safety Committee recommendations for City Council ACTION as regards Illegal Fireworks – Proposed City Ordinances CF 21-0318** Motion (Rodriguez – Koretz) relative to the Los Angeles Fire Department and Los Angeles Police Department examining the feasibility of implementing new programs to curtail fireworks usage, including the creation of a reward program to encourage individuals to report major suppliers of illegal fireworks in the City, and a fireworks buyback program based on the City’s Gun Buyback Program. http://clkrep.lacity.org/online/docs/2021/21-0318_mot_03-17-21.pdf

18. **CF 21-0002-S18 Housing Development Ministerial Approval / Duplex and Parcel Map Division / Environmental Review Exemption** Resolution (Koretz - Krekorian) relative to including in the City's 2021-22 State Legislative Program its position on SB 9 (Atkins), which would require cities and counties, including charter cities, to provide for the ministerial approval of a housing development containing two residential units (a duplex), and a parcel map dividing a lot into two equal parts, for residential use; and exempts environmental review. <https://cityclerk.lacity.org/m.clerkconnect/#CFIResult&ui-state=dialog>

19. **CF 21-0002-S21 Midrise, Medium-Density Housing / Public Transportation / Jobs-Rich neighborhoods** Resolution (Koretz - Krekorian) relative to including in the City's 2021-22 State Legislative Program its position on SB 10 (Wiener), which requires that cities allow midrise, medium-density housing on sites that are either within one-half mile of high-quality public transportation, or within a jobs-rich, high-opportunity neighborhood close to key job centers, without affordability requirements or sensitivity to the character of existing neighborhoods. <https://cityclerk.lacity.org/m.clerkconnect/#CFIResult&ui-state=dialog>

20. Committee & Liaison Reports

21. Board Member announcements and requests for future agenda items

22. Motion to adjourn

North Hills West Neighborhood Council & Committee Agendas are posted for public review at Uncle Joe’s Donuts – 8704 Woodley – North Hills CA 91343 and posted on the NHWNC website www.nhwnc.net

PUBLIC INPUT AT NEIGHBORHOOD COUNCIL MEETINGS – The public is requested to fill out a “Speaker Card” to address the board on any item on the Agenda PRIOR to the Board taking action on an item. Comments from the public on Agenda items will be heard only when the respective item is being considered. Comments on other matters, not appearing on the Agenda that are within the board’s subject matter jurisdiction, will be heard during

the Public Comment period. During the current situation requiring that we conduct meetings online, please send your request to make a public comment to Secretary@nhwnc.net. Please include the item number along with an indication that you support, oppose, or support conditionally - naming your conditions.

As a covered entity under **Title II of the Americans with Disabilities Act**, the City of Los Angeles does not discriminate on the basis of disability and, upon request, will provide reasonable accommodation to ensure equal access to its programs, services and activities. Sign language interpreters, assistive listening devices and other auxiliary aids or services, may be provided upon request. If you require language services translation services and to ensure availability of services, please make your requests at least three (3) business days (72 hours) prior to the meeting you wish to attend by contacting Carol Hart, Board President, via email at President@nhwnc.net or by phone 818-281-9387.

RECONSIDERATION PROCESS: Reconsideration of a vote by the Board may be called as a motion by the Board members that voted on the prevailing side of the decision.

GRIEVANCE PROCESS: A stakeholder or group of stakeholders may present a grievance concerning the legality of actions by the Board during public comment. Substantive grievances will be examined by a panel set by the Board and the decisions may be appealed to the Department of Neighborhood Empowerment.

PUBLIC ACCESS OF RECORDS: In compliance with 'Government Code Section 54957.5, non-exempt writings that are distributed to a majority or all of the board in advance of its meetings, may be viewed at the board meeting. Documents may also be reviewed by going to the Board's website [www.http://nhwnc.net](http://nhwnc.net).

In addition, if you would like a copy of any record related to an item on the agenda please contact Board Secretary Dave Brown at secretary@nhwnc.net by phone 818-903-2259 or mail to NHWNC – PO Box 2091 – North Hills – CA – 91393.

NHWNC BYLAWS – Please be advised that the bylaws of the North Hills West Neighborhood Council provide a process for reconsideration of actions as well as a grievance procedure. For your convenience, the bylaws which were approved on 6-17-2020 are available during every meeting and online at: [www.http://nhwnc.net](http://nhwnc.net).

In compliance with 'government code section 5497.5, non-exempt writings that are distributed to a majority or all of the Board in advance of a meeting are available on our website: [www.http://nhwnc.net](http://nhwnc.net)

For More Information About The NHWNC Please Call – 818-903-2259 – Or Send Mail To P.O. Box 2091 – North Hills CA 91393-2091. We look forward to hearing from you!

SI REQUIERE SERVICIOS DE TRADUCCION, FAVOR DE NOTIFICAR AL CONCEJO VECINAL 3 DÍAS DE TRABAJO (72 HORAS) ANTES DEL EVENTO. SI NECESITA ASISTENCIA CON ESTA NOTIFICACION, POR FAVOR CONTACTE A DAN GIBSON, PRESIDENTE DE LA MESA, POR EMAIL A dgibson.nhwnc@gmail.com.

Please Do Not Remove Before February 20th, 2020

LOS ANGELES POLICE DEPARTMENT

MICHEL R. MOORE
Chief of Police



ERIC GARCETTI
Mayor

P.O. Box 30158
Los Angeles, CA 90030
Telephone: (213) 486-8590
TTY: (877) 275-5273
Ref #: 3.5

April 28, 2020

Department of Neighborhood Empowerment
200 North Spring Street, 20th Floor
Los Angeles, CA 90012
Attention: Jose Galdamez

Invoice No: 20SPEC132

Dear Mr. Galdamez:

The Los Angeles Police Department (LAPD) has completed the billing for the overtime costs associated with the NHWNC General Board Meetings held at the New Horizon – Sam's Cafe on July 18, 2019, August 15, 2019, September 19, 2019, October 17, 2019, November 21, 2019 and December 19, 2019. The total amount being billed is \$1,959.81.

Enclosed is a summary of overtime hours worked by the officers and a copy of your request for security services for the meetings. Please transfer funds to the LAPD, referencing Invoice No. 20SPEC132, as follows:

Fund	Department	Revenue Source Code	Amount
100	70	5161	\$1,959.81

If you have any questions regarding this matter, please contact Management Assistant Jaymee Dyke, Fiscal Operations Division, Budget Section, at (213) 486-8550.

Respectfully,

MICHEL R. MOORE
Chief of Police


THOM BRENNAN, Police Administrator II
Commanding Officer
Fiscal Operations Division

Enclosures

Los Angeles Police Department
Report: NHWNC General Board Meetings
Invoice#: 20SPEC132
Period: 7/18/2019 - 12/19/2019

Dept	Div	EmployeeName	Serial#	Class	Varcode	Vardate	Hours	OT	HourlyRate	Amount	CAP Rate	Total	ActCode
4301	170	CORRAL, EFREN	35472	POLICE OFFICER III	PA	12/19/2019	3.0		\$92.9833	\$278.95	\$33.89	\$312.84	77
					Sub-Total		3.0					\$312.84	
4301	170	DELVALLE, DANIEL	27677	POLICE OFFICER III	PA	09/19/2019	3.0		\$92.9400	\$278.82	\$33.88	\$312.70	77
					Sub-Total		3.0					\$312.70	
4301	170	PARKER, JOHN	36560	POLICE OFFICER III	PA	08/15/2019	3.0		\$89.0867	\$267.26	\$32.47	\$299.73	77
			36560	POLICE OFFICER III	PA	08/15/2019	1.0		\$89.0900	\$89.09	\$10.82	\$99.91	77
					Sub-Total		4.0					\$399.65	
4301	170	PETEQUE, NORMA	31373	POLICE OFFICER III	PA	07/18/2019	3.0		\$91.8167	\$275.45	\$33.47	\$308.92	77
					Sub-Total		3.0					\$308.92	
4301	170	SELLERS, PHILLIP	31934	POLICE OFFICER III	PA	10/17/2019	3.0		\$92.9867	\$278.96	\$33.89	\$312.85	77
			31934	POLICE OFFICER III	PA	11/21/2019	3.0		\$92.9867	\$278.96	\$33.89	\$312.85	77
					Sub-Total		6.0					\$625.71	
										Grand Total	19.0	\$1,959.81	

Overtime
Code

77

**CITY OF LOS ANGELES
INTER-DEPARTMENTAL CORRESPONDENCE****June 26, 2019**

To: Captain Kathleen Burns
Los Angeles Police Department
Devonshire Community Police Station

Attn: Sgt II Jose Torres

From: Jose Galdamez
Neighborhood Empowerment Advocate
Department of Neighborhood Empowerment

Subject: REQUESTING FOR SECURITY SERVICES FOR NORTH HILLS WEST
NEIGHBORHOOD COUNCIL MEETING

The North Hills West Neighborhood Council (NHWNC) is requesting security from the Los Angeles Police Department (LAPD) for assistance with safety and/or decorum concerns at NHWNC Board Meetings.

On Thursday, June 20, 2019, the NHWNC approved a motion to request one police officer to staff the NHWNC General Board Meetings for the 2019-20 fiscal year.

Schedule of the meetings are as follows:

North Hills West Neighborhood Council Meeting - (1 Sworn Officer)

Date: 3rd Thursday of the month for 12 months (7/18, 8/15, 9/19, 10/17, 11/21, 12/19, 1/16, 2/20, 3/19, 4/16, 5/21, 6/18)

Time: 6:30pm to 9:30pm
(End time is approximate depending on agenda items)

Location: New Horizons -Sam's Cafe
15725 Parthenia Street,
North Hills, CA 91343

The cost of deploying the officer(s) for these meetings will be covered by the North Hills West Neighborhood Council. Please send invoices to the following address:
Department of Neighborhood Empowerment
200 North Spring Street, 20th Floor
Los Angeles, CA 90012
Attention: Jose Galdamez

You may also email invoices to Jose.Galdamez@lacity.org, who will coordinate with the Department Accounting staff to ensure timely payments.

Thank you in advance for your attention in this matter. If you have any questions please contact me at (818) 374-9895.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Jose Galdamez', with a stylized flourish at the end.

Jose Galdamez
Neighborhood Council Advocate
Department of Neighborhood Empowerment

WHITE - DESIGN COPY
YELLOW - EMPLOYEE COPY
PINK - CT PROGRAM ADMINISTRATOR

OVERTIME REPORT

TYPE OR PRINT LEGIBLY IN INK

FOR OFFICE USE ONLY
DATE: JUL 28 2019
CODE: 6077

DATE REPORTED 7/18/19	EMPLOYEE ID 44295	CLASS P3+H	NAME (LAST, FIRST, MIDDLE INITIAL) PETEQUE, NORMA P.							
RECORD TO NEAREST TENTH OF HOURS WORKED OR TAKEN OFF	TOTAL HOURS WORKED		TYPE OF COMPENSATION REQUESTED				HOURS TAKEN OFF			
	TIME & 1/4	ST. TIME	CASH TIME & 1/4	ST. TIME	TIME TIME & 1/4	ST. TIME	NEW BANK TIME & 1/4	ST. TIME	OLD BANK TIME & 1/4	ST. TIME
	3.0		3.0							
DATE AND TIME WORKED		FROM		TO		TOTAL BANK				
7/18/19		1830		7/18/19		2129		30+		
REASON FOR OVERTIME (CHECK ONE)	☐ Court or Admin. Hearing	☐ Unscheduled Activity	☒ Prescheduled Activity	☐ Unusual Major Events			☐ Worked on Day Off in Lieu of a Holiday			
EMP STATUS	☒ EOW	☐ DO	☐ HO	☐ VC/O	☐ PPH	☐ OTHER				
TYPE OF CRIME REPORT/CHARGE		CR. NO.		BOOKING NO.		COURT CASING. ☐ On Call ☐ No Ties				
NORTH HILLS WEST N/C MTG										
DESCRIPTION OF ACTIVITY										
MONTHLY										
ATTENDED NEIGHBORHOOD COUNCIL MTG FOR										
NORTH HILLS WEST @ NEW HORIZON										
OVERTIME PAID BY (NHHWC) DUE TO SAFETY										
CONCERNS INVOLVING HOSTILE EX-BOARD MEMBER										
Res. Reviewed		Date	Initial	Serial No.		KICKBACK				
7/18/19		07/19/19	[Signature]	3232Y		[Signature]				
31313		31313		31313		31313				

WHITE - DIVISION COPY
YELLOW - EMPLOYEE COPY
PINK - OT PROGRAM ADMINISTRATOR

OVERTIME REPORT

TYPE OR PRINT LEGIBLY IN INK

FOR OFFICE USE ONLY	
PRY PERIOD ENDS AUG 17 2019	CODE 6077

DATE REPORTED 08-15-19	EMPLOYEE ID (ED) 75062	RANK/PO PHI +1	NAME (LAST, FIRST, MIDDLE INITIAL) PARKER, JOHN C								
RECORD TO NEAREST TENTH (1) WORKED OR TAKEN OFF	TOTAL HOURS WORKED		TYPE OF COMPENSATION REQUESTED				HOURS TAKEN OFF				
	TIME & 1/4	ST. TIME	CASH TIME & 1/4 ST. TIME		TIME TIME & 1/4 ST. TIME		NEW BANK TIME & 1/4 ST. TIME		OLD BANK TIME & 1/4 ST. TIME		
	3.0 hrs	/	3.0	/	/	/					
DATE AND TIME WORKED						TOTAL BANK: 10+					
FROM		TO		Division		Assignment		Watch			
Date 08-15-19 Time 1830		Date 08-15-19 Time 2130		DEV		175281		W2			
REASON FOR OVERTIME (CHECK ONE)	☐ Court or Admin. Hearing	☐ Unscheduled Activity	☒ Prescheduled Activity	☐ Unusual Major Events			☐ Worked on Day Off in Lieu of a Holiday				
EMP STATUS	☒ BOW	☐ DO	☐ HO	☐ VOTO	☐ PPH	☐ OTHER					
TYPE OF CRIME/REPORT/CHARGE NORTH HILLS WEST N.C.			DR. NO.		BOOKING NO.		COURT CASE NO.		☐ On Duty ☐ On Leave		
DESCRIPTION OF ACTIVITY											
WORKED PAST ROW FOR SECURITY											
SERVICES FOR NORTH HILLS WEST NEIGHBORHOOD											
COUNCIL MEETING; PROVIDED CRIME UPDATE											
& EVENTS FOR DEVONSHIRE											
Signature of Supervisor ADV Sgt TORRES						Time worked was only initial and date 1268-19-19					
Supervisor Reviewed	Date 08/16/19	Initial	Serial No. 22324			☐ KICKBACK					
I certify the above to be true.			Off worked by: ☐ With HUC prior approval			Above is in compliance with LAAC 4.158					
John Parker # 36560 (Signature of Employee)			[Signature] (Signature of Supervisor/Approver, Date Reported)			[Signature] BIRK (Signature of Commanding Officer)					

OVERTIME REPORT

TYPE OF PRINT LEGIBLY IN INK

DATE REPORTED: AUG 17 2019
6077
6011

DATE REPORTED 08-15-19	EMPLOYEE ID (EO)	75062	RANK/PS	PHI +1	NAME (LAST, FIRST, MIDDLE INITIAL)	PARKER, JOHN C					
RECORD TO: NEAREST TENTH OF WORKED ON TASKS OFF	TOTAL HOURS WORKED		TYPE OF COMPENSATION REQUESTED				HOURS TAKEN OFF				
	TIME & %	ST. TIME	CASH TIME & %	ST. TIME	TIME TIME & %	ST. TIME	NEW BANK TIME & %		OLD BANK TIME & %		
	1.0		1.0								
DATE AND TIME WORKED						TOTAL BANK: 10.5					
FROM		TO		Division		Assignment		Watch			
08-15-19		2130		08-15-19		2230		DEV			
REASON FOR OVERTIME (CHECK ONE)		☐ Court or Admin. Hearing		☐ Unscheduled Activity		☒ Pre-scheduled Activity		☐ Unusual Major Events			
EMP STATUS		☒ EOW		☐ DO		☐ NO		☐ VOTO			
TYPE OF CRIME/REPORT/CHARGE		NORTH HILLS WEST N.C.		DR. NO.		BOOKING NO.		COURT CASE NO.			
DESCRIPTION OF ACTIVITY											
WORKED (1) HOUR PAST NORTH HILLS WEST NEIGHBORHOOD COUNCIL MEETING DUE TO MULTIPLE AGENDAS TO COVER											
Total hours worked only - Total and date when entered						RS 8-19-19					
Rec'd/Reviewed	Date	Initial	Serial No.		KICKBACK						
08/16/19			32324		Above is in compliance with LAAC 4 163						
I certify the above to be true.			OT worked ☐ WITH ☐ WITHOUT prior approval			Signature of Commanding Officer					
John Parker #31560			[Signature]			31790					

08/15/2019 (12:11)

PLEASE PRINT NAME AND PHONE NUMBER FOR THE 2019-20 FISCAL YEAR.

OVERTIME REPORT
 TYPE OR PRINT LEGIBLY IN INK

FOR OFFICE USE ONLY
 OCT 24 2019 6077

DATE REPORTED 10-18-19		EMPLOYEE ID (EO) 24374		RANK/RG PH+1		NAME (LAST, FIRST, MIDDLE INITIAL) SELLERS, PHILIP A	
TOTAL HOURS WORKED 3.0		TYPE OF COMPENSATION REQUESTED CASH		HOURS TAKEN OFF			
TIME & % 3:00		ST. TIME		TIME & % 3:00		ST. TIME	
DATE AND TIME WORKED FROM 10-17-19 1830 TO 10-17-19 2130		DIVISION DEL		TOTAL BANK 100			
REASON FOR OVERTIME (CHECK ONE) ☐ Court or Admin. Hearing ☐ Unscheduled Activity ☒ Pre-scheduled Activity ☐ Unusual Major Events		EMP STATUS ☒ EOW ☐ DO ☐ NO ☐ VOTO ☐ PPH ☐ OTHER		COURT CASE NO. ☐ On Call ☐ In Lieu of a Holiday			
TYPE OF CRIME/REPORT/CHARGE SECURITY DISTRICT - NWANC		DR. NO.		BOOKING NO.		COURT CASE NO.	
DESCRIPTION OF ACTIVITY WORKED OVERTIME DISTRICT FOR SECURITY SERVICES - NORTH HILLS WEST NEIGHBORHOOD COUNCIL MEETING							
RECEIVED/REVIEWED 10-19-19		INITIALS [Signature]		SERIAL NO. 32334		KICKBACK Above is in compliance with LAAC 4.169	
I certify the above to be true [Signature]		Signature of Employee		Signature of Supervisor Approving (Date Approved)		Signature of Commanding Officer	

NOTE: THE NWANC General Board Meetings for the 2019-20 fiscal year.

WHITE - DIVISION COPY
YELLOW - EMPLOYEE COPY
PINK - OT PROGRAM ADMINISTRATOR

OVERTIME REPORT

TYPE OR PRINT LEGIBLY IN INK

FOR OFFICE USE ONLY

DATE OF REPORT: NOV 23 2019
OFFICE USE ONLY: 62717

DATE REPORTED 11-21-19	EMPLOYEE ID (EID) 24374	BRANCH PULH	DEPT. NAME (PULH) SULLERS, PHILIP A								
REASON TO REQUEST FORTH OT WORKED (CHECK ONE)	TOTAL HOURS WORKED		TYPE OF COMPENSATION REQUESTED				HOURS TAKEN OFF				
	TIME & 1/4	ST. TIME	CASH TIME & 1/4 ST. TIME		TIME TIME & 1/4 ST. TIME		NEW BANK TIME & 1/4 ST. TIME		OLD BANK TIME & 1/4 ST. TIME		
	3:00 hrs		3:00 hrs			2:00					
DATE AND TIME WORKED						TOTAL BANK: 100					
FROM		TO		Division		Assigned		Voted			
Date: 11-21-19 Time: 18:30		Date: 11-21-19 Time: 21:50		DSU		3:00		2			
REASON FOR OVERTIME (CHECK ONE)	☐ Court or Admin. Hearing	☐ Unscheduled Activity	☒ Pre-scheduled Activity	☐ Unusual Major Events				☐ Worked on Day Off in Lieu of a Holiday			
EMP STATUS	☐ EON	☒ DO	☐ NO	☐ VOTO	☐ PPH	☐ OTHER					
TYPE OF CRIME/REPORT/CHARGE NHLWNC Security DISTRICT			DR. NO.		BOOKING NO.		COURT CASE NO. ☐ On Site ☐ On Time				
DESCRIPTION OF ACTIVITY											
WORKED SECURITY DISTRICT FOR NORTH HILLS WEST											
NORTHBOROUGH COUNCIL GENERAL BOARD MEETING											
I understand that only one entry will be entered when reported.											
Rec'd/Reviewed	Date: 11/22/19	INITIAL	Serial No. 22824	SULLERS OIC		24 11-23-19					
I certify the above to be true.			☐ OT worked for 100% ☐ OT/DO/OT not approved	KICKBACK		Above is in compliance with LRAO 4.105					
Signature of Employee 11/22/19 31934			Signature of Supervisor Approving (Date Approved)				Signature of Community Officer				

11/24/19 (11/27)

11/24/19

GREEN - DIVISION COPY
YELLOW - EMPLOYEE COPY
PINK - OT PROGRAM ADMINISTRATOR

OVERTIME REPORT

TYPE OR PRINT LEGIBLY IN INK

FOR OFFICE USE ONLY	
PAY PERIOD ENDING	CODE
DEC 31, 2019	0277

DATE REPORTED 12/19/19	EMPLOYEE ID (EO) 35472	RANK/PG P3+1	NAME (LAST, FIRST, MIDDLE INITIAL) CORRAL, EFREN J.								
RECORD TO NEAREST TENTH OF WORKED OR TAKEN OFF	TOTAL HOURS WORKED		TYPE OF COMPENSATION REQUESTED				HOURS TAKEN OFF				
	TIME & 1/4	ST. TIME	CASH TIME & 1/4	ST. TIME	TIME TIME & 1/4	ST. TIME	NEW BANK TIME & 1/4	ST. TIME	OLD BANK TIME & 1/4	ST. TIME	
	3.0		3.0								
DATE AND TIME WORKED						TOTAL BANK					
FROM		TO		Division		Assignment		Watch			
12/19/19		1830		12/19/19		2130		DEV		W2	
REASON FOR OVERTIME (CHECK ONE)	☐ Court or Admin. Hearing	☐ Unscheduled Activity	☒ Prescheduled Activity	☐ Unusual Major Events			☐ Worked on Day Off In Lieu of a Holiday				
EMP STATUS	☐ EOW	☒ DO	☐ NO	☐ VOTO	☐ PPH	☐ OTHER					
TYPE OF CRIME/REPORT/CHARGE NHNHC Meeting			DR. NO.		BOOKING NO.		COURT CASE NO.		☐ On Call	☐ Be There	
DESCRIPTION OF ACTIVITY											
Worked 3 HRS OT to work security detail at the											
North Hills West Neighborhood Council Meeting at											
15725 Pulviner St.											
Supervisor use only. Initial and date when entered.											
Rec'd/Reviewed	Date	Initial	Serial No.	Sgt. # Torres Approved			24 12-23-19				
12/20/19	35472		52324				KICKBACK				
I certify the above to be true			OT worked WITH ☒ WITHOUT ☐			Above is in compliance with LAAC 4.169					
Efren J. Corral			[Signature]			3190					
[Signature]			[Signature]			[Signature]					

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: North Hills West Neighborhood Council

SECTION I - APPLICANT INFORMATION

- 1a) Friends of the Mid-Valley Library 95-457927 CA Dec.1996
Organization Name *Federal I.D. # (EIN#)* *State of Incorporation* *Date of 501(c)(3) Status (if applicable)*
- 1b) 16244 Nordhoff St North Hills CA 91343
Organization Mailing Address *City* *State* *Zip Code*
- 1c) _____
Business Address (If different) *City* *State* *Zip Code*
- 1d) **PRIMARY CONTACT INFORMATION:**
Christine Daush (818)892-1280 ccdaush@verizon.net
Name *Phone* *Email*
- 2) Type of Organization- Please select one:
☐ Public School (not to include private schools) *Attach Signed letter on School Letterhead* or ☒ 501(c)(3) Non-Profit (other than religious institutions) *Attach IRS Determination Letter*
- 3) _____
Name / Address of Affiliated Organization (if applicable) *City* *State* *Zip Code*

SECTION II - PROJECT DESCRIPTION

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

To purchase a poster laminating machine that can be used both by the Mid-Valley Library staff and the NHWNC members.

- 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)

The poster laminating machine will create cleaner posters that will last a longer time. The posters won't tear and stain when they are laminated.

SECTION III - PROJECT BUDGET OUTLINE

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

6a)	Personnel Related Expenses	Requested of NC	Total Projected Cost
		\$	\$
		\$	\$
		\$	\$
6b)	Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
	GBC Ultima 55 EZ-Load 27" Thermal Roll Laminator-1710755EZ	\$1497.99	\$0
		\$3	\$0
		\$	\$

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: \$1497.99

10a) Start date: ___/___/___ 10b) Date Funds Required: 06/15/2021 10c) Expected Completion Date: 06/15/2021
(After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

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

☒ No ☐ Yes If Yes, please describe below:

Name of NC Board Member	Relationship to Applicant

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application?

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

SECTION V - DECLARATION AND SIGNATURE

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read the documents "What is a Public Benefit," and "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of Non-Profit Corporation or School Principal - REQUIRED*

Christine Daush

PRINT Name

President

Title



Signature

3/19/21

Date

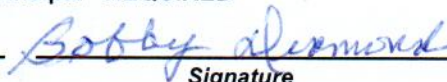
12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*

Bobby Diamond

PRINT Name

Secretary

Title



Signature

3/19/2021

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
DISTRICT DIRECTOR
2 CUPANIA CIRCLE
MONTEREY PARK, CA 91755-7406

DEPARTMENT OF THE TREASURY

Date: DEC 12 1996

FRIENDS OF THE MID-VALLEY REGIONAL
BRANCH LIBRARY
16244 NORDHOFF
NORTH HILLS, CA 91343

Employer Identification Number:
95-4579271
Case Number:
956281116
Contact Person:
TYRONE THOMAS
Contact Telephone Number:
(213) 894-2289
Accounting Period Ending:
JUNE 30
Foundation Status Classification:
509(a)(2)
Advance Ruling Period Begins:
AUGUST 23, 1996
Advance Ruling Period Ends:
JUNE 30, 2001
Addendum Applies:
NO

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in section 509(a)(2).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make a final determination of your foundation status.

If we publish a notice in the Internal Revenue Bulletin stating that we

Letter 1045 (DC/CG)

FRIENDS OF THE MID-VALLEY REGIONAL

will no longer treat you as a publicly supported organization, grantors and contributors may not rely on this determination after the date we publish the notice. In addition, if you lose your status as a publicly supported organization, and a grantor or contributor was responsible for, or was aware of, the act or failure to act, that resulted in your loss of such status, that person may not rely on this determination from the date of the act or failure to act. Also, if a grantor or contributor learned that we had given notice that you would be removed from classification as a publicly supported organization, then that person may not rely on this determination as of the date he or she acquired such knowledge.

If you change your sources of support, your purposes, character, or method of operation, please let us know so we can consider the effect of the change on your exempt status and foundation status. If you amend your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, let us know all changes in your name or address.

As of January 1, 1984, you are liable for social security taxes under the Federal Insurance Contributions Act on amounts of \$100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the private foundation excise taxes under Chapter 42 of the Internal Revenue Code. However, you are not automatically exempt from other federal excise taxes. If you have any questions about excise, employment, or other federal taxes, please let us know.

Donors may deduct contributions to you as provided in section 170 of the Internal Revenue 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.

Donors may deduct contributions to you only to the extent that their contributions are gifts, with no consideration received. Ticket purchases and similar payments in conjunction with fundraising events may not necessarily qualify as deductible contributions, depending on the circumstances. Revenue Ruling 67-246, published in Cumulative Bulletin 1967-2, on page 104, gives guidelines regarding when taxpayers may deduct payments for admission to, or other participation in, fundraising activities for charity.

You are not required to file Form 990, Return of Organization Exempt From Income Tax, if your gross receipts each year are normally \$25,000 or less. If you receive a Form 990 package in the mail, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the return.

If you are required to file a return you must file it by the 15th day of the fifth month after the end of your annual accounting period. We charge a penalty of \$10 a day when a return is filed late, unless there is reasonable

FRIENDS OF THE MID-VALLEY REGIONAL

cause for the delay. However, the maximum penalty we charge cannot exceed \$5,000 or 5 percent of your gross receipts for the year, whichever is less. We may also charge this penalty if a return is not complete. So, please be sure your return is complete before you file it.

You are not required to file federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, we will assign a number to you and advise you of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

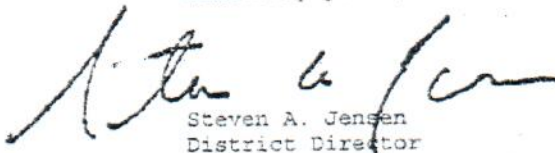
This determination is based on evidence that your funds are dedicated to the purposes listed in section 501(c)(3) of the Code. To assure your continued exemption, you should keep records to show that funds are spent only for those purposes. If you distribute funds to other organizations, your records should show whether they are exempt under section 501(c)(3). In cases where the recipient organization is not exempt under section 501(c)(3), you must have evidence that the funds will remain dedicated to the required purposes and that the recipient will use the funds for those purposes.

If we said in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help us resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,



Steven A. Jensen
District Director



CITY OF LOS ANGELES
Office of Finance
P.O. Box 53200
Los Angeles CA 90053-0200

FRIENDS OF THE MID-VALLEY REGIONAL BRANCH LIBRARY

16244 NORDHOFF STREET
NORTH HILLS, CA 91343-3806

16244 NORDHOFF STREET
NORTH HILLS, CA 91343-3806

THIS CERTIFICATE MUST BE POSTED AT PLACE OF BUSINESS				
CITY OF LOS ANGELES TAX REGISTRATION CERTIFICATE				
THIS CERTIFICATE IS GOOD UNTIL SUSPENDED OR CANCELLED				
BUSINESS TAX				
ACCOUNT NO.	FUND/CLASS	DESCRIPTION	ISSUED: 04/30/2013	STATUS
0002679122-0001-5	L044	Retail Sales	04/30/2013	Active
FRIENDS OF THE MID-VALLEY REGIONAL BRANCH LIBRARY				
16244 NORDHOFF STREET				
NORTH HILLS, CA 91343-3806				
16244 NORDHOFF STREET				
NORTH HILLS, CA 91343-3806				
ISSUED FOR TAX COMPLIANCE PURPOSES ONLY				
NOT A LICENSE, PERMIT, OR LAND USE AUTHORIZATION				
ISSUED BY: <i>Christine P. Christensen</i>				
DIRECTOR OF FINANCE				
NOTIFY THE OFFICE OF FINANCE IN WRITING OF ANY CHANGE IN OWNERSHIP OR ADDRESS - Office of Finance P.O. Box 53200 Los Angeles CA 90053-0200				



[Menu](#)

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- [BINDING MACHINES](#)
- [BINDING SUPPLIES](#)
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- [LAMINATORS](#)
- [LAMINATING FILM](#)
- [LAMINATING POUCHES](#)
- [PL](#)

[Home](#) > [Laminating](#) > [Laminators](#) > [Roll Laminators](#) > GBC Ultima 55 EZ-Load 27" Thermal Roll Laminator - 1710755EZ

GBC Ultima 55 EZ-Load 27" Thermal Roll Laminator - 1710755EZ

Part #: 1710755EZ | Brand: [GBC](#)

Laminator Type: Roll

Core Diameter: 1"

Laminating Speed: 120" per minute

Maximum Document Width: 27"

Package Options:

[-- Please Select --](#)

*Excludes Oversize and International

90 Day Warranty

Price Match Guarantee

Oversize / Truck shipping

Brand New

In Stock

\$1,497.⁹⁹

1

ADD TO CART



This Item Ships Via Truck

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

DEPARTMENT OF THE TREASURY

Date: JUN 15 2016

MONTEREY HILLS FOUNDATION
PO BOX 32164
LOS ANGELES, CA 90032-0000

Employer Identification Number:
81-2808902
DLN:
26053560002746
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
May 31
Public Charity Status:
509(a)(2)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
May 2, 2016
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.

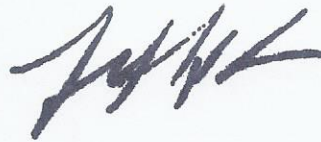
If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

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

MONTEREY HILLS FOUNDATION

Sincerely,

A handwritten signature in dark ink, appearing to read 'J. Cooper', written in a cursive style.

Jeffrey I. Cooper
Director, Exempt Organizations
Rulings and Agreements

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

1a) <u>Organization Name</u>	<u>Federal I.D. # (EIN#)</u>	<u>State of Incorporation</u>	<u>Date of 501(c)(3) Status (if applicable)</u>
1b) <u>Organization Mailing Address</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>
1c) <u>Business Address (If different)</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>

1d) **PRIMARY CONTACT INFORMATION:**

<u>Name</u>	<u>Phone</u>	<u>Email</u>
-------------	--------------	--------------

2) **Type of Organization- Please select one:**

☐ Public School *(not to include private schools)*
Attach Signed letter on School Letterhead

or

☐ 501(c)(3) Non-Profit *(other than religious institutions)*
Attach IRS Determination Letter

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

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

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)

SECTION III - PROJECT BUDGET OUTLINE

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

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

6b)	Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
		\$	\$
		\$	\$
		\$	\$

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: \$ _____

10a) Start date: ____/____/____ 10b) Date Funds Required: ____/____/____ 10c) Expected Completion Date: ____/____/____
(After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

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

☐ No ☐ Yes If Yes, please describe below:

Name of NC Board Member	Relationship to Applicant

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application?

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

SECTION V - DECLARATION AND SIGNATURE

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read the documents "What is a Public Benefit," and "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of Non-Profit Corporation or School Principal - REQUIRED*

PRINT Name Title Signature Date

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

PRINT Name Title Signature Date

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

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

DEPARTMENT OF THE TREASURY

Date: JUL 02 2020

LAPD DEVONSHIRE POLICE ACTIVITY
LEAGUE SUPPORTERS
8721 WILBUR AVE
NORTHRIDGE, CA 91324

Employer Identification Number:
23-7270505
DLN:
29053045317030
Contact Person:
MRS. JOHNSON ID# 31287
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
May 15, 2019
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.

Based on the information you submitted in your application, we approved your request for reinstatement under Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is retroactive to your date of revocation.

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

LAPD DEVONSHIRE POLICE ACTIVITY

to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

A handwritten signature in cursive script that reads "Stephen A. Martin".

Director, Exempt Organizations
Rulings and Agreements



Neighborhood Council Funding Program

APPLICATION for Neighborhood Purposes Grant (NPG): North Hills West

Submitted by LAPD Devonshire PALS (EIN: 23-7270505)

ADDENDUM

4) Please describe the purpose and intent of the grant (continued):

The requested funds will be allocated to supplies at our youth center for our agricultural, robotics, and auto shop programs. Funds will be designated specifically for agricultural materials including the following: cages for pot-bellied pigs; food for pigs, chickens, and turtles; tarps; chicken wire; shavings; garden soil and seeds. Funds allocated to the auto shop program will support the purchase of tools and equipment including an engine crane, engine stand, transmission stand, floor jack, creeper, air compressor, grinder, dent puller, torch, welder, air compressor, air tools, spray guns, screwdrivers, sockets, wrenches, and jack stands. The grant also will underwrite robotics kits.

5) How will this grant be used to primarily support or serve a public purpose and benefit the public at-large (continued):

We also are providing an outlet for participating children and teens to decompress; receive mentoring, support, healthy meals and snacks; and use different tools to manage stress and anxiety - benefiting themselves, their families, and their neighborhoods.

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: North Hills West Neighborhood Council

SECTION I - APPLICANT INFORMATION

1a) LAPD Devonshire PALS 23-7270505 CA 05/15/2019
Organization Name Federal I.D. # (EIN#) State of Incorporation Date of 501(c)(3) Status (if applicable)

1b) 8721 Wilbur Avenue Los Angeles CA 91324
Organization Mailing Address City State Zip Code

1c) _____
Business Address (if different) City State Zip Code

1d) PRIMARY CONTACT INFORMATION:

Edgar Sedano 818-885-6433 Esedano@devonshire-pals.org
Name Phone Email

2) Type of Organization- Please select one:

☐ Public School (not to include private schools)
 Attach Signed letter on School Letterhead

or ☒ 501(c)(3) Non-Profit (other than religious institutions)
 Attach IRS Determination Letter

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

SECTION II - PROJECT DESCRIPTION

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

The mission of LAPD Devonshire PALS (PALS) is to build character and enrich the lives of children and teens by offering year-round, after-school activities that foster trust and understanding between young people, the LAPD and the community. To that end, PALS provides a range of programs that pique our members' interests, encourage their curiosity, and expand their horizons. The requested funds will be allocated to supplies at our youth center for our agricultural, robotics, and auto shop programs. Funds will be designated specifically for agricultural materials including the following:

~~cages for pot bellied pigs; food for pigs, chickens, and turtles; toys; chicken wire; shovels;~~

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)

PALS is dedicated to developing character in youth, reducing juvenile crime and creating safer communities. We do this by providing after-school enrichment programs for low-income, at-risk children and teens. Particularly during the ongoing health, economic, and educational crisis, youth are suffering from heightened stress, anxiety, and depression. We know that we will have to provide local youth with more academic, emotional, and social support than ever before while maintaining stringent safety protocols. By offering a variety of hands-on, experiential, and FUN learning activities, we are supporting our members' educational progress and vocational possibilities while taking a much-needed break from ubiquitous screen time. We also are providing an outlet for participating children and teens to decompress; receive mentoring, support, healthy meals and snacks; and use different tools to manage stress and anxiety - benefiting themselves, their families, and their neighborhoods.

SECTION III - PROJECT BUDGET OUTLINE

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

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

6b)	Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
	Agricultural program supplies	\$500	\$3,500
	Robotics kits	\$1000	\$3,500
	Automotive program supplies	\$1000	\$6,000

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?
☐ No ☒ Yes If Yes, please list names of NCs: Granada Hills South, Granada Hills North, Northridge

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: \$2,500

10a) Start date: 06/01/21 10b) Date Funds Required: 05/01/21 10c) Expected Completion Date: 12/31/21
 (After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

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

☒ No ☐ Yes If Yes, please describe below:

Name of NC Board Member	Relationship to Applicant

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application?

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

SECTION V - DECLARATION AND SIGNATURE

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read the documents "What is a Public Benefit," and "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of Non-Profit Corporation or School Principal - REQUIRED*

Edgar Sedano

Executive Director

PRINT Name

Title



Signature

03/24/21

Date

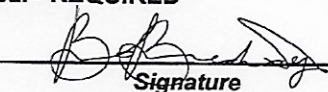
12b) Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*

Bree Breckenridge

Board Secretary

PRINT Name

Title

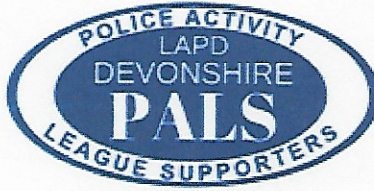


Signature

03/24/21

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



Neighborhood Council Funding Program

APPLICATION for Neighborhood Purposes Grant (NPG): North Hills West

Submitted by LAPD Devonshire PALS (EIN: 23-7270505)

ADDENDUM

4) Please describe the purpose and intent of the grant (continued):

The requested funds will be allocated to supplies at our youth center for our agricultural, robotics, and auto shop programs. Funds will be designated specifically for agricultural materials including the following: cages for pot-bellied pigs; food for pigs, chickens, and turtles; tarps; chicken wire; shavings; garden soil and seeds. Funds allocated to the auto shop program will support the purchase of tools and equipment including an engine crane, engine stand, transmission stand, floor jack, creeper, air compressor, grinder, dent puller, torch, welder, air compressor, air tools, spray guns, screwdrivers, sockets, wrenches, and jack stands. The grant also will underwrite robotics kits.

5) How will this grant be used to primarily support or serve a public purpose and benefit the public at-large (continued):

We also are providing an outlet for participating children and teens to decompress; receive mentoring, support, healthy meals and snacks; and use different tools to manage stress and anxiety - benefiting themselves, their families, and their neighborhoods.

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

DEPARTMENT OF THE TREASURY

Date: JUL 02 2020

LAPD DEVONSHIRE POLICE ACTIVITY
LEAGUE SUPPORTERS
8721 WILBUR AVE
NORTHRIDGE, CA 91324

Employer Identification Number:
23-7270505
DLN:
29053045317030
Contact Person:
MRS. JOHNSON ID# 31287
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
May 15, 2019
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.

Based on the information you submitted in your application, we approved your request for reinstatement under Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is retroactive to your date of revocation.

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

LAPD DEVONSHIRE POLICE ACTIVITY

to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Norton

Director, Exempt Organizations
Rulings and Agreements

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: North Hills West NC

SECTION I - APPLICANT INFORMATION

1a) Devonshire is S.O.L.I.D. 95-4418512 California 1/20/1993
Organization Name Federal I.D. # (EIN#) State of Incorporation Date of 501(c)(3) Status (if applicable)

1b) P.O. Box 7181 Northridge CA 91327
Organization Mailing Address City State Zip Code

1c) 10250 Etiwanda Ave., (Devonshire Police Sta.) Northridge CA 91325
Business Address (if different) City State Zip Code

1d) PRIMARY CONTACT INFORMATION:

Tapio Kartiala (Treasurer) 818-368-4861 tkartiala@gmail.com
Name Phone Email

2) Type of Organization- Please select one:

☐ Public School (not to include private schools)
 Attach Signed letter on School Letterhead

or ☒ 501(c)(3) Non-Profit (other than religious institutions)
 Attach IRS Determination Letter

N/A

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

SECTION II - PROJECT DESCRIPTION

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

Devonshire LAPD Station's gym is in need of renovation in order for the officers to continue to stay in shape for overall physical and mental health reasons. Due to the pandemic, public gyms have not been allowed to be open since the beginning of 2020 and the Stations's gym is being used now more than ever. Some of the current gym equipment will be refurbished and additional new equipment will be installed. The room will also be repainted and the following will be installed: wall wrap, paint, wall paneling, TV & mount, bluetooth stereo, industrial wall fan, and additional matting.

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)

Your NC will help provide SOLID with the much needed funds for this project which will result in an overall physical health and morale boost for the officers of Devonshire PS - one of the safest in all of LAPD. Due to many budget constraints over the years, the gym has fallen into disrepair and has been patched with fixes from SOLID funds and is overdue for a major overahaul. With the city's overall cuts to Police this past year, it is not feasible for their budget to include gym renovations. SOLID's purpose is to provide those items for Devonshire PS that are needed but not budgeted for. Our ability to fundraise has been curtailed during the pandemic and we are reaching out to our NC's to help fulfill this need. It is our belief that the renovations provided by this project will continue to enhance our officer's physical health, morale and overall community relationships in the near and long term benefitting the public at large.

SECTION III - PROJECT BUDGET OUTLINE

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

	Requested of NC	Total Projected Cost
6a) Personnel Related Expenses		
N/A	\$	\$
	\$	\$
	\$	\$
6b) Non-Personnel Related Expenses		
See attached list	\$5000.00	\$31,151.00
	\$	\$
	\$	\$

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?
☐ No ☒ Yes If Yes, please list names of NCs: GHSNC, Chatsworth NC

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
GHSNC (check rec'd)	\$3500.00	\$31,151.00
Chatsworth NC	\$1000.00	\$31,150.00
SOLID Fundraising	\$22,650.00	\$31,150.00

9) What is the TOTAL amount of the grant funding requested with this application: \$5000.00

10a) Start date: 05/01/2021 10b) Date Funds Required: 05/01/2021 10c) Expected Completion Date: 06/01/2021
 (After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

11a) Do you (applicant) have a current or former relationship with a Board Member of the NC?
☒ No ☐ Yes If Yes, please describe below:

Name of NC Board Member	Relationship to Applicant

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application?
☐ Yes ☒ No *(Please note that if a Board Member of the NC has a conflict of interest and completes this form, or participates in the discussion and voting of this NPG, the NC Funding Program will deny the payment of this grant in its entirety.)

SECTION V - DECLARATION AND SIGNATURE

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read the documents "What is a Public Benefit," and "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of Non-Profit Corporation or School Principal - REQUIRED*

Dianne Kartiala President Dianne Kartiala 4/15/21
 PRINT Name Title Signature Date

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

Yolanda Petroski Secretary Yolanda Petroski 4/16/21
 PRINT Name Title Signature Date

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



CA LICENSE #974311
14141 COVELLO STREET SUITE #9A
VAN NUYS, CA 91405
+1 8186161118

PROPOSAL

ADDRESS

Solid/LAPD Devonshire Station
P.O. BOX 7181
Northridge, CA 91327

PROPOSAL # 1699
DATE 01/28/2021

JOB LOCATION

10250 ETIWANDA AVE

DESCRIPTION	AMOUNT
GYM MINOR REMODEL	
REPLACE (7) EXISTING LIGHT FIXTURES WITH (7) NEW LED FLAT PANELS.	1,650.00
REPLACE EXISTING CEILING TILES/PANELS WITH NEW 2'X4' CEILING TILES/PANELS WITH SPLIT SCORE IN MIDDLE.	1,900.00
REMOVE PLYWOOD ON WALLS.	300.00
INSTALL DRYWALL ON WALLS IF MISSING AFTER PLYWOOD REMOVAL. INCLUDES TAPING, PRIMER AND PAINT.	1,500.00
REMOVE ALL ITEMS ON WALLS.	75.00
INSTALL (2) 10" X 40" KICKPLATES ON EXTERIOR EXIT DOOR.	150.00
REMOVE ALL RUBBER MATS ON WALLS. CUT METAL ANGLE WHERE IT MEETS MIRROR. WILL NOT CUT METAL ANGLE UNDER MIRROR.	600.00
INSTALL DRYWALL ON WALLS IF MISSING AFTER MAT REMOVAL. INCLUDES TAPING, PRIMER AND PAINT.	1,500.00
SAND, PRIME AND PAINT T-BAR GRID. INCLUDES (2) HVAC GRILLES.	650.00
SCRAPE, PRIME, PATCH, SPOT PRIME AND PAINT ALL WALLS. INCLUDES (2) DOORS.	1,250.00
EXCLUDES MOVING EQUIPMENT.	

AC 01/28/2021

TOTAL

\$9,575.00

Accepted By

Accepted Date



CA LICENSE #974311
14141 COVELLO STREET SUITE #9A
VAN NUYS, CA 91405
+1 8186161118

PROPOSAL

ADDRESS

Solid/LAPD Devonshire Station
P.O. BOX 7181
Northridge, CA 91327

PROPOSAL # 1700
DATE 01/28/2021

JOB LOCATION

10250 ETIWANDA AVE

DESCRIPTION

GROUND FLOOR HALLWAY TO BE TOUCHED UP AS NEEDED. INCLUDES
WALLS, DOOR FRAMES, AND WINDOW FRAMES.

AMOUNT

650.00

AC 01/28/2021

TOTAL

\$650.00

Accepted By

Accepted Date

THE FIRST ESTIMATE FOR THE GYM:

List of equipment we are requesting along with additional items to complete the Devonshire Area gym.

• **Gym equipment:**

- Smith Machine. Reman existing \$450
- SSF Olympic Flat bench New \$695
- SSF adjustable bench New (2x) \$1,390
- Proline lat pull/low row combo new \$2,299
- Dual Adjustable pulley new \$2,999 Commercial treadmill remanufactured \$2,499
- Commercial air bike new \$899
- 1- set kettle bells KG 4kg-20kg w- rack \$440
- 3- Olympic bars @\$175each \$525
- 800 LBS of bumper weights \$2080
- Delivery and install \$1300
- **Total: \$15,576 delivery and install**

• **Additional Items:**

- Wall wrap and paint \$1500
- 50-60 inch Tv w/mount \$500
- Bluetooth Stereo \$350
- 1 industrial wall fan \$300
- Additional matting \$2200
- Wall paneling \$500

Total: \$5350.00

- **Devonshire Gym remodel total: \$20,926.00**

GRAND TOTAL: \$31,151



IRS Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248167147
June 05, 2015 LTR 4168C 0
95-4418512 000000 00

00018446

BODC: TE

DEVONSHIRE IS S O L I D
PO BOX 7181
NORTHRIDGE CA 91327



003343

Employer Identification Number: 95-4418512
Person to Contact: Ms Wittwer
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your May 27, 2015, 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 March 1994.

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.

0248167147
June 05, 2015 LTR 4168C 0
95-4418512 000000 00
00018447

DEVONSHIRE IS S O L I D
PO BOX 7181
NORTHRIDGE CA 91327

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

Sincerely yours,

Doris P. Kenwright

Doris Kenwright, Operation Mgr.
Accounts Management Operations 1

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

DEVONSHIRE IS S.O.L.I.D.

FILE NUMBER: C1718778
FORMATION DATE: 01/20/1993
TYPE: DOMESTIC NONPROFIT CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of October 15, 2012.

Debra Bowen

DEBRA BOWEN
Secretary of State

RKS



State of California
Secretary of State

92

Statement of Information

(Domestic Nonprofit, Credit Union and Consumer Cooperative Corporations)

Filing Fee: \$20.00. If amendment, see instructions.

IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

11-013711

FILED

In the office of the Secretary of State
of the State of California

JAN 20 2011

This Space for Filing Use Only

1. CORPORATE NAME

DEVONSHIRE IS S.O.L.I.D.
17549 LAHEY ST
GRANADA HILLS, CA. 91344
C1718778

Due Date:

Complete Principal Office Address (Do not abbreviate the name of the city. Item 2 cannot be a P.O. Box.)

2. STREET ADDRESS OF PRINCIPAL OFFICE IN CALIFORNIA, IF ANY

CITY

STATE ZIP CODE

CA

3. MAILING ADDRESS OF THE CORPORATION, IF REQUIRED

CITY

STATE ZIP CODE

P.O. Box 7181

NORTHRIDGE

CA 91344

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

4. CHIEF EXECUTIVE OFFICER/

ADDRESS

CITY

STATE ZIP CODE

JIM MALKIN 17549 LAHEY ST GRANADA HILLS CA 91344

5. SECRETARY

ADDRESS

CITY

STATE ZIP CODE

RICHARD FARRA 17548 LAHEY ST GRANADA HILLS CA 91344

6. CHIEF FINANCIAL OFFICER/

ADDRESS

CITY

STATE ZIP CODE

CAROLINE EAST 11150 JELICO AVE GRANADA HILLS CA. 91344

Agent for Service of Process (If the agent is an individual, the agent must reside in California and Item 8 must be completed with a California street address (a P.O. Box address is not acceptable). If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 8 must be left blank.)

7. NAME OF AGENT FOR SERVICE OF PROCESS

JIM MALKIN

8. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

CITY

STATE ZIP CODE

17549 LAHEY ST. GRANADA HILLS CA 91344

Davis-Stirling Common Interest Development Act (California Civil Code section 1350, et seq.)

9. ☐ Check here if the corporation is an association formed to manage a common interest development under the Davis-Stirling Common Interest Development Act and proceed to Items 10, 11 and 12.

NOTE: Corporations formed to manage a common interest development must also file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code section 1363.6. Please see instructions on the reverse side of this form.

10. ADDRESS OF BUSINESS OR CORPORATE OFFICE OF THE ASSOCIATION, IF ANY

CITY

STATE ZIP CODE

11. FRONT STREET AND NEAREST CROSS STREET FOR THE PHYSICAL LOCATION OF THE COMMON INTEREST DEVELOPMENT

8-DIGIT ZIP CODE

(Complete if the business or corporate office is not on the site of the common interest development.)

12. NAME AND ADDRESS OF ASSOCIATION'S MANAGING AGENT, IF ANY

CITY

STATE ZIP CODE

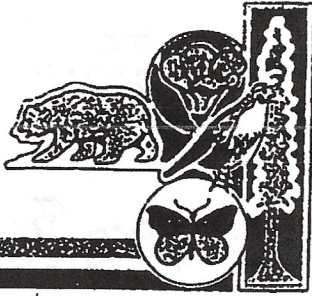
13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

1/17/11
DATE

CAROLINE EAST
TYPE/PRINT NAME OF PERSON COMPLETING FORM

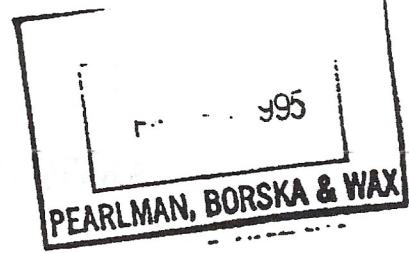
TREASURER
TITLE

Caroline East
SIGNATURE



State of California

SECRETARY OF STATE'S OFFICE



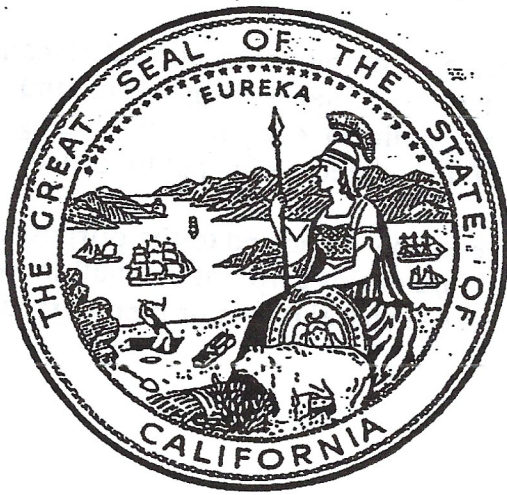
DEVONSHIRE IS S.O.L.I.D.

I, *TONY MILLER*, Acting Secretary of State of the State of California, hereby certify:

That the annexed transcript was prepared by and in this office from the record on file, of which it purports to be a copy, and that it is full, true and correct.

IN WITNESS WHEREOF, I execute
this certificate and affix the Great
Seal of the State of California this

OCT 26 1994



Tony Miller
Acting Secretary of State

1718778

FILED
In the office of the Secretary of State
of the State of California

ARTICLES OF INCORPORATION
OF
DEVONSHIRE IS S.O.L.I.D.

JAN 20 1993

March Foxg E
MARCH FOXG EU, Secretary of State

FIRST: The name of this corporation is:

DEVONSHIRE IS S.O.L.I.D.

SECOND: This corporation is a nonprofit public benefit corporation and is not organized for the private gain of any persons. It is organized under the Nonprofit Public Benefit Corporation Law for public and charitable purposes.

THIRD: The specific purposes of this corporation are:

(a) To assist the Devonshire area Community in facilitating and supporting Community Based Policing; and

(b) To assist in the Devonshire area Community's involvement in the ability to implement the program of Community Based Policing; and

(c) To provide any and all equipment and other support and resources which the City of Los Angeles may be unable to provide the law and enforcement organizations for crime prevention and law enforcement support in the Devonshire area.

FOURTH: (a) This corporation is organized and operated exclusively for charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code.

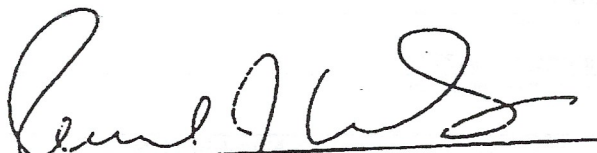
(b) No substantial part of the activities of this corporation shall consist of carrying on propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate or intervene in any political campaign (including the publishing or distribution of statements) on behalf of any candidate for public office.

(c) All corporate property is irrevocably dedicated to the purposes set forth in Article Three, above. No part of the net earnings of this corporation shall inure to the benefit of any of its directors, trustees, officers, private shareholders or members, or to the benefit of any private person.

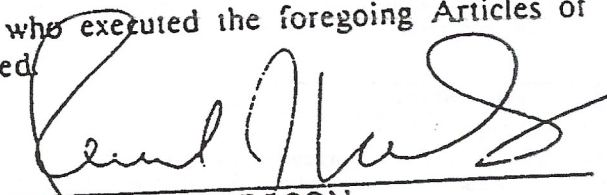
FIFTH: On the winding up and dissolution of this corporation, after paying or adequately providing for the debts, obligations, and liabilities of the corporation, the remaining assets of this corporation shall be distributed to such organization (or organizations) organized and operated exclusively for supporting the community involvement in assisting and implementing community based policing programs and other public and charitable purposes which has established its tax-exempt status under Section 501(c)(3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States internal revenue law) and which has established its tax-exempt status under Section 23701d of the California Revenue and Taxation Code (or the corresponding section of any future California revenue and tax law).

SIXTH: The name and address in this state of the corporation's initial agent for service of process is Robert J. Carlson, 16133 Ventura Boulevard, Suite 1175, Encino, California 91436.

DATED: January 18, 1993


ROBERT J. CARLSON
Incorporator

I hereby declare that I am the person who executed the foregoing Articles of Incorporation, which execution is my act and deed.


ROBERT J. CARLSON

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the
requester. Do not
send to the IRS.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Devonshire Is S.O.L.I.D.	
2 Business name/disregarded entity name, if different from above S.O.L.I.D.	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor or single-member LLC ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. ☒ Other (see instructions) ► 501(c)(3)	
4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ (Applies to accounts maintained outside the U.S.)	
5 Address (number, street, and apt. or suite no.) See instructions. PO Box 7181	Requester's name and address (optional)
6 City, state, and ZIP code Northridge, CA 9137	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
			-			-		
or								
Employer identification number								
9	5	-	4	4	1	8	5	1 2

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ►

Mark Coh

Date ►

9-26-17

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

YOUR RETURN MAILING ADDRESS

NAME: MONTEREY HILLS FOUNDATION

ADDRESS: 616 CABRILLO VILLAS

CITY: LOS ANGELES

STATE: CA ZIP CODE: 90042



FICTITIOUS BUSINESS NAME STATEMENT

TYPE OF FILING AND FILING FEE (Check one)

- ☒ Original- **\$26.00** (FOR ORIGINAL FILING WITH ONE BUSINESS NAME ON STATEMENT)
☐ Amended (New) Filing- **\$26.00** (CHANGES IN FACTS FROM ORIGINAL FILING- REQUIRES PUBLICATION)
☐ Refile- **\$26.00** (NO CHANGES IN THE FACTS FROM ORIGINAL FILING)
\$5.00 - FOR EACH ADDITIONAL BUSINESS NAME FILED ON SAME STATEMENT, DOING BUSINESS AT THE SAME LOCATION **\$5.00**- FOR EACH ADDITIONAL OWNER IN EXCESS OF ONE OWNER

The following person(s) is (are) doing business as:

*1. COMMUNITY DISASTER PREPAREDNESS FOUNDATION 2. _____
Print Fictitious Business Name(s)
** 616 CABRILLO VILLAS 616 CABRILLO VILLAS
Street address of principal place of business Mailing address if different
Los Angeles CA 90042 LA COUNTY Los Angeles CA 90042
City State /Country Zip COUNTY City State /Country Zip
Articles of Incorporation or Organization Number (if applicable): AI #ON 3903114

***REGISTERED OWNER(S):

1. <u>MONTEREY HILLS FOUNDATION</u> Full Name/Corp/LLC (P.O. Box not accepted) <u>616 CABRILLO VILLAS</u> Residence Address <u>LOS ANGELES</u> <u>CA</u> <u>90042</u> City State/Country Zip <u>CA</u> If Corporation or LLC - Print State of Incorporation/Organization	2. _____ Full Name/Corp/LLC (P.O. Box not accepted) Residence Address _____ City State/Country Zip _____ If Corporation or LLC - Print State of Incorporation/Organization
3. _____ Full Name/Corp/LLC (P.O. Box not accepted) Residence Address _____ City State/Country Zip _____ If Corporation or LLC - Print State of Incorporation/Organization	4. _____ Full Name/Corp/LLC (P.O. Box not accepted) Residence Address _____ City State/Country Zip _____ If Corporation or LLC - Print State of Incorporation/Organization

IF MORE THAN FOUR REGISTRANTS, ATTACH ADDITIONAL SHEET SHOWING OWNER INFORMATION

****THIS BUSINESS IS CONDUCTED BY: (Check one)

- ☐ an Individual ☐ a General Partnership ☐ a Limited Partnership ☐ a Limited Liability Company
☐ an Unincorporated Association other than a Partnership ☒ a Corporation ☐ a Trust ☐ Copartners
☐ a Married Couple ☐ Joint Venture ☐ State or Local Registered Domestic Partners ☐ a Limited Liability Partnership

*****The date registrant started to transact business under the fictitious business name or names listed above: N/A
(Insert N/A above if you haven't started to transact business)

I declare that all information in this statement is true and correct.

(A registrant who declares as true any material matter pursuant to Section 17913 of the Business and Professions Code that the registrant knows to be false is guilty of a misdemeanor punishable by a fine not to exceed one thousand dollars (\$1,000).)

REGISTRANT(S)/CORP/LLCNAME (PRINT) MONTEREY HILLS FOUNDATION TITLE President

REGISTRANT SIGNATURE _____ IF CORP OR LLC, PRINT NAME PATRICK BOTZ-FORBES

If corporation, also print corporate title of officer. If LLC, also print title of officer or manager.

This statement was filed with the County Clerk of LOS ANGELES on the date indicated by the filed stamp in the upper right corner.

NOTICE - IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION. EFFECTIVE JANUARY 1, 2014, THE FICTITIOUS BUSINESS NAME STATEMENT MUST BE ACCOMPANIED BY THE AFFIDAVIT OF IDENTITY FORM.

THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE).

I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.
DEAN C. LOGAN, LOS ANGELES COUNTY CLERK

BY: _____, Deputy



Los Angeles County Registrar-Recorder/County Clerk

DEAN C. LOGAN
Registrar-Recorder/County Clerk

AFFIDAVIT OF IDENTITY – FICTITIOUS BUSINESS NAME STATEMENT

If submitting the Fictitious Business Name Statement by **MAIL** or through a **THIRD PARTY**, the registered owner **MUST** bring this page to a notary to be **NOTARIZED**. In accordance with Section 17913 of the California Business and Professions Code, the following identifying information is required to file a Fictitious Business Name Statement.

Registrant Name MONTEREY HILLS FOUNDATION

Name of Business COMMUNITY DISASTER PREPAREDNESS FOUNDATION

Registrant Address 616 CABRILLO VILLAS
Street Address
LOS ANGELES CA 90042
City State/Country Zip Code

Registrant Signature _____

If the registrant is a corporation, a limited liability company, a limited partnership, or a limited liability partnership, the county clerk will require evidence issued by the Secretary of State indicating the current existence and good standing of that business entity.

*****For Mail or Third Party Requests Only*****

This certificate must be notarized by a Notary Public for all Mail and Third Party Submissions

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF _____)
County of _____) ss

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20____, by _____, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature _____

(Seal)

FOR OFFICE USE ONLY: *To be completed by Deputy County Clerk for in-person filings only*****

ID #: _____ Exp. Date: _____ Deputy Signature: _____

SubTotal 9.5% Tax Total

Staging Area Equipment:

Staging Area Secure Storage	KNAACK Jobmaster Chest - 4' W x 2.5' D x 2.5' H	\$800.00	1	\$800.00 Amazon			
Staging Area Storage Lock	Good Combination Lock for Jobsite Box	\$35.00	1	\$35.00 Amazon			
Staging Area Map Stand	66" Reinforced Artist Easel Stand	\$30.00	1	\$30.00 Amazon			
Staging Area Dry Erase Board	Magnetic Dry Erase Board 24"x36"	\$35.00	1	\$35.00 Amazon			
Staging Area Dry Erase Markers	Dry Erase Parkers - 6 pack and eraser	\$7.00	1	\$7.00 Amazon			
Staging Area Maps	Maps - Laminated	\$50.00	1	\$50.00 Amazon			
Staging Area Team Forms Kit	Expanding File Folder - 13 Pocket	\$20.00	1	\$20.00 Amazon			
Staging Area Team Clipboards	Black Plastic Clip Boards - 12 Pack	\$25.00	1	\$25.00 Amazon			
Staging Area Team Pens	Pens - 20 Pack	\$15.00	1	\$15.00 Amazon			
					\$1,017.00	\$96.62	\$1,113.62

Commercial Radios:

Staging Area Communications	10x 20 channel, 2 watt, Part 90, CDPF license	\$60.00	10	\$600.00 CPDF	Staging Area, DAT 1, 2, 3, 4, IRT 1, 2, Command Ch, Spare 1, 2		
Staging Area Communications	Field Box for Radios	\$9.98	1	\$9.98 Amazon			
					\$609.98	\$0.95	\$610.93

Medical Resupply:

Medical Resupply - Bag	Arsenal 5216 Responder Gear Bag	\$155.00	1	\$155.00 SOS Products			
Medical Resupply - Dressing	Gauze Pads Sterile - 4x4 - 100 Box	\$10.00	5	\$50.00 SOS Products			
Medical Resupply - Dressing	Non-adherent Pads Sterile - 4x3 - 100 Box	\$10.00	5	\$50.00 SOS Products			
Medical Resupply - Dressing	Krinkle Gauze Roll 4 1/2" Sterile - 100 Pack	\$190.00	1	\$190.00 SOS Products			
Medical Resupply - Dressing	Gauze Pads Non-Sterile - 4x4 - 200-Pack	\$7.00	3	\$21.00 SOS Products			
Medical Resupply - Bandages	Stretch Gauze Bandage Roll 2" - 12-Pack	\$7.50	5	\$37.50 SOS Products			
Medical Resupply - Bandages	Stretch Gauze Bandage Roll 3" - 12-Pack	\$8.50	5	\$42.50 SOS Products			
Medical Resupply - Bandages	Sensi-wrap self adherent bandage 2"x5yd - 36-pack	\$60.00	2	\$120.00 SOS Products			
Medical Resupply - Bandages	Triangular Bandage 40" - 12-pack	\$10.50	5	\$52.50 SOS Products			
Medical Resupply - Wound Cleaners	BZK Antiseptic Towelettes - 1000 pack	\$26.00	1	\$26.00 SOS Products			
Medical Resupply - Antibiotic Ointment	Triple Antibiotic Ointment .5gm - 144-Pack	\$15.00	2	\$30.00 SOS Products			
Medical Resupply - Hand Wipes	Wet Wipe Cleansing Towelettes - 1000 case	\$25.00	1	\$25.00 SOS Products			
Medical Resupply - Gloves	Nitrile Gloves Medium, Large, X-Large - 100 case	\$20.00	3	\$60.00 SOS Products			
					\$859.50	\$81.65	\$941.15
					\$2,486.48	2486.48	\$2,665.70

Staging Area Support Items (Optional):

Staging Area Shelter	10x10 with 4 removable zippered walls	\$160.00	1	\$160.00	Amazon
Staging Area Table	6' Folding Table	\$60.00	1	\$60.00	Costco
Staging Area Chairs	Folding Chair	\$45.00	2	\$90.00	Costco
Staging Area Lighting	LED Lantern AA powered - 2 Pack	\$17.00	1	\$17.00	Amazon
Staging Area Drinking Water	4.22 oz pouch - 64 Pack - 5yr shelf life	\$28.00	1	\$28.00	Amazon
Staging Area Team Lighting	Lightsticks 12hr - 20 Pack	\$20.00	1	\$20.00	Amazon
Staging Area Team Lighting	Mini flashlight 1 AA - 300 lm - 10 Pack	\$30.00	1	\$30.00	Amazon
Staging Area Team Batteries	AA Batteries - 100ct	\$25.00	1	\$25.00	Amazon
Staging Area Team PPE	Leather Gloves - large - 5pack	\$15.00	1	\$15.00	Amazon
Staging Area Team PPE	Safety Goggles	\$2.00	5	\$10.00	Amazon

\$455.00 \$43.23 \$498.23

\$3,163.92



Quote

Telephone: (714) 262-4205
 E-mail: jeff@containerprosinc.com
 Website: www.containerprofessionalsinc.com

Date: 4-8-21

Account Name: NHW Neighborhood Council
 Phone Number 818-809-9158
 E-mail secretary@nhwnc.net



BILL TO:

SHIP TO:

 Contact: _____

 Van Nuys, Ca

 2nd. Contact: _____

Container Size	DESCRIPTION	QTY	UNIT PRICE
20ft	One trip (beige)	1	4200
Other Comments or Special Instructions			SUBTOTAL
			TAX RATE
			TAX
			S & H
			Modify's
			<u>TOTAL</u>

TOTAL
4200
0
0
0
4200
9.500%
399
375
0
4974