De	partment of Neighborhoo	od Empowern	nent					-mon &
Re	porting Month:		JULY		NDITURE REPORT	EMF	OWER LA	on Extra d
	Name:		North Hills W	lest Submitted:	9/13/2016 9:30:11	Departmen	i st RHOOD EMPOWERMENT	
BU	dget Fiscal Year:	2016-2017				NEIGHAC	RHOOD EMPOWERMENT	
FII	L IN ALL THE UNSHADED	(WHITE) FIE	LDS (Must be	submitted to the Department within 10	days of Board Approva	l along with docu	mentation and	hard copy)
	EXPENDIT	URES BY LINE	ITEM (for m	ore than 12 expenditures, you may conti	nue entering on page 3	of this workshe	et - see below)	
A	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / DESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
1	New Horizons	20160531		7/1/2016- Meeting Space Location (Sams Café)	PRIOR YR OUTREACH			\$180.00
2	New Horizons	20160602		7/1/2016- Meeting Space Location (Sams Café)	PRIOR YR OUTREACH			\$360.00
3	Armando Diaz	Control Printin		7/29/16- Copies for 3 months of MERs for July GB	OPERATIONS			\$261.12
4	Friends of Mid Valley Library			7/20-NPG	PRIOR YR NPG			\$2,700.00
5	SOLID			7/14-NPG	PRIOR YR NPG			\$200.00
6	Sepulveda UUS	040916NC		7/12-The Union - Voting Place	PRIOR YR ELECTION			\$200.00
7								
8								
9								
10								
11					***************************************			
12								
	SUBTOTAL: Expenditures b	y Line Item (M	lay include tot	als on page 3, if entered)				\$3,901.12
В	CUMULATIVE EXPENDITURE	ES FROM PRIO	R MONTHS (CU	JRRENT FISCAL YR)				\$0.00
C	OUTSTANDING COMMITME	NTS (OBLIGATI	IONS)					
1								
2								
3								
4								
5								
6								
7								
8	3							
9								
10								
	SUBTOTAL: Outstanding Co	ommitments (I	ncludes total	on page 3)				\$0.00
D	Total Expenditures & Com	mitments						\$3,901.12
E			sessed, prior f	iscal years items, etc) (use '-' for credits, '+' f	or deductions)			(\$3,640.00)
F	Approved Budget 2016-20							\$37,000.00 \$36,738.88
G	Balance of Budget 2016-20	11/						330,730.88

		MONTH	LY CASH RECONCIL	IATION		
Beginning Balance (A)	Funds Deposited (B)		Available : (A+B)	Cash Spent this (D)	Month	Remaining Balance (E) = C - D
\$3,524.43	\$6,265.57	(CSD) IN THE SECTION OF	\$9,790.00		\$3,901.12	\$5,888.8
		MONTH	LY CASH FLOW AN	ALYSIS		
Category Identifier	Budget Category	Adopted Budget (A)	Total Spent this Mo nth (B)	FY 2015-16 Expenses Cleared in FY 2016-17 (C)	Total Spent in Prior Months (D)	Unspent Budget Balance (E) = A - B - D
100	Operations	\$7,000.00		\$0.00		\$6,738.8
200	Outreach	\$20,000.00	\$0.00	\$540.00		\$20,000.0
300	Community Improvement	\$8,000.00		\$0.00	52,00	\$8,000.0
400	NPG	\$2,000.00		\$2,900.00		\$2,000.0
500	Elections		\$0.00	\$200.00		\$0.0
	TOTAL	\$37,000.00	\$261.12	\$3,640.00	\$0.00	\$36,738.8
		Margarana Margarana		INDAH (A)		
le, the Treasurer ar	nd Signer of the above indic furnish additional docu	ated Council, dec	lare that the inforn	nation presented on t		
easurer Signature			Signer's Signature			
int Name	Armando Diaz		Print Name	-	Dan Gibson	
ate	9/12/2016		Date		9/12/2016	



STATEMENT UnionBank OF ACCOUNTS

UNION BANK CENTURY CITY 0206 PO BOX 512380 LOS ANGELES

CA 90051-0380

NORTH HILLS WEST NEIGHBORHOOD COUNCIL 200 N SPRING ST FL 20 LOS ANGELES CA 90012-4801

Page 1 of 2

Statement Number: 0062262795

07/01/16 - 07/29/16

Telephone Banking

For 24-hour Automated Direct Service

800-238-4486 800-826-7345(TDD)

Representatives are available Monday through Saturday

To open additional accounts, or apply for loans, call your banking office at 310-551-8900

You may also access your account online at unionbank.com

Thank you for banking with us since 2014

Save time by depositing checks directly from your smartphone or tablet. Easy Usage: It is simple to submit a deposit. Select an account, enter the amount and take a photo of both sides of the check. It's that simple. Quick Confirmation: Check your deposit status online or with your mobile app. For more information, go to: unionbank.com/mobilecheckdeposit

Business Basics Checking Summary

Account Number: 0062262795

Days in statement period: 29

Balance on 7/1 \$ Additions

3,524.43 6,265.57

Subtractions

-3,901.12-3,640.00

Payments Balance on 7/29

-261.12

Statement Average Ledger Balance

5,888.88 5,698.88

We waived your service charge this statement period.

Checks

Additions

Date	Description/Location	Reference	Amount
7/12	CITY OF LOS ANGE EFT PAYMT PPD *********0735	54679977 \$	6,265.57

Checks

Number	Date	Reference	Amount	Number	Date	Reference	Amount
5044	7/1	07679550	540.00	5046	7/20	08331296	2,700.00
5045	7/14	08436648	200.00	5047	7/12	07531450	200.00
Total						3	3,640.00

Payments online and electronic banking

Date	Description/Lo	cation				Reference	Amount
7/29	ARMANDO	DIAZ	ONLINE	PMT	WEB	50207292	\$ 261.12
	UN168619597	6POS					

Information and Banking Office Services



New Horizons: Serving Individuals with Special Needs

15725 Parthenia Street, NorthHills CA 91343

North Hills West Neighborhood Council

Event Date 5/1/2016

5/31/2016

16405 Chase St North Hills CA 91343

Invoice No.: 20160531

Attention: Dan Gibson

Event Date	Description-	Hours	Rate	Amount charge	Total Invoice
5/19/2016	Meeting	4	180.00	180.00	180.00
				<u> </u>	
				-,	
					

Total Amount Due \$180



New Horizons: Serving Individuals with Special Needs

15725 Parthenia Street, NorthHills CA 91343

North Hills West Neighborhood Council

Event Dates: 06-01-2016 06-30-2016

16405 Chase St

North Hills CA 91343

Invoice No.: 20160602

Attention: Dan Gibson

Description-	Hours	Rate	Amount charge	Total Invoice
Meeting	4	180.00	180.00	
Meeting	4	180.00	180.00	
				-
	Meeting	Meeting 4	Meeting 4 180.00	Meeting 4 180.00 180.00

Total Amount Due	\$360
Total Amount Duc	7300















12952 Washington Blvd. Los Angeles, CA 90066 **United States** Phone: 310-827-7468

alex@control-printing.com

Invoice number:

Invoice date:

7/21/2016 PAID

Payment terms:

7/21/2016

Due date:

Amount Due: \$261.12

Bill To:

Armando Diaz Adiaz9@gmail.com

Description B/W Copies	Quantity 1,088	Price Amour \$0.24	s261.12
Stapling	80	\$0.20	\$16.00
Discount		\$16.00	\$-16.00
Total		\$261.12 USD	



EMPOWER LA **Department of Neighborhood Empowerment Funding Request Form** North Hills West NC NAME: Requestor: Vicki Magaw **Budget Fiscal Year:** 2015-2016 Vendor: Friends of the Mid Valley Library Request Date: 6/13/16 Address: 16244 Northoff Street Meeting Date: 6/2/16 State: North Hills CA City: Agenda Item: 10E Phone: 818-895-3634 Zip Code: 91343 Outreach Neighborhood Puspose Grant NC Sponsored Event Operations 1,500.00 Amount:\$ Board Member Reimbursement Community Improvement Project Contract / Lease Multiple # of payments Out of State 1099 Expense One Time Expense **Monthly** If a bank card exemption of the daily \$2,500 limit is required for this request, please provide the date(s) and amount needed for the daily limit to be lifted: ALLOCATE \$1,5000 TO FRIENDS OF THE MID-VALLEY REGIONAL LIBRARY'S "HOT OFF THE PRESS" BOOK PROGRAM THIS **Public Benefit** INVOLVES THE PURCHASE OF MULTIPLE COPIES OF CURRENT POPULAR TITLES. COUNCIL IS RECOGNIZED FOR SUPPORT Description AND SUCH IS INCLUDED WITH EACH BOOK. Vote Count (Continued on page 2 if more than 20 Board Members) *Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed. Ineligible Yes No Abstain *Recused Absent **Board Position Board Member Name** X President Dan Gibson X Vice President David Phelps X Treasurer Armando Diaz X Secretary Dave Brown X Punam Gohel X Garry Fordyce X Carol Hart X David Hyman X Sam Kwasman X Antonio Lovato X Dan Mick X Kreshell Ramey Grand Total (including page 2): NC Ouorum: We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action. Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically, i.e. no additional Cash Request Form is required. Signer's Signature: Treasurer's Signature: 6-13-20/6 Print/Type name: (20250h Print/Type name: Authorization Code Stafflet(Alm/dd/yy): 1st Level Date (mm/dd/yy): Advanced Payment Approved 2nd Level Department Use Only Denied >\$2,500 NPG Sponsored Event Revised 05/25/16

North Hills West NC NAME:

Department of Neighborhood Empowerment Funding Request Form North Hills West NC NAME: Requestor: Vicki Magaw 2015-2016 **Budget Fiscal Year:** Vendor: Friends of the Mid Valley Library Request Date: 6/17/16 Meeting Date: Address: 16244 Northoff Street 6/16/16 State: CA City: North Hills Agenda Item: 12B Zip Code: 91343 Phone: 818-895-3634 NC Sponsored Event Neighborhood Puspose Grant **Operations** Outreach Amount:\$ 1,200.00 Board Member Reimbursement Community Improvement Project Contract / Lease Multiple # of payments One Time Expense ☐ Monthly Out of State 1099 Expense If a bank card exemption of the daily \$2,500 limit is required for this request, please provide the date(s) and amount needed for the daily limit to be lifted: NPG of \$1,200% to Friends of the Mid-Valley Regional Library for the purchase of: 1) Best-Rite Platinium Reversible Marker Board, \$669.99; 2) Deluxe Mini Play Cube, \$129.99; 3) Carpets for Kids ABC Cateerpillar, \$359.99. Total cost \$1,159.07 Vote Count (Continued on page 2 if more than 20 Board Members) *Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed. Ineligible **Board Position** Yes No Abstain *Recused Absent **Board Member Name** X Dan Gibson President X Vice President David Phelps X Armando Diaz Treasurer X Secretary Dave Rrown X Punam Gohel X Garry Fordyce X Carol Hart X David Hyman X Sam Kwasman X Antonio Lovato X Dan Mick X Kreshell Ramey X Madlena Minasian Grand Total (including page 2): NC Quorum: We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action. Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically, i.e. no additional Cash Request Form is required. Treasurer's Signature: Signer's Signature Dinz Print/Type name Print/Type name: Authorization Code 1st Level Staffeitialsm/dd/yy): Date (mm/dd/yy): Contract Approved 2nd Level Department Use Only NPG Sponsored Event Denied >\$2,500

Department of Neighborhood Empowerment EMPOWER LA **Funding Request Form** North Hills West NC NAME: Requestor: Yolanda Petroski 2015-2016 Budget Fiscal Year: Vendor: SOLID Request Date: 6/13/16 Address: 10250 Etiwanda Ave 6/2/16 Meeting Date: State: CA City: Northridge Agenda Item: 10D Phone: 818-363-9844 Zip Code: 91327 NC Sponsored Event Neighborhood Puspose Grant Outreach Operations 200.00 Amount:\$ Board Member Reimbursement Community Improvement Project Contract / Lease Multiple # of payments Monthly Out of State 1099 Expense One Time Expense If a bank card exemption of the daily \$2,500 limit is required for this request, please provide the date(s) and amount needed for the daily limit to be lifted: FUNDS CONTRIBUTED WILL BE USED TO DEFRAY PROGRAMMING RELATED COSTS SPECIFICALLY REGARDING VOLUNTEER **Public Benefit** SURVEILLANCE TEAM ONGOING OPERATIONS. Description Vote Count (Continued on page 2 if more than 20 Board Members) *Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed. Ineligible Absent Yes No Abstain *Recused **Board Position Board Member Name** X President Dan Gibson X Vice President David Phelps X Treasurer Armando Diaz X Secretary Dave Brown X Punam Gohel X Garry Fordyce X Carol Hart X David Hyman X Sam Kwasman X Antonio Lovato X Dan Mick X Kreshell Ramey Grand Total (including page 2): We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action. Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically, i.e. no additional Cash Request Formis required. Signer's Signature: Treasurer's Signature: 6-13-16 Diaz Print/Type name: Print/Type name: Authorization Code 1st Level State vielsm/dd/yy): 16 Date (mm/dd/yy): Approved 2nd Level Department Use Only NPG Sponsored Event Denied >\$2,500 Revised 05/25/16

North Hills West

NC NAME:

STATEMENT

Date: 8/11/2016 Statement # [100]

Sepulveda Unitarian Universalist Society

9550 Haskell Avenue North Hills, CA 91343 Phone: 818-894-9251

Fax: 818-901-2128

Email: office@sepulvedauu.org

Comments: Hours for the election were extended 2 hours in advance for poll set-up and 4 hours after the polls closed for vote tabulation and certification.



"The Onion"

Armando Diaz, Treasurer	
North Hills West Neighborhood Council	
P.O. Box 2091	
North Hills, CA 91343	
818- 809-9158	
Renter ID: NHW/NC	

BILL TO

DATE	DESCRIPTION			BALANCE		AMOUNT
4/9/16	Facility Rental, North H Bi-Annual Elections (e					\$400.00
CURRENT	1-30 DAYS PAST DUE	31-60 DAYS PAST DUE	61-90 DAYS PAST DUE	OVER 90 DA	ιΥS	AMOUNT DUE
CURRENT 0.00					0.00	AMOUNT DUE
	PAST DUE	PAST DUE	PAST DUE			
	PAST DUE	PAST DUE	PAST DUE 400.00	PAST DUE		200 400.00
	PAST DUE	PAST DUE	PAST DUE 400.00 REMITTANCE	PAST DUE	0.00	200 400.00
CURRENT 0.00	PAST DUE	PAST DUE	PAST DUE 400.00 REMITTANCE Statement #	PAST DUE	0.00 040916N 6-10-16	200 400.00

Make all checks payable to Sepulveda Unitarian Universalist Society

Thank you for your business!