

# Monthly Expenditure Report



Reporting Month: June 2022

Budget Fiscal Year: 2021-2022

NC Name: Granada Hills South  
Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$27127.50	\$16363.36	\$10764.14	\$0.00	\$0.00	\$10764.14

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office	\$20666.00	\$400.48	\$5318.51	\$0.00	\$5318.51
Outreach		\$5598.88		\$0.00	
Elections		\$0.00		\$0.00	
Community Improvement Project	\$5000.00	\$3864.00	\$1136.00	\$0.00	\$1136.00
Neighborhood Purpose Grants	\$10809.63	\$6500.00	\$4309.63	\$0.00	\$4309.63
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$9348.13	

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	GOOGLE GSUITE GHSNC.ORG	06/01/2022	Google Suite is our web master and is provided for in our Admin package Budget \$ 122.48	General Operations Expenditure	Office	\$122.48
2	4IMPRINT, INC	06/03/2022	Outreach giveaways on community events. Although each item was under thousand dollars 4 imprints gave a total of \$3,316.80 and divided up into three \$1000 payments and one for \$316.80. Since not acceptable I had 4 imprints refund all said monies and then resubmit each individual transaction w/ individual payments. Additionally or imprint was unable to show clear thousand dollar transactions as well as the refund and was only able to give me the attached summary.. SEE other \$1k pay. Dup bill to	General Operations Expenditure	Outreach	\$1000.00
3	POSTAL PLUS	06/03/2022	Flyers made by postal +4 tree lighting ceremony which includes two receipts and the BAC; amount \$65.70	General Operations Expenditure	Outreach	\$65.70

4	4IMPRINT, INC	06/07/2022	Outreach giveaways or community events. Although each item was under thousand dollars for imprint gave a total of \$3,316.80 and divided it up with three payments of \$1000 and one payment for \$316.80. Since this was not acceptable I had for imprint refund said monies and then resubmitted individually with individual payment receipts. NOTE This was duplicated from next page and should be removed	General Operations Expenditure	Outreach	\$316.80
5	PUBLIC STORAGE 67676	06/07/2022	Public storage is a general operation cost and part of our Admin Package. where we keep our belongings; space C-221-June payment \$278.00	General Operations Expenditure	Office	\$278.00
6	SOS SURVIVAL PRODUCTS	06/13/2022	Outreach item giveaway, the general board had decided to give away gifts that would impact public safety as well. Events for giveaways include Street fair, emergency preparedness fair and etc.	General Operations Expenditure	Outreach	\$1579.00
7	4IMPRINT, INC	06/15/2022	Outreach giveaways invoice, receipt with BACs \$304.92. Giveaways are given at Street fair, egg hunt, hollowing hunt and etc. although never required we collect emails at the various events to expand our influence with the community and sign them up for future events including the parade, tree lighting, disaster fair and etc.	General Operations Expenditure	Outreach	\$304.92
8	4IMPRINT, INC	06/15/2022	Outreach giveaways are given away at such events like the Street fair, egg hunt, Halloween hunt and etc. although never required we received stakeholders emails so that we may publicize events such as the parade, the tree lighting, the emergency fair and more. This is the best way to get community involvement and tell the stakeholders who we are; as part of our mission statement	General Operations Expenditure	Outreach	\$875.50
9	4IMPRINT, INC	06/15/2022	Outreach giveaways with invoice, receipt and BAC. We outreach to our stakeholders at various events such as the Street fair, egg hunt, Halloween hunt, and etc. though never a requirement we collect emails from stakeholders as they collect giveaways	General Operations Expenditure	Outreach	\$717.78
10	4IMPRINT, INC	06/15/2022	Outreach giveaways are given away at such events like the Street fair, egg hunt, Halloween hunt and etc. although never required we received stakeholders emails so that we may publicize events such as the parade, the tree lighting, the emergency fair and more. This is the best way to get community involvement and tell the stakeholders who we are;	General Operations Expenditure	Outreach	\$999.40

			as part of our mission statement. This is a community Favorite			
11	4IMPRINT, INC	06/15/2022	Outreach giveaways are given away at such events like the Street fair, egg hunt, Halloween hunt and etc. although never required we received stakeholders emails so that we may publicize events such as the parade, the tree lighting, the emergency fair and more. This is the best way to get community involvement and tell the stakeholders who we are; as part of our mission statement	General Operations Expenditure	Outreach	\$419.20
12	4IMPRINT, INC	06/15/2022	We were unaware that 4 imprint did not bill us from Oct 2021 for our Outreach giveaways. Please find list	General Operations Expenditure	Outreach	\$2337.38
13	4IMPRINT, INC	06/15/2022	Outreach giveaways or community events. Although each item was under thousand dollars for imprint gave a total of \$3,316.80 and divided it up with three payments of \$1000 and one payment for \$316.80. Since this was not acceptable I had for imprint refund said monies and then resubmitted individually with individual payment receipts. NOTE This was duplicated from next page and should be removed	General Operations Expenditure	Outreach	\$-1000.00
14	4IMPRINT, INC	06/15/2022	Outreach giveaways or community events. Although each item was under thousand dollars for imprint gave a total of \$3,316.80 and divided it up with three payments of \$1000 and one payment for \$316.80. Since this was not acceptable I had for imprint refund said monies and then resubmitted individually with individual payment receipts. NOTE This was duplicated from next page and should be removed	General Operations Expenditure	Outreach	\$-1000.00
15	4IMPRINT, INC	06/15/2022	Outreach giveaways on community events. Although each item was under thousand dollars 4 imprints gave a total of \$3,316.80 and divided up into three \$1000 payments and one for \$316.80. Since this was not acceptable I had 4 imprints refund all said monies and then resubmit each individual transaction with individual payments. Additionally or imprint was unable to show clear thousand dollar transactions as well as the refund and was only able to give me the attached summary.. SEE other \$1k pay	General Operations Expenditure	Outreach	\$-1000.00

16	4IMPRINT, INC	06/15/2022	Outreach giveaways or community events. Although each item was under thousand dollars for imprint gave a total of \$3,316.80 and divided it up with three payments of \$1000 and one payment for \$316.80. Since this was not acceptable I had for imprint refund said monies and then resubmitted individually with individual payment receipts. NOTE This was duplicated from other page one of these should be removed; \$316.80	General Operations Expenditure	Outreach	\$-316.80
17	Granada Hills Recreation Center	06/01/2022	Sponsor spring egg hunt	General Operations Expenditure	Outreach	\$300.00
18	Granada Hills Woman's Club	06/02/2022	NPG for a new roof	Neighborhood Purpose Grants		\$500.00
19	Granada Hills Community Foundation	06/01/2022	NPG For the Granada Hills street faire and parade	Neighborhood Purpose Grants		\$3500.00
20	J & B Landscaping, Inc.	06/18/2022	to provide a series of watering cycles to the Cedar Trees on White Oak Ave.	Community Improvement Project		\$3864.00
21	North Valley Caring Services	06/03/2022	NVCS will provide holiday chher, food, containers, wrapping paper, hygiene supplies, printing	Neighborhood Purpose Grants		\$2500.00
<b>Subtotal:</b>						<b>\$16363.36</b>

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

Administrative Services Division

**Neighborhood Council (NC) Funding Program**

Board Action Certification (BAC) Form



NC Name: Granada Hills South

Meeting Date: September 2 2021

**Budget Fiscal Year:** 2021 - 2022

Agenda Item No: VI. A.

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

approves an NPG in the amount of \$3,500 to the Granada Hills Community Foundation for the Street Faire on Oct. 23rd, 2021 and the Holiday Parade on Dec. 5th, 2021.

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.

Please remain in the room until after the vote is complete.							
Board Member's First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Carlos Amador	Member	X					
Mike Benedetto	President						
Launa Bogartz	Treasurer				X		X
John Horn	Member	X					
Verej Isanians	Member				X		
Michael Jordan	Member	X					
George Karam	Member	X					
Sally Kolstad	Member						
Christine Lamonica	Member	X				X	
Jerilyn Lopez-Mendoza	Member	X					
Emayatzy Oliver	Member	X					
Abbey Ronquillo	Member	X					
Carolyn Sanderson	Member		X				
Chantal Serrano	Member	X					
Brad Smith	Member	X					
Chavon Smith	Member	X					
Colleen Toumayan	Vice-President	X					
Board Quorum: 9	Total:	12	1	0	2	1	1

We, the authorized signers of the above named Neighborhood Council, do hereby certify that the foregoing is a true and correct copy of the minutes of the meeting held on \_\_\_\_\_, 20\_\_\_\_.

**Board Quorum: 9**

**Total:**

12

1

1

3

1

1


	Total	12	1	0	2	1	1
--	-------	----	---	---	---	---	---

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

re Colleen Toumays  
Colleen Toumays, Vice-President

Authorized Signature: \_\_\_\_\_

FR: 

Print/Type Name:

Print/Type Name:

Chavon Smith, Alternate Signer

Date: 9-2-21

Date: 9-2-21

**Neighborhood Council Funding Program****APPLICATION for Neighborhood Purposes Grant (NPG)**

2

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: \_\_\_\_\_

**SECTION I - APPLICANT INFORMATION**

1a) Granada Hills Community Foundation 46-3612720 California Jul 25, 2014  
*Organization Name Federal I.D. # (EIN#) State of Incorporation Date of 501(c)(3) Status (if applicable)*

1b) 16911 San Fernando Mission Blvd. #219 Granada Hills CA 91344  
*Organization Mailing Address City State Zip Code*

1c) \_\_\_\_\_  
*Business Address (if different) City State Zip Code*

**1d) PRIMARY CONTACT INFORMATION:**

*Name Phone Email*

**2) Type of Organization- Please select one:**

☐ Public School (not to include private schools)  
 Attach Signed letter on School Letterhead

or

☒ 501(c)(3) Non-Profit (other than religious institutions)  
 Attach IRS Determination Letter

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.**

Granada Hills Community Foundation is a primary source of funding for the Granada Hills Chamber of Commerce to support the needs of the annual Granada Hills Community Holiday Parade and the Granada Hills Community Street Faire.

**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)**

Granada Hills Holiday Parade is a non-discriminatory event and welcomes all stakeholders from any community. The parade includes bands, music, floats, autos, and marchers from various organizations. There are thousands of participants and spectators with 3,500 plus children involved in the parade. Granada Hills Holiday Parade has become one of the largest independent parades in the Valley. Funds raised on NPGs will be used to facilitate the Granada Hills Holiday Parade.

Granada Hills Street Faire is a non-discriminatory event and welcomes all stakeholders from any community. The Street Faire includes local vendors, crafts people and auto clubs from various organizations. Funds raised on NPGs will be used to facilitate the Granada Hills Street

**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>
		\$	\$
		\$	\$
		\$	\$

6b)	<b>Non-Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
	General Parade & Street Faire Activities, supplies and support	\$ 3,500.00	\$ 35,000.00
		\$	\$
		\$	\$

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

☐ No ☒ Yes

If Yes, please list names of NCs: All Region two NCs and Mission Hills

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:

<b>Source of Funding</b>	<b>Amount</b>	<b>Total Projected Cost</b>
Various Sponsor, Participants, Vendors, and various donors	\$ 40,000.00	\$ 40,000.00
Neighborhood Councils (Region two and and Mission Hills)	\$ 35,000.00	\$ 35,000.00
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: \$ 3,500.00

10a) Start date: 8 / 1 / 21 10b) Date Funds Required: 10 / 31 / 21 10c) Expected Completion Date: 12 / 05 / 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:

<b>Name of NC Board Member</b>	<b>Relationship to Applicant</b>

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\*

Alisa Altman

President

Alisa Altman

7/19/2021

PRINT Name

Title

Signature

Date

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

Dave Beauvais

Secretary

Dave Beauvais

7/19/2021

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

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

DEPARTMENT OF THE TREASURY

Date: **JUL 25 2014**

GRANADA HILLS COMMUNITY FOUNDATION  
C/O JOHN F WEITKAMP  
10724 WHITE OAK AVE  
GRANADA HILLS, CA 91344

Employer Identification Number:  
46-3612720  
DLN:  
17053296392013  
Contact Person:  
LINDA DANIELS ID# 75096  
Contact Telephone Number:  
(877) 829-3500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990 Required:  
Yes  
Effective Date of Exemption:  
January 23, 2013  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

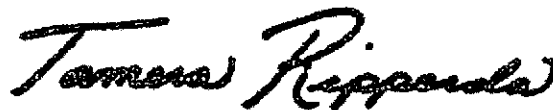
Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://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.

Sincerely,



Director, Exempt Organizations

Letter 947





# 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 Neighborhood Council

### SECTION I - APPLICANT INFORMATION

- 1a) Granada Hills Woman's Club 95-6098261 CA  
Organization Name Federal I.D. # (EIN#) State of Incorporation Date of 501(c)(3) Status (if applicable)
- 1b) 10666 White Oak Ave Granada Hills CA 91344  
Organization Mailing Address City State Zip Code
- 1c) \_\_\_\_\_  
Business Address (if different) City State Zip Code

#### 1d) PRIMARY CONTACT INFORMATION:

Pat Silver 818 968 8648 psilver0401@att.net  
Name Phone Email

#### 2) Type of Organization- Please select one:

☐ Public School (not to include private schools)  
Attach Signed letter on School Letterhead

or

☒ 501(c)(3) Non-Profit (other than religious institutions)  
Attach IRS Determination Letter

- 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.

Our clubhouse was built in 1950. We have repainted the facility and repaired the parking lot, but we now must replace our roof. The funds would be used to replace the roof

#### 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 upkeep of our facility is an important use of our fund raising dollars. We are proud of our recent repainting and repaving of our parking lot. Both those projects were mostly funded by Granada Hills Woman's Club member donations and a donation from CD-12. Due to Covid we have been unable to rent our facility. The rental of our facility is our major income. Our membership is 83 members of which I estimate that one third live in the GHSNC district. Permits were obtained, roof has been replaced and installation has passed the two required building and safety inspections.

**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>
	<i>NONE</i>	\$	\$
		\$	\$
		\$	\$

6b)	<b>Non-Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
	Remove current roof and replace roof	\$500	\$32000
		\$	\$
		\$	\$

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

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:

<b>Source of Funding</b>	<b>Amount</b>	<b>Total Projected Cost</b>
We are also submitting an NPG to GHNNC	\$500	\$32,000
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: **\$500**

10a) Start date: 10/11/21 10b) Date Funds Required: 12/29/21 10c) Expected Completion Date: 10/14/21  
 (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:

<b>Name of NC Board Member</b>	<b>Relationship to Applicant</b>

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\*

Pat Silver

PRINT Name

President

Title

*Pat Silver*

Signature

12/8/21

Date

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

Barbara Murphy

PRINT Name

Recording Secretary

Title

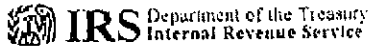
*Barbara J Murphy*

Signature

12/8/21

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



CINCINNATI OH 45999-0038

In reply refer to: 0248254921  
Feb. 07, 2018 LTR 4167C 0  
95-2009211 000000 00

00018018  
BODC: TE

CALIFORNIA FEDERATION OF WOMENS  
CLUBS  
% MODY D ABULENCIA  
5556 LINDEN ST  
DUBLIN CA 94568

027811

Employer identification number: 95-2009211  
Group exemption number: 8288

Dear Taxpayer:

This is in response to your request dated Jan. 29, 2018, for information about your tax-exempt status.

Our records indicate we issued a determination letter to you in November 1998, and you're currently exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also recognized the subordinates on the list you submitted as exempt from federal income tax under IRC Section 501(c)(3).

For federal income tax purposes, donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106 and 2522.

Because IRC Section 170(c) describes your subordinate organizations, donors can deduct contributions they make to them.

Please refer to [www.irs.gov/charities](http://www.irs.gov/charities) for information about filing requirements. Specifically, IRC Section 6033(j) provides that, if you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

In addition, each subordinate organization is subject to automatic revocation if it doesn't file a required return or notice for three consecutive years. Subordinate organizations can file required returns or notices individually or as part of a group return.

For tax forms, instructions, and publications, visit [www.irs.gov](http://www.irs.gov) or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

Page 24

956096775	SUB	CALIFORNIA FEDERATION OF WOMEN'S CLUBS P. O. BOX 465 WOMANS CLUB OF HOLTVILLE	HOLTVILLE	CA	92250-046565	c/o JEANNETTE MONROY	5
956096782	SUB	CALIFORNIA FEDERATION OF WOMEN'S CLUBS P.O. BOX 1323 WOMENS COMMUNITY CLUB OF BRAWLEY	BRAWLEY	CA	92227-1323234	c/o TIFFANY HENSLEY	5
956097387	SUB	CALIFORNIA FEDERATION OF WOMEN'S CLUBS 601 N KIRBY ST SPC 525 DE ANZA DISTRICT	HEMET	CA	92545-595325	c/o EMILY GERSTBACHER	5
956098261	SUB	CALIFORNIA FEDERATION OF WOMEN'S CLUBS P.O. BOX 3364 GRANADA HILLS WOMANS CLUB	GRANADA HILLS	CA	91394-036464	c/o DEBBIE PIETRASZKO	5
956099125	SUB	CALIFORNIA FEDERATION OF WOMEN'S CLUBS P.O. BOX 393 JULIAN WOMANS CLUB	JULIAN	CA	92036-0393933	c/o SUSAN FOWLER	5
956100081	SUB	CALIFORNIA FEDERATION OF WOMEN'S CLUBS P.O. BOX 415 SAN CLEMENTE WOMANS CLUB	SAN CLEMENTE	CA	92674-0415156	c/o JANET PARKER	5
956100399	SUB	CALIFORNIA FEDERATION OF WOMEN'S CLUBS 3277 DISCOVERY WAY SIERRA CAHUENGA DISTRICT	ROSAMOND	CA	93560-6224779	c/o PAM POTTER	5
956102281	SUB	CALIFORNIA FEDERATION OF WOMEN'S CLUBS P.O. BOX 138 TIERRA ADORADA DISTRICT	CAYUCOS	CA	93430-0138388	c/o JUDY CONNORS	5



**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 Neighborhood Council

**SECTION I - APPLICANT INFORMATION**

1a) NORTH VALLEY CARING SERVICES 95-444561 CA 02/1996  
*Organization Name* *Federal I.D. # (EIN#)* *State of Incorporation* *Date of 501(c)(3) Status (if applicable)*

1b) 15453 RAYEN STREET NORTH HILLS CA 91343  
*Organization Mailing Address* *City* *State* *Zip Code*

1c) \_\_\_\_\_  
*Business Address (if different)* *City* *State* *Zip Code*

**1d) PRIMARY CONTACT INFORMATION:**

LAURA RATHBONE 818-534-6059 LRATHBONE@NVCSINC.ORG  
*Name* *Phone* *Email*

**2) Type of Organization- Please select one:**

☐ Public School (not to include private schools)  
 Attach Signed letter on School Letterhead

or

☒ 501(c)(3) Non-Profit (other than religious institutions)  
 Attach IRS Determination Letter

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.**

North Valley Caring Services will be bringing holiday cheer throughout the community once again this year and we need your help! Grants will be used to purchase and distribute holiday food, gifts, and cheer to NVCS food pantry recipients, the unhoused community, and families living in motels.

With the help from NC's last year, NVCS was able to provide over 3000 households with gifts, meals and holiday cheer. We decorated our truck, asked Santa to hop in, and hand delivered gifts and meals to families living in motels and on the

Our collected data shows that 1,021 households in Granada Hills are recipients of our food pantry.

**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)**

This grant will be used to support the community who struggles with financial hardships during the holiday season. A portion of the funding received will cover printing costs of promotional materials that will include the GHSCNC logo

**SECTION III - PROJECT BUDGET OUTLINE**

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

6a) Personnel Related Expenses	Requested of NC	Total Projected Cost
	\$	\$
	\$	\$
	\$	\$

6b) Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Food, containers, wrapping paper, hygiene supplies, printing	\$2500	\$20,000
	\$	\$
	\$	\$

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?  
☐ No ☒ Yes If Yes, please list names of NCs: Sylmar, North Hills East, North Hills West, Mission Hills, Lake Balboa

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: \$ 2500

10a) Start date: 11/15/21 10b) Date Funds Required: 11/15/21 10c) Expected Completion Date: 01/01/22  
 (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\***

<u>Manuel Flores</u>	<u>Executive Director</u>	<u>Manuel Flores</u>	<u>11/1/2021</u>
<b>PRINT Name</b>	<b>Title</b>	<b>Signature</b>	<b>Date</b>

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

<u>Martha Nava</u>	<u>Admin</u>	<u>Martha Nava</u>	<u>11/1/2021</u>
<b>PRINT Name</b>	<b>Title</b>	<b>Signature</b>	<b>Date</b>

\* 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





Department of the Treasury  
Internal Revenue Service

P.O. Box 2508  
Cincinnati OH 45201

In reply refer to: 0248153327  
Feb. 10, 2014 LTR 4170C 0  
95-4444561 000000 00

00017356

BODC: TE

NORTH VALLEY CARING SERVICES  
15435 RAYEN ST  
NORTH HILLS CA 91343



011298

Person to Contact: Ms. Espelage  
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your request of Jan. 30, 2014, regarding the tax-exempt status of North Valley Caring Services.

Our records indicate that a determination letter was issued in February 1996, granting this organization exemption from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

Our records also indicate this organization is not a private foundation within the meaning of section 509(a) of the Code because it is described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to this organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to the organization or for its 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.

If you have any questions, please call us at the telephone number shown above.



Date: 5-24-22

**J & B Landscaping Inc.**  
13741 Foothill Blvd #210  
Sylmar, CA 91342 US  
(818)367-8000  
jandblandscaping635@yahoo.com

**BILL TO**  
Carlos Amador  
Granada Hills

**INVOICE #** 12241  
**DATE** 05/12/2022  
**DUE DATE** 06/11/2022  
**TERMS** Net 30

ACTIVITY	QTY	RATE	AMOUNT
<b>Maintenance</b> Supply water to water 135 Trees twice a week with 12GL for each tree for only one week. Trees located between San Jose and San Fernando Mission Rd. Price includes labor.	1	3,864.00	3,864.00

BALANCE DUE **\$3,864.00**



## Granada Hills Recreation Center

16730 Chatsworth St.  
Granada Hills, CA 91344  
Phone 818-363-3556

**TO:**

Granada Hills South Neighborhood Council\  
16911 San Fernando Mission Blvd. PMB 137  
Granada Hill, CA 91344

DATE: May 31, 2022

**COMMENTS OR SPECIAL INSTRUCTIONS:**

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
	Sponsorship for Spring Egg Hunt for Materials for the free community event, including Baskets and plastic eggs.		\$300
Make all checks payable to : <b>City of L.A. Department of Recreation and Parks</b> If you have any questions concerning this memo, contact Michelle Gross De La Hoya at 818-363-3556		SUBTOTAL	\$300
		PERMIT FEE	
		TOTAL DUE	\$300



Invoice number: 4155927274

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 .....4155927274

Invoice date .....May 31, 2022

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

Domain name .....ghsnc.org

## Google Workspace

[illegible]

Total in USD

**\$122.48**

**Summary for May 1, 2022 - May 31, 2022**

1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

Subtotal in USD

\$118.83

Local sales tax (3.07%)

\$3.65

Total in USD

\$122.48

**You will be automatically charged for any amount due.**

Subscription	Description	Interval	Quantity	Amount(\$)
G Suite Basic	Usage	May 1 - May 3	18	10.45
G Suite Basic	Usage	May 4 - May 31	20	108.38
Subtotal in USD				\$118.83
Local sales tax (3.07%)				\$3.65
Total in USD				\$122.48

**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>



## Payment Receipt

Google LLC  
1600 Amphitheatre Pkwy  
Mountain View, CA 94043  
United States

**Payment date** Jun 1, 2022  
**Billing ID** 9930-5897-7673  
**Payment method** Mastercard •••• 8162  
**Payment number** M01644257232

Tax identification number  
77-0493581

Granada Hills South Neighborhood Council  
Aaron DeVandry  
18403 W Vogel Ave  
Waddell, AZ 85355  
United States

Description	
Payment amount	\$122.48



A promotional graphic for the Public Storage App. The background is a dark, grainy image of a storage unit interior. Overlaid on the left is a dark rectangular box with white text. On the right is a white smartphone mockup showing the app's interface. The text in the dark box reads: 'PUBLIC STORAGE APP' in small caps, followed by 'The Ultimate Tool for Contactless Storage' in large, bold letters. Below this, it says 'Use YOUR PHONE to Open Gates, Doors & Elevators' and a large, rounded 'DOWNLOAD' button. The smartphone screen shows a notification: 'You are within range for access.' followed by 'Granada Hills, CA 91344' and a large 'OPEN' button with a padlock icon. Below the phone is a small 'CLOSE' button.

**PUBLIC STORAGE APP**

**The Ultimate Tool for Contactless Storage**

Use **YOUR PHONE** to Open  
Gates, Doors & Elevators

**DOWNLOAD**

You are within range  
for access.  
Granada Hills, CA  
91344

**OPEN**

CLOSE

Your Account Details

[Log In](#)

### COLLEEN TOUMAYAN

Account 54851594  
Number:  
Phone: (818) 800-8836  
Email: [colleen@toumayangroup.com](mailto:colleen@toumayangroup.com)

### Balance Due Details

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

**SPACE** C221  
**NUMBER:**

**SPACE SIZE:** 10x10

<b>Monthly Charges</b>		<b>Current Balance</b>	
Monthly	\$263.00	Current Balance/Due	\$0.00
Rate:		Now:	
Rent Tax:	\$0.00	(as of 05/11/2022)	
Insurance:	\$15.00	Due Next:	\$278.00
		(06/01/2022 to	
<b>Monthly</b>	<b>\$278.00</b>	06/30/2022)	
<b>Total:</b>		<b>Total Due:</b>	<b>\$278.00</b>

**TOTAL DUE:**  
**\$278.00**

**Make This Payment**

	<b>† PAST DUE/DUE NOW</b>	<b>† DUE NEXT 06/01/2022</b>
<b>RENT</b>	<b>\$0.00</b>	<b>\$263.00</b>
<b>INSURANCE</b>	<b>\$0.00</b>	<b>\$15.00</b>
<b>TOTAL</b>	<b>\$0.00</b>	<b>\$278.00</b>

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

† Changes to your rental agreement may result in updates to your payment due date or rental term. 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.



Michael Benedetto &lt;mbenedetto@ghsnc.org&gt;

---

**Fw: We've received your payment**


---

colleen toumayangroup.com <colleen@toumayangroup.com>  
To: Michael Benedetto <mbenedetto@ghsnc.org>

Sat, Jun 18, 2022 at 9:25 AM

---

**From:** Public Storage <DoNotReply@Publicstorage.com>  
**Sent:** Tuesday, June 7, 2022 10:31 AM  
**To:** colleen toumayangroup.com <colleen@toumayangroup.com>  
**Subject:** We've received your payment

Have questions? Ask our [virtual assistant](#) **Your Payment Receipt # 221917881\_00000001**

This confirms your payment of \$278.00 on 06/07/2022 by Credit Card. Thanks for using Public Storage!

[Your Account Details](#)[Log In](#)**COLLEEN TOUMAYAN****Account**

**Number:** 54851594  
**Phone:** (818) 800-8836  
**Email:** colleen@toumayangroup.com

**Storage Payment Details**

**STORAGE LOCATION:** 18175 Chatsworth Ave  
Granada Hills, CA 91344

**PAYMENT RECEIVED:**  
**\$278.00**

**SPACE NUMBER:** C221

**SPACE SIZE:** 10x10

## Your Payment Details

\* When you provide a check as payment, you authorize us to use information from your check to make a one-time electronic fund transfer from your account. In certain circumstances, such as for technical or processing reasons, we may process your payment as a check transaction.

**Thanks for using Public Storage.**



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

Make a payment, view your transaction history,  
or sign up for AutoPay and never forget a  
payment.

Access your gate code, manage your insurance coverage, or schedule a move-out date.

Get directions to the property, change your move-in date, or access helpful information before you move in.

Update your contact information and your email notification preferences.



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

**Main Address**

MIKE BENEDETTO  
GRANADA HILLS SOUTH NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760

**Invoice Address**

Mike Benedetto  
Granada Hills South NC  
11024 BALBOA BLVD STE GH  
Box 767  
Granada Hills CA 91344  
USA

**Shipping Address**

Mike Benedetto  
Granada Hills South NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760  
USA  
Tel: 818-723-8087

**Order Number:** 22998597

**Date:** June 13, 2022

**Account No.:** 2447365

**Your Order No.:**

**Questions Call:** Lori Mades

**Phone:** 877-446-7746 Ext. 8175

**Fax:** 877-725-8656

**Email:** lmades@4imprint.com

**Item Wave Cap**

**Colors** (Crown,Wave): Stone, Black

Qty	Item #	Description	Unit \$	Price \$	Total \$
122	8528	Wave Cap	5.7600	702.72	702.72
1	Coupon	Coupon Code	-68.7720	-68.77	-68.77
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00
122	*Embroidery	Embroidery Run Charge	0.0000	0.00	0.00
		Freight		40.00	40.00
		<b>Tax</b>			58.83
					717.78

**Item Power Clip - Translucent**

**Colors** (Clip,Grip): Translucent Dark Green, Black

Qty	Item #	Description	Unit \$	Price \$	Total \$
1,100	2245-T	Power Clip - Translucent	0.7200	792.00	792.00
1	Coupon	Coupon Code	-79.2000	-79.20	-79.20
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00
		Freight		95.00	95.00
		<b>Tax</b>			67.70
					875.50

**Item Measuring Cup - 12 oz.**

**Colors** (Cup,Trim): Clear, Blue

Qty	Item #	Description	Unit \$	Price \$	Total \$
100	128703-12	Measuring Cup - 12 oz.	4.1500	415.00	415.00
1	Coupon	Coupon Code	-40.0000	-40.00	-40.00
1	Set-Up Charge	Set-Up Charge	45.0000	45.00	45.00
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00
1	Discounts	Free Set-Up	-45.0000	-45.00	-45.00
		Freight		25.00	25.00
		<b>Tax</b>			34.20
					419.20

**Item Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color**

**Colors** (Polo,Trim) : See Below

Qty	Item #	Description	Unit \$	Price \$	Total \$
20	105469-FC	Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color	14.7100	294.20	294.20
		4 - Medium : Navy, Navy	0.0000	0.00	0.00
		7 - Large : Navy, Navy	0.0000	0.00	0.00
		7 - Extra Large : Navy, Navy	0.0000	0.00	0.00



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

Order Number: 22998597  
Date: June 13, 2022  
Account No.: 2447365  
Your Order No.:

Questions Call: Lori Mades  
Phone: 877-446-7746 Ext. 8175  
Fax: 877-725-8656  
Email: lmades@4imprint.com

		2 - Extra Extra Large : Navy, Navy	0.0000	0.00	0.00
1	Coupon	Coupon Code	-29.4200	-29.42	-29.42
1	Discounts	Free Set-Up	-35.0000	-35.00	-35.00
1	Set-Up Charge	Set-Up Charge(Per Order Line)	35.0000	35.00	35.00
20	Run Charge	Run Charge Per Item	0.0000	0.00	0.00
		Freight		15.00	15.00
				<b>Tax</b>	<b>25.14</b>
					<b>304.92</b>

**Item Sightseeing 20-Can Event Cooler****Colors**

(Cooler, Trim): Hunter Green, Black

Qty	Item #	Description	Unit \$	Price \$	Total \$
170	144189	Sightseeing 20-Can Event Cooler	5.0700	861.90	861.90
1	Coupon	Coupon Code	-86.1900	-86.19	-86.19
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00
		Freight		150.00	150.00
				<b>Tax</b>	<b>73.69</b>
					<b>999.40</b>
				<b>Grand Total</b>	<b>3,316.80</b>

**Thank You! We appreciate your business.**

**Any overruns you may have received are yours with our compliments.**

- To ensure proper credit to your account, please quote "22998597/2447365" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

**4imprint Federal ID #39-1837105, GSA Contract # GS-07F-9626S.** A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - [www.4imprint.com](http://www.4imprint.com)

**Please Remit to:**

**4imprint, Inc.**

**25303 Network Place**

**Chicago, IL 60673-1253**

Term ID: 001

**Sale - Approved**

Date	06/03/22	Time 11:30:23
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	053576	
<b>Amount</b>	<b>\$921.74</b>	
<b>Tax</b>	<b>\$78.26</b>	
<b>Total Amount</b>	<b>\$1,000.00</b>	

Customer Copy

Term ID: 001

**Refund - Approved**

Date	06/15/22	Time 16:09:09
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	063679	
<b>Amount</b>	<b>\$1,000.00</b>	

Customer Copy



☐ 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.**

①

Date: 5-24-22

**Agenda Item No: VII. Outreach**

approves up to \$5,000 for promotional items for outreach events such as the Street Fair, Parade, Tree Lighting, Holiday Egg Hunt and Movie Night in the Park.

☐ 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.

Board Quorum: 9	Total:	10	0	1	5	0	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.							

Date: 10-7-21

Date: 10-7-21

**POSTAL PLUS**

11024 BALBOA BLVD  
GRANADA HILLS, CA 91344  
8183660360

Cashier: KANWAL SINGH

Transaction **207460**

**Total** **\$65.70**

CREDIT CARD SALE **\$65.70**  
MASTERCARD 1188

03-Jun-2022 5:06:04P  
\$65.70 | Method: EMV  
MASTERCARD  
XXXXXXXXXXXX1188  
MICHAEL BENEDETTO  
Reference ID: 215500555483  
Auth ID: 066898  
MID: \*\*\*\*\*8884  
AID: A0000000041010  
AthNtwkNm: MASTERCARD  
PIN VERIFIED

Online: <https://clover.com/p/9RB760FPDPSFC>

**\*\*\* REPRINT \*\*\***

Payment 9RB760FP0PSFC

Clover Privacy Policy  
<https://clover.com/privacy>

Postal Plus  
11024 Balboa Blvd  
GRANADA HILLS, CA 91344  
818-366-0360

Copies	400 @ 0.15	60.00 TX
SUBTOTAL		60.00
TAX		
State Tax on 60.00		5.70
TOTAL		65.70
TEND Cash		65.70

Total shipments: 0  
Customer: None selected

11/05/2021  
03:47 PM

#364882  
Workstation: 0 - Master Workstation

\*\*\*\*\*  
Thank you for your business  
\*\*\*\*\*



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

**Main Address**

MIKE BENEDETTO  
GRANADA HILLS SOUTH NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760

**Invoice Address**

Mike Benedetto  
Granada Hills South NC  
11024 BALBOA BLVD STE GH  
Box 767  
Granada Hills CA 91344  
USA

**Shipping Address**

Mike Benedetto  
Granada Hills South NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760  
USA  
Tel: 818-723-8087

**Order Number:** 22998597

**Date:** June 13, 2022

**Account No.:** 2447365

**Your Order No.:**

**Questions Call:** Lori Mades

**Phone:** 877-446-7746 Ext. 8175

**Fax:** 877-725-8656

**Email:** lmades@4imprint.com

**Item Wave Cap**

**Colors** (Crown,Wave): Stone, Black

Qty	Item #	Description	Unit \$	Price \$	Total \$
122	8528	Wave Cap	5.7600	702.72	702.72
1	Coupon	Coupon Code	-68.7720	-68.77	-68.77
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00
122	*Embroidery	Embroidery Run Charge	0.0000	0.00	0.00
		Freight		40.00	40.00
				<b>Tax</b>	58.83
					717.78

**Item Power Clip - Translucent**

**Colors** (Clip,Grip): Translucent Dark Green, Black

Qty	Item #	Description	Unit \$	Price \$	Total \$
1,100	2245-T	Power Clip - Translucent	0.7200	792.00	792.00
1	Coupon	Coupon Code	-79.2000	-79.20	-79.20
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00
		Freight		95.00	95.00
				<b>Tax</b>	67.70
					875.50

**Item Measuring Cup - 12 oz.**

**Colors** (Cup,Trim): Clear, Blue

Qty	Item #	Description	Unit \$	Price \$	Total \$
100	128703-12	Measuring Cup - 12 oz.	4.1500	415.00	415.00
1	Coupon	Coupon Code	-40.0000	-40.00	-40.00
1	Set-Up Charge	Set-Up Charge	45.0000	45.00	45.00
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00
1	Discounts	Free Set-Up	-45.0000	-45.00	-45.00
		Freight		25.00	25.00
				<b>Tax</b>	34.20
					419.20

**Item Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color**

**Colors** (Polo,Trim): See Below

Qty	Item #	Description	Unit \$	Price \$	Total \$
20	105469-FC	Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color	14.7100	294.20	294.20
		4 - Medium : Navy, Navy	0.0000	0.00	0.00
		7 - Large : Navy, Navy	0.0000	0.00	0.00
		7 - Extra Large : Navy, Navy	0.0000	0.00	0.00



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

<b>Order Number:</b>	22998597	<b>Questions Call:</b>	Lori Mades
<b>Date:</b>	June 13, 2022	<b>Phone:</b>	877-446-7746 Ext. 8175
<b>Account No.:</b>	2447365	<b>Fax:</b>	877-725-8656
<b>Your Order No.:</b>		<b>Email:</b>	lmades@4imprint.com

		2 - Extra Extra Large : Navy, Navy	0.0000	0.00	0.00
1	Coupon	Coupon Code	-29.4200	-29.42	-29.42
1	Discounts	Free Set-Up	-35.0000	-35.00	-35.00
1	Set-Up Charge	Set-Up Charge(Per Order Line)	35.0000	35.00	35.00
20	Run Charge	Run Charge Per Item	0.0000	0.00	0.00
		Freight		15.00	15.00
				<b>Tax</b>	25.14
					304.92

Item Sightseeing 20-Can Event Cooler			Colors (Cooler,Trim): Hunter Green, Black		
Qty	Item #	Description	Unit \$	Price \$	Total \$
170	144189	Sightseeing 20-Can Event Cooler	5.0700	861.90	861.90
1	Coupon	Coupon Code	-86.1900	-86.19	-86.19
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00
		Freight		150.00	150.00
				<b>Tax</b>	73.69
					999.40
				<b>Grand Total</b>	3,316.80

**Thank You! We appreciate your business.**  
**Any overruns you may have received are yours with our compliments.**

- To ensure proper credit to your account, please quote "22998597/2447365" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

**4imprint Federal ID #39-1837105, GSA Contract # GS-07F-9626S.** A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - [www.4imprint.com](http://www.4imprint.com)

**Please Remit to:**  
**4imprint, Inc.**  
**25303 Network Place**  
**Chicago, IL 60673-1253**

Term ID: 001

**Sale - Approved**

Date	06/07/22	Time 17:37:10
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	015558	
<b>Amount</b>	<b>\$292.01</b>	
<b>Tax</b>	<b>\$24.79</b>	
<b>Total Amount</b>	<b>\$316.80</b>	

Customer Copy

## Refund - Approved

Date	06/15/22	Time 16:09:54
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	052361	
<b>Amount</b>	<b>\$316.80</b>	

Customer Copy

## Board Action Certification (BAC) Form

**Agenda Item No: IX. Outreach B.**

approve up to \$14,000 for outreach giveaways and materials along with refilling the helium balloon tanks

☐ 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.**

0

Date:





# SOS SURVIVAL PRODUCTS

15705 Strathern St #11 • Van Nuys, CA 91406

Phone: 800 479-7998 • Fax: 818 909-0360

www.sosproducts.com

## INVOICE

861482



Invoice Date: 06/13/2022 12:36

Customer ID: 1614B

Open ID: R9-016133

Ship Via: WILL CALL

Terms: PAID

PO: VERBAL MIKE

### BILL TO

GRANADA HILLS SOUTH NC

MIKE BENEDETTO

11024 BALBOA BLVD

BOX 767

Granada Hills, CA 91344

U.S.A.

### SHIP TO

GRANADA HILLS SOUTH NC

MIKE BENEDETTO

11024 BALBOA BLVD

BOX 767

Granada Hills, CA 91344

U.S.A.

BILL TO: (818) 723-8087 | mbenedetto@ghsnc.org

SHIP TO: (818) 723-8087

#	SKU	DESCRIPTION	QTY	PRICE	EXT	TAX
1	180	INDIVIDUAL AUTO/SURVIVAL KIT	48	27.00	1,296.00	Y

### PRINTING INFORMATION:

2	screen	SET UP FEE	1	50.00	50.00	Y
3	screen25	Printing Charge	48	2.00	96.00	Y

Location: Pocket

Color: White

Logo:

GRANADA HILLS SOUTH

NEIGHBORHOOD COUNCIL

GHSNC.ORG

CURBSIDE PICKUP

BY APPOINTMENT

### \*\*Credit Card Payment Summary\*\*

Trans: 7541074492 | Auth: 068156 | Card: XX1188

#	SKU	DESCRIPTION	QTY	PRICE	EXT	TAX
SUBTOTALS:			97		1,442.00	

# Freight

COUNTY	46.87
STATE	90.13

SALESPERSON: JEFF | [jeff@sosproducts.com](mailto:jeff@sosproducts.com)



Tax Total	137.00
Deposit	0.00
<b>TOTAL</b>	<b>1,579.00</b>

MC	1,579.00
<b>TOTAL</b>	<b>1,579.00</b>

I agree to pay the above amount according to the card issuer agreement (morchant agreement if credit voucher)

SIGNATURE \_\_\_\_\_

sent to Mr





101 Commerce Street  
Oshkosh, WI 54901

Invoice Address

Mike Benedetto  
Granada Hills South NC  
11024 Balboa Blvd Ste GH  
Box 767  
Granada Hills, CA 91344

Toll Free 800-982-9159  
Free Fax 800-355-5043

Your Order No.	22998597-4	Account No.	2447365
Invoice Date	June 14, 2022	Account Rep	Lori Mades

Qty	Item #	Description	Unit \$	Price	Total
20	105469-FC	Gildan 6 oz. DryBlend 50/50 Jersey Polo	\$14.71	\$294.20	\$294.20
		4-Medium: Navy, Navy	\$0.00	\$0.00	\$0.00
		7-Large: Navy, Navy	\$0.00	\$0.00	\$0.00
		7-Extra Large: Navy, Navy	\$0.00	\$0.00	\$0.00
		2-Extra Extra Large: Navy, Navy	\$0.00	\$0.00	\$0.00
1	Coupon	Coupon Code	-\$29.42	-\$29.42	-\$29.42
1	Set-Up	Set-Up Charge(Per Order Line)	\$35.00	\$35.00	\$35.00
1	Discounts	Free Set-Up	-\$35.00	-\$35.00	-\$35.00
20	Run Charge	Run Charge Per Item	\$0.00	\$0.00	\$0.00
		Freight		\$15.00	\$15.00
				<b>Tax</b>	\$25.14
					\$304.92
<b>Grand Total</b>					<b>\$304.92</b>

**Thank you! We appreciate your business.**

**4imprint Inc. 25303 Network Place, Chicago, IL 60673-12531**

- ◆ If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- ◆ **Any questions regarding your invoice?** Please call 1-800-982-8979. Our terms are Net 30.

**4imprint Federal ID #39-1837105.** A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website – [www.4imprint.com](http://www.4imprint.com)

Term ID: 001

**Sale - Approved**

Date	06/15/22	Time 16:13:54
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX	1188
Order ID	22998597	
Approval Code	044243	
<b>Amount</b>	<b>\$281.06</b>	
<b>Tax</b>	<b>\$23.86</b>	
<b>Total Amount</b>	<b>\$304.92</b>	

Customer Copy

Self to H





101 Commerce Street  
Oshkosh, WI 54901

Invoice Address

Mike Bendetto  
Granada Hills South NC  
11024 Balboa Blvd Ste GH  
Box 767  
Granada Hills, CA 91344

Toll Free 800-982-9159  
Free Fax 800-355-5043

<b>Your Order No.</b>	22998597-2	<b>Account No.</b>	2447365
<b>Invoice Date</b>	June 14, 2022	<b>Account Rep</b>	Lori Mades

Qty	Item #	Description	Unit \$	Price	Total
1,100	2245-T	Power Clip-Translucent	\$0.72	\$792.00	\$792.00
1	Coupon	Coupon Code	-\$79.20	-\$79.20	-\$79.20
1	Set-Up	Set-Up Charge	\$55.00	\$55.00	\$55.00
1	Discounts	Free Set-Up	-\$55.00	-\$55.00	-\$55.00
		Freight		\$95.00	\$95.00
				<b>Tax</b>	\$67.70
					\$875.50
<b>Grand Total</b>					<b>\$875.50</b>

**Thank you! We appreciate your business.**

**4imprint Inc. 25303 Network Place, Chicago, IL 60673-12531**

- ♦ If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- ♦ **Any questions regarding your invoice?** Please call 1-800-982-8979. Our terms are Net 30.

**4imprint Federal ID #39-1837105.** A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website – [www.4imprint.com](http://www.4imprint.com)

Term ID: 001

**Sale - Approved**

Date	06/15/22	Time 16:13:04
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX	1188
Order ID	22998597	
Approval Code	004172	
<b>Amount</b>	<b>\$806.99</b>	
<b>Tax</b>	<b>\$68.51</b>	
<b>Total Amount</b>	<b>\$875.50</b>	

Customer Copy







101 Commerce Street  
Oshkosh, WI 54901

Invoice Address

Mike Benedetto  
Granada Hills South NC  
1024 Balboa Blvd Ste GH  
Box 767  
Granada Hills, CA 91344

Toll Free 800-982-9159  
Free Fax 800-355-5043

<b>Your Order No.</b>	22998597-1	<b>Account No.</b>	2447365
<b>Invoice Date</b>	June 14, 2022	<b>Account Rep</b>	Lori Mades

Qty	Item #	Description	Unit \$	Price	Total
122	8528	Wave Cap	\$5.76	\$702.72	\$702.72
1	Coupon	Coupon Code	-\$68.77	-\$68.77	-\$68.77
1	Discounts	Good Will Discount	-\$15.00	-\$15.00	-\$15.00
122	Embroidery	Embroidery Run Charge	\$0.00	\$0.00	\$0.00
		Freight		\$40.00	\$40.00
				<b>Tax</b>	\$58.83
					\$717.78
<b>Grand Total</b>					<b>\$717.78</b>

**Thank you! We appreciate your business.**

**4imprint Inc. 25303 Network Place, Chicago, IL 60673-12531**

- ♦ If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- ♦ **Any questions regarding your invoice?** Please call 1-800-982-8979. Our terms are Net 30.

**4imprint Federal ID #39-1837105.** A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - [www.4imprint.com](http://www.4imprint.com)

Term ID: 001

**Sale - Approved**

Date	06/15/22	Time 16:12:34
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX	1188
Order ID	22998597	
Approval Code	021858	
<b>Amount</b>	<b>\$661.61</b>	
<b>Tax</b>	<b>\$56.17</b>	
<b>Total Amount</b>	<b>\$717.78</b>	

Customer Copy

sent to Mr.

NCFP 101 BAC Rev020118



101 Commerce Street  
Oshkosh, WI 54901

Invoice Address

Mike Benedetto  
Granada Hills South NC  
11024 Balboa Blvd Ste GH  
Box 767  
Granada Hills, CA 91344

Toll Free 800-982-9159  
Free Fax 800-355-5043

Your Order No.	22998597-5	Account No.	2447365
Invoice Date	June 14, 2022	Account Rep	Lori Mades

Qty	Item #	Description	Unit \$	Price	Total
170	144189	Sightseeing 20-can Event Cooler	\$5.07	\$861.90	\$861.90
1	Coupon	Coupon Code	-\$86.19	-\$86.19	-\$86.19
1	Set-Up	Set-Up Charge	\$55.00	\$55.00	\$55.00
1	Discounts	Free Set-Up	-\$55.00	-\$55.00	-\$55.00
		Freight		\$150.00	\$150.00
				<b>Tax</b>	\$73.69
					\$999.40
<b>Grand Total</b>					<b>\$999.40</b>

**Thank you! We appreciate your business.**

**4imprint Inc. 25303 Network Place, Chicago, IL 60673-12531**

- ♦ If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- ♦ **Any questions regarding your invoice?** Please call 1-800-982-8979. Our terms are Net 30.

**4imprint Federal ID #39-1837105.** A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website -- [www.4imprint.com](http://www.4imprint.com)

Term ID: 001

**Sale - Approved**

Date	06/15/22	Time 16:14:20
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX	1188
Order ID	22998597	
Approval Code	030879	
<b>Amount</b>	<b>\$921.19</b>	
<b>Tax</b>	<b>\$78.21</b>	
<b>Total Amount</b>	<b>\$999.40</b>	

Customer Copy

Sal. 10/11

### Board Action Certification (BAC) Form

**Meeting Date:** Tuesday, May 24, 2022

**Agenda Item No: IX. Outreach B.**

approve up to \$14,000 for outreach giveaways and materials along with refilling the helium balloon tanks

☐ Check☐ Credit Card☐ 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.**

Board Quorum: 9	Total:	6	1	2	8	0	0
-----------------	--------	---	---	---	---	---	---

Authorized Signature: Colleen Toumayan  
Print/Type Name: Colleen Toumayan, Vice-President

Date: 5-24-22

Date: 5-24-22



101 Commerce Street  
Oshkosh, WI 54901

Invoice Address

Mike Benedetto  
Granada Hills South NC  
11024 Balboa Blvd Ste GH  
Box 767  
Granada Hills, CA 91344

Toll Free 800-982-9159  
Free Fax 800-355-5043

<b>Your Order No.</b>	22998597-3	<b>Account No.</b>	2447365
<b>Invoice Date</b>	June 14, 2022	<b>Account Rep</b>	Lori Mades

Qty	Item #	Description	Unit \$	Price	Total
100	128703-12	Measuring Cup - 12 oz.	\$4.15	\$415.00	\$415.00
1	Coupon	Coupon Code	-\$40.00	-\$40.00	-\$40.00
1	Set-Up	Set-Up Charge	\$45.00	\$45.00	\$45.00
1	Discounts	Free Set-Up	-\$45.00	-\$45.00	-\$45.00
1	Discounts	Good Will Discount	-\$15.00	-\$15.00	-\$15.00
		Freight		\$25.00	\$25.00
				<b>Tax</b>	\$34.20
					\$419.20

**Grand Total \$419.20**

**Thank you! We appreciate your business.**

**4imprint Inc. 25303 Network Place, Chicago, IL 60673-12531**

- ♦ If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- ♦ **Any questions regarding your invoice?** Please call 1-800-982-8979. Our terms are Net 30.

**4imprint Federal ID #39-1837105.** A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website – [www.4imprint.com](http://www.4imprint.com)



Term ID: 001

**Sale - Approved**

Date	06/15/22	Time 16:13:29
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX	1188
Order ID	22998597	
Approval Code	009914	
<b>Amount</b>	<b>\$386.40</b>	
<b>Tax</b>	<b>\$32.80</b>	
<b>Total Amount</b>	<b>\$419.20</b>	

Customer Copy

Self to Mr



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

877-446-7746

800-355-5043

Invoice Number 9392466

Account No. 2447365

Invoice Date June 10, 2022

Account Rep. Lori Mades

Your Order No.

Our Order No. 21887030

271.34

Item	Cushioned Jar Opener - Circle		Colors	(Opener, Trim): Green, Green		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
300	115249-CR	Cushioned Jar Opener - Circle	0.6900	207.00	207.00	
1	Set-Up Charge	Set-Up Charge	40.0000	40.00	40.00	
1	Coupon	Coupon Code	-24.7000	-24.70	-24.70	
		Freight		13.82	13.82	
				<b>Tax</b>	21.12	
					257.24	

Item	Corner View Frame		Colors	(Frame,Trim): White, White		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
200	5892	Corner View Frame	1.3500	270.00	270.00	
1	Set-Up Charge	Set-Up Charge(Per Order Line)	50.0000	50.00	50.00	
1	Coupon	Coupon Code	-32.0000	-32.00	-32.00	
		Freight		44.07	44.07	
				Tax	27.36	
					359.43	

Item	Seasons Across America Calendar - Stapled		Colors	(Calendar,Trim): Multicolor, Multicolor		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
200	112194-ST	Seasons Across America Calendar - Stapled	1.4400	288.00	288.00	
1	Set-Up Charge	Set-Up Charge(Per Order Line)	10.0000	10.00	10.00	
1	Coupon	Coupon Code	-29.8000	-29.80	-29.80	
		Freight		47.79	47.79	
				Tax	25.48	
					341.47	

**Total Net** 2,156.98  
**Total Tax** 180.40  
**Grand Total** 2,337.38  
**Received** -2,337.38  
**Total Due** 0.00



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

877-446-7746

800-355-5043

MIKE BENEDETTO  
GRANADA HILLS SOUTH NC  
11024 BALBOA BLVD STE GH  
BOX 767  
GRANADA HILLS CA 91344

**Shipping Address**

Mike Benedetto  
Granada Hills South NC  
11024 BALBOA BLVD  
STE 767  
GRANADA HILLS, CA 91344-5007  
USA  
Tel: 818-723-8087

Invoice Number 9392466

Invoice Date June 10, 2022

Reference No

Account No. 2447365

Account Rep. Lori Mades

Our Order No. 21887030

**Item Value Color Coffee Mug - 11 oz.**

**Colors** (Mug,Trim): Dark Green, Dark Green

Qty	Item #	Description	Unit \$	Price \$	Total \$
216	111699-C	Value Color Coffee Mug - 11 oz.	1.7700	382.32	382.32
1	Set-Up Charge	Set-Up Charge(Per Order Line)	55.0000	55.00	55.00
1	Coupon	Coupon Code	-43.7320	-43.73	-43.73
		Freight		87.46	87.46
		<b>Tax</b>			37.39
					518.44

**Item Balloon - 11" Standard Colors**

**Colors** (Balloon,Trim): See Below, See Below

Qty	Item #	Description	Unit \$	Price \$	Total \$
1,000	16053	Balloon - 11" Standard Colors	0.2200	220.00	220.00
1	Set-Up Charge	Set-Up Charge	10.0000	10.00	10.00
1	Coupon	Coupon Code	-23.0000	-23.00	-23.00
		Freight		12.15	12.15
		<b>Tax</b>			19.67
					238.82

**Item Hand Fan - 8" Round**

**Colors** (Fan,Handle): White, Tan

Qty	Item #	Description	Unit \$	Price \$	Total \$
250	5137-RD	Hand Fan - 8" Round	1.0900	272.50	272.50
1	Set-Up Charge	Set-Up Charge	65.0000	65.00	65.00
1	Coupon	Coupon Code	-33.7500	-33.75	-33.75
		Freight		18.03	18.03
		<b>Tax</b>			28.86
					350.64

**Item Sport Mini Flyer - 7-1/4"**

**Colors** (Flyer,Trim): Green, Green

Qty	Item #	Description	Unit \$	Price \$	Total \$
200	162194-7	Sport Mini Flyer - 7-1/4"	0.9500	190.00	190.00
1	Set-Up Charge	Set-Up Charge	50.0000	50.00	50.00
1	Coupon	Coupon Code	-24.0000	-24.00	-24.00
		Freight		34.82	34.82
		<b>Tax</b>			20.52



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

877-446-7746  
800-355-5043

Invoice Number 9392466  
Invoice Date June 10, 2022  
Your Order No.

Account No. 2447365  
Account Rep. Lori Mades  
Our Order No. 21887030

**Thank You! We appreciate your business.**  
**Any overruns you may have received are yours with our compliments.**

- To ensure proper credit to your account, please quote "9392466/2447365" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint, Inc.

4imprint Federal ID #39-1837105, GSA Contract # GS-07F-96265. A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

**To Pay Your Invoice Online Please Visit:**  
**[www.4imprint.com/payinvoice](http://www.4imprint.com/payinvoice)**

**To Remit By Check:**  
**4imprint, Inc.**  
**25303 Network Place**  
**Chicago, IL 60673-1253**

15

Term ID: 001

**Sale - Approved**

Date	06/15/22	Time 18:25:25
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	21887030	
Approval Code	048580	
<b>Amount</b>	<b>\$2,156.99</b>	
<b>Tax</b>	<b>\$180.39</b>	
<b>Total Amount</b>	<b>\$2,337.38</b>	

Customer Copy



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

**Main Address**

MIKE BENEDETTO  
GRANADA HILLS SOUTH NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760

**Invoice Address**

Mike Benedetto  
Granada Hills South NC  
11024 BALBOA BLVD STE GH  
Box 767  
Granada Hills CA 91344  
USA

**Shipping Address**

Mike Benedetto  
Granada Hills South NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760  
USA  
Tel: 818-723-8087

**Order Number:** 22998597

**Date:** June 13, 2022

**Account No.:** 2447365

**Your Order No.:**

**Questions Call:** Lori Mades

**Phone:** 877-446-7746 Ext. 8175

**Fax:** 877-725-8656

**Email:** lmades@4imprint.com

**Item Wave Cap**

**Colors** (Crown,Wave): Stone, Black

Qty	Item #	Description	Unit \$	Price \$	Total \$
122	8528	Wave Cap	5.7600	702.72	702.72
1	Coupon	Coupon Code	-68.7720	-68.77	-68.77
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00
122	*Embroidery	Embroidery Run Charge	0.0000	0.00	0.00
		Freight		40.00	40.00
		<b>Tax</b>			58.83
					717.78

**Item Power Clip - Translucent**

**Colors** (Clip,Grip): Translucent Dark Green, Black

Qty	Item #	Description	Unit \$	Price \$	Total \$
1,100	2245-T	Power Clip - Translucent	0.7200	792.00	792.00
1	Coupon	Coupon Code	-79.2000	-79.20	-79.20
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00
		Freight		95.00	95.00
		<b>Tax</b>			67.70
					875.50

**Item Measuring Cup - 12 oz.**

**Colors** (Cup,Trim): Clear, Blue

Qty	Item #	Description	Unit \$	Price \$	Total \$
100	128703-12	Measuring Cup - 12 oz.	4.1500	415.00	415.00
1	Coupon	Coupon Code	-40.0000	-40.00	-40.00
1	Set-Up Charge	Set-Up Charge	45.0000	45.00	45.00
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00
1	Discounts	Free Set-Up	-45.0000	-45.00	-45.00
		Freight		25.00	25.00
		<b>Tax</b>			34.20
					419.20

**Item Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color**

**Colors** (Polo,Trim) : See Below

Qty	Item #	Description	Unit \$	Price \$	Total \$
20	105469-FC	Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color	14.7100	294.20	294.20
		4 - Medium : Navy, Navy	0.0000	0.00	0.00
		7 - Large : Navy, Navy	0.0000	0.00	0.00
		7 - Extra Large : Navy, Navy	0.0000	0.00	0.00





101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746  
Free Fax: 800-355-5043

Order Number: 22998597  
Date: June 13, 2022  
Account No.: 2447365  
Your Order No.:

Questions Call: Lori Mades  
Phone: 877-446-7746 Ext. 8175  
Fax: 877-725-8656  
Email: lmades@4imprint.com

		2 - Extra Extra Large : Navy, Navy	0.0000	0.00	0.00
1	Coupon	Coupon Code	-29.4200	-29.42	-29.42
1	Discounts	Free Set-Up	-35.0000	-35.00	-35.00
1	Set-Up Charge	Set-Up Charge(Per Order Line)	35.0000	35.00	35.00
20	Run Charge	Run Charge Per Item	0.0000	0.00	0.00
		Freight		15.00	15.00
				<b>Tax</b>	25.14
					304.92

Item	Sightseeing 20-Can Event Cooler		Colors	(Cooler, Trim): Hunter Green, Black		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
170	144189	Sightseeing 20-Can Event Cooler	5.0700	861.90	861.90	
1	Coupon	Coupon Code	-86.1900	-86.19	-86.19	
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00	
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00	
		Freight		150.00	150.00	
				<b>Tax</b>	73.69	
					999.40	
				<b>Grand Total</b>	3,316.80	

**Thank You! We appreciate your business.**  
**Any overruns you may have received are yours with our compliments.**

- To ensure proper credit to your account, please quote "22998597/2447365" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

**4imprint Federal ID #39-1837105, GSA Contract # GS-07F-9626S.** A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - [www.4imprint.com](http://www.4imprint.com)

**Please Remit to:**  
**4imprint, Inc.**  
**25303 Network Place**  
**Chicago, IL 60673-1253**

Term ID: 001

**Sale - Approved**

Date	06/03/22	Time 11:30:23
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	053576	
<b>Amount</b>	<b>\$921.74</b>	
<b>Tax</b>	<b>\$78.26</b>	
<b>Total Amount</b>	<b>\$1,000.00</b>	

Customer Copy

Term ID: 001

**Refund - Approved**

Date	06/15/22	Time 16:09:09
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	063679	
<b>Amount</b>	<b>\$1,000.00</b>	

Customer Copy

☐ 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.**

①

Date: 5-24-22



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

**Main Address**

MIKE BENEDETTO  
GRANADA HILLS SOUTH NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760

**Invoice Address**

Mike Benedetto  
Granada Hills South NC  
11024 BALBOA BLVD STE GH  
Box 767  
Granada Hills CA 91344  
USA

**Shipping Address**

Mike Benedetto  
Granada Hills South NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760  
USA  
Tel: 818-723-8087

**Order Number:** 22998597  
**Date:** June 13, 2022  
**Account No.:** 2447365  
**Your Order No.:**

**Questions Call:** Lori Mades  
**Phone:** 877-446-7746 Ext. 8175  
**Fax:** 877-725-8656  
**Email:** lmades@4imprint.com

Item Wave Cap		Colors (Crown,Wave): Stone, Black			
Qty	Item #	Description	Unit \$	Price \$	Total \$
122	8528	Wave Cap	5.7600	702.72	702.72
1	Coupon	Coupon Code	-68.7720	-68.77	-68.77
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00
122	*Embroidery	Embroidery Run Charge	0.0000	0.00	0.00
		Freight		40.00	40.00
				<b>Tax</b>	58.83
					717.78

Item Power Clip - Translucent		Colors (Clip,Grip): Translucent Dark Green, Black			
Qty	Item #	Description	Unit \$	Price \$	Total \$
1,100	2245-T	Power Clip - Translucent	0.7200	792.00	792.00
1	Coupon	Coupon Code	-79.2000	-79.20	-79.20
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00
		Freight		95.00	95.00
				<b>Tax</b>	67.70
					875.50

Item Measuring Cup - 12 oz.		Colors (Cup,Trim): Clear, Blue			
Qty	Item #	Description	Unit \$	Price \$	Total \$
100	128703-12	Measuring Cup - 12 oz.	4.1500	415.00	415.00
1	Coupon	Coupon Code	-40.0000	-40.00	-40.00
1	Set-Up Charge	Set-Up Charge	45.0000	45.00	45.00
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00
1	Discounts	Free Set-Up	-45.0000	-45.00	-45.00
		Freight		25.00	25.00
				<b>Tax</b>	34.20
					419.20

Item Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color		Colors (Polo,Trim) : See Below			
Qty	Item #	Description	Unit \$	Price \$	Total \$
20	105469-FC	Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color	14.7100	294.20	294.20
		4 - Medium : Navy, Navy	0.0000	0.00	0.00
		7 - Large : Navy, Navy	0.0000	0.00	0.00
		7 - Extra Large : Navy, Navy	0.0000	0.00	0.00



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

Order Number: 22998597

Date: June 13, 2022

Account No.: 2447365

Your Order No.:

Questions Call: Lori Mades

Phone: 877-446-7746 Ext. 8175

Fax: 877-725-8656

Email: lmades@4imprint.com

		2 - Extra Extra Large : Navy, Navy	0.0000	0.00	0.00
1	Coupon	Coupon Code	-29.4200	-29.42	-29.42
1	Discounts	Free Set-Up	-35.0000	-35.00	-35.00
1	Set-Up Charge	Set-Up Charge(Per Order Line)	35.0000	35.00	35.00
20	Run Charge	Run Charge Per Item	0.0000	0.00	0.00
		Freight		15.00	15.00
				<b>Tax</b>	25.14
					304.92

Item	Sightseeing 20-Can Event Cooler	Colors	(Cooler,Trim): Hunter Green, Black			
Qty	Item #	Description	Unit \$	Price \$	Total \$	
170	144189	Sightseeing 20-Can Event Cooler	5.0700	861.90	861.90	
1	Coupon	Coupon Code	-86.1900	-86.19	-86.19	
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00	
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00	
		Freight		150.00	150.00	
				<b>Tax</b>	73.69	
					999.40	
				<b>Grand Total</b>	3,316.80	

**Thank You! We appreciate your business.**

**Any overruns you may have received are yours with our compliments.**

- To ensure proper credit to your account, please quote "22998597/2447365" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

4imprint Federal ID #39-1837105, GSA Contract # GS-07F-9626S. A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - [www.4imprint.com](http://www.4imprint.com)

**Please Remit to:**

**4imprint, Inc.**

**25303 Network Place**

**Chicago, IL 60673-1253**

Term ID: 001

**Sale - Approved**

Date	05/27/22	Time 15:15:08
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	057387	
<b>Amount</b>	<b>\$921.74</b>	
<b>Tax</b>	<b>\$78.26</b>	
<b>Total Amount</b>	<b>\$1,000.00</b>	

Customer Copy

Term ID: 001

**Refund - Approved**

Date	06/15/22	Time 16:09:23
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	063679	
<b>Amount</b>	<b>\$1,000.00</b>	

Customer Copy



☐ Board Member Reimbursement

1

Date: 5-24-22



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746  
Free Fax: 800-355-5043

**Main Address**

MIKE BENEDETTO  
GRANADA HILLS SOUTH NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760

**Invoice Address**

Mike Benedetto  
Granada Hills South NC  
11024 BALBOA BLVD STE GH  
Box 767  
Granada Hills CA 91344  
USA

**Shipping Address**

Mike Benedetto  
Granada Hills South NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760  
USA  
Tel: 818-723-8087

**Order Number:** 22998597

**Date:** June 13, 2022

**Account No.:** 2447365

**Your Order No.:**

**Questions Call:**

Lori Mades

**Phone:**

877-446-7746 Ext. 8175

**Fax:**

877-725-8656

**Email:**

lmades@4imprint.com

Item Wave Cap		Colors		(Crown,Wave): Stone, Black		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
122	8528	Wave Cap	5.7600	702.72	702.72	
1	Coupon	Coupon Code	-68.7720	-68.77	-68.77	
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00	
122	*Embroidery	Embroidery Run Charge	0.0000	0.00	0.00	
		Freight		40.00	40.00	
				<b>Tax</b>	58.83	
					717.78	

Item Power Clip - Translucent		Colors		(Clip,Grip): Translucent Dark Green, Black		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
1,100	2245-T	Power Clip - Translucent	0.7200	792.00	792.00	
1	Coupon	Coupon Code	-79.2000	-79.20	-79.20	
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00	
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00	
		Freight		95.00	95.00	
				<b>Tax</b>	67.70	
					875.50	

Item Measuring Cup - 12 oz.		Colors		(Cup,Trim): Clear, Blue		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
100	128703-12	Measuring Cup - 12 oz.	4.1500	415.00	415.00	
1	Coupon	Coupon Code	-40.0000	-40.00	-40.00	
1	Set-Up Charge	Set-Up Charge	45.0000	45.00	45.00	
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00	
1	Discounts	Free Set-Up	-45.0000	-45.00	-45.00	
		Freight		25.00	25.00	
				<b>Tax</b>	34.20	
					419.20	

Item Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color		Colors		(Polo,Trim) : See Below		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
20	105469-FC	Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color	14.7100	294.20	294.20	
		4 - Medium : Navy, Navy	0.0000	0.00	0.00	
		7 - Large : Navy, Navy	0.0000	0.00	0.00	
		7 - Extra Large : Navy, Navy	0.0000	0.00	0.00	



Invoice 22998597

Page 2

101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746  
Free Fax: 800-355-5043Order Number: 22998597  
Date: June 13, 2022  
Account No.: 2447365  
Your Order No.:Questions Call: Lori Mades  
Phone: 877-446-7746 Ext. 8175  
Fax: 877-725-8656  
Email: lmades@4imprint.com

1	Coupon	2 - Extra Extra Large : Navy, Navy	0.0000	0.00	0.00
1	Discounts	Coupon Code	-29.4200	-29.42	-29.42
1	Set-Up Charge	Free Set-Up	-35.0000	-35.00	-35.00
20	Run Charge	Set-Up Charge(Per Order Line)	35.0000	35.00	35.00
		Run Charge Per Item	0.0000	0.00	0.00
		Freight		15.00	15.00
				<b>Tax</b>	25.14
					304.92

Item	Qty	Item #	Description	Colors	(Cooler, Trim):	Unit \$	Price \$	Total \$
	170	144189	Sightseeing 20-Can Event Cooler		Hunter Green, Black	5.0700	861.90	861.90
	1	Coupon	Coupon Code			-86.1900	-86.19	-86.19
	1	Set-Up Charge	Set-Up Charge			55.0000	55.00	55.00
	1	Discounts	Free Set-Up			-55.0000	-55.00	-55.00
			Freight				150.00	150.00
							<b>Tax</b>	73.69
								999.40
							<b>Grand Total</b>	3,316.80

**Thank You! We appreciate your business.**  
Any overruns you may have received are yours with our compliments.

- To ensure proper credit to your account, please quote "22998597/2447365" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

4imprint Federal ID #39-1837105, GSA Contract # GS-07F-9626S. A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this Invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - [www.4imprint.com](http://www.4imprint.com)

**Please Remit to:**  
**4imprint, Inc.**  
**25303 Network Place**  
**Chicago, IL 60673-1253**



Michael Benedetto &lt;mbenedetto@ghsnc.org&gt;

**4imprint order 22998597**

Joseph Logemann &lt;jlogemann@4imprint.com&gt;

To: "mbenedetto@ghsnc.org" &lt;mbenedetto@ghsnc.org&gt;

Mon, Jun 20, 2022 at 12:56 PM

15 085Fh-273	22998597	Tran Accepted - Sales	XXXXXXXXXXXX1188	999.40
15 085Fh-273	22998597	Tran Accepted - Sales	XXXXXXXXXXXX1188	304.92
15 0861h-273	22998597	Tran Accepted - Sales	XXXXXXXXXXXX1188	419.20
15 085Fh-273	22998597	Tran Accepted - Sales	XXXXXXXXXXXX1188	575.50
15 085Fh-273	22998597	Tran Accepted - Sales	XXXXXXXXXXXX1188	717.78
15 0861h-273	22998597	Tran Accepted - Credit	XXXXXXXXXXXX1188	316.80
15 085Fh-273	22998597	Tran Accepted - Credit	XXXXXXXXXXXX1188	1 000.00
15 0861h-273	22998597	Tran Accepted - Credit	XXXXXXXXXXXX1188	1 000.00
15 085Fh-273	22998597	Tran Accepted - Credit	XXXXXXXXXXXX1188	1 000.00
17 0C2SL-265	22998597	Tran Accepted - Sales	XXXXXXXXXXXX1188	316.80
13 0863h-261	22998597	Tran Accepted - Sales	XXXXXXXXXXXX1188	1 000.00
10 085Fh-257	22998597	Tran Accepted - Sales	XXXXXXXXXXXX1188	1 000.00
17 0CECI-254	22998597	Tran Accepted - Sales	XXXXXXXXXXXX1188	1 000.00

Hello Mike, please see what we have above as I am not sure why the approval code is the same, but as you can see there are 4 separate charges and then also the refunds above.

Please let me know if this works.

Thanks,

Joe Logemann Credit Customer Service Associate

Email [jlogemann@4imprint.com](mailto:jlogemann@4imprint.com)

Phone 800-260-5606 Ext 8393

Fax 800-355-5043

Web [www.4imprint.com](http://www.4imprint.com)

Term ID: 001

**Refund - Approved**

Date	06/15/22	Time 16:09:38
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	063679	
<b>Amount</b>	<b>\$1,000.00</b>	

Customer Copy





101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

**Main Address**

MIKE BENEDETTO  
GRANADA HILLS SOUTH NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760

**Invoice Address**

Mike Benedetto  
Granada Hills South NC  
11024 BALBOA BLVD STE GH  
Box 767  
Granada Hills CA 91344  
USA

**Shipping Address**

Mike Benedetto  
Granada Hills South NC  
16423 RINALDI ST  
GRANADA HILLS, CA 91344-3760  
USA  
Tel: 818-723-8087

**Order Number:** 22998597

**Date:** June 13, 2022

**Account No.:** 2447365

**Your Order No.:**

**Questions Call:** Lori Mades

**Phone:** 877-446-7746 Ext. 8175

**Fax:** 877-725-8656

**Email:** lmades@4imprint.com

**Item Wave Cap**

**Colors** (Crown,Wave): Stone, Black

Qty	Item #	Description	Unit \$	Price \$	Total \$
122	8528	Wave Cap	5.7600	702.72	702.72
1	Coupon	Coupon Code	-68.7720	-68.77	-68.77
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00
122	*Embroidery	Embroidery Run Charge	0.0000	0.00	0.00
		Freight		40.00	40.00
				<b>Tax</b>	58.83
					717.78

**Item Power Clip - Translucent**

**Colors** (Clip,Grip): Translucent Dark Green, Black

Qty	Item #	Description	Unit \$	Price \$	Total \$
1,100	2245-T	Power Clip - Translucent	0.7200	792.00	792.00
1	Coupon	Coupon Code	-79.2000	-79.20	-79.20
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00
		Freight		95.00	95.00
				<b>Tax</b>	67.70
					875.50

**Item Measuring Cup - 12 oz.**

**Colors** (Cup,Trim): Clear, Blue

Qty	Item #	Description	Unit \$	Price \$	Total \$
100	128703-12	Measuring Cup - 12 oz.	4.1500	415.00	415.00
1	Coupon	Coupon Code	-40.0000	-40.00	-40.00
1	Set-Up Charge	Set-Up Charge	45.0000	45.00	45.00
1	Discounts	Good Will Discount	-15.0000	-15.00	-15.00
1	Discounts	Free Set-Up	-45.0000	-45.00	-45.00
		Freight		25.00	25.00
				<b>Tax</b>	34.20
					419.20

**Item Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color**

**Colors** (Polo,Trim) : See Below

Qty	Item #	Description	Unit \$	Price \$	Total \$
20	105469-FC	Gildan 6 oz. DryBlend 50/50 Jersey Polo - Full Color	14.7100	294.20	294.20
		4 - Medium : Navy, Navy	0.0000	0.00	0.00
		7 - Large : Navy, Navy	0.0000	0.00	0.00
		7 - Extra Large : Navy, Navy	0.0000	0.00	0.00



101 Commerce St  
PO Box 320  
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

<b>Order Number:</b>	22998597	<b>Questions Call:</b>	Lori Mades
<b>Date:</b>	June 13, 2022	<b>Phone:</b>	877-446-7746 Ext. 8175
<b>Account No.:</b>	2447365	<b>Fax:</b>	877-725-8656
<b>Your Order No.:</b>		<b>Email:</b>	lmades@4imprint.com

		2 - Extra Extra Large : Navy, Navy	0.0000	0.00	0.00
1	Coupon	Coupon Code	-29.4200	-29.42	-29.42
1	Discounts	Free Set-Up	-35.0000	-35.00	-35.00
1	Set-Up Charge	Set-Up Charge(Per Order Line)	35.0000	35.00	35.00
20	Run Charge	Run Charge Per Item	0.0000	0.00	0.00
		Freight		15.00	15.00
				<b>Tax</b>	25.14
					304.92

Item Sightseeing 20-Can Event Cooler			Colors (Cooler,Trim): Hunter Green, Black		
Qty	Item #	Description	Unit \$	Price \$	Total \$
170	144189	Sightseeing 20-Can Event Cooler	5.0700	861.90	861.90
1	Coupon	Coupon Code	-86.1900	-86.19	-86.19
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00
1	Discounts	Free Set-Up	-55.0000	-55.00	-55.00
		Freight		150.00	150.00
				<b>Tax</b>	73.69
					999.40
				<b>Grand Total</b>	3,316.80

**Thank You! We appreciate your business.**

**Any overruns you may have received are yours with our compliments.**

- To ensure proper credit to your account, please quote "22998597/2447365" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

**4imprint Federal ID #39-1837105, GSA Contract # GS-07F-9626S.** A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - [www.4imprint.com](http://www.4imprint.com)

**Please Remit to:**

**4imprint, Inc.**

**25303 Network Place**

**Chicago, IL 60673-1253**



Term ID: 001

**Sale - Approved**

Date	06/07/22	Time 17:37:10
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	015558	
<b>Amount</b>	<b>\$292.01</b>	
<b>Tax</b>	<b>\$24.79</b>	
<b>Total Amount</b>	<b>\$316.80</b>	

Customer Copy

## Refund - Approved

Date	06/15/22	Time 16:09:54
Method of Payment	MasterCard	
Entry Method	Manual	
Account #	XXXXXXXXXXXX1188	
Order ID	22998597	
Approval Code	052361	
<b>Amount</b>	<b>\$316.80</b>	

Customer Copy

Paul H.



## Board Action Certification (BAC) Form

**Meeting Date:** Tuesday, May 24, 2022

**Agenda Item No:** IX. Outreach B.

approve up to \$14,000 for outreach giveaways and materials along with refilling the helium balloon tanks

☐ Check☐ Credit Card☐ 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.**

Board Quorum: 9	Total:	6	1	2	8	0	0
-----------------	--------	---	---	---	---	---	---

Authorized Signature: Colleen Toumayan  
Print/Type Name: Colleen Toumayan, Vice-President

Authorized Signature: Christina Wallis  
Print/Type Name: Christina Wallis, Treasurer

Date: 5-24-22

Date: 5-24-22