Monthly Expenditure Report



Reporting Month: March 2022 Budget Fiscal Year: 2021-2022

NC Name: Woodland Hills-Warner Center Neighborhood Council

Monthly Cash Reconciliation						
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available	
\$30364.01	\$2669.81	\$27694.20	\$0.00	\$0.00	\$27694.20	

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office		\$999.81		\$0.00	
Outreach	\$19400.00	\$70.00	\$8394.20	\$0.00	\$8394.20
Elections		\$0.00		\$0.00	
Community Improvement Project	\$5000.00	\$0.00	\$5000.00	\$0.00	\$5000.00
Neighborhood Purpose Grants	\$7600.00	\$1600.00	\$4300.00	\$0.00	\$4300.00
Funding Requests Und	der Review: \$0.00	Encumbrai	nces: \$0.00	Previous Expend	itures: \$11635.99

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	EIG CONSTANTCONTACT.CO	03/10/2022	out reach emails	General Operations Expenditure	Outreach	\$70.00
2	GRASSHOPPER.COM	03/13/2022	phones	General Operations Expenditure	Office	\$31.81
3	THE UPS STORE 4033	03/14/2022	mail box	General Operations Expenditure	Office	\$480.00
4	STORAGE ETC. WARNER CE	03/19/2022	storage	General Operations Expenditure	Office	\$488.00
5	Lions of Lockhurst	02/17/2022	Lockhurst Elementry student program	Neighborhood Purpose Grants		\$1600.00
	Subtotal:					\$2669.81

Outstanding Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
	Subtotal: Outstanding					\$0.00



Print

Billing Activity - Payments

Woodland Hills-Warner Center Neighborhood Council

Attn: paul lawler 200 N Spring St Los Angeles CA 90012 US

P: 8182228222

Payments from 03/04/2022 to 04/03/2022

Date Description Charge Amount Credit Amount

Today's Date: 04/03/2022

User Name:

03-10-2022 11:13:43 Payment - Credit Card (MasterCard) AM *******8073 \$70.00

Billing questions? Contact Support

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



Account Information

WHWCNC Peter Fletcher 20929 Ventura Boulevard Woodland Hills, CA 91364, US

Bill Date:	03/12/22
Usage Period:	02/12/22 - 03/12/22

Charges Summary

Previous Invoice Amount:	\$33,41
Current Charges:	
Recurring Charges	
Non-Recurring Charges	\$0.00
Usage Charges	\$1.71
Taxes & Surcharges	\$6.49
Federal USF	\$1.61
Total Charges:	\$31 <u>.</u> 81
Debits & Credits	\$0.00
Payments	\$31.81
Balance Due:	\$0.00

Grasshopper News

At Grasshopper, we know that entrepreneurs just like you can change the world, one small business at a time.

That's why we started the Entrepreneur Movement. Watch the video at grasshopper.com/idea and tell everyone you know about Grasshopper.

Partner Offers



Detail of Current Charges

Payments & C	redits		
Date	Detail	Paym ₍	ent/Credit
03/12/22	Monthly Payment, Paid on Master Card ending in 8073		\$31.81
		Total Payments & Credits:	\$31.81

Recurring Charges		
Current Period		
Pay As You Grow Plan, 03/12/22 - 04/12/22		\$12.00
Voicemail Transcription, 03/12/22 - 04/12/22		\$10.00
	Total Recurring Charges:	\$22.00

Minute Charge	es Summary				
Туре	Included	Used	Overage	Rate	Charge
Domestic	0 minutes	28.6	28.6 minutes	0.060	\$1.71
			Total Minus	te Charges:	\$1.71

Taxes & Surch	arges	
Туре	Detail	Charge
Tax	Utility Users Tax	\$1.80
Tax	CA Teleconnect Fund	\$0.07
Tax	Universal Lifeline Telephone Service Charge	\$0.51
Tax	CA High Cost Fund A	\$0.07
Tax	FCC Regulatory Fee (Wireline)	\$0.03
Tax	CASF	\$0.10
Tax	CA TRS	\$0.12
Tax	CA PUC Fee	\$0.04
Surcharge	Regulatory Recovery Fee	\$3.75
	Total Taxes & Surcharges:	\$6.49

Federal Univer	sal Service Fund	
Туре	Detail	Charge
Surcharge	Fed Universal Service Fund	\$1 <u>.</u> 61
_	Total Federal USF Contributions:	\$1.61

Summary of Minute Charges

By Number		
Number		Total Minutes
+18186399444		28.6
	Total Minutes Used:	28.6

Explanation of Terms

Domestic: Calls that are placed inside the United States and its provinces.

and **Voice Over:** Use of voice talents for recording of main greeting or extensions.

Off Shore: Calls placed outside of U.S. borders.

Bonus Minutes: Extra minutes that are credited to your account.

International: Calls placed from a country other than the U.S.

Set Up Support: Help setting up your account and customizing your features.

Federal Universal Service Fund The USF contribution factor established by the Federal Communications Commission is

Statement Summary

Page 3 of 3



applicable to telecommunications services and is adjusted by the FCC every calendar quarter.

The UPS Store #4033 20929 VENTURA BLVD STE 47 WOODLAND HILLS, CA 91364-2334 818-702-0456

Terminal....: POS4033C Date.: 3/14/2022 Employee...: 155775 Time.: 10:05 AM Cashier's Name Danny COPY ITEM NAME PRICE TOTAL Business LG Mailbox (NR) \$480.00 12 @ \$40.00 Tax \$0.00 Term - 1/19/2022 to 4/18/2023 Business LG Mailbox (NR) \$0.00 3 @ \$0.00 Tax \$0.00 (Free Months) 24 Hour Access (NR) \$0.00 12 @ \$0.00 Tax \$0.00 Call In Service (NR) \$0.00 12 @ \$0.00 Tax \$0.00 Package Notification via Email (NR) \$0.00 12 @ \$0.00 Tax \$0.00 Package Notification via Text Message (NR) \$0.00 12 @ \$0.00 Tax \$0.00 Mail Notification via Text Message (NR) \$0.00 \$0.00 Tax \$0.00 Late Fee (NR) \$0.00 1 @ \$0.00 Tax \$0.00 Subtota1 \$480.00 Shipping/Other Charges \$0.00 Total tax \$0.00 Total \$480.00

Items Designated NR are NOT eligible for Returns, Refunds or Exchanges.

\$480.00

Cards

US Postal Rates Are Subject to Surcharge.



Storage Etc. - Warner 6030 Canoga Ave Woodland Hills, CA 91367 818-347-7160

Payment Receipt

W.H. W.C. Neighborhood Council

c/o: Paul Lawler

20929 Ventura Blvd. Ste 47-535 Woodland Hills CA 91367 Date Printed March 19, 2022

Payment Date March 19, 2022 1:16 PM

Unit 3149 Receipt Number 113535

Paid Thru May 31, 2022

By RI

Date	Unit	Description	Charge	Discount	Tax	Total	Payment	Method
04/01/22	3149	Rent 4/1-4/30	235.00	0.00	0.00	235.00	235.00	Master Card
04/01/22	3149	Insurance 4/1-4/30	9.00	0.00	0.00	9.00	9.00	Master Card
05/01/22	3149	Insurance 5/1-5/31	9.00	0.00	0.00	9.00	9.00	Master Card
05/01/22	3149	Rent 5/1-5/31	235.00	0.00	0.00	235.00	235.00	Master Card

Taxes	0.00
Payment (less tax)	488.00
Payment Subtotal	488.00
Credits Applied	0.00
Refunds Applied	0.00
Total Applied to Account	488.00

Current Account Balance

0.00

Paid By Master Card ****8073

Paid Thru Date May 31, 2022

Transaction Type Sale

Authorization 038362 Reference 101501

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

X

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: Wa	rner Cent	ter	
SECTION I- APPLICANT INFORMATION		MAZ HAN		
Lions of Lockhurst P		4857051	CA	6/28/2017
Organization Name 1b) 6520 Platt Ave #199 Organization Mailing Address 1c) 6170 Lockhurst Dr	VV City	est Hills	State of Incorporation CA State Hills CA	Date of 501(c)(3) Status (if applicab 91307 Zip Code 91367
Business Address (If different) 1d) PRIMARY CONTACT INFORMATION:	City		State	Zip Code
Seliene Hacker 818-28	2-6465	seliene34	@gmail.cor	n
Name		one	Email	
2) Type of Organization- Please select one: Public School (not to include private school Attach Signed letter on School Letter	ols) or	501(c)(3) Nor Attach IRS D	n-Profit (other than religio etermination Letter	us institutions)
3) Name / Address of Affiliated Organization	(if applicable)	City	Stat	te Zip Code
SECTION II - PROJECT DESCRIPTION	Test In Total			

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

Grant funds will be used to support the theater program which is unique to Lockhurst Charter Elementary. We have been working with Theater of Hearts for 5 years and developed a close relationship. This is the 1st year they were not able to get a grant from the district. Lockhurst Charter believes in a well rounded education. Lockhurst Charter is a diverse school that attends to not only TK-5th but also special needs children. Right now LAUSD pays for our orchestra, art teacher and librarian. The PTO raise money to pay for PE, music and computers. That is a total of \$53,000 we need to fundraise just to cover those costs.

 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 arts education is a crucial compoment of a well-rounded education. Schools play a vital role on cultivating the next generation of leaders. Students who recieve enrichment in the arts benefit from confidence, improved memory and social skills. These students will take these qualities into the community as a good member of society. The students we least expect to shine really come out and show growth and their true talents. These teachers are only connect with the students on a positive and motivating level but they are professionals in their field. Since the schools have been closed for 1 1/2 years it is even more essential to have this. It provides our students with a safe environment to excel and develop their self along with building confidence in an area the may not have known they were successful.

Personnel Related Expenses		Requested of NC	Total Projected Cost
		\$	\$
		\$	\$
		5	3
Non-Personnel Related Expen	505	Requested of NC	Total Projected Cost
The second secon	! Hearts for 3rd -5th grade		
	Ereans for 31d -5th grade	\$ 1600.00	\$8000.00
	V to State When	S	\$
he implementation of this spec	is, please list names of NCs: Wife program or purpose description	est Hills for laptops last year but of ibed in Question 4 continu	ent on any other factors
Sources or funding? (Including NF	applications to other NCs)	The state of the s	, please describe:
overce or running		Amount	Total Projected Cost
			8
		- 12	k
ON IV - POTENTIAL CONFLICT	IS OF INTEREST		
Do you (applicant) have a currer	nt or former relationship with a	Board Member of the NC?	
Do you (applicant) have a currer No Dyes If Yes Name of NC Board Member	The second secon	Board Member of the NC?	
Do you (applicant) have a currer ■ No ☐ Yes If Yes	nt or former relationship with a		
Do you (applicant) have a currer No Dives If Yes Name of NC Board Member	at or former relationship with a s, please describe below:	Relationship	to Applicant
Do you (applicant) have a currer No Diyes If Yes Name of NC Board Member If yes, did you request that the b	at or former relationship with a s, please describe below:	Relationship Relationship te of the City Attorney before NC has a conflict of interest.	to Applicant ore filing this application
Do you (applicant) have a currer No	or former relationship with a s, please describe below: Doard member consult the Office that if a Board Member of the on and voting of this NPG, the consult the Consult the Office that if a Board Member of the on and voting of this NPG, the consult the Consult that the consult the Office that if a Board Member of the on and voting of this NPG, the consult that the consult the consult that the	Relationship ce of the City Attorney before NC has a conflict of Intohe NC Funding Program	to Applicant ore filing this application erest and completes th will deny the payment
Do you (applicant) have a currer No I yes If Yes Name of NC Board Member If yes, did you request that the bill yes I No '(Please note or participates in the discussing grant in its entirety.)	coard member consult the Office that if a Board Member of the formand voting of this NPG, to the that I have read the document that I have read the document to conflict of interest exist the acurrent Board Member at if the grant received is not	Relationship te of the City Attorney before NC has a conflict of interest in provided herein and consuments "What is a Publics) and/or program(s) fall hat would prevent the amount of the Neighborhood Coursed in accordance with	to Applicant ore filing this application erest and completes th will deny the payment mmunicated otherwise lic Benefit," and "Conf I within the criteria of a warding of the Neighb uncil to whom I am sub
Do you (applicant) have a currer No Yes If Yes Name of NC Board Member If yes, did you request that the board yes No '(Please note or participates in the discussion of participates in the discussion of participates in the best of maccurately stated. I further affire that project/program and that no ses Grant. Laffirm that I am repplication. I further affirm that application. I further affirm that application.	coard member consult the Office that if a Board Member of the on and voting of this NPG, to the New York that I have read the document that the proposed project to conflict of interest exist the grant received is not urned immediately to the Nei fit Corporation or School Prince	Relationship te of the City Attorney before NC has a conflict of Interpretation provided herein and consuments "What is a Publics) and/or program(s) fall hat would prevent the arof the Neighborhood Counsel used in accordance with ghborhood Council.	to Applicant ore filing this application erest and completes th will deny the payment mmunicated otherwise lic Benefit," and "Conf I within the criteria of a warding of the Neighb uncil to whom I am sub
Do you (applicant) have a currer No Jyes If Yes Name of NC Board Member If yes, did you request that the board yes If Yes If yes, did you request that the board yes If Yes If yes, did you request that the board yes If Yes If yes, did you request that the board yes If Yes If Yes If yes, did you request that the board yes If yes, did you request that the board yes If Yes	coard member consult the Office that if a Board Member of the on and voting of this NPG, to conflict of interest exist the conflict of interest exist the grant received is not urned immediately to the Nei fit Corporation or School Princes (Interest exist the composed of the Nei fit Corporation or School Princes (Interest exist the Corporation or School Princes)	Relationship te of the City Attorney before NC has a conflict of Intohe NC Funding Program In provided herein and consuments "What is a Publics) and/or program(s) fall hat would prevent the arof the Neighborhood Coursed in accordance with ghborhood Council. Ipal - REQUIRED* Signature	to Applicant ore filing this application arest and completes the will deny the payment of the Benefit," and "Confil within the criteria of a warding of the Neighburcil to whom I am subth the terms of the app
Do you (applicant) have a currer No Jyes If Yes Name of NC Board Member If yes, did you request that the board Member If yes, did you request that the board Member If yes, did you request that the board member If yes, did you request that the board member of participates in the discussion of the board of the discussion of the board of the board of the project/program and that members of the project/program and the project/project/project/project/project/project/project/project/project/project/project/project/project/project/project/pr	coard member consult the Office that if a Board Member of the formand voting of this NPG, to the that I have read the doctor conflict of interest exist the control of the grant received is not a current Board Member at if the grant received is not a current Board Member at if the grant received is not a current Board Member at if the grant received is not a current Board Member at if the grant received is not a current Board Member at if the grant received is not a current Board Member at if the grant received is not a current Board Member at if the grant received is not a current Board Member at if the grant received is not a current Board Member at if the grant received is not a current Board Member at its composition or School Print Cipal Title	Relationship te of the City Attorney before NC has a conflict of Intohe NC Funding Program In provided herein and consuments "What is a Publics) and/or program(s) fall hat would prevent the arof the Neighborhood Coursed in accordance with ghborhood Council. Ipal - REQUIRED* Signature	to Applicant ore filing this application arest and completes the will deny the payment of the Benefit," and "Confil within the criteria of a warding of the Neighburcil to whom I am subth the terms of the app
Do you (applicant) have a currer No Jyes If Yes Name of NC Board Member If yes, did you request that the board yes John Member If yes, did you request that the board yes John Member If yes, did you request that the board yes John Member of Mem	coard member consult the Office that if a Board Member of the on and voting of this NPG, to conflict of interest exist the conflict of interest exist the grant received is not urned immediately to the Nei fit Corporation or School Princes (Interest exist the composed of the Nei fit Corporation or School Princes (Interest exist the Corporation or School Princes)	Relationship te of the City Attorney before NC has a conflict of Intohe NC Funding Program In provided herein and consuments "What is a Publics) and/or program(s) fall hat would prevent the arof the Neighborhood Coursed in accordance with ghborhood Council. Ipal - REQUIRED* Signature	to Applicant ore filing this application arest and completes the will deny the payment of the Benefit," and "Confil within the criteria of a warding of the Neighburcil to whom I am subth the terms of the app

Program at (213) 978-1058 or clerk netunding@lacity.org for instructions on completing this form

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

Date: SEP 13 2017

LIONS OF LOCKHURST PARENT TEACHER
ORGANIZATION
6170 LOCKHURST DR
WOODLAND HILLS, CA 91367-1204

Employer Identification Number: 36-4857051 DLN: 17053188303007 Contact Person: HENRY F SHAMBURGER ID# 31472 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: June 30 Public Charity Status: 509(a)(2) Form 990/990-EZ/990-N Required: Effective Date of Exemption: June 28, 2017 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 TRC 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.

LIONS OF LOCKHURST PARENT TEACHER

Sincerely,

potaphen a mortun

Director, Exempt Organizations Rulings and Agreements

Office of the City Clerk										
Administrative Services Division						/1	50 J <u>an</u> 140			
Neighborhood Council (NC) Funding Prog	ram									
Board Action Certification (BAC) Form						المستند	2- 3-15 W			
NC Name: Woodland Hills Warner Cente	NC Name; Woodland Hills Warner Center				Meeting Date: 01-12-2022					
Budget Fiscal Year: 2021-2022	Budget Fiscal Year: 2021-2022				Agenda Item No: 22010					
Board Motion and/or Public Benefit Statement (CIP and NPG): Loins of Lockhurst NPG			Control of the Contro							
500 A C C C C C C C C C C C C C C C C C C		19-19-19-19-19-19-19-19-19-19-19-19-19-1								
Method of Payment: (Select One)	≯ Check		Credit Card		□ Boar	d Member Reimb	ursement			
Recused Board Member	s must leave the room prior			ot return to the ro	om until after t	the vote is comple	ete.			
Board Member's First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused			
AARON QUANTZ	AREA 1 RESIDENT	X								
KAREN DIBIASE	AREA 1 BUSINESS	×								
MARK SCHWARTZ	AREA 1 CBO	X			· · · · · · · · · · · · · · · · · · ·		***************************************			
REINA CERROS MACCAUGHEY	AREA 1 ALTERNATE					X				
ARTURO VALEASQUEZ	AREA 2 RESIDENT	X				1				
PAIUL LAWLER	AREA 2 BUSINESS	X			er.e					
SEAN MCCARTHY	AREA 2 CBO	X								
KATHLEEN BARTH	AREA 2 ALTERNATE				*****	X				
NANCY MCLEAN	AREA 3 RESIDENT	×								
ANGELA DAWSON	AREA 3 BUSINESS	X								
JOHN SANDY CAMPBELL	AREA 3 CBO	X					was a second of the same of			
ALEX FARASSATI	AREA 3 ALTERNATE				(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)					
BRIAN ARCHIBALD	AREA 4 RESIDENT				······································	X	The Management of the Control of the			
MARTIN LIPKIN	AREA 4 BUSINESS	X		 	×	 	Name - Parker			
DENA WEISS	AREA 4 CBO	^		<u> </u>	rainterariore de la company					
SEAN PITZ	AREA 4 ALTERNATE	^_								
RESIDENT AREA 5	OPEN					X	the same time to the same and t			
BUSINESS AREA 5	OPEN				-		····			
PETER FLECTCHER							*****			
	AREA 5 CBO	X								
ALTERNATE ARE 5	OPEN				••••					
LESLIE SIMON	AREA 6 RESIDENT	X								
	AREA 6 BUSINESS	X	1							
HEATH KLEINE	AREA 6 CBO	X								
LAUREN KAUFMAN	AREA 6 ALTERNATE		-			X				
RESIDENT AREA 7	OPEN									
	AREA 7 BUSINESS	X								
HOUTAN HORMOZIAN	AREA 7 CBO	X								
SAM EVANS oard Quorum:	AT LARGE	X								
	Total:	18	21 4h - (-6)			4				
/e, the authorized signers of the above no leeting was held in accordance with all la leeting where a quorum of the Board was p	ers, bourge, and biorcodic	The abov	e was approved by	presented on thi the Neighborho	s form is accura od Council Boar	ate and complete rd, at a Brown Ad	, and that a public it compliant public			
uthorized Signature	20112		Authorized Signa	ture: /)	2. 1	0	7			
int/Type Name: PAUL LAWLER	Print/Type Name: JOYCE FLETCHER									
	2022		Date: /		OZZ	The second secon				
				1116	<u> </u>	NCFP	101 BAC Rev020118			