



Budget Fiscal Year: 2015
(Must be submitted to the Department within 10 days of Board Approval)

[illegible]

CASH Status Analysis						
Category Identifier	Budget Category	Budget (A)	Cash Deposited to Date	Uncommitted Balance	Cash Spent to date (D)	Cash In-Bank Remaining Balance
100	Operations	\$5,660.00	\$3,959.51	\$1,700.50	\$2,295.49	\$1,664.02
200	Outreach	\$21,700.00	\$7,288.10	\$14,411.91	\$6,454.69	\$833.41
300	Community Improvement	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
400	NPG	\$9,640.00	\$4,640.00	\$5,000.00	\$4,640.00	\$0.00
500	Elections	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	TOTAL	\$37,000.00	\$15,887.60	\$21,112.40	\$13,390.18	\$2,497.42

NEIGHBORHOOD COUNCIL CERTIFICATION

We, BRANDON SCHINDELHEIM (Treasurer Name) and BRAD SMITH (Signer Name), declare that we are the Treasurer and Signer, respectively of the GRANADA HILLS SOUTH Neighborhood Council (NC) and that on 02/05/15 (date adopted), a Brown Act noticed public meeting was held by the GRANADA HILLS SOUTH NC with a quorum of 16 (number) board members present and that by a vote of 13 (number) yes, 0 (number) no, and 3 (number) abstentions the GRANADA HILLS SOUTH NC adopted the Monthly Expenditure Report for the month of JANUARY (month), 2015 (year).

Treasurer Signature 		Signer's Signature 	
Print Name BRANDON SCHINDELHEIM		Print Name BRAD SMITH	
Date 2/5/2015		Date 2/5/2015	
NC Additional Comments			

Board Vote Form

Budget Fiscal Year: 2014-2015

Meeting Date: February 5, 2015

Agenda Item: #VII. 3. b)



USE THIS FORM FOR THE FOLLOWING FUNDING ITEMS:

- ☒ APPROVAL OF MONTHLY EXPENDITURE REPORT
☐ BUDGET PACKAGE APPROVAL / AMENDMENT
☐ APPOINTMENT OF FUNDING OFFICER / CARDHOLDER
☐ OTHER: NON-FUNDING ACTION ITEM

Description:	FUNDING MOTION (by Mr. Schindelheim, seconded by Mr. Mansker): The Granada Hills South Neighborhood Council approves its Monthly Expenditure Report and Treasurer's Report for January 2015."
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*Recused-Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed.

Board Member Name		Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible
Jerry Askew, Vice-President		Business	x					
Mike Benedetto		Member-at-Large	x					
Jeffrey Bohrer		Member-at-Large	x					
Bonnie Marie Bursk		Commercial Property Owner	x					
Krisna Crawford-Velasco		Member-at-Large					x	
Arthur Daush Jr.		Seniors					x	
Jeremy "Jett" Dunlap		Member-at-Large	x					
Gina Greschner		Renters			x			
Varun Khurana		Students						x
Sally Kolstad		Education					x	
Deron Lopez		Youth Activities	x					
Eric Mansker		Homeowners	x					
Anthony Matthews, Secretary		Parks and Cultural Org.	x					
Brandon Schindelheim, Treasurer		Member-at-Large	x					
Brad Smith, President		Member-at-Large	x					
Jim Summers		Member-at-Large	x					
Rene Trinidad		Member-at-Large	x					
Ross Turmell		Member-at-Large	x					
Cindy Wu-Freedman		Member-at-Large Community Int.					x	
Mark Morris		Faith-Based Organizations						x
VACANT		Community Organizations						
			Yes	No	Abstain	*Recused	Absent	Ineligible
NC Quorum:	11	Totals:	13		1		4	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.

Treasurer's Signature: _____

Signer's Signature:

Print/Type name: Brandon Schindelheim, Treasurer

Print/Type name: Brad Smith, President

Date:

2/5/2015

Date:

2/5/2015

NC Additional Comments



STATEMENT OF ACCOUNTS

UNION BANK
CENTURY CITY 0206
PO BOX 512380
LOS ANGELES CA 90051-0380

Page 1 of 2
Statement Number: 0053624706
01/01/15 - 01/30/15

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

GRANADA HILLS SOUTH NEIGHBORHOOD COUNCIL
200 N SPRING ST FL 20
LOS ANGELES CA 90012-4801

- Merchant Services has a variety of secure processing solutions that are compliant with cardholder security standards. Get up to \$300 in rebates when you apply and are approved for a new Merchant Services account by 3/31/15. Call or stop by a branch office or see unionbank.com/merchantofferUB for details.

Business Basics Checking Summary

Account Number: 0053624706

Days in statement period: 30

Balance on 1/1	\$	2,158.95
Additions		3,553.05
Subtractions		-3,214.58
	Checks	-2,878.51
	Purchases	-336.07
Balance on 1/30	\$	2,497.42
Statement Average Ledger Balance		3,091.65

We waived your service charge this statement period.

Additions

Date	Description/Location	Reference	Amount
1/2	CITY OF LOS ANGE EFT PAYMT PPD *****0735	55113556	\$ 3,553.05

Checks

Number	Date	Reference	Amount	Number	Date	Reference	Amount
5011	1/6	06869860	2,500.00	5017	1/20	06106964	158.73
5016*	1/16	06761676	219.78				
Total							\$ 2,878.51

* Checks missing in sequence. Out of sequence check numbers may also be located in the Payments section of your statement.

Purchases ATM card and Debit card™ purchases

Date	Description/Location	Reference	Amount
1/8	TOGO'S GRA 18080 Chatsworth 818-363-7799 CA	70072712	\$ 110.00
1/8	RALPHS 18010 CHATSWORT GRANADA HIL CA	70088102	11.18
1/9	THE UPS ST 17939 CHATSWORT GRANADA HILLS CA	70088482	214.89
Total			\$ 336.07

Information and Banking Office Services

For each monthly statement period your account includes:

- Unlimited free Information Services calls to 24-hour Automated Direct Service
- Banking office Information Services calls are \$0.00
- Banking office deposits are \$0.00

Your account was not charged for information and banking office services during the statement period.

Togo's

18080 Chatsworth St, Ste 2B
Granada Hills, CA
Phone (818) 363-7799
Fax (818) 363-7720

60058 Robert V

2015-046

Check: 1174

Guests: 1

01/07/2015 05:46PM

Take Out

1	CA CAL Fav Sand SM	55.00
1	CA Fav TASTE Sand SM	55.00
	CC-Mastercard	110.00
	*****6670	

Subtotal	110.00
Sales Tax	0.00
Payment	110.00

Change Due \$0.00

----- Check Closed -----

01/07/2015 05:46:56PM

Thank you, have a great day!

AVOID THE LUNCH CROWD
ORDER ONLINE
WWW.TOGOS.COM/ORDERONLINE

Order Number: 1174

Togo's

18080 Chatsworth St, Ste 2B
Granada Hills, CA
Phone (818) 363-7799
Fax (818) 363-7720

60058 Robert V

2015-046

Check: 1174

Guests: 1

01/07/2015 05:46PM

*** REPRINT ***

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Sales Tax	0.00
Payment	110.00

Change Due \$0.00

----- Check Closed -----

01/07/2015 05:46:57PM

Thank you, have a great day!

AVOID THE LUNCH CROWD
ORDER ONLINE
WWW.TOGOS.COM/ORDERONLINE

Order Number: 1174

get real
{low prices}

@ **Ralphs**

2015-047

18010 Chatsworth St
(818) 831-6556
YOUR CASHIER WAS Adrienne F

	KR WATER 32/8FO	RC	3.99 F
	CA REDEM VAL		1.60 F
SC	RALPHS SAVED YOU	0.50	
	KR WATER 32/8FO	RC	3.99 F
	CA REDEM VAL		1.60 F
SC	RALPHS SAVED YOU	0.50	
	RALPHS rewards CUSTOMER	*****9082	
	TAX		0.00
****	BALANCE		11.18

703 Ralphs #646
18010 Chatsworth St.
Granada Hills CA 91344
MASTERCARD Purchase
*****6670
TOTAL: 11.18
REF#: 000000

MASTERCARD	11.18
CHANGE	0.00

TOTAL NUMBER OF ITEMS SOLD = 4
01/08/15 06:02pm 646 12 115 131

Tell Me

The UPS Store - #672
17939 Chatsworth Street
Granada hills, CA 91344
(818) 360-6144

01/08/15 05:53 PM

We are the one stop for all your
shipping, postal and business needs.

We offer all the services you need
to keep your business going.

2015-048



001 000001 (003)	t1 \$ 157.50
Copies	QTY 2250
Reg Unit Price	\$ 0.07
002 000001 (003)	t1 \$ 39.20
Copies	QTY 560
Reg Unit Price	\$ 0.07

SubTotal \$ 196.70
tax (t1) \$ 18.19
Total \$ 214.89

Master Card \$ 214.89

ACCOUNT NUMBER * *****6670
Appr Code: (S) Sale

Receipt ID 82814278869513882371 2810 Items
CSH: Center Tran: 3961 Reg: 002


Thank you for visiting our store.
Please come back again soon.

Whatever your business and personal
needs, we are here to serve you.



We're here to help.
Join our FREE email program to receive
great offers and resources.

www.theupsstore.com/signup

We are an equal opportunity employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

		Partners in Diversity, Inc. South Pasadena, CA 91051 President: Fred (626) 793-0012	
For Name DAVID LEVINE	Order #	CE44861L	
Social Security #	Address CELESTINA HILLS SOUTH ALHAMBRA	City ALHAMBRA	Zip 91002

I, **DAVID LEVINE**, HEREBY CERTIFY THAT THE ABOVE LISTED PERSONNEL, BEING AN AUTHORIZED REPRESENTATIVE OF COMPANY, ARE BEING EMPLOYED TO CONDUCT A RESEARCH AND CONDUCT AND HAVE THE WORKING PERMISSIONS TO CONDUCT ANY RESEARCH, VISIT, MEETINGS, AND/OR PARTICIPATE IN ANY RESEARCH, WITHIN THE FACILITIES OF THE RESEARCH AND DEVELOPMENT AND/OR LABORATORY AND/OR LABORATORY, WITHIN THE DATE OF RESEARCH, WITHOUT FIRST NOTIFYING PARTNERS IN DIVERSITY, INC. AND/OR DISTRIBUTION (OR) IN PARTNERS IN DIVERSITY, INC. ALHAMBRA, CALIFORNIA. I AM NOT TO BE EMPLOYED, THE TERMS AND CONDITIONS OF THE RESEARCH AND DEVELOPMENT, AND/OR PARTICIPATE IN ANY RESEARCH, WITHIN THE DATE OF RESEARCH, WITHOUT FIRST NOTIFYING PARTNERS IN DIVERSITY, INC. ALHAMBRA, CALIFORNIA. I AM NOT TO BE EMPLOYED, THE TERMS AND CONDITIONS OF THE RESEARCH AND DEVELOPMENT, AND/OR PARTICIPATE IN ANY RESEARCH, WITHIN THE DATE OF RESEARCH, WITHOUT FIRST NOTIFYING PARTNERS IN DIVERSITY, INC. ALHAMBRA, CALIFORNIA.

Approved: David Levine 	Overwritten: David Levine 	
For Date Use Only 07-14	Of Hours 07	Bonus

PARTNERS IN DIVERSITY, INC.

Being duly authorized on behalf of the above Customer, the undersigned hereby (1) certifies that the above hours are correct and that the work was performed in a satisfactory manner; (2) confirms prior agreement between Partners in Diversity, Inc. and Customer, with respect to the services performed hereunder and any future services, that (a) Customer shall not entrust employees of Partners in Diversity, Inc. with unattended premises, cash, negotiable or other valuables or authorize such employees to operate machinery or motor vehicles without prior written permission from Partners in Diversity, Inc. in each instance. (b) Partners in Diversity, Inc. insurance does not cover loss of damage caused by Partners in Diversity, Inc. employees operating Customer's owned or leased motor vehicle(s), and Customer therefore accepts full responsibility for claims, including the defense thereof, involving bodily injury, property damage, fire, theft, collision, cargo damage or public liability damage sustained or incurred as a result of Partners in Diversity, Inc. employee driving such vehicle(s), or arising out of involving violation by customer in paragraph (2) (a) above. (c) Partners in Diversity, Inc. is not responsible for claims made under its insurances unless such claims are reported in writing by customer within thirty days after occurrence, (d) Customer shall indemnify and save Partners in Diversity, Inc. harmless from claims and demands arising out of the Occupational Safety and Health act as it relates to premises owned or controlled by Customer and to which Partners in Diversity, Inc. employees are assigned. The Customer recognizes Partners in Diversity, Inc. employer-employee relationship with its personnel, and accepts the obligation to discuss all matters concerning their employment, job assignments, pay procedures, etc., with Partners in Diversity, Inc.

[illegible]

PARTNERS IN DIVERSITY, INC.
ASGE MARQUETTE COMMERCIAL FIN
NW 6333 P.O. BOX 1450
MINNEAPOLIS, MN 55485-6333
(626)793-0020

PAGE 1

CUST# 02-0136

DATE 01/12/15

INVOICE# 020449

NEIGHBORHOOD COUNCIL
ATTN: ACCOUNTS PAYABLE
GRANADA HILLS SOUTH
11024 BALBOA BLVD
GRANADA HILLS, CA 91344

2015-045

TERMS: DUE UPON RECEIPT

WEEK	END	EMPLOYEE	HOURS	RATE	OT HOURS	OT RATE	TOTAL
01/11		LEVIN, DAVID L ADMIN. MINUTE TAKER	6.50	24.42			158.73
			6.50		.00		
TOTAL DUE:							158.73

We are an equal opportunity employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.



Partners In Diversity, Inc

P.O. Box 654
South Pasadena, CA 91031
Pasadena Fax (626) 793-0022

Your Name	DAVID LEVIN		Order #
Social Security #			
Client Name	GRANADA HILLS SOUTH NEIGHBORHOOD COUNCIL		
Address	City	Zip	

CUSTOMER AGREEMENT

THE UNDERSIGNED, BEING AN AUTHORIZED REPRESENTATIVE OF COMPANY, HEREBY CERTIFIES THAT THE ABOVE HOURS ARE CORRECT AND THAT THE WORK WAS PERFORMED TO COMPANY'S SATISFACTION. CUSTOMER AGREES THAT IT WILL NOT HIRE THIS EMPLOYEE ON A PERMANENT BASIS OR TRANSFER SAID EMPLOYEE TO ITS PAYROLL FOR ANY REASON, WITHIN ONE YEAR FROM DATE OF REFERRAL, WITHOUT FIRST NOTIFYING PARTNERS IN DIVERSITY, INC. AND, AT CUSTOMER'S OPTION (1) PAYING PARTNERS IN DIVERSITY, INC. A LIQUIDATION CHARGE, OR (2) CONTINUING TO PAY PARTNERS IN DIVERSITY, INC. A TEMPORARY FEE FOR A PERIOD OF 600 WORKING HOURS FROM DATE OF NOTIFICATION. THE TERMS AND CONDITIONS ON THE REVERSE SIDE HEREOF ARE A PART OF THIS AGREEMENT.

Approved Hours	Overtime Hours	Supervisor / Client Signature
6.50		<i>[Signature]</i>
For Office Use Only		
Week Ending	Total Hours	OT Hours
1-11-15		

TIME CARD - Report All Time to the Nearest 1/4 Hour • Multiple Copies Press Here

Day	Date	Time Started	Time Finished	Less Lunch	Hours W
Mon.					
Tues.					
Wed.					
Thurs.	1-8-15	6 30	8 15		1 3/4
Fri.					
Sat.	1-10-15	10 -	3 15	30	4 3/4
Sun.					
Total Hours Worked for the Week					6 1/2

EMPLOYEE STATEMENT:

Employee certifies no accident or injury was sustained while working on the assignment unless noted on this time card. Should employee be taken by Partners in Diversity, Inc. to enforce this agreement or any part thereof, employee agrees and accepts that he/she shall be liable for all legal and all court costs. I understand and agree that any unemployment claims made by me must be filed and disallowed if I do not contact Partners in Diversity, Inc. immediately upon completion of this agreement.

[Signature]
Employee Signature

NOTICE TO EMPLOYEE

This time card slip must be filed in completely and

Partners in Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms its policy to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all federal, state, and municipal laws.

GOLD - Mail back copy

WHITE -

PARTNERS IN DIVERSITY, INC.

Being duly authorized on behalf of the above Customer, the undersigned hereby (1) certifies that the above hours are correct and that the work was performed in a satisfactory manner; (2) confirms prior agreement between Partners in Diversity, Inc. and Customer, with respect to the services performed hereunder and any future services, that (a) Customer shall not entrust employees of Partners in Diversity, Inc. with unattended promises, cash, negotiable or other valuables or authorize such employees to operate machinery or motor vehicles without prior written permission from Partners in Diversity, Inc. in each instance. (b) Partners in Diversity, Inc. insurance does not cover loss of damage caused by Partners in Diversity, Inc. employees operating Customer's owned or leased motor vehicle(s), and Customer therefore accepts full responsibility for claims, including the defense thereof, involving bodily injury, property damage, fire, theft, collision, cargo damage or public liability damage sustained or incurred as a result of Partners in Diversity, Inc. employee driving such vehicle(s), or arising out of involving violation by customer in paragraph (2) (a) above. (c) Partners in Diversity, Inc. is not responsible for claims made under its insurances unless such claims are reported in writing by customer within thirty days after occurrence, (d) Customer shall indemnify and save Partners in Diversity, Inc. harmless from claims and demands arising out of the Occupational Safety and Health act as it relates to premises owned or controlled by Customer and to which Partners in Diversity, Inc. employees are assigned. The Customer recognizes Partners in Diversity, Inc. employer-employee relationship with its personnel, and accepts the obligation to discuss all matters concerning their employment, job assignments, pay procedures, etc., with Partners in Diversity, Inc.

2015-045

Council Funding Program
REQUEST FORM

ADMIN. SUPPORT SVCS
DONOR EMPOWER LA
NEIGHBORHOOD EMPOWERMENT

Complete this form to request funding 2014 SEP 22 A 10:10

REQUEST DATE: Aug. 7, 2014

Amount Requested: \$ 2,500.00

NEIGHBORHOOD COUNCIL: Granada Hills South

Please complete all of the following and answer questions A-D:

Name of Requester: Brandon Schindelheim

A. Are you a board member of this Neighborhood Council?

☒ Yes ☐ No

- If "yes," is this request on behalf of a

B. Is this a request for recurring payment? (if "yes" Term: Please Choose)

☐ Yes ☒ No

NC Committee? ☐ Yes ☒ No

C. Is this request a payment for services requiring a 1099?

☐ Yes ☒ No

Committee:

D. Is this a request for an out-of-state vendor?

☐ Yes ☒ No

Remittance:

Payable to: Granada Hills Community Foundation

10724 White Oak Avenue

Address:

Granada Hills

CA

91344

City

State

Zip:

MKabo@csun.edu

818-207-2993

Email Address

Contact Phone number

Notes and / or Public Benefit Statement (Describe how these funds will benefit the this neighborhood):

Sponsoring the Oct. 11, 2014 Granada Hills Street Faire will support GHSNC community outreach and the GHSNC's ties with the community.

DECLARATION

I, the Requester, understand that I am requesting public funds from the Neighborhood Council and that such funds are restricted under the guidelines set forth by the Department of Neighborhood Empowerment. I declare that this funding request does not pose any potential conflict of interest for any Board Member and will provide any documentation requested by the Department to authorize payment or review the appropriateness of the request.

Requester's Signature

Aug. 7, 2014

Date

NEIGHBORHOOD COUNCIL USE ONLY

(Board Vote Count Form must accompany this form)

Brandon Schindelheim

Signature

Date

TREASURER'S Name

Brad Smith

Signature

Date

2nd Signer's Name

Board Action:

☐ DENIED (date):

☒ Approved for: \$ 2,500.00

☐ Amended for: \$

NC Budget Category: 200 - Outreach

DEPARTMENT USE ONLY

AUTHORIZATION CATEGORY:

☐ NPG

☐ CIP

☐ Contract

☐ Lease

☐ Sponsored Event

☐ >\$2,500

☐ Advanced Payment

☐ Approved

☐ Denied

Authorization Code: GHSNC 2014-003

1st Lvl | date: 9/23/14

2nd Lvl | date: 9-25-14

Department Notes:

SAVE

PRINT

AC 9/24/14