

# Monthly Expenditure Report



Reporting Month: March 2021

Budget Fiscal Year: 2020-2021

NC Name: Granada Hills South  
Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$24654.07	\$4517.50	\$20136.57	\$12819.27	\$0.00	\$7317.30

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office	\$19846.36	\$478.11	\$10449.29	\$434.31	\$10014.98
Outreach		\$539.39		\$0.00	
Elections		\$0.00		\$0.00	
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Neighborhood Purpose Grants	\$12153.64	\$3500.00	\$6153.64	\$12384.96	\$-6231.32
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$10879.57	

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	Google LLC GSUITE_ghsn	03/01/2021	Monthly GHSNC address maintenance fee	General Operations Expenditure	Office	\$111.32
2	PUBLIC STORAGE 67676	03/03/2021	Monthly storage locker fee.	General Operations Expenditure	Office	\$263.00
3	PROFESSIONAL PRINTING	03/15/2021	Printing for Election Flyer	General Operations Expenditure	Outreach	\$539.39
4	Devonshire is S.O.L.I.D.	02/11/2021	TO SUPPORT 501(C)(3) CHARITY IN NC	Neighborhood Purpose Grants		\$3500.00
5	PARTNERS IN DIVERSITY, INC.	02/25/2021	NC APPROVES MINUTES WRITER FOR NC MEETING FROM APPROVED ENCUMBERANCE FUNDS	General Operations Expenditure	Office	\$103.79
<b>Subtotal:</b>						<b>\$4517.50</b>

Outstanding Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	AARON DEVANDRY - CONCEPT TO WEB	03/03/2021	NC WEBSITE MAIN MARCH 2021 AND GODADDY RENEWAL	General Operations Expenditure	Office	\$150.00

2	AARON DEVANDRY - CONCEPT TO WEB	04/05/2021	NC WEBSITE MAIN MARCH 2021	General Operations Expenditure	Office	\$150.00
3	Partners in Diversity, Inc.	04/08/2021	NC APPROVES MINUTES WRITER FOR NC MEETING FROM APPROVED ENCUMBERANCE FUNDS	General Operations Expenditure	Office	\$134.31
4	North Valley Family YMCA	04/15/2021	SUPPORT FOR KIDS AT THE YMCA IS CRUCIAL FOR THE NC	Neighborhood Purpose Grants		\$2300.00
5	Veterans of Foreign Wars (VFW)	04/15/2021	SUPPORT FOR THE VFW IN OUR NC IS VITAL FOR OUR VETERANS IN THE NC	Neighborhood Purpose Grants		\$3200.00
6	North Valley Caring Services	04/15/2021	SUPPORT FOR FOOD TO HUNGRY PEOPLE IN THE NC IS VITAL	Neighborhood Purpose Grants		\$3800.00
7	VINTAGE STEM MAGNET	04/15/2021	SUPPORT FOR SCHOOL PROGRAM FOR STUDENTS IN OUR NC	Neighborhood Purpose Grants		\$3084.96
<b>Subtotal:</b> Outstanding						<b>\$12819.27</b>



# Invoice

Invoice number: 3870558408

Google LLC

1600 Amphitheatre Pkwy

Mountain View, CA 94043

United States

Federal Tax ID: 77-0493581

## Bill to

Aaron DeVandry

Granada Hills South Neighborhood Council

5005 Stone Fence Sr

Colorado Springs, CO 80922

United States

## Details

Invoice number .....3870558408

Invoice date .....Feb 28, 2021

Billing ID .....9930-5897-7673

Domain name .....ghsnc.org

## Google Workspace

Total in USD **\$111.32**

## Summary for Feb 1, 2021 - Feb 28, 2021

Subtotal in USD \$108.00

Local sales tax (3.07%) \$3.32

Total in USD \$111.32

You will be automatically charged for any amount due.

Subscription	Description	Interval	Quantity	Amount(\$)
G Suite Basic	Usage	Feb 1 - Feb 28	18	108.00
Subtotal in USD				\$108.00
Local sales tax (3.07%)				\$3.32
Total in USD				<b>\$111.32</b>

Need help understanding the charges on your invoice? [Click here for detailed explanations](https://support.google.com/a?p=gsuite-bills-and-charges)  
<https://support.google.com/a?p=gsuite-bills-and-charges>

**From:** DoNotReply@Publicstorage.com,  
**To:** davebeauvais@verizon.net,  
**Subject:** Your upcoming storage payments  
**Date:** Fri, Feb 12, 2021 8:05 am

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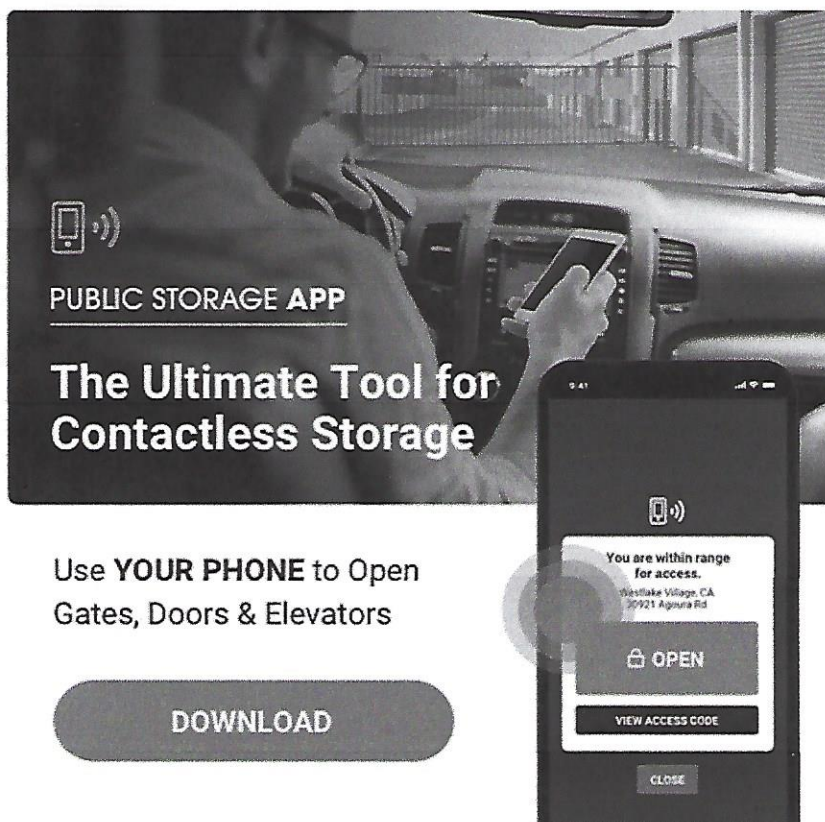
## Here is your Monthly Storage Invoice.

Hi David,

Thanks for choosing Public Storage! As a friendly reminder, your storage invoice for rental period 03/01/2021 to 03/31/2021 is now available for payment. If your account is set up for AutoPay, your payment will be automatically processed.

If you plan on visiting one of our storage locations to make a payment, for your safety and that of our employees please bring a face covering or mask. If you forget your face covering at home, we will have a mask available for you.

**Make This Payment**

A black and white advertisement for the Public Storage App. The background shows a person in a car using a smartphone. Overlaid on the image is a dark rectangular box with white text and icons. At the top left of the box is a smartphone icon with signal waves. Below it, the text 'PUBLIC STORAGE APP' is underlined. The main headline reads 'The Ultimate Tool for Contactless Storage'. Below the headline, it says 'Use YOUR PHONE to Open Gates, Doors & Elevators'. A large, rounded 'DOWNLOAD' button is positioned below the text. To the right of the text box is a smartphone displaying the app's interface. The app screen shows a notification: 'You are within range for access. Westlake Village, CA 91361 Agoura Rd'. Below this notification are three buttons: 'OPEN' (with a lock icon), 'VIEW ACCESS CODE', and 'CLOSE'.

## Your Account Details [Log In](#)

**DAVID BEAUVAIS**

**ACCOUNT NUMBER:** 13943765  
**PHONE:** (818) 831-2318  
**EMAIL:** davebeauvais@verizon.net

## Balance Due Details

**STORAGE LOCATION:** 18175 Chatsworth Ave  
Granada Hills, CA 91344  
[Get Directions](#)  
**SPACE NUMBER:** C221

SPACE SIZE: 10x10

**MONTHLY CHARGES**

Monthly Rate: \$252.00  
 Rent Tax: \$0.00  
 Insurance: \$11.00  
**Monthly Total: \$263.00**

**CURRENT BALANCE**

Current Balance: \$0.00  
 (as of 02/11/2021)  
 Charges for Rental Term: \$263.00  
 ( 03/01/2021 to 03/31/2021)  
**Total Due: \$263.00**

**TOTAL DUE: \$263.00****Make This Payment**

	† PAST DUE/DUE NOW	† DUE NEXT 03/01/2021
RENT	\$0.00	\$252.00
INSURANCE	\$0.00	\$11.00
<b>TOTAL</b>	<b>\$0.00</b>	<b>\$263.00</b>

Glad to have you with us,  
**Your Public Storage Team**

† If you have a past due balance, please contact your location manager, as your property is subject to a lien and enforcement may be imminent.



**We've made it easy to do everything you want online**

**Payments Your Way**

Make a payment, view your transaction history,

**Your Storage Space**

Access your gate code, manage your

**From:** DoNotReply@Publicstorage.com,  
**To:** davebeauvais@verizon.net,  
**Subject:** Your AutoPay confirmation  
**Date:** Wed, Mar 3, 2021 8:43 am

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## Thanks for your AutoPay payment!

Hi David,

We're confirming that a payment in the amount of \$263.00 was made on 03/02/2021 from your Master Card CreditCard account ending in 4397 and entry type is manual.

Your confirmation number for this transaction is 098053.

## Your Account Details [Log In](#)

### DAVID BEAUVAIS

<b>ACCOUNT NUMBER:</b>	13943765
<b>PHONE:</b>	(818) 831-2318
<b>EMAIL:</b>	davebeauvais@verizon.net

## Payment Details

<b>STORAGE LOCATION:</b>	18175 Chatsworth Ave Granada Hills, CA 91344 (818) 296-9184 C221
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SPACE NUMBER:

SPACE SIZE:

10x10

**PAYMENT AMOUNT:**  
**\$263.00**

	PAST DUE/DUE NOW	DUE NEXT 04/01/2021
RENT	\$0.00	\$252.00
INSURANCE	\$0.00	\$11.00
TOTAL	\$0.00	\$263.00

Glad to have you with us,  
**Your Public Storage Team**

**Public Storage**CONNECT:       **BLOG**

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# Invoice

1203 San Fernando Road. San Fernando CA, 91340  
P.818.898.1537 - F.818.361.4677  
Proprintsla@gmail.com

Date	Invoice #
3/3/2021	18491

Bill To
Granada Hills Neighborhood Council Granada Hills CA 91344 David Beavuvias 818-634-1511

Ship To

P.O. Number	Terms	Rep	Ship	Via
David Beavuvias	COD		3/3/2021	Will Call
Quantity	Item Code	Description	U/M	Amount
11,000	809	EDDM Post Cards- 6.5 X 9, 14pt, UV, 2-Sided, Full Color		944.90T
				0.00
PROFESSIONAL PRINTING CENTER 1203 SAN FERNANDO RD SAN FERNANDO, CA 91340 (818) 898-1537 03/15/2021 14:52:28 CREDIT CARD MC SALE Card # XXXXXXXXXXXX4397 SEQ #: 1 Batch #: 4 Trans #: 1 Approval Code: 046883 TRANS ID: MCPWY1YYC0315 Entry Method: Manual Mode: Online Tax Amount: \$0.00 Avs Code: N Card Code: M SALE AMOUNT \$539.39 THANK YOU! CUSTOMER COPY		Deposit \$500.00 Credit Card 2/25/21 Balance \$539.39 Sales Tax 94.49		
			<b>PAID</b>	
			<b>Total</b>	<b>\$1,039.39</b>

## Board Action Certification (BAC) Form



**Agenda Item No: VIII. E.**


authorizes . . . \$7,000.00 . . . publicizing candidate filing deadlines, instructions for vote-by-mail and a possible joint Neighborhood Council Election Town Hall.

☐ Board Member Reimbursement

**Recused Board Members must leave the room prior to any discussion and may not return to the room until after the vote is complete.**

<b>Board Member's First and Last Name</b>	<b>Board Position</b>	<b>Yes</b>	<b>No</b>	<b>Abstain</b>	<b>Absent</b>	<b>Ineligible</b>	<b>Recused</b>
Carlos Amador	Member	X					
Dave Beauvais	President	X					
Mike Benedetto	Vice-President	X					
Bette Biers	Member	X					
Bonnie Marie Bursk	Member	X					
Julie Carson	Secretary	X					
John Horn	Member	X					
Sally Kolstad	Member	X					
Rachel Lee	Member					X	
Jerilyn Lopez Mendoza	Member	X					
Mark Morris	Member	X					
Emayatzy Oliver	Member				X		
Abbey Ronquillo	Treasurer	X					
Brandon Schindelheim	Member	X					
Brad Smith	Member	X					
Colleen Toumayan	Member	X					
Ross Turnell	Member	X					
<b>Board Quorum: 9</b>	<b>Total:</b>	<b>15</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>

We, the authorized signers of the above named Neighborhood Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with all laws, policies, and procedures. The above was approved by the Neighborhood Council Board, at a Brown Act compliant public meeting where a quorum of the Board was present.

re 

None Known

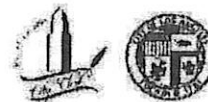
Print/Type Name: Dave Beauvais, President

Date: 12-3-20



## 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: Granada Hills South 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 Station) 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) **or** ☒ 501(c)(3) Non-Profit (other than religious institutions)  
*Attach Signed letter on School Letterhead* *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 Station'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 & 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 overhaul. 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 us 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.

6a)	<b>Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
	N/A	\$	\$
		\$	\$
		\$	\$
6b)	<b>Non-Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
	See attached list	\$3500.00	\$21,000.00
		\$	\$
		\$	\$

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

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
SOLID fundraising	\$17,500.00	\$21,000.00
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: \$3500.00

10a) Start date: 03/01/21 10b) Date Funds Required: 03/01/21 10c) Expected Completion Date: 05/01/21  
 (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\*

Dianne Kartiala President Dianne Kartiala 4/25/21  
 PRINT Name Title Signature Date

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

Yolanda Petroski Secretary Yolanda Petroski 4/25/21  
 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](mailto:clerk.ncfunding@lacity.org) for instructions on completing this form



CA LICENSE #974311  
14141 COVELLO STREET SUITE #9A  
VAN NUYS, CA 91405  
+1 8184881701

## PROPOSAL

### ADDRESS

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

PROPOSAL # 1640

DATE 05/29/2020

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### JOB LOCATION

LAPD DEVONSHIRE

DESCRIPTION	AMOUNT
MAIN ENTRY LOBBY	
INSTALL METAL BASE WITH 1/4" PLEXI-GLASS FOR ENTIRE MAIN LOBBY COUNTER.	2,500.00
DETECTIVE AREA	
INSTALL METAL BASE WITH 1/4" PLEXI-GLASS FOR DETECTIVE LOBBY COUNTER.	1,250.00
INSTALL SHEET METAL ON DETECTIVE LOBBY DESK FRONT FACING WALLS AS DESCRIBED BY LT. LUCAS AND CAPT. BURNS.	1,650.00
INSTALL COUNTER TOPS ON DETECTIVE DESK TO MATCH LOBBY COUNTER TOPS.	3,300.00
REMOVE EXISTING BENCH ALONG DETECTIVE LOBBY AREA.	200.00
REMOVE EXISTING CABINET IN DETECTIVE AREA ALONG WALLS.	100.00
INSTALL (1) 12' X 8' WALL CABINET WITH MIDDLE SHELF SECTION.	2,900.00
INSTALL LOCKABLE CABINETS UNDER DETECTIVE LOBBY DESK. INCLUDES REMOVING EXISTING CABINETS.	1,600.00

AC 05/28/2020

TOTAL

**\$13,500.00**

Accepted By

Accepted Date



## S . O . L . I . D . Supporters of Law Enforcement In Devonshire

*A non-profit 501(c)(3) organization devoted to supporting LAPD Devonshire Area Officers who protect and serve our community*

Tax I.D. # 95-4418512 • Established 1993

### Officers

Dianne Kartiala  
President

Nancy Morgan  
Vice President

Yolanda Petroski  
Secretary

Tapio Kartiala  
Treasurer

### Directors

John Beard  
Mark Cohen  
Jeanne Cruger  
Gary Farajian  
Debbie Forstall  
Glenn Gomez  
Lori Luszczyk  
Debi Mayer  
Dale Penn  
Pravin Singh  
Chris Smith  
Virginia Snow  
Bill Tiefuhr

### Ex-Officio Advisor

Capt. Kathleen J. Burns  
Commanding Officer  
Devonshire Area

Captain Paul Weber  
Commanding Officer  
Devonshire Patrol

### Honorary Board

Robert Carlson, Esq.  
Paula Cracium  
Rickey Gelb  
The Hon. John Lee,  
Councilman 12<sup>th</sup> District  
Eric Leser, O.D.  
Becky Leveque,  
S.O.L.I.D. Co-Founder  
Bob Luszczyk, D.D.S.  
Jake Parunyan  
The Hon. Greig Smith,  
S.O.L.I.D. Co-Founder  
Larry Stearn

### 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**



## Request for Taxpayer Identification Number and Certification

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

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

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

☐ C Corporation

☐ S Corporation

☐ Partnership

☐ Trust/estate

☐ 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

6 City, state, and ZIP code

Northridge, CA 9137

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type.  
See Specific Instructions on page 3.

### 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:

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 ►

*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](http://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.





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](http://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

N

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

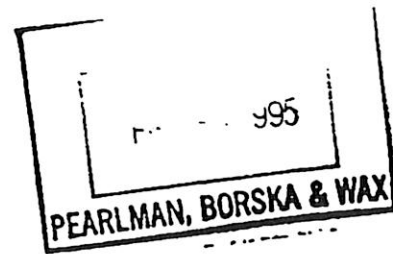
TREASURER  
TITLE

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*  
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.

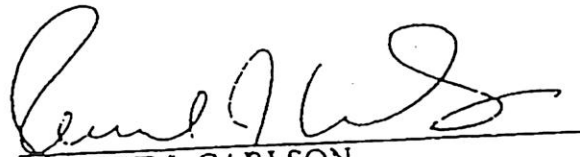
(b) No substantial part of the activities of this corporation shall consist of carrying on propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate or intervene in any political campaign (including the publishing or distribution of statements) on behalf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

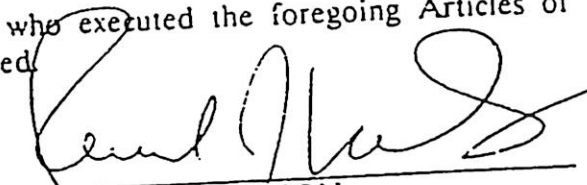
FIFTH: On the winding up and dissolution of this corporation, after paying or adequately providing for the debts, obligations, and liabilities of the corporation, the remaining assets of this corporation shall be distributed to such organization (or organizations) organized and operated exclusively for 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









**PARTNERS IN DIVERSITY, INC.**  
A Small Business, Women Owned Enterprise

**Remit to: Partners In Diversity, Inc.**  
P.O. Box 654  
South Pasadena, CA 91031-0654

# INVOICE

**Invoice Amount**

**\$103.79**

**Payment Terms**

Due On Receipt

**Invoice Date**

12/07/2020

**Invoice No.**

37088

**Customer No.**

1352

Neighborhood Council/G.H. South  
Attn to: Accounts Payable  
11024 Balboa Blvd  
Granada Hills, CA 91344

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council/G.H. South	Corporate	1352	Due On Receipt

Description	Type	Units	Rate	Amount
<b>Week ending: 12/06/2020</b>				
Levin, David Minute Taker	Reg	4.25	\$24.42	\$103.79
<b>Total This Week ending:</b>				<b>\$103.79</b>

<b>Reg: 4.25 OT: 0 DT: 0</b>	<b>Total - This Invoice:</b>	<b>\$103.79</b>
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Partners In Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, age, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms in policy and practice to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all applicable federal, state and municipal laws.

## Office of the City Clerk

Administrative Services Division

### Neighborhood Council (NC) Funding Program

## Board Action Certification (BAC) Form



NC Name: Granada Hills South

Meeting Date: July 2 2020

**Budget Fiscal Year:** 2019-2020

Agenda Item No: VI. B.

**Board Motion and/or Public Benefit Statement (CIP and NPG):**

approves of 2020/2021 fiscal year budget.

Method of Payment: (Select One)

☐ Check☐ Credit Card☐ Board Member Reimbursement

### Vote Count

**Recused Board Members must leave the room prior to any discussion and may not return to the room until after the vote is complete.**

<b>Board Member's First and Last Name</b>	<b>Board Position</b>	<b>Yes</b>	<b>No</b>	<b>Abstain</b>	<b>Absent</b>	<b>Ineligible</b>	<b>Recused</b>
Carlos Amador	Member	X					
Dave Beauvais	President	X					
Mike Benedetto	Vice-President	X					
Bette Biers	Member	X					
Bonnie Marie Bursk	Member	X					
Julie Carson	Secretary	X					
John Horn	Member	X					
Sally Kolstad	Member	X					
Jerilyn Lopez Mendoza	Member					X	
Mark Morris	Member	X					
Emayatzy Oliver	Member	X					
Abbey Ronquillo	Member				X		
Brandon Schindelheim	Treasurer	X					
Brad Smith	Member	X					
Colleen Toumayan	Member	X					
Ross Turmell	Member	X					
Sarah Tran	Member				X		
<b>Board Quorum: 9</b>	<b>Total:</b>	14	0	0	2	1	0

We, the authorized signers of the above named Neighborhood Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with all laws, policies, and procedures. The above was approved by the Neighborhood Council Board, at a Brown Act compliant public meeting where a quorum of the Board was present.

Authorized Signature

Authorized Signature:

Print/Type Name: Brandon Schindelheim, Treasurer

Print/Type Name: Dave Beauvais, President

Date: 7-2-20

Date: 7-2-20