# Monthly Expenditure Report



Reporting Month: June 2024

Budget Fiscal Year: 2023-2024

NC Name: North Hollywood West Neighborhood Council

Monthly Cash Reconciliation						
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available	
\$18450.40	\$7909.98	\$10540.42	\$5000.00	\$0.00	\$5540.42	

Monthly Cash Flow Analysis							
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available		
Office		\$409.98		\$0.00			
Outreach	\$19824.00	\$2500.00	\$8290.21	\$0.00	\$8290.21		
Elections		\$0.00		\$0.00			
Community Improvement Project	\$14294.21	\$0.00	\$11634.21	\$0.00	\$11634.21		
Neighborhood Purpose Grants	\$9116.00	\$5000.00	\$-7384.00	\$5000.00	\$-12384.00		
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$22783.81			

	Expenditures							
#	Vendor	Date	Description	Budget Category	Sub-category	Total		
1	Neighborhood Council Budget Day	05/24/2024	17. DISCUSSION AND POSSIBLE ACTION: to approve a contribution of \$1000 to Neighborhood Council Budget Day.	General Operations Expenditure	Outreach	\$1000.00		
2	City of Los Angeles Budget Advocacy	05/24/2024	18. DISCUSSION AND POSSIBLE ACTION: to approve a contribution of \$1000 to the City of Los Angeles Budget Advocacy.	General Operations Expenditure	Outreach	\$1000.00		
3	City of Los Angeles Congress of Neighborhoods - Event	05/24/2024	19. DISCUSSION AND POSSIBLE ACTION: to approve a contribution of \$500 to City of Los Angeles Congress of Neighborhoods - Event.	General Operations Expenditure	Outreach	\$500.00		
4	Parents, Educators/Teachers & Students in Action (PESA)	05/24/2024	8. DISCUSSION AND POSSIBLE ACTION: to approve an NPG application from PESA for \$5000 to operate their summer internship program.	Neighborhood Purpose Grants		\$5000.00		
5	WENDY L. MOORE / MOORE BUSINESS RESULTS	06/03/2024	Communication and Developer Services, as Invoiced, provided by Wendy L. Moore of Moore Business Results.	General Operations Expenditure	Office	\$216.24		
6	City of Los Angeles - Department of Neighborhood Empowerment	06/07/2024	Operating expenditure for an annual Zoom license	General Operations Expenditure	Office	\$193.74		

Subtotal:

\$7909.98

Outstanding Expenditures								
#	Vendor	Date	Description	Budget Category	Sub-category	Total		
1	She is Hope LA	06/07/2024	9. DISCUSSION AND POSSIBLE ACTION: to approve an NPG application from She is Hope LA for \$5000 to purchase personal hygiene supplies and basics for moms and kids.	Neighborhood Purpose Grants		\$5000.00		
	Subtotal: Outstanding	g				\$5000.00		

### Neighborhood Council Funding Contribution Form Congress of Neighborhoods/Budget Advocacy Special Accounts

I, Gregory Wright (President or Vice-President [VP] name), declare that I am the President or VP of the Neighborhood Council (NC) and that on May 23, 20: (meeting date), a Brown Act-noticed public meeting was held by the NC with a quorum of 8 (number) board members present and that by a vote of 8 (number) Yea, 0 (number) Nay, and 0 (number) Abstentions, the NC approved funding contribution(s) from our current Fiscal Year budget for the following Department of Neighborhood Empowerment Special Account(s):

Neighborhood Council Budget Day in the amount of:

\*<u>1000</u> By checking "Neighborhood Council Budget Day," you will be contributing to cover expenses associated with Budget Day, additional Budget workshops, and essential administrative needs.

☑ Neighborhood Council Budget Advocacy (L.A. Charter Section 909) in the amount of:

\*<sub>\$</sub> 1000

L.A. Congress of Neighborhoods (LAAC 22.801) – Event in the amount of:

\*<sub>\$</sub> 500

L.A. Congress of Neighborhoods (LAAC 22.801) – EmpowerLA Awards in the amount of:

\*\$

Therefore, the Neighborhood Council requests that the Office of the City Clerk, NC Funding Program issue payment from our NC's current Fiscal Year budget to the Department of Neighborhood Empowerment for the purpose(s) as indicated above.

Contributions for Neighborhood Council Budget Advocacy and the Congress of Neighborhoods support activities and programs that advance the purpose of the Neighborhood Council System as determined by the Department of Neighborhood Empowerment. Funds do not support any specific entity, alliance, or group.

of President of Signature

5/24/24 Date

To request payment, the NC Treasurer must submit this completed form in the NC Funding System portal, Outreach Category, as the "Payment Request Document" along with the respective Board Action Certification (BAC) form. Forms must be submitted by the annual deadline for check payment requests (normally June 1<sup>st</sup>) in order to process the payment from current Fiscal Year funds.

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

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

- You may also search the respective Special Account in the Vendor section of the Funding System portal when submitting the payment request(s).
- Please submit separate payment requests for each Special Account contribution.

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Office of the City Clerk							
Administrative Services Division						( <b>1</b>	3 01 105 day
Neighborhood Council (NC) Funding Prog	ram						
Board Action Certification (BAC) Form						·	GT SOLO THE
NC Name: North Hollywood West			Meeting Date: 5	/23/24			
Budget Fiscal Year: 2023-24			Agenda Item No	: 17			
Board Motion and/or Public Benefit Statement (CIP and NPG):	DISCUSSION A	ND POS	SIBLE ACT	TION: to a	pprove a d	contribution	of \$1000
	to Neighborhoo	d Council	Budget Da	ay.			
Method of Payment: (Select One)	Check		Credit Card		🗆 Board	Member Reimbu	irsement
Recused Board Member	s must leave the room prio		e Count sion and may not	return to the ro	om until after th	ne vote is comple	te.
Board Member's First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Greg Wright	At Large - 2027	Х					
Leslie Ann Myrick-Rose	At Large - 2025	Х					
Vicki Corona	At Large - 2027	Х					
Holli Johnson	At Large - 2025					Х	
Adriana Gomez	Business - 2027				Х		
Jonathan Rogers	Resident - 2025	Х					
Charles Savinar	Resident - 2027				Х		
Jim Kompare	Resident - 2025	Х					
John Dinkjian	Resident - 2027	X					
Carol Rose	Senior/Youth - 2027	X					
Lorraine Matza	Community - 2027	X					
	Senior/Youth	~					
Vacant	++						
Vacant	Community						
Board Quorum: 7	Total:	8			2	1	
We, the authorized signers of the above meeting was held in accordance with all meeting where a quorum of the Board wa DocuSigned by:	laws, policies, and procedu	ncil, declare the ures. The above	at the information was approved b	n presented on t	this form is accu hood Council Bo	ard, at a Brown	te, and that a public Act compliant public
Authorized Signatures she	Mysickers		Authorized Sign	ature:	12	TIN	
Print/Type Name: Leslie Ann Myri			Print/Type Nam	Glegivan	ght J	7	
Date: 5/23/24			Date: 5/23/24	1		,	

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Office of the City Clerk						()	
Administrative Services Division							Star Star Bar
Neighborhood Council (NC) Funding Progr	ram						
Board Action Certification (BAC) Form						ششيك ا	CALEND THE
NC Name: North Hollywood West			Meeting Date: 5	5/23/24			
Budget Fiscal Year: 2023-24			Agenda Item No	p: 18			
Board Motion and/or Public Benefit	DISCUSSION A	ND POS		TION to a	nnrove a r	contribution	of \$1000
Statement (CIP and NPG):	to the City of Lo				pprove a v	Jonandador	10101000
	to the only of Ed	o / ingeloc		avoodoy.			
Method of Payment: (Select One)	Check		Credit Card		Board	Member Reimbu	ursement
Recused Board Member	s must leave the room prio		Count	return to the ro	om until after t	he vote is comple	te.
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Greg Wright	At Large - 2027	X		Austani	Absent	incligible	
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Vicki Corona	At Large - 2027	X					
		~				X	
Holli Johnson	At Large - 2025				×	^	
Adriana Gomez	Business - 2027				X		
Jonathan Rogers	Resident - 2025	Х					
Charles Savinar	Resident - 2027				X		
Jim Kompare	Resident - 2025	Х					
John Dinkjian	Resident - 2027	Х					
Carol Rose	Senior/Youth - 2027	Х					
Lorraine Matza	Community - 2027	Х					
Vacant	Senior/Youth						
Vacant	Community						
							N
Board Quorum: 7	Total:	8			2	1	
We, the authorized signers of the above meeting was held in accordance with all meeting where a quopum of the board wa	laws, policies, and procedu	ncil, declare tha ures. The above	t the informatio was approved t	n presented on to by the Neighbor	this form is accu hood Council Bo	arate and comple bard, at a Brown	te, and that a public Act compliant public
Authorized Signature D5BAD946CFC437	- mar to to	•	Authorized Sign	ature	A	Apo	
Print/Type Name: Leslie Ann Myri	ck-Rose		Print/Type Nam	Greg Wri	ght		
			Date: 5/23/24				

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Name: North Hollywood West			Meeting Date: Agenda Item N				
idget Fiscal Year: 2023-24							of \$500 to
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Holli Johnson	At Large - 2025					X	
110111 22	Business - 2027				X		
Adriana Gomez	Resident - 2025	Х	1	1			
Jonathan Rogers	Resident - 2023		1		X		
Charles Savinar		×					
Jim Kompare	Resident - 2025	X				1	
John Dinkjian	Resident - 2027	<u>X</u>					
Carol Rose	Senior/Youth - 2027	X	+				
Lorraine Matza	Community - 2027	X				+	
Vacant	Senior/Youth						
Vacant	Community						
					2	1	
Board Quorum: 7 We, the authorized signers of the above meeting was held in accordance with meeting where a quorum of the Board DocuSigned by:	all laws, policies, and proce		that the inform	ation presented o red by the Neighb	n this form is ac	curate and com	plete, and that a pu vn Act compliant pu
L P O	- Mysicker	6	Authorized	Signature	PR	T/	
Authorized Signature 22. Print/Type Name: Leslie Ann M			Print/Type	Name: Greg	tright /	M	
Date: 5/23/24			Date: 5/2	3/24		/	

### 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 Hollywood West Neighborhood Council

### SECTION I- APPLICANT INFORMATION

1a)	Parents, Educators/Teachers & Students in A Organization Name	and a statement	46-2694430 deral I.D. # (EIN#)	Ca. State of Incorporation	12/20/13 Date of 501(c)(3) Status (if applicable)
1b)	14500 Roscoe Blvd 4th Floor, Room 18	I	Panorama City	Ca.	91402
	Organization Mailing Address	Cit	y	State	Zip Code
1c)					
	Business Address (If different)	Cit	y	State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:				
	Seymour Amster	81	8-943-0613	Seymour.Am	ster@pesa-edu.org
	Name	P	hone	Email	nen en anter
2)	Type of Organization- Please select one: Public School (not to include private schools) Attach Signed letter on School Letterhead	or		a-Profit (other than religious ) etermination Letter	institutions)
3)	Name / Address of Affiliated Organization (if appli	cable)	City	State	Zip Code

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

# 2024 SUMMER INTERNSHIP PROGRAM FOR YOUTH RESIDING IN THE NORTH HOLLYWOOD WEST NEIGHBORHOOD COUNCIL

Parents, Educators/Teachers & Students in Action (PESA) is a leading community-based organization that has been providing economic development opportunities to youth for over a decade. PESA provides youths with the opportunity to engage in a strength-based assessment that identifies the careers their strengths are best suited for. PESA then provides educational and career assistance, and when needed mental health support, to get them on the career path they are interested in. PESA is the only Los Angeles County community-based organization addressing chronic absenteeism and as such PESA is instrumental in breaking the cycle of homelessness.

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 purpose of this grant would be to provide a summer internship opportunity for youth residing in this Neighborhood Council District. The internship would be composed of having each youth complete a strength-based assessment to determine what career best suits them. The internship would be composed of educating the youth on basic office skills that they can use for their future career. As well as workshops on Financial Literacy, Civic Engagement, and College Readiness. They would also engage in a community project that they could practice using the skills they have been taught.

### SECTION III - PROJECT BUDGET OUTLINE

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

Personnel Related Expenses	Requested of NC	Total Projected Cost
Office Skills and Civic Engagement Workshops	\$ 1,500.00	\$ 3,000.00
Financial Literacy Workshops	\$ 1,500.00	\$ 3,500.00
High School and College Readiness Workshops	\$ 1,000.00	\$ 1,400.00
Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Materials	\$ 1,000.00	\$ 2,000.00
	\$	\$

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

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: \$\_5,000.00

10a) Start date: 06 /15 /20240b) Date Funds Required: 06 / 15 / 20240c) Expected Completion Date: 08 / 15 / 2024 (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 Ves	If Yes, please describe below:	
Name of NC Board	<b>Nember</b>	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 <u>\*(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.)</u>

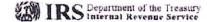
SECTION V - DECLARATION AND SIGNATURE

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\*

Seymour Amster	Chief Executive O	Officer	$\langle \ $	4/16/24
PRINT Name	Title		Signature	Date
12b) Secretary of Non-profit Corpora	tion or Assistant School	Principal - RE		ch /
Francine Amster	Secretary	710	May D-C	Chef in 4/16/24
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 <u>clerk.ncfunding@lacity.org</u> for instructions on completing this form



OGDEN UT 84201-0029

In reply refer to: 4077591934 Oct. 28, 2015 LTR 4168C 0 46-2694430 000000 00 00030922 BODC: TE

PARENTS EDUCATORS-TEACHERS & STUDENTS IN ACTION 18017 CHATSWORTH ST GRANADA HILLS CA 91344-5608

007650

Employer Identification Number: 46-2694430 Person to Contact: Ms. Wiles Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Oct. 05, 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 December 2013.

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)(l) and 170(b)(l)(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.

4077591934 Oct.-28, 2015 LTR 4168C 0 46-2694430 000000 00 00030923

PARENTS EDUCATORS-TEACHERS & STUDENTS IN ACTION 18017 CHATSWORTH ST GRANADA HILLS CA 91344-5608

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

. . . . . . .

Sincerely yours,

Juppe

Jeffrey I. Cooper Director, EO Rulings & Agreement

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Form <b>W-9</b>	
(Rev. October 2018)	
Department of the Treasun Internal Revenue Service	y

### **Request for Taxpayer** Identification Number and Certification

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

		Loove this line blank	

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.							
	Parents,Educators/Teachers & Students in Action 2 Business name/disregarded entity name, if different from above							•
Print or type. See Specific Instructions on page 3.	S Chick 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 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) ▶       Non-Profit Corporation exempt under 501 (c)(3)         5 Address (number, street, and apt. or suite no.) See instructions.       Requester's name a         18017 Chatsworth Street #337       6 City, state, and ZIP code         Granada Hills, Ca. 91344       7 List account number(s) here (optional)	certa instru Exen Code (Applie	ain ent uction npt pa nption e (if an	tities is on iyee i fror iy) :ounts	, not pag code n FA	individ e 3): (if any TCA re ined out	bly onl duals; )	993
Par	Taxpayer Identification Number (TIN)           your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid         Social sec	-unitar a	numb					
backu	up withholding. For individuals, this is generally your social security number (SSN). However, for a					Т	T	
reside	ent alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other es, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>	-			-			
TIN, la	ater.						_	-
Note:	If the account is in more than one name, see the instructions for line 1. Also see What Name and Employer	Identi	ficat	on n	umb	er		]
Numb	ber To Give the Requester for guidelines on whose number to enter.	- 2	6	9	4	4	3 0	]

#### Certification Part II

Under penalties of perjury, I certify that:

- 1. 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
- 2. 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
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. 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 ►	-	Date ► 4/16/24

### **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 taxpaver 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-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.

· Form 1099-INT (interest earned or paid)



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

PARENTS, EDUCATORS / TEACHERS & STUDENTS IN ACTION

18017 CHATSWORTH STREET UNIT #337 GRANADA HILLS, CA 91344-5608

1

14500 ROSCOE BLVD FLOOR #4TH PANORAMA CITY, CA 91402-4190

-	ACCOUNT NO.	FUND/CLASS	Business TAX ISS DESCRIPTION	STARTED	STATUS				
	0002893373-0001-4	L049	Professions / Occupations	03/01/2016	Active				
- SSUED F	PARENTS, EDUCATORS / TE 18017 CHATSWORTH STREI GRANADA HILLS, CA 91344-	et unit #337	ISSUED FOR TAX	ISSUED FOR TAX COMPLIANCE PURPOSES ONLY					
0	14500 ROSCOE BLVD F	LOOR #4TH	· NOT A LICENSE, I	PERMIT, OR LAND USE A ISSUED BY:	AUTHORIZAT				
	PANORAMA CITY, CA 9	1402-4190		la	n				
	"No registration certificate or permit issued under the provisions of the Business Tax ordinances of the LAMC, or the payment of any tax required under the provisions of the Business Tax ordinances of the LAMC shall be construed as authorizing the conduct or continuance of any illegal business or of a legal business in an illegal manner."								

r									
Office of the City Clerk						1			
Administrative Services Division							300 100 100		
Neighborhood Council (NC) Funding Prog	ram								
Board Action Certification (BAC) Form						شنشينية	A soil ist		
NC Name: North Hollywood West			Meeting Date: 5	6/23/24					
Budget Fiscal Year: 2023-24	T		Agenda Item No	o: 8					
Board Motion and/or Public Benefit Statement (CIP and NPG):	DISCUSSION A	ND POS	SIBLE ACT	TION: to a	pprove ar	NPG app	lication from		
	PESA for \$5000								
						<u> </u>			
Method of Payment: (Select One)	Check	Vot	Credit Card		L Board	d Member Reimb	ursement		
Recused Board Member	s must leave the room prior			return to the ro	om until after t	he vote is comple	ete.		
Board Member's First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused		
Greg Wright	At Large - 2027	Х							
Leslie Ann Myrick-Rose	At Large - 2025	х							
Vicki Corona	At Large - 2027		X						
Holli Johnson	At Large - 2025					X			
Adriana Gomez	Business - 2027	Х							
Jonathan Rogers	Resident - 2025	Х							
Charles Savinar	Resident - 2027				Х				
Jim Kompare	Resident - 2025	Х							
John Dinkjian	Resident - 2027	X							
Carol Rose	Senior/Youth - 2027	X							
Lorraine Matza	Community - 2027	X							
	Senior/Youth	^							
Vacant	++								
Vacant	Community								
Board Quorum: 7	Total:	8	1		1	1			
We, the authorized signers of the above meeting was held in accordance with all meeting where a quorum of the Board wa DocuSigned by:	laws, policies, and procedu	icil, declare tha res. The above	t the information was approved b	n presented on t by the Neighborh	his form is accu nood Council Bo	urate and comple bard, at a Brown	te, and that a public Act compliant public		
Authorized Signature IL.	mpretters		Authorized Signa	ature.		2/1	L		
Print/Type Name: Leslie Ann Myri	ck-Rose		Print/Type Nam	e: Grea Mari	abt	VTK			
Date: 5/23/24		ана арала ала арада жала ар	Date: 5/23/24			A			
5/23/24			0120124	5/23/24					



Mr. Greg Wright North Hollywood West NC 12814 Victory Blvd. North Hollywood, CA 91606 Invoice #NoHoWest 2024 0531 Number

Date May 31, 2024

Please remit to:

Wendy L. Moore Moore Business Results 19300 Rinaldi, #7524 Northridge, CA 91327

818 252-9399 http://www.moorebusinessresults.com/ City of LA Tax #549794-29

Communications services for NoHoWest.	216.24
Total Amount Due:	\$216.24

Thank you for your business. We appreciate working with you.

Please pay within 21 days of invoice date. Payments not received by that date may incur a late fee of \$25. We may also assess a 1.5% interest charge per month on late payments. Interest accrues retroactively from the invoice date. If the invoice is not paid within 90 days, additional collections fees may apply. Returned checks are \$25.

Date	Task	Hours
	Calendar: Sr. Symposium. Social, Mother's Day, Memorial Day, fire	
5/8/2024	service day, readyla, symposium, adoption day	0.42
	Agenda. Calendar: Fireworks buyback, NoHo Summer Nights, Big Dog	
5/13/2024	Walk. Eblast. Social	1.00
5/22/2024	Youth internship on social	0.17
	Total	1.59

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Office of the City Clerk						4					
Administrative Services Division						and the second sec					
Neighborhood Council (NC) Funding Prog	ram										
Board Action Certification (BAC) Form						<u>Ca</u>					
NC Name: North Hollywood West			Meeting Date: 8/11/2023								
Budget Fiscal Year: 2023-24 Board Motion and/or Public Benefit			Agenda Item N								
Statement (CIP and NPG):		DISCUSSION AND POSSIBLE ACTION: to approve the FY2023-2024 Nort									
	Hollywood Wes	st NC bud	get and ac	dmin packe	et.						
Method of Payment: (Select One)	Check		Credit Card		🗌 Boan	d Member Reimb	ursement				
			e Count								
<u>i i na na manana na si sa si</u>	rs must leave the room pri	1	1	T	1	T	r				
Board Member's First and Last Name Greg Wright	Board Position At Large - 2027	Yes X	No	Abstain	Absent	Ineligible	Recused				
Leslie Ann Myrick-Rose	At Large - 2025	x									
Vicki Corona	At Large - 2023	X	<u> </u>	+							
		<u>^</u>				1					
Holli Johnson Adriana Gomez	At Large - 2025 Business - 2027				X						
Jonathan Rogers	Resident - 2025					X					
Charles Savinar	Resident - 2027	X		<u> </u>							
Jim Kompare	Resident - 2025	X			<u> </u>						
John Dinkjian	Resident - 2027	X	<u> </u>		<u> </u>	+					
Carol Rose	Senior/Youth - 2027	X									
Lorraine Matza	Community - 2027			_	X						
Vacant	Senior/Youth										
Vacant	Community										
					l						
					1						
· · · · · · · · · · · · · · · · · · ·						1					
Board Quorum: 7	Total:	7		1	2	1					
We, the authorized signers of the above meeting was held in accordance with all meeting where a quorum of the Bpard wa	laws, policies, and proced										
Authorized Signature	- Peros	(=1)00	Authorized Sig		<u>SE</u>	e ffer					
	ck-Rose			<sup>me:</sup> Greg Wri	ignt						
<sup>Date:</sup> 8/11/2023			Date: 8/11/2	2023							

## CITY OF LOS ANGELES

### BOARD OF NEIGHBORHOOD COMMISSIONERS

VACANT PRESIDENT

JOY ATKINSON VICE PRESIDENT

LEONARD SHAFFER DEBBIE WEHBE MAGGIE QUIROZ KEREN WATERS RANDELL ERVING DOUGLAS EPPERHART

Email: commission@empowerla.org

### CALIFORNIA



KAREN BASS MAYOR

# NEIGHBORHOOD COUNCILS EMPOWER LA

20° FLOOR, CITY HALL 200 NORTH SPRING STREET LOS ANGELES. CA 90012

TELEPHONE (213) 978-1551 TOLL-FREE 3-1-1 FAX: (213) 978-1751 E-MAIL: EmpowerLA@lacity.org

VANESSA SERRANO INTERIM GENERAL MANAGER

ERICK MUÑOZ COMMISSION EXECUTIVE ASSISTANT

www.EmpowerLA.org

### **INVOICE # 25-041**

# BILL TO: North Hollywood West Neighborhood Council

Address: P.O. Box 101, 12814 Victory Blvd.,

North Hollywood, CA 91606

Email: treasurer@nohowest.org

DATE: April 25, 2024

## **DUE DATE: Upon Received**

Quantity	Item Description	Unit Price	Amount
1.00	Commodity Code 4316: Software-Zoom Enterprise host 05062024-05052025	\$140.57	\$140.57
1.00	Commodity Code 4316: Software-Zoom Audio 05062024-05052025	\$53.17	\$53.17
		<b>Total Cost</b>	\$193.74

Please make Checks Payable to:

# **City of Los Angeles - Department of Neighborhood Empowerment**

200 N. Spring Street, Suite 2005

Los Angeles, CA 90012

Office of the City Clerk						-()	105 42	
Administrative Services Division								
Neighborhood Council (NC) Funding Progr	am					rife y ha		
Board Action Certification (BAC) Form				140104				
NC Name: North Hollywood West			Meeting Date: 3/13/24 Agenda Item No: 12					
Budget Fiscal Year: 2023-24 Board Motion and/or Public Benefit								
Statement (CIP and NPG):	DISCUSSION A expenditure of \$	ND POSS 200 for a	SIBLE AC	TION: to a soom licen	approve ar se.	n operating		
Method of Payment: (Select One)	Check		Credit Card		🗌 Board	Member Reimbo	ursement	
Recused Board Member	s must leave the room prio		Count ion and may not	t return to the ro	om until after t	he vote is comple	ete.	
Board Member's First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused	
Greg Wright	At Large - 2027	Х						
Leslie Ann Myrick-Rose	At Large - 2025	Х						
Vicki Corona	At Large - 2027	Х						
Holli Johnson	At Large - 2025	Х						
Adriana Gomez	Business - 2027	Х						
Jonathan Rogers	Resident - 2025	Х						
Charles Savinar	Resident - 2027	Х						
Jim Kompare	Resident - 2025	Х						
John Dinkjian	Resident - 2027				Х			
Carol Rose	Senior/Youth - 2027	Х				ļ		
Lorraine Matza	Community - 2027	Х						
Vacant	Senior/Youth							
Vacant	Community							
Board Quorum: 7	Total:				1		ate and that a public	
We, the authorized signers of the above meeting was held in accordance with al meeting where a quorum of the Board w	I laws, policies, and proced	incil, declare th lures. The abov	at the informati e was approved	on presented on by the Neighbo	this form is acc rhood Council B	oard, at a Brown	a Act compliant public	
Authorized Signature			Authorized Sig	<u> </u>	-11	ZT	>	
Print/Type Name: Leslie Ann My	rick-Rose		Print/Type Na	Coregan	right /	TK		
Date: 3/13/24			Date: 3/13/2	24	0			