

Mar Vista Community Council



Mar Vista Community Council Executive and Finance Committee Minutes

Monday, November 5, 2018 from 7:00 p.m. to 9:00 p.m. at The Coffee Connection (Station Room)

3838 S. Centinela Blvd.
Los Angeles, CA 90066

Co-Chair: Elliot Hanna (elliot.hanna@marvista.org) Co-Chair: Holly Tilson (holly.tilson@marvista.org)

- 1. **Call to order** Meeting called to order at 7:00 p.m.
- 2. Roll Call Call of the roll and certification of a quorum Roll call waived; all members present.
- 3. Announcements None
- 4. **Public comment for items NOT on this agenda** A discussion of **Fall Festival** accounting was conducted. No action taken.
- 5. **Reading and approval of minutes** Approval of minutes from 10/1/2018 Reading waived; minutes approved unanimously.
- 6. Officer Reports
 - 6.1. Chair Elliot Hanna None
 - **6.2. 1**st **Vice-Chair** Rob Kadota Briefly reported on the MV Bike and Safety Fair. Expressed disappointment at the lack of board-member involvement.
 - **6.3.** 2nd Vice-Chair Mary Hruska Raised concerns about the lack of transparency in the Recode LA process.
 - **6.4. Secretary** Sara Roos Expressed concern about animosity within the board.
 - **6.5.** Treasurer Holly Tilson Briefly summarized MVCC financial status.
- 7. **Special Orders** None
- 8. Unfinished Business and General Orders None
- 9. New Business -
 - **9.1. Discussion of Monthly Expense Report (MER)** Discussion and possible action regarding the latest Monthly Expense Report (MER) Report was reviewed in detail.
 - **9.2.** Discussion and action on upcoming funding items and expenditures Discussion and possible action regarding expected funding items and expenditures for the remainder of FY2019 Motion for \$16.86 to cover overruns for Grease Night at Venice High School was introduced and approved unanimously.
 - **9.3. Appointment of Primary Cardholder** "The Mar Vista Community Council (MVCC) appoints Elliot Hanna as the primary cardholder, <u>and Rob Kadota as the second signer</u>, for the MVCC credit card." Draft motion amended to include underlined text. Amendment and final motion passed unanimously.
 - **9.4. Status of items from prior Board of Directors' (BoD) meetings** Discussion and possible action regarding outstanding items (e.g. letters, minutes, etc.) from prior BoD meetings Brief discussion held regarding chronic delinquency of committee minutes.
- 10. Adjournment (not later than 9:00 p.m.) Meeting adjourned at 8:43 p.m.

in compliance with Government Code section 54957.5, non-exempt writings that are distributed to a majority or all of the board in advance of a meeting, may be viewed at http://www.marvista.org or at the scheduled meeting. In addition, if you would like a copy of any record related to an item on the agenda, please contact secretary@marvista.org. **As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and upon request, will provide reasonable accommodation to ensure equal access to its programs, services, and activities. Sign language interpreters, assistive listening devices, or any auxiliary aids and/or services may be provided upon request. To ensure availability of services, please make your request at least 3 business days prior to the meeting you wish to attend by contacting chair@marvista.org.





Mar Vista Community Council



Mar Vista Community Council Executive and Finance Committee

Monday, December 3, 2018 from 7:00 p.m. to 9:00 p.m. at The Coffee Connection (Station Room)

3838 S. Centinela Blvd.
Los Angeles, CA 90066

Co-Chair: Elliot Hanna (elliot.hanna@marvista.org) Co-Chair: Holly Tilson (holly.tilson@marvista.org)

Reports
 8.5. Treasurer – Holly Tilson

Monthly Expenditure Report



Reporting Month: October 2018 Budget Fiscal Year: 2018-2019

NC Name: Mar Vista Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$35147.50	\$5007.94	\$30139.56	\$47.12	\$0.00	\$30092.44

Monthly Cash Flow Analysis						
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available	
Office		\$635.37		\$47.12		
Outreach	\$36000.00	\$3372.57	\$25139.56	\$0.00	\$25092.44	
Elections		\$0.00		\$0.00		
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Neighborhood Purpose Grants	\$6000.00	\$1000.00	\$5000.00	\$0.00	\$5000.00	
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$6852.50		

	Expenditures							
#	Vendor	Date	Description Budget Category				Sub-category	Total
1	STORQUEST-WLA/SAWTELLE	10/01/2018	(Credit card transaction)	General Operations Expenditure	Office	\$461.00		
2	STAPLES DIRECT	10/21/2018	(Credit card transaction)	General Operations Expenditure	Office	\$30.65		
3	THE WEB CORNER	10/01/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$181.50		
4	GUITAR CENTER #128	10/05/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$30.09		
5	STAPLES 00114272	10/14/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$26.26		
6	AT&T BILL PAYMENT	10/18/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$95.54		
7	SMARTNFINAL39510303956	10/20/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$316.86		
8	MAILCHIMP MONTHLY	10/21/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$27.00		

9	COPYLAND, INC	10/26/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$583.36
10	AMZN Mktp US M81EG8180	10/31/2018	(Credit card transaction)	General Operations Expenditure	Outreach	\$47.96
11	Sara Roos	09/10/2018	Funding Motion: The MVCC appropriates Board R	General Operations Expenditure	Office	\$7.23
12	North Westdale Neighborhood Association	10/01/2018	Funding Motion: The MVCC appropriates \$3	General Operations Expenditure	Outreach	\$300.00
13	Holly Tilson	10/04/2018	Funding Motion: Reimbursement of office expen	General Operations Expenditure	Office	\$86.49
14	CBS Advertising Distributors LLC	10/10/2018	Funding Motion:The MVCC approves the OUT	General Operations Expenditure	Outreach	\$1470.00
15	CBS Advertising Distributors LLC	10/11/2018	Funding Motion: The MVCC appropriates \$2	General Operations Expenditure	Outreach	\$294.00
16	Saint Andrew's Lutheran Church	10/11/2018	Funding Motion: The MVCC appropriates \$6	General Operations Expenditure	Office	\$25.00
17	Pacific Area Boosters Association, Inc.	10/15/2018	Funding Motion: The MVCC appropriates \$1	Neighborhood Purpose Grants		\$1000.00
18	Saint Andrew's Lutheran Church	10/16/2018	The MVCC approves the expenditure of up to \$300 fo	General Operations Expenditure	Office	\$25.00
	Subtotal:					\$5007.94

Outstanding Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	Elliot Hanna	10/11/2018	Funding Motion: The MVCC approves a reimburse	General Operations Expenditure	Office	\$22.12
2	Saint Andrew's Lutheran Church	10/25/2018	Funding Motion: The MVCC appropriates \$6	General Operations Expenditure	Office	\$25.00
	Subtotal: Outstanding	g				\$47.12

StorQuest - West Los Angeles / Sawtelle 2531 Sawtelle Blvd. Los Angeles, CA 90064 (310) 477-6964

Kadota, Rob 3759 Barry Ave

Los Angeles, CA 90066

StorQuest - West Los Angeles / Sawtelle 2531 Sawtelle Blvd. Los Angeles, CA 90064 (310) 477-6964

Account Number: 1003314483

DETACH UPPER PORTION AND RETURN IT WITH YOUR CHECK PAYMENT

MONTHLY INVOICE

IMPORTANT INFORMATION

It's a pleasure to serve you at StorQuest - West Los Angeles / Sawtelle. Kindly remit the amount due before the Payment Due Date below. You can pay by (1) credit card, (2) check, (3) cashier's check or (4) money order. Your canceled check or the cashier's check paperwork will serve as your receipt.

Questions about your Invoice? Please call your StorQuest - West Los Angeles / Sawtelle Manager at (310) 477-6964.

Space	Due Date F	Rent	Services	Fees	Insurance	Other	Tax	Credits	Total
34	Sep 30, 2018 \$44	9.00	\$.00	\$.00	\$12.00	\$.00	\$.00	\$.00	\$461.00

New Balance: \$461.00

Notice Date: Sep 14, 2018 Past Due Balance: \$.00
Payment Due Date: Sep 30, 2018 Total Amount Due: \$461.00

You can pay your bill online by visiting www.storquest.com, over the phone by calling (310) 477-6964, by mail, or in person at StorQuest - West Los Angeles / Sawtelle. Each month your payment can be automatically charged to your credit card, just ask us for an Autopay card and we'll take care of the rest.

Kadota, Rob

From: Staples <support@orders.staples.com>
Sent: Tuesday, October 16, 2018 1:54 PM

To: Kadota, Rob

Subject: Confirmation of Staples Order: #9792398223

STAPLES"

FREE NEXT-DAY DELIVERY.

On eligible orders. See details.

FURNITURE PAPER BREAKROOM INK & TONER ELECTRONICS OFFICE SUPPLIES

WE'VE GOT IT.

Hello Robert Kadota,

Please see your order details below.



ORDER NUMBER: 9792398223 ORDER DATE: 10/16/2018

PICK UP IN STORE



Please don't go to the store just yet. We'll send you an email when your items are ready. Once each item is ready, you will have five days to pick them up at your convenience.

Arrives in Store By: Thursday, October 18, 2018

Pick Up at: Staples, 11341 National Blvd, Los Angeles, CA 900643726



Verbatim 8GB PinStripe USB 20 Flash Drive 5 Pack Red Green Blue Purple Teal 99146 Item #1913050 Quantity: Price: 1 \$37.99

Discounts: \$2.00

You Paid: \$27.99

2\$Off Verbatim 8GB
PinStripe USB 2.0 Flash
Drive, 5 Pack, Red,
Green, Blue, Purp
\$8.00

8\$Off Verbatim 8GB PinStripe USB 2.0 Flash Drive, 5 Pack, Red, Green, Blue, Purp

To view or cancel your order please click below. Most orders may be canceled within 30 minutes of being placed.

VIEW ORDER

BILLING INFORMATION

Billing address
Robert Kadota
3759 Barry Ave

Los Angeles, CA 90066

Payment Information Subtotal: \$37.99

Discounts: \$10.00

Shipping/Fees: \$0.00 Tax: \$2.66

Order Total: \$30.65

Payment Method

MC ending in 8563: \$30.65

YOU MIGHT ALSO LIKE



\$16.99

Staples Electronics Duster, 7 oz., 2 pack(SPL07ENFR-2)



\$17.99

Verbatim 16GB PinStripe USB 2.0 Flash Drive, 2 Pack, Green, Blue (99149)



\$149.99

Acer® S230HL Bbd 23" Widescreen Display

NEED IT TODAY? NO PROBLEM.

Buy online and pick up in store in 1 hour.

LEARN MORE

5% back, every time.

Enroll in the More Account™ and earn more rewards in store and online.



See our Weekly Ad

APPLY NOW



Get your coupons



Find a local store

Get professional tips and ideas: **BUSINESS RESOURCE CENTER.**



STAY CONNECTED

[] [] [] [] [] []









Staples, Inc., 500 Staples Drive, Framingham, MA 01702

Invoice

The Web Corner, Inc. 19509 Ventura Blvd.

Tarzana CA 91356 (818) 345-7443

Date	Invoice #	Due Date
10/1/2018	17409	10/1/2018
181 Pr		

Bill To	
Mar Vista Neighborhood Council	

		P.O. No.	Terms	Project
Quantity	Description		Rate	Amount
1	1 Monthly Maintenance: includes up to 1 hour for; phone support, web development, requests, & website adjustment 0 Monthly Hosting for marvista.org (included in maintenance)		150.00	150.00
0			15.00	0.00
Please remit p	payment at your earliest convenience.		Total	\$150.00
Thank you for	your business!			φ150.00
			Payments/Credi	ts -\$150.00
			Balance Due	\$0.00

Invoice

The Web Corner, Inc. 19509 Ventura Blvd. Tarzana CA 91356 (818) 345-7443

Date	Invoice #	Due Date
10/1/2018	17408	10/1/2018

	_
Bill To	
Mar Vista Neighborhood Council]

		P.O. 1	No.	Terms	Project	
Quantity	Description			Rate	Amount	
9	Email Standard Mailboxes: 9 Accounts for marvista.org			3.50	31.5	50
	payment at your earliest convenience. your business!		To	otal	\$31.	50
THATIK YOU TO	y 001 2031110331		P	ayments/Cre	e dits -\$31.5	0
			В	alance Due	\$0.0)0



THANK YOU FOR SHOPPING AT GUITAR CENTER

WEST L.A. 10831 West Pico Blvd Los Angeles, CA 90064-2105 310-475-0637

Sales Date : Sales No. :

Sales Type Customer No.:

10-05-18 05:05pm 1280959856 (01) REGULAR SALE 1280156794 ROB KADOTA

Gasserstape to lape Microphone Wires

+ longer

1/4"tomini cable for

Mevo - iPad connection

Robkadota



EXT.AMT DESCRIPTION
PERMACEL ZIN CAFFER TAPE BLK 50YD SAU # 4733299000 19.99 LIVEWIRE ESS SY15ED 15FT 3.5MM (TRS)-DUAL 1/4IN Y 7.49 SKU # 2387117000

PAY TYPE 04 MASTER CARD

27.48 2.61 9.5 %Tax:

Total USD\$ 30.09

icated on this ticket refer to 109612 ALEX W Y. Cashier: 109612

By

INF 0 CARD

Amount 30.09 USD\$ Auth No 046744 **Purchase** Entry Chip Read Issuer

Merchant Number 372472763880 Terminal ID 1337214

Verified

CVM Results 420300 AID A000000041 A0000000041010

8000048000 TVR 0110A0003220000000000000000000FF IAD TSI

E800 00

Thank You for Shopping at Guitar Center!!!

Buy Online Now at www.guitarcenter.com Or call 1-666-496-7882 WE LOVE FEEDBACK.Tell us yours at www.guitarcenter.com/pages/Store-Feedback

For details on our Lowest Price and Satisfaction Guarantees please 90 to www.guitarcenter.com/policies

Like us: facebook.com/guitarcenter Follow us on Twitter/Instagram:@guitarcenter Subscribe to us: youtube.com/guitarcenter Rent Band and Orchestra Instruments

40000TTA

STAPLES

11341 National Blvd. LOS ANGELES, CA 90064 (310) 445-4041

SALE

1887040 6 002 80899 1427 10/14/18 03:21

QTY SKU

PRICE

	REWARDS NUMBER 5948563548	
1 5	SPLS BINDERCLIP 8P	
	718103182362	4.99
1 8	31/2X11-SLANTED SI *	
•	718103098229	7.00
1 [BINDER CLIP 8PK LA	
	718103156776	4.99
1 8	31/2X11-SLANTED SI *	
7	18103098229	7.00
SUBTO	JATL	23.98
9	Standard Tax 9.5000%	2.28
TOTAL		\$26.26

MASTERCARD USD\$26.26

Card No.: XXXXXXXXXXXXXX8563 [C]

Chip Read

Auth No.: 035347 AID.: A0000000041010

Verified By PIN

TOTAL ITEMS 4

*Item is currently on promotion. Some coupons are only valid on regular priced items. Please see coupon terms and conditions for details.

Staples brand products.
Below Budget. Above Expectations.

THANK YOU FOR SHOPPING AT STAPLES!

Shop online at www.staples.com

Shop Smarter. Get Rewarded.
Staples Rewards members get up to 5%
back in Rewards in store only. \$2 back in
Rewards per recycled ink cartridges. Up to
20 per month.Minimum purchase required.
Exclusions Apply.See an associate for
full program details or to enroll.



Dutleach Supplies Rivder
For blue tent at Acryle
MV Farmers Market displays
Rob Kadota 10/15/18



MAR VISTA COMMUNTY CONCIL 200 N SPRING ST LOS ANGELES, CA 90012-4801

Oct 18, 2018

Page: 1 of 2

Bill Cycle Date: 08/26/18 - 09/25/18 **Account:** 287282471306 **Foundation Account:** FAN 07974093

Invoice: 287282471306X10032018

Visit us online at: www.att.com/business

Wireless Statement

Bill-At-A-Glance	
Previous Balance	\$95.54
Payment - 09/18 - Thank You!	\$95.54CR
Adjustments	\$0.00
Balance	\$0.00
New Charges	\$95.54
Amount to be Debited	\$95.54

Wireless

Group 1 - Data Summary - Aug 26 thru Sep 25

AT&T Unlimited Plus One Line for Business - Includes unlimited domestic wireless data, talk and text on an eligible device. After 22GB of data usage, AT&T may slow speeds. Includes up to 10GB of tethering/line on an eligible device. After 10GB, tethering usage is slowed to max of 128 Kbps. Stream Saver included. Additional monthly access charge applies for each device. Eligible for \$5 auto-pay discount. Discount is applied within in 1 to 2 bill cycles. Other restrictions apply. See att.com/abs-additional-terms for plan details.

	Data Used (GB)
213 446-1595	1.81
Total	1.81

Service Summary

AutoPay will Debit Your Card by

_	Service		Page	Total
	Wireless			\$95.54
	213 446-1595	\$95.54	1	
7	Total New Char	ges		\$95.54

213 446-1595 MAR VISTA COMMUNTY CONCIL

Mobile Insurance Premium - Includes Coverage for loss, theft, accidental damage, liquid damage, and out-of-warranty malfunction

Mobile Protection Pack - Support - Includes ProTech support and Protect Plus app on eligible devices, when bundled with Mobile Insurance.

Monthly Charges - Sep 26 thru Oct 25

, ,	
1. AT&T Unlimited Plus One Line for Business	65.00
2. Discount for unlimited single line AutoPay	5.00CF
3. Access for Laptop Connect 4G LTE	20.00
4. Mobile Insurance Premium	8.99
5. Mobile Protection Pack - Support	3.00
Total Monthly Charges	91.99

Manage Your Account:

Online: att.com/myatt Mobile App: att.com/myattapp Support: 800 331-0500 or 611 from your mobile device TTY: 866 241-6567



For Important Information about your bill, please see the **News You Can Use** section (Page 2).

Other Charges and Credits

Data Usage SummaryAT&T Unlimited Plus One Line for Business

Surcharges and Other Fees

6. Administrative Fee 1.99

Wireless Services provided by AT&T Mobility, LLC.

Printed on Recyclable Pape

Your Card will be Debited on or after: Oct 18, 2018 \$95.54



Account Number 287282471306

MAR VISTA COMMUNTY CONCIL 200 N SPRING ST LOS ANGELES, CA 90012-4801

AT&T MOBILITY PO Box 6463 Carol Stream, IL 60197-6463



MAR VISTA COMMUNTY CONCIL 200 N SPRING ST LOS ANGELES, CA 90012-4801 Page: 2 of 2 Bill Cycle Date: 08/26/18 - 09/25/18

Account: 287282471306
Foundation Account: FAN 07974093

Invoice: 287282471306X10032018

Visit us online at: www.att.com/business

213 446-1595 MAR VISTA COMMUNTY CONCIL

Other Charges and Credits - Continued					
7. Property Tax Allotment	0.31				
8. Regulatory Cost Recovery Charge	1.25				
Total Surcharges and Other Fees	3.55				
Total Other Charges & Credits	3.55				
Total for 213 446-1595	95.54				
Total for Wireless accounts	95.54				

Important Information

LATE PAYMENT CHARGE

The late payment charges for consumer and Individual Responsibility User (IRU) bills not paid in full by the payment due date is \$5.75. Late payment charges for Corporate Responsibility User (CRU) accounts are applied according to applicable contracts.

PAYMENT OPTIONS

Use the myAT&T App* on your smartphone, visit att.com/billpay to pay your AT&T bills electronically, or via our Interactive Voice Response system free of charge anytime day or night by calling 800 288-2020. Payments made with an AT&T representative will be assessed a \$5 convenience fee. *Compatible device and account registration required. Messaging and data charges may apply for download and usage.

ELECTRONIC CHECK CONVERSION

Paying by check authorizes AT&T to use the information from your check to make a one-time electronic fund transfer from your account. Funds may be withdrawn from your account as soon as your payment is received. If we cannot process the transaction electronically, you authorize AT&T to present an image copy of your check for payment. Your original check will be destroyed once processed. If your check is returned unpaid you agree to pay such fees as identified in the terms and conditions of your AT&T Service Agreement, up to \$30. Returned checks may be presented electronically. If you want to save time and stamps, sign up for AutoPay at www.att.com/autopay using your checking account. It's easy, secure, and convenient!

TAX ID

AT&T Mobility Tax ID # 84-1659970.

QUESTIONS ABOUT YOUR BILL OR SERVICE

If you have any questions about your bill or concerns about your service, call Customer Service at 800 331-0500, 611 from your cell phone or write to AT&T, PO Box 1809, Paramus, NJ 07653-1809. We may need to investigate your concerns, if necessary, and will notify you of the results of the investigation. See your Terms of Service for lost/stolen phone information. If we cannot resolve your issue, you have the option to write the California Public Utilities Commission at Consumer Affairs Branch, 505 Van Ness Ave., Room 2003, San Francisco, CA 94102, or at www.cpuc.ca.gov, or call 800 649-7570 or TDD 800 229-6846.

SURCHARGES AND OTHER FEES

In addition to the monthly cost of the rate plan and any selected features, AT&T imposes the following other charges, on a per line basis: (1) federal and state universal service charges, (2) a Regulatory Cost Recovery Charge of up to \$1.25 to help defray its cost incurred in complying with obligations and charges imposed by state and federal telecom regulations, (3) an Administrative Fee to help defray certain expenses AT&T incurs, such as interconnection and cell site rents and maintenance, and (4) other government assessments, including without limitation a gross receipts surcharge and a Property Tax Allotment surcharge of \$0.20 - \$0.45 applied per Corporate Responsibility User's assigned number. These fees are not taxes or government-required charges. See www.att.com/additionalcharges.

AT&T NATL CENTER FOR CUSTOMERS WITH DISABILITIES

Questions on accessibility by persons with disabilities: 866 241-6568.

HOW DATA IS BILLED

Data is rounded up to the nearest KB for each line. Data for each line within a group is then added together and the total is rounded up to the nearest MB at the end of each billing cycle. For plans billed in GB, the total MB is then converted to GB. 1024KB = 1 Megabyte (MB), 1024MB = 1 Gigabyte (GB).

© 2012 AT&T Intellectual Property. All rights reserved.



** Welcome To Our Los Angeles Store * Store # 395 ********** See Us On WEB www.smartandfinal.com

Cashier: Danielle

DATE 10/20/18	TIME 14:15:30
9 @ 4.99 Heb Nat Beef Frank Don Lee Veggie Pat Don Lee Veggie Pat Hoffy Beef Franks Hoffy Beef Franks FJ 1/4 Ib Froz Bf FJ 1/4 Ib Froz Bf	21.99 F -> \$2.00
TOTAL MasterCard TENDER Cash ChANGE	316.86 316.86 .00
TOTAL NUMBER OF ITEMS THIS	VISIT> 24

TOTAL NUMBER OF ITEMS THIS VISIT

**** Electronic Payment Activity **** 10/20/2018 14:17:06 Entry Method: Chip MASTERCARD CARD #: - AFPROVED PURCHASE

AUTH CODE: 079705

Mod∃: Issuer A0000000041010 AID: TVR: 0000048000 IAD: 0110A040032200000000000000000000 000FF TSI: E800 ARC: ΟÜ AF31EBC7C04098B2 TC: 001 SEQ: 025617 MID: 288033 TID: Total: USD\$ 316.86

PIN VERIFIED ***** Electronic Payment Activity ***** 14:17:11 OP# 810094079 10/20/18 Trans # 111 Store # 395 Term:2

> THANK YOU FOR SHOPPING YOUR LOS ANGELES SMART AND FINAL STORE MANAGEF: Julio Lopez 1 (310) 473-3344

********************* We want to know your thoughts so we can serve you better.

> Complete our customer survey and be entered for a chance to win one of five

\$100 SmartCash Cards

Please visit www.smartandfinal.com/survey within 7 days of this shop!

From: Mailchimp Billing
To: Kadota, Rob
Subject: Mailchimp Invoice

Date: Sunday, October 21, 2018 2:49:21 AM



Your order has been processed.

Invoice MC04714945

Processed on Oct 21, 2018 02:49 am Pacific Time.

Monthly plan

1501 - 2500 subscribers.	\$30.00		
Discounts			
Two-factor authentication (10.0%)	(-) \$3.00		
Subtotal	\$27.00		
Taxes			
State and Local Tax	\$0.00		
Total	\$27.00		
Paid via Mast card ending in 8563 on October 21, 2018	\$27.00		

Issued to

Robert Kadota sararoosmv@gmail.com rob@orl.ucla.edu Mar Vista Community Council 200 N. Spring St Los Angeles, CA 90012 310.628.4095

Issued by

Mailchimp c/o The Rocket Science Group, LLC 675 Ponce De Leon Ave NE Suite 5000 Atlanta, GA 30308 USA www.mailchimp.com

US EIN 58-2554149

View In Your Account

© 2001-2018 Mailchimp[®], All Rights Reserved.

675 Ponce De Leon Ave NE • Suite 5000 • Atlanta, GA 30308 USA

Contact Us • Terms of Use • Privacy Policy



11717 W. Pico Blvd

Los Angeles, CA 90064

310-479-3957 info@onedaycopy.com

Invoice

No: **65953**

Date: 10/8/18

Customer PO:

Customer No: 880

Ship To: Bill To:

Elliot Hanna Mar Vista Community Council PO Box 66871 Los Angeles CA 90066

Phone: 424-738-0503

Holly Tilson Rob Kadota Mar Vista Community Council PO Box 66871 Los Angeles CA 90066

Phone: 310.628.4095

Quantity Description **Amount** 20 B&W BoD-181009-Agenda.pdf, BoD-181009-Packet, 8.5 x 11 White 20# 20lb White Bond \$ 42.28 Smooth, 38 sheets, copied on 1 side **SUBTOTAL** Taken by: andre \$ 42.28 TAX \$ 4.02 **SHIPPING** \$ 0.00 **DEPOSITS** \$ 0.00 **TOTAL** \$ 46.30 Wanted: Tue 10/9/18 AMOUNT DUE \$ 46.30 B&W \$ 46.30 10/8/18



11717 W. Pico Blvd Los Angeles, CA 90064

310-479-3957 info@onedaycopy.com

Invoice

No: **65597**

Date: 10/8/18

Customer PO:

Customer No: 880

Ship To: Bill To:

MVCC Mar Vista Community Council PO Box 66871 Los Angeles CA 90066 Holly Tilson Rob Kadota Mar Vista Community Council PO Box 66871

Los Angeles CA 90066 Phone: 310.628.4095

Quantity		Description		Amount			
40	The City Of Los Angeles - C sheets, digital print on 1 side	The City Of Los Angeles - Color 9 pages, 8.5 x 11 White 60# 60 lb Offset Paper Smooth, 9 sheets, digital print on 1 side					
40	Mar Vista Community Counc Smooth, 3 sheets, digital pri	\$ 51.76					
40	Generalize Summary of Zon	\$ 109.51					
40	B&W Palms ,Mar Vista, Del	Offset Paper Smooth, 7 sheets, digital print on 1 side B&W Palms ,Mar Vista, Del Rey Community Plan, 8.5 x 11 White 20# 20lb White Bond Smooth, 37 sheets, copied on 2 sides					
40		Smooth, 37 sheets, copied on 2 sides 3&W Los Angeles Planning and Zoning, 8.5 x 11 White 20# 20lb White Bond Smooth, 29 heets, copied on 2 sides					
Taken by:	andre		SUBTOTAL TAX SHIPPING DEPOSITS	\$ 490.47 \$ 46.59 \$ 0.00 \$ 0.00			
Mary Aruska Plan Sub Cor	- Materials for Community	Wanted: Sat 9/15/18	TOTAL	\$ 0.00 \$ 537.06			
T IAIT SUD COL	THITHUGG	The City Of Los Angeles - Color 9 pages	AMOUNT DUE	\$ 537.06			
\$ 537.06							
φ 557.00							



Final Details for Order #111-8936938-9846633

Print this page for your records.

Order Placed: October 29, 2018

Sold by: GLOBAL MEDICAL (seller profile)

Amazon.com order number: 111-8936938-9846633

Order Total: \$47.96

Shipped on October 30, 2018

Items Ordered 2 of: Nitrile Exam Gloves, Medical Grade, Disposable, Food Safe, Non Latex, 4 mil Thickness, Powder Free, Blue color, Convenient Dispenser Pack of 100 (Small) Sold by: GLOBAL MEDICAL (seller profile)	Price \$11.99
Condition: New 1 of: Nitrile Exam Gloves, Medical Grade, Disposable, Food Safe, Non Latex, 4 mil Thickness, Powder Free, Blue color, Convenient Dispenser Pack of 100 (Large) Sold by: GLOBAL MEDICAL (seller profile)	\$11.99
Condition: New 1 of: Nitrile Exam Gloves, Medical Grade, Disposable, Food Safe, Non Latex, 4 mil Thickness, Powder Free, Blue color, Convenient Dispenser Pack of 100 (Medium)	\$11.99

Condition: New

Shipping Address: Item(s) Subtotal: \$47.96 Rob Kadota Shipping & Handling: \$0.00 3759 Barry Ave

Los Angeles, CA 90066 Total before tax: \$47.96 **United States** Sales Tax: \$0.00

Total for This Shipment: \$47.96 Shipping Speed: Two-Day Shipping

Payment information

Payment Method: Item(s) Subtotal: \$47.96 MasterCard | Last digits: 8563 Shipping & Handling: \$0.00 Reference number: 247

Total before tax: \$47.96 **Billing address** Estimated tax to be collected: \$0.00 Robert kadota

200 N. Spring st. Grand Total: \$47.96 LOS angeles, Ca 90012

United States

Credit Card transactions MasterCard ending in 8563: October 30, 2018: \$47.96

To view the status of your order, return to Order Summary.

Conditions of Use | Privacy Notice © 1996-2018, Amazon.com, Inc. or its affiliates

MUC Storage Locker Keeps.

THANK YOU FOR SHOPPING AT DICK'S TRUE VALUE SOM ROOS 12216 VENICE BLVD PO BOX 661297 LOS ANGELES, CA 90066 (310) 397-3220

Thank You for shopping at Dick s Visit us at www.dickstruevalue.com 07/12/18 1:42PM 40 553 SALE

6 EA 1 10 EA * 6.60 STIC KEY

TOTAL:\$ 6.60 TAX: \$.63 TOTAL: \$ BC AMT:

XXXXXXXXXXXXXX1471 CARD#:

: 062200278992

7 23 AMT: H: 72929G

t reference #:209831 Bat#

PED

EXPR: XXXX D TYPE VISA

....ID/ValCode: 072449

ik card

USD\$ 7 23



>> JRNL#C09831 CUST NO: *5 <<==

THANK YOU SARA D ROOS FOR YOUR PATRONAGE

I agree to pay above total amount according to card issuer agreement (merchant agreement if credit voucher)

CASH CUSTOMER

Customer Copy

THE RICH OF THE PARTY OF THE PA

NO RETURNS AFTER 30 DAYS

board reunlouisement office expense X 3 12 23 Sara Loos

Office of the City Clerk

Administrative Services Division

Neighborhood Council (NC) Funding Program

Board Action Certification Form

NC Name: Mar Vista Community Council

Meeting Date: August 14, 2018

Aug 2018 12,5,8

Budget Fiscal Year: 2018-2019

Agenda Item No: 13 5.8

12.5.8

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

CD = Community Director

Funding Motion: The MVCC appropriates Board Reimbursement of \$7.23 to Sara Roos for storage locker keys as a miscellaneous office expense.

Vote Count

Recused Boardinellibe	Recused Boardine Hibers must leave the room prior to any discussion and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the social and may not recum to the room district the room di						
Board Member Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recuse
Elliot Hanna	Chair CD			×			
Rob Kadota	1st VC ALD	X					
Paola Cervantes	2nd VC ALD	X			X		
Cara Page	Socretary ALD	V					

Rob Kadota	1st VC ALD	X			
Paola Cervantes	2nd VC ALD	X		X	
Sara Roos	Secretary ALD	X			
Holly Tilson	Treasurer Z6D	X			
Ken Apern	Z1D	X			
Damien Newton	Z2D	X			
Mary Hruska	Z3D	X			
Aaron Elster	- Z4D	X			
Michelle Krupkin	DZ5	X			
Susan Klos	ALD			X	
Robin Doyno	ALD	X			
Nanxi Liu	ALD	X			
ALD = At Large Director					
ZD = Zone Director					

Totals We, the Treasurer and the Second Signer of the above named Neighborhood Council, declare that the information presented on this form is accurate and complete, and that a public meeting was beld 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.

Treasurer's Signatur	e doller 1 list	Second Signer's Signa	ature Conc.
Print/Type Name:	Holly Tilson	Print/Type Name:	Elliot Hanna
Date:	8-14-2018	Date:	8-14-2018

NORTH WESTDALE NEIGHBORHOOD ASSOCIATION P.O. Box 642522, Los Angeles, CA 90064

President - Martin Rubin 2822 Barry Avenue Los Angeles , CA 90064 310.479.2529

Date: September 27, 2018

Mar Vista Community Council Holly Tilson, Treasurer rhubarb999@aol.com

Tel.: (310) 391-6408

<u>Description:</u> <u>Amount</u>

Outreach at the North Westdale Neighborhood Association's September 29, 2018 Fall Block Party The MVCC will offer support for the gathering and do outreach during the party, offering information about the city and the MVCC. The outreach will also gather additional email subscribers.

Total (Balance due) \$300.00

Please make check payable to "NWNA"
Mail to:
(in care of)
Martin Rubin
2822 Barry Avenue
Los Angeles, CA 90064

Thank you.

Office of the City Clerk

Administrative Services Division

Neighborhood Council (NC) Funding Program

Board Action Certification Form

NC Name: Mar Vista Community Council

Budget Fiscal Year: 2018-2019
Board Motion and/or Public
Benefit Statement (CIP and NPG):

Aug2018 12.5.2



Meeting Date: August 14, 2018

Agenda Item No: 45.5.2

12.5.2

Funding Motion: The MVCC appropriates \$300 for the purpose of conducting Outreach at the North Westdale Neighborhood Association's Fall 2018 Block Party

Pagusad Panedmambara	must leave the room prior		Count ion and may no	ot return to the r	oon until after t	the vote is compl	ete.
Board Member Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Elliot Hanna	Chair CD			X			
Rob Kadota	1st VC ALD	X					
Paola Cervantes	2nd VC ALD				X		
Sara Roos	Secretary ALD	X			×		
Holly Tilson	Treasurer Z6D	X					
Ken Apern	Z1D	X					
Damien Newton	Z2D	X					
Mary Hruska	_Z3D	X					
Aaron Elster	Z4D	X					
Michelle Krupkin	DZ5	X					
Susan Klos	ALD				X		
Robin Doyno	ALD	X					
Nanxi Liu	ALD	X					
LD = At Large Director							
ZD = Zone Director							
D = Community Director							
otals 11 Q7		10	0		7		

We, the Treasurer and the Second Signer 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.

Treasurer's Signatu	re dolly I don	Second Signer's Signat	ture	
Print/Type Name:	Holly Tilson	Print/Type Name:	Elliot Hanna	
Date:	8-14-2018	Date:	8-14-2018	

STAPLES

2052 Bundy Drive West Los Angeles, CA 90025 (310) 826-0442

SALE

1905973 4 004 16472 0336 08/18/18 01:23

QTY SKU

PRICE

REWARDS NUMBER 0010978922

1 HP 934 XL BLK/STD 889894153654 78.99 SUBTOTAL 78 99 Standard Tax 9 5000% 7.50

Discover Credit

USD\$86.49

Card No.: XXXXXXXXXXXXX0970 [C]

Chip Read

Auth No · 01851B AID . A0000001523010

TOTAL ITEMS 1

Staples brand products
Below Budget Above Expectations

THANK YOU FOR SHOPPING AT STAPLES !

Shop online at www.staples com

Shop Smarter. Get Rewarded.
Staples Rewards members get up to 5%
back in Rewards in store only. \$2 back in
Rewards per recycled ink cartridges. Up to
20 per month.Minimum purchase required.
Exclusions Apply.See an associate for
full program details or to enroll.



Win a \$50K scholarship or one of four prizes.

Staples For Students Sweepstakes

Thank you for your purchase
Enter the following code for a chance to
win a \$50,000 scholarship
or one of four \$25,000 scholarships

Board Reumbursement
Office expense
Sunter onle
Holle illson

Office of the City (~	ork	

Administrative Services Division

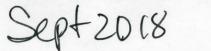
Neighborhood Council (NC) Funding Program

Board Action Certification Form

NC Name: Mar Vista Community Council

Budget Fiscal Year: 2018-2019

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





Meeting Date: September 11, 2018

Agenda Item No: 12.6

Funding Motion: Reimbursement of office expenses. The Mar Vista Community Council approves an \$86.49 OFFICE EXPENDITURE to reimburse Holly Tilson for office supplies used in the treasurer's duties.

Vote Count

Board Member Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Elliot Hanna	Chair CD	X					
Rob Kadota	1st VC ALD	X					
Vacant	2nd VC ALD						
Sara Roos	Secretary ALD	X					
Holly Tilson	Treasurer Z6D	X					
Ken Apern	Z1D				Х		
Damien Newton	Z2D	X					
Mary Hruska	Z3D	X					
Aaron Elster	Z4D	X					
Michelle Krupkin	DZ5	X					
Susan Klos	ALD	X					
Robin Doyno	ALD	X					
Nanxi Liu	ALD	X					
Q=Quorum							
ALD = At Large Director							
ZD = Zone Director							
CD = Community Director							
otals (Q 7		11	0	0	/		

We, the Treasurer and the Second Signer 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.

Treasurer's Signatu	re Obllex Tuson	Second Signer's Signat	ture
Print/Type Name:	Holly Tilson	Print/Type Name:	Elliot Hanna
Date:	9-11-2018	Date:	9-11-2018



CBS ADVERTISING DISTRIBUTORS, LLC

P.O. Box 6511 BEVERLY HILLS, CA 90212-6511

TEL. (310) 390-5744 FAX (310) 390-5414

Mar Vista Neighborhood Council P.O. Box 66871 Los Angeles, CA 90066

Attn: Sara Roos

INVOICE NO.		
	95022	
DATE	9/28/18	
ACCOUNT NO.		
YOUR P.O. NUMBER		
TERMS	15 Days	
DEPOSIT		
FOB		
SALESMAN	Simon	

QTY	UNIT	DESCRIPTION	UNIT PRICE	AMOUNT
	17.5	DISTRIBUTION / DATE		\$1,470.00
17,500		Flyers distributed in Mar Vista Dates: Sept. 29 and 30, 2018	φ04.00	φ1,470.00
		Dates. Sept. 29 and 30, 2010		
		DUE AND PAYABLE UPON RECEIPT OF INVOICE	SUB TOTAL	\$1,470.0
			TAX	
			TOTAL	\$1,470.0

fice of the City Clerk		C 1	2010	, ,	2	3	
ministrative Services Division	December	Sent	-2018	12	-15	o App	- OUCE
eighborhood Council (NC) Funding pard Action Certification Form	Program	0					Obj Chi
Name: Mar Vista Community	Council	N	Meeting Date: Se	ptember 11,	2018		
udget Fiscal Year: 2018-2019		A	genda Item No:	12.3			
oard Motion and/or Public	Funding Motion:	Appropriatio	n for fall nev	wsletter. Ti	he Mar Vis	ta Commun	ity
ment statement (en and me)	Council approves	the OUTRE	EACH EXPE	NDITURE	of up to	elleped \$4	000, for
Congent	printing costs and	distribution	for a fall ne	ewsletter		1,	
			Count			the vete is comp	ete
Recused Boardmembers	must leave the room price	or to any discussi	on and may not i	return to the ro			
Board Member Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Elliot Hanna	Chair CD	X					
Rob Kadota	1st VC ALD	X					
Vacant	2nd VC ALD						
Sara Roos	Secretary ALD	X					
Holly Tilson	Treasurer Z6D	X					
Ken Apern	Z1D	(Х		
Damien Newton	Z2D	X					
Mary Hruska	Z3D	X					
Aaron Elster	Z4D	X					
Michelle Krupkin	DZ5	X					
Susan Klos	ALD	X					
Robin Doyno	ALD	X					
Nanxi Liu	ALD	X					
INALIXI LIU	ALD	/					
	4 4. 0	14.1	2526.71				
grunding,	per credit	youra					
distribes	ion -	-	1470.00	_			
		4	3996.71		-		
					-	+	1
					-		-
Q=Quorum							
ALD = At Large Director	r						
ZD = Zone Director						-	
CD = Community Director	r		-	_			-
Totals II Q 7		11	0	0	1	ad on this form in	accurate and
We, the Treasurer and the Second complete, and that a public meeti	Signer of the above nam	ed Neighborhood	d Council, declare	that the inform dures. The above	nation presente ve was approve	ed on this form is ed by the Neighbo	rhood Coun
complete, and that a public meeti Board, at a Brown Act compliant p	ng was held in accordanc public meeting where a qu	e with all laws, po Jorum of the Boa	rd was present.	adies. The abo			
board, at a brown Act compliant			Second Signer's	Si	1	x	
Treasurer's Signature	The Clark			FI			
Print/Type Name: Holly			Print/Type Name: Elliot Hanna 9-11-2018				
Date: 9-11-2	2018		Date:	9-	11-2010	,	



CBS ADVERTISING DISTRIBUTORS, LLC

P.O. Box 6511 BEVERLY HILLS, CA 90212-6511

TEL. (310) 390-5744 FAX (310) 390-5414

Mar Vista Neighborhood Council P.O. Box 66871 Los Angeles, CA 90066

Attn: Sara Roos

INVOICE NO.		
	95023	
DATE		
	9/28/18	
ACCOUNT NO.		
YOUR P.O. NUMBER		
TERMS	45 Davis	
	15 Days	
DEPOSIT		
FOB		
SALESMAN		
	Simon	

QTY	UNIT	DESCRIPTION	UNIT PRICE	AMOUNT
3,500	3.5	DISTRIBUTION / DATE Additional Flyers distributed in Mar Vista	\$84.00	\$294.00
		Dates: Sept. 29 and 30, 2018		
		DUE AND PAYABLE UPON RECEIPT OF INVOICE	SUB TOTAL	\$294.00
			TAX	
			TOTAL	\$294.0

Office of the City Clerk

Date: 10.9.2018

Administrative Services Division

Oct 2018 17.4.11





Neighborhood Council (NC) Funding Progra	am	10	010 1	41111	11	The The		
Board Action Certification (BAC) Form	ty Council		1 7	October 9	2018		101-0	
NC Name: Mar Vista Communi	ty Couricii		Meeting Date:	October 9 :	2010			
Budget Fiscal Year: 2018-2019 Board Motion and/or Public Benefit Statement (CIP and NPG):	Funding Motion:	The M\	Agenda Item No: 12.4.1.1 IVCC appropriates \$294 (above the \$4K previously REACH expenditure for the Fall neswletter and					
consent	distribution.							
Method of Payment: (Select One)	Check	Check Credit Card Board Member Reimbursement						
	must leave the room prior		te Count	t return to the ro	om until after t	he vote is comple	ote.	
	T			Abstain	Absent	Ineligible	Recused	
Board Member's First and Last Name Elliot Hanna	Board Position Chair CD	Yes	No	X	Absent	mengiote	necuseu	
Rob Kadota	1st VC ALD	X						
	2nd VC							
Sara Roos	Secretary ALD	X						
Holly Tilson	Treasurer Z6D	X						
Ken Alpern	Z1D	Y						
Vacant	Z2D	-	-	-	-	-		
Mary Hruska	Z3d	X						
Aaron Elster	Z4D				X			
Michelle Krupkin	Z5D	X			1			
Susan Klos	ALD	X						
Robin Doyno	ALD			V				
Nanxi Liu	ALD				X			
Stacy Shure	ALD				-	X		
J								
CD = Community Director								
ALD = At Large Director								
ZD = Zone Director								
Board Quorum: 7	Total:	7	0	2	2	1		
We the authorized signers of the above	named Neighborhood Cour	ncil, declare t	hat the information	on presented on	this form is acc	urate and comple	ete, and that a publi	
meeting was held in accordance with all meeting where a quorum of the Board wa	laws, policies, and procedu	res. The abo	ve was approved	by the Neighbor	hood Council Bo	oard, at a Brown	Act compliant publi	
Authorized Signature	riuson		Authorized Sig	natur		2		
Print/Type Name: Holly Tilson)		Print/Type Nar	me: Elliot Ha	nna			
1 10119 1110011								

Date: 10.9.2018



11555 National Blvd. Los Angeles, CA 90064 T: 310-477-0256 F: 310-477-1697 office@standrews-wla.org

INVOICE

Date Issued: 8/23/2018

Bill To: Mar Vista Community Council

Date	Description/Facility Used	Time	Rate
Tue. Sept. 25, 2018	Narthex	7:30PM-9PM	\$25
		TOTAL BALANCE DUE	\$25

MVCC community Plan Sub-com

Office of the City Clerk Oct 2018 12,4,1,2 **Administrative Services Division** Neighborhood Council (NC) Funding Program **Board Action Certification (BAC) Form** Meeting Date: October 9 2018
Agenda Item No: 12.4.1.2 NC Name: Mar Vista Community Council Budget Fiscal Year: 2018-2019 Funding Motion: The MVCC appropriates \$600 for FY2018-19 for meeting Board Motion and/or Public Benefit Statement (CIP and NPG): room rental at St. Andrew's Lutheran Church, located in Los Angeles, CA. 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. **Board Member's First and Last Name Board Position** Abstain **Absent** Ineligible Recused Elliot Hanna Chair CD Rob Kadota 1st VC ALD 2nd VC Secretary ALD Sara Roos Holly Tilson Treasurer Z6D Ken Alpern Z_{1D} Vacant Z₂D Mary Hruska Z₃d **Aaron Elster** Z₄D Michelle Krupkin Z₅D Susan Klos ALD Robin Doyno ALD Nanxi Liu ALD Stacy Shure ALD CD = Community Director ALD = At Large Director ZD = Zone Director Board Quorum: / 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** Print/Type Name: Holly Tilson Date: 10.9.2018 Date: 10.9.2018

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.

lame	of NC from which you are seeking this	s grant: /////////	Marvista	T SAGI
SEC	TION I- APPLICANT INFORMATION	Name and Address of the Owner, where	AND ELECTRICATION	SOCIAL PROPERTY.
1a)	Pacific Area Boosters >	ASSIC 95-3971197 Federal I.D. # (EIN#) St	3 CA	1973 Date of 501(c)(3)
1b)	P.O. Box 2895	5 Venice	CA	Status (if applicable)
	Organization Mailing Address	City	State	Zip Code
1c)				
	Business Address (If different)	City	State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:	pilcant should submit a Project Co	f the project, the ep	Ja) Start deter . P. J. L. L. (Alter con cultica o
	Diane harrett	30.529.1294	Shappa	255 F@ao1.0
	Name	Phone	Email	(Insulface) nov of Jet
3)	Public School (not to include private school Attach Signed letter on School Letter Name / Address of Affiliated Organization	rhead / Attach IRS Deter		
acti	TION II - PROJECT DESCRIPTION	(if applicable) City	State	Zip Code
	Please describe the purpose and intent of	of the grant.	La	latina sii nimm
-	For the purchase of of LAP D's annual targeting facilie	food an tox Community but Communities. Wir	s in su reach po Her Worde	pport rand Even
5)	How will this grant be used to primarily s	support or serve a public purpose	and benefit the pub	lic at-large.
	(Grants cannot be used as rewards or pr	rizes for individuals)	deline	N OHALL
	Toys and food are for the holidays	e given to the	OMMUNIT	4
	1 10 1001			

Personnel Related Expenses	Requested of NC	Tatal Business 10
corhodicitied and ro halberning knowners are an area of the	c Requested of NC	Total Projected Cost
CASSAM Calcula in the prevention have become and some or	\$	\$
enchan lie daw enois organizate and smoon flags	\$	\$
William Developer and American	19	\$
Non-Personnel Related Expenses	/ Requested of NC	Total Projected Cost
TOUS + FOOD to he huse	Maskel s	\$ 1000
l less just to	\$	\$
	\$	\$
re you (applicant) applied to any other Neighborhoo No Yes If Yes, please list names on the implementation of this specific program or purported or funding? (Including NPG applications to other	of NCs: DRMC, NCW P ose described in Question 4 contin	PNC
Source of Funding /	Amount	Total Projected Cost
Other NCOUNCILS + DONCOLADINS	\$	\$ 20,000
Sponsorships	\$	\$
	\$	\$
ther completion of the project the applicant about	10c) Expected Co	empletion Date: 1210
After completion of the project, the applicant should ON IV - POTENTIAL CONFLICTS OF INTEREST o you (applicant) have a current or former relationsh No Yes If Yes, please describe beloame of NC Board Member	submit a Project Completion Reposition Repos	ort to the Neighborhood
ON IV - POTENTIAL CONFLICTS OF INTEREST o you (applicant) have a current or former relationsh you (applicant) have a current or former relationsh if Yes, please describe beloame of NC Board Member yes, did you request that the board member consult Yes No *(Please note that if a Board Member participates in the discussion and voting of this rant in its entirety.)	submit a Project Completion Reposition Project Completion Reposition With a Board Member of the NC ow: Relationship the Office of the City Attorney between of the NC has a conflict of interest.	ort to the Neighborhood ?? to to Applicant fore filing this application terest and completes the
ON IV - POTENTIAL CONFLICTS OF INTEREST o you (applicant) have a current or former relationsh no	ip with a Board Member of the NC ow: Relationship The Office of the City Attorney better of the NC has a conflict of into some into the NC Funding Program ormation provided herein and conthe documents "What is a Public project(s) and/or program(s) fat exist that would prevent the additional accordance with the Neighborhood Council.	fore filing this application terest and completes the will deny the payment of the Neighborhood the Neighborhood to warding of the Neighborhood to whom I am sultancil to whom I am sul
ON IV - POTENTIAL CONFLICTS OF INTEREST o you (applicant) have a current or former relationships of the property of the proper	ip with a Board Member of the NC ow: Relationship The Office of the City Attorney better of the NC has a conflict of into S NPG, the NC Funding Program Formation provided herein and contact the documents "What is a Public project(s) and/or program(s) fact exist that would prevent the additional accordance with the Neighborhood Council. Fool Principal - REQUIRED Signature	fore filing this application terest and completes the will deny the payment of the Neighborhood the Neighborhood to warding of the Neighborhood to whom I am sultancil to whom I am sul
ON IV - POTENTIAL CONFLICTS OF INTEREST o you (applicant) have a current or former relationsh of you (applicant) have a current or former relationsh of yes If Yes, please describe beloame of NC Board Member yes, did you request that the board member consult yes No *(Please note that if a Board Member participates in the discussion and voting of this rant in its entirety.) ON V - DECLARATION AND SIGNATURE by affirm that, to the best of my knowledge, the infection of this application and affirm that I have read to of this application and affirm that the proposed project/program and that no conflict of interest ese Grant. I affirm that I am not a current Board No plication. I further affirm that if the grant receives there, said funds shall be returned immediately to executive Director of Non-Profit Corporation or School.	ip with a Board Member of the NC ow: Relationship The Office of the City Attorney better of the NC has a conflict of into S NPG, the NC Funding Program Formation provided herein and contact the documents "What is a Public project(s) and/or program(s) fact exist that would prevent the additional accordance with the Neighborhood Council. Fool Principal - REQUIRED Signature	ort to the Neighborhood ort to the Neighborhood or to Applicant fore filing this application terest and completes the will deny the payment ommunicated otherwise blic Benefit," and "Con ill within the criteria of the Neighborhood the Neighborhood the terms of the application the terms of the application of the Neighborhood the terms of the application the terms of the application of the Neighborhood of the Neighborhood

* 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 for instructions on completing this form

74-,7-1-26 14

11) 523 16.5

المادات المادات

INTERNAL REVENUE SERVICE DISTRICT DIRECTOR 2 CUPANIA CIPCLE MONTEREY PARK, CA 91754

DEPARTMENT OF THE TREASURY

Date: 02 100

PACIFIC AREA BOOSTERS ASSOCIATION 12312 CULVER BLVD LOS ANGELES, CA 90066-6222 Employer Identification Number: 95-3971193
Contact Person:
TYRONE THOMAS
Contact Telephone Number:
(213) 725-0164

Our Letter Dated: March 1, 1989 Addendum Applies: No

Dear Applicant:

This modifies our letter of the above date in which we stated that you would be treated as an organization that is not a private foundation until the expiration of your advance ruling period.

Your exempt status under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3) is still in effect. Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Code because you are an organization of the type described in section 509(a)(2)

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(2) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was awars of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(2) organization.

If we have indicated in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours

Michael J. Quinn District Director

Letter 1050 (DO/CG)

Office of the City Clerk Oct 2018 12.4.3.1 **Administrative Services Division** Neighborhood Council (NC) Funding Program Board Action Certification (BAC) Form Meeting Date: October 9 2018 NC Name: Mar Vista Community Council Budget Fiscal Year: 2018-2019 Agenda Item No: 12.4.3.1 Funding Motion: The MVCC appropriates \$1000 for a NPG for Pacific Board Motion and/or Public Benefit Statement (CIP and NPG): Boosters LAPD Winter Wonderland 2018 Toy Giveaway Event. ☐ Credit Card Method of Payment: (Select One) ☐ 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. **Board Member's First and Last Name Board Position** Yes No **Abstain** Absent Ineligible Recused Elliot Hanna Chair CD Rob Kadota 1st VC ALD 2nd VC Sara Roos Secretary ALD Holly Tilson Treasurer Z6D Ken Alpern Z₁D Vacant Z₂D Mary Hruska Z₃d **Aaron Elster** Z₄D Michelle Krupkin Z₅D Susan Klos ALD Robin Doyno ALD Nanxi Liu ALD ALD CD = Community Director ALD = At Large Director ZD = Zone Director Board Quorum: / Total: 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. Print/Type Name: Holly Tilson Print/Type Name: Elliot Hanna Date: 10.9.2018 Date: 10.9.2018



11555 National Blvd. Los Angeles, CA 90064 T: 310-477-0256 F: 310-477-1697 office@standrews-wla.org

INVOICE

Date Issued: 10/15/2018 **Bill To:** Mar Vista Community Council

Date	Description/Facility Used	Time	Rate
Sat. Oct. 6, 2018	Library	6PM-7PM	\$25

TOTAL BALANCE DUE

\$25

Office of the City Clark							/>	
Office of the City Clerk		1	Λ				A British (
Administrative Services Division Neighborhood Council (NC) Funding	g Drogram	David	e Auc	7014	1241	0	1	
Board Action Certification Form	g Piogram	COOL	C 44 W	1000	17.10		Thy Test	
	NC Name: Mar Vista Community Council				18			
Budget Fiscal Year: 2018-2019			Agenda Item N	August 14, 20 o: 12.4.6				
Board Motion and/or Public	Cunding Metion.	The MAYO	C approves the expenditure of up to \$300 for FY					
Benefit Statement (CIP and NPG):	2018-2019 for me located in Los An	eting roo	m rental at a					
Recused Boardmembers	must leave the room prio		ote Count ussion and may no	ot return to the i	roon until after	the vote is comp	lete.	
Board Member Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused	
Elliot Hanna	Chair CD			X				
Rob Kadota	1st VC ALD	×		-				
Paola Cervantes	2nd VC ALD				V			
		X	-					
Sara Roos	Secretary ALD		-					
Holly Tilson	Treasurer Z6D							
Ken Apern	Z1D	X_						
Damien Newton	Z2D	X						
Mary Hruska	Z3D	X						
Aaron Elster	. Z4D	X						
Michelle Krupkin	DZ5	X						
Susan Klos	ALD				X			
Robin Doyno	ALD	X			1			
Nanxi Liu	ALD	X						
INALIAI LIU	ALD	/\	+					
ALD = At Large Director								
ZD = Zone Director								
CD = Community Director								
IIA		10	0		2			
We, the Treasurer and the Second complete, and that a public meetin Board, at a Brown Act compliant pu	g was held in accordance v	vith all laws, p	oolicies, and proce	e that the informedures. The above	ation presented e was approved	on this form is a by the Neighbor	ccurate and hood Council	
Treasurer's Signature	41490-	>		s Signature 4	m	1		
Print/Type Name: Holly Tilson			Print/Type Name: Elliot Hanna					
Date: 8-14-2018			Date: 8-14-2018					

Office of the City Clerk

Administrative Services Division

Neighborhood Council (NC) Funding Program

Board Action Certification Form

NC Name: Mar Vista Community Council

Budget Fiscal Year: 2018-2019 **Board Motion and/or Public** Benefit Statement (CIP and NPG): July 2018 13.2.6



Meeting Date: July 10, 2018

13.2.6 Agenda Item No: 15.1

Funding Motion: The MVCC approves the expenditure of up to \$300 for FY 2018-2019 for meeting room rental at and to St. Andrew's Lutheran Church, located in Los Angeles, CA.

Board Member Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Elliot Hanna	Chair CD			X			
Rob Kadota	1st Vice Chair ALD	XX				Х	
Paola Cervantes	2nd Vice Chair ALD	XX				X	
Sara Roos	Secretary ALD	X					
Holly Tilson	Treasurer Z6D	X	15.43	AL DALLERY, F.			
Ken Alpern	Z1D	X					
Damien Newton	Z2D	X					
Mary Hruska	-Z3D				X		
Aaron Elster	Z4D	X					
LChepe Krupkin	Z5D	X					
Robin Doyno	ALD	X					
Susan Klos	ALD	XX				X	
Nanxi Liu	ALD	X					
Q=Quorum							
CC=Community Director							
ZD=Zone Director		9 X					
ALD=At Large Director		U	-		1	n	
Totals VQ=7 We, the Treasurer and the Second		N	0		1		

complete, and that a public meeting was held in accordance with all Board, at a Brown Act compliant public meeting where a quorum of the Board was present.

Treasurer's Signatu	re dolly/USM	Second Signer's Signat	
Print/Type Name:	Holly Tilson	Print/Type Name:	Elliot Hanna/Rob Kadota
Date:	7/10/2018	Date:	7/10/2018

- 10. **Consent Calendar** The Consent Calendar is reserved for items deemed to be routine and non-controversial. Any committee member may pull an item or items for further discussion.
 - **10.1.NPG Application from MySafe:LA** Discussion and possible action regarding a \$4,900 NPG application from MySafe:LA.

mvcc.director.hanna@gmail.com

From: MySafe:LA <community@mysafela.org>
Sent: Tuesday, November 13, 2018 10:59 AM

To: Elliot.Hanna@marvista.org; Rob.Kadota@marvista.org; Mary.Hruska@marvista.org;

Sara.Roos@marvista.org; Holly.Tilson@marvista.org

Subject: Mar Vista NPG Application

Attachments: Mar Vista .pdf; MSLA LA Council Cert 2017.pdf; MSLA CA Assembly Cert 2017.pdf; MSLA 2017

FireSmart.pdf; MSLA State Senate.pdf; Fic Biz Name Statement.pdf; SCP 501c3 IRS Determination

Letter.pdf; MSLA 2017 Ready Set Go Brochure.pdf

Dear Mar Vista Neighborhood Council Board,

We'd like to formally introduce ourselves and say hello. We've been in your neighborhood for the last few years, working with your local fire stations, schools, and senior facilities to make your community safer and more resilient.

MySafe:LA is a nonprofit public charity that focuses on education and life safety training throughout the City of Los Angeles. We focus on earthquake preparation and survival, fire safety, CPR training, hit and run issues, and overall community readiness. Our mission is to save lives through education, engagement, and partnerships.

Specifically in your neighborhood, we have:

- Educated and created Family Escape Plans for **160 elementary school students** in our FireSmart program.
- Installed 149 Smoke Alarms during a canvassing event.
- Trained 144 High School Students in Hands-Only CPR.

Traditionally, we have operated solely on federal and state grants and donations/gifts to provide our services and do not take funds from the Los Angeles Fire Department. Due to the changing political climate, however, we are engaging on a more local level and would like to partner with your specific community.

We would like the opportunity to present to your Board in hopes of creating a new, lasting partnership. To learn more about us and our programs, visit us at:

MySafeLA.Org
A brief video introduction
Facebook
Twitter
Instagram

Please find attached our application for the Neighborhood Purposes Grant, which includes:

- NPG Application
- IRS Determination Letter
- Fictitious Name Documentation
- A sample of our in-house education materials, including our Ready Set Go and FireSmart brochures
- Our most recent Certificates of Achievement from...
- CA State Assembly
- LA City Council
- CA State Senate

Please don't hesitate to contact us if you have any questions or would like further information.

Best,

Cara and Kim

MySafe:LA

Fire & Life Safety Education

⊠:: 10061 Riverside Drive | Mailstop 777 | Toluca Lake, CA | 91602-2560

CONFIDENTIALITY NOTE:

This email and any attachments are confidential. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of this email or any attachment is prohibited and may be subject to legal remedy. Any views or opinions expressed in this email are those of the individual sender unless the sender specifically states otherwise. If you have received this email in error, please notify MySafe:LA immediately by returning it to the sender and delete this copy from your system. Thank you for your cooperation.

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.

	of NC from which you are seeking this grant	:			
1a)	Organization Name	Fed	leral I.D. # (EIN#)	State of Incorporation	Date of 501(c)(3) Status (if applicable
1b)					
	Organization Mailing Address	City	/	State	Zip Code
1c)					
	Business Address (If different)	City	/	State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:				
	Name	PI	hone	Email	
2)	Type of Organization- Please select one: ☐ Public School (not to include private schools) Attach Signed letter on School Letterhead	or		n-Profit (other than religious a etermination Letter	institutions)
3)	Name / Address of Affiliated Organization (if appl	icable)	City	State	Zip Code

SECTION II - PROJECT DESCRIPTION

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

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)

PAGE 1 NCFP 107

Personnel Related Expenses		Requested of NC	Total Projected Cost
		\$	\$
		\$	\$
		\$	\$
Non-Personnel Related Expenses		Requested of NC	Total Projected Cost
		\$	\$
		\$	\$
		\$	\$
Have you (applicant) applied to any othe ☐ No ☐ Yes If Yes, plea	er Neighborhood Counci ase list names of NCs:	Is requesting funds for th	nis project?
s the implementation of this specific prosources or funding? (Including NPG app			ngent on any other factor es, please describe:
Source of Funding		Amount	Total Projected Cost
		\$	\$
		\$	\$
		\$	\$
	se describe below:		
Name of NC Board Member		Relationsh	ip to Applicant
Name of NC Board Member		Relationsh	ip to Applicant
o) If yes, did you request that the board i	f a Board Member of th	ce of the City Attorney be	efore filing this application
b) If yes, did you request that the board in the second of the second participates in the discussion and the second participates in the discussion and the second participates in the s	f a Board Member of th	ce of the City Attorney be	efore filing this application
o) If yes, did you request that the board in the local or participates in the discussion and grant in its entirety.)	f a Board Member of the divoting of this NPG, the divoting of this NPG, the divoting of the NPG, the divoting of the divoting	ce of the City Attorney be	efore filing this application
o) If yes, did you request that the board in the local or participates in the discussion and grant in its entirety.) CCTION V - DECLARATION AND SIGNATION.	if a Board Member of the divoting of this NPG, to	ce of the City Attorney be the NC has a conflict of it the NC Funding Progra	efore filing this application terest and completes the mill deny the paymer
o) If yes, did you request that the board of Yes No *(Please note that if or participates in the discussion an grant in its entirety.) CCTION V - DECLARATION AND SIGNATION AND SIGNATI	if a Board Member of the divoting of this NPG, for this NPG, for this NPG, for the divoting of the divoting t	ce of the City Attorney be NC has a conflict of in the NC Funding Program on provided herein and coments "What is a Pu	efore filing this application terest and completes the model of the paymer communicated otherwish the payments of the payments
o) If yes, did you request that the board of Yes No *(Please note that if or participates in the discussion an grant in its entirety.) CTION V - DECLARATION AND SIGNATION OF SIGNATION AND SIGNATION OF SIGNATION AND SIGNATION OF SIGNATION	If a Board Member of the d voting of this NPG, to URE owledge, the information at I have read the do at the proposed project.	ce of the City Attorney be the NC has a conflict of it the NC Funding Progra n provided herein and ocuments "What is a Put t(s) and/or program(s) f	efore filing this application terest and completes the modern will deny the paymer communicated otherwise blic Benefit," and "Cortall within the criteria of
o) If yes, did you request that the board in the discussion and affirm the discussion and affirm the discussion and affirm the discussion and the	If a Board Member of the divoting of this NPG, to URE pwledge, the information at I have read the do at the proposed project of interest exist to	ce of the City Attorney be the NC has a conflict of in the NC Funding Program of the NC Funding Program (s) final funding	efore filing this application terest and completes the modern will deny the payment communicated otherwise ablic Benefit," and "Cortall within the criteria of awarding of the Neigh
o) If yes, did you request that the board in the discussion and affirm that I am not a discussion and a d	JRE Welledge, the information at I have read the dotte at the proposed project of interest exist four the Board Member	ce of the City Attorney be the NC has a conflict of in the NC Funding Program on provided herein and comments "What is a Put(s) and/or program(s) for the Neighborhood C	efore filing this application terest and completes the modern will deny the payment communicated otherwise ablic Benefit," and "Confall within the criteria of awarding of the Neighouncil to whom I am su
o) If yes, did you request that the board in the discussion and affirm the discussion and the discussion and the discussion and the discussion and affirm that I am not a discussion and affirm that I am not a discussion and affirm that I am not a discussion and the discussion. I further affirm that I am not a discussion and the discussion	JRE DWIE D	n provided herein and cuments "What is a Put(s) and/or program(s) final would prevent the of the Neighborhood C tused in accordance w	efore filing this application terest and completes the modern will deny the payment communicated otherwise ablic Benefit," and "Confall within the criteria of awarding of the Neighouncil to whom I am su
o) If yes, did you request that the board in the discussion and affirm the discussion and that no control of the discussion and the discussion and the discussion and affirm the discussion and discussion and the discussion and discussion an	If a Board Member of the divoting of this NPG, to URE OWLED	ce of the City Attorney be NC has a conflict of in the NC Funding Program on provided herein and cuments "What is a Put (s) and/or program(s) for the Neighborhood C trused in accordance with the conference of the Neighborhood Council.	efore filing this application terest and completes the modern will deny the payment communicated otherwise ablic Benefit," and "Confall within the criteria of awarding of the Neighouncil to whom I am su
b) If yes, did you request that the board in the Yes No *(Please note that in the discussion and the discuss	If a Board Member of the divoting of this NPG, to URE OWLED	ce of the City Attorney be NC has a conflict of in the NC Funding Program on provided herein and cuments "What is a Put (s) and/or program(s) for the Neighborhood C trused in accordance with the conference of the Neighborhood Council.	efore filing this application terest and completes the will deny the paymer communicated otherwise ablic Benefit," and "Cortall within the criteria of awarding of the Neighouncil to whom I am surith the terms of the ap
o) If yes, did you request that the board in Yes No *(Please note that in or participates in the discussion and grant in its entirety.) CCTION V - DECLARATION AND SIGNATE or participates in the discussion and grant in its entirety.) CCTION V - DECLARATION AND SIGNATE or participates in the best of my known accurately stated. I further affirm the erest" of this application and affirm the nefit project/program and that no correspond or proses Grant. I affirm that I am not a control of the project	If a Board Member of the divoting of this NPG, to URE OWLED	ce of the City Attorney be NC has a conflict of in the NC Funding Program on provided herein and coments "What is a Put(s) and/or program(s) for the Neighborhood C to used in accordance with the confliction of the Neighborhood Council.	efore filing this application terest and completes the will deny the paymer communicated otherwise ablic Benefit," and "Cortall within the criteria of awarding of the Neighouncil to whom I am surith the terms of the ap
o) If yes, did you request that the board in Yes No *(Please note that if or participates in the discussion an grant in its entirety.) CTION V - DECLARATION AND SIGNATE Preby affirm that, to the best of my known accurately stated. I further affirm the erest" of this application and affirm the nefit project/program and that no corresposes Grant. I affirm that I am not a composes Grant. I affirm that I am not a composes Grant. I affirm that I am not a composes Grant. I further affirm that if the ted here, said funds shall be returned to PRINT Name	URE Wedge, the information at I have read the document the proposed project of interest exist accurrent Board Member are grant received is no immediately to the Neimann Title	ce of the City Attorney be the NC has a conflict of in the NC Funding Program on provided herein and comments "What is a Put(s) and/or program(s) for the Neighborhood Cot used in accordance with the confliction of the Neighborhood Council. Cipal - REQUIRED* David Bais Signature	efore filing this application terest and completes the will deny the paymer communicated otherwise ablic Benefit," and "Core all within the criteria of awarding of the Neighouncil to whom I am surith the terms of the apparent.
b) If yes, did you request that the board of Yes No *(Please note that if or participates in the discussion an grant in its entirety.) CCTION V - DECLARATION AND SIGNATE ereby affirm that, to the best of my known accurately stated. I further affirm the erest" of this application and affirm the nefit project/program and that no control of the project in the sapplication. I further affirm that if the sapplication. I further affirm that if the lated here, said funds shall be returned 2a) Executive Director of Non-Profit Cor	URE Wedge, the information at I have read the document the proposed project of interest exist accurrent Board Member are grant received is no immediately to the Neimann Title	ce of the City Attorney be the NC has a conflict of in the NC Funding Program on provided herein and comments "What is a Put(s) and/or program(s) for the Neighborhood Cot used in accordance with the confliction of the Neighborhood Council. Cipal - REQUIRED* David Bais Signature	efore filing this application terest and completes the modern will deny the payment communicated otherwise ablic Benefit," and "Correct all within the criteria of awarding of the Neighouncil to whom I am surith the terms of the apparent with the apparent wit

* 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 for instructions on completing this form

PAGE 2 NCFP 107

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

Date: FEB 11 2010

THE SAFE COMMUNITY PROJECT C/O GENE TAKAGI 425 MARKET ST STE 2200 SAN FRANCISCO, CA 94105 Employer Identification Number: 27-0967511 DLN: 17053029333010 Contact Person: RENEE RAILEY NORTON ID# 31172 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: March 31 Public Charity Status: 170(b)(1)(A)(vi) Form 990 Required: Effective Date of Exemption: September 10, 2009 Contribution Deductibility: Yes Addendum Applies:

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.

No

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.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

THE SAFE COMMUNITY PROJECT

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

Robert Choi

Director, Exempt Organizations

Rulings and Agreements

Enclosure: Publication 4221-PC

Letter 947 (DO/CG)

STATE OF CALIFORNIA



CERTIFICATE OF RECOGNITION

PRESENTED TO:

MySafe: LA

On behalf of the California State Senate, it is my pleasure to recognize your outstanding work in public safety. Thank you for your contributions to the Community. Your commitment and dedication is truly appreciated. Best wishes and continued success!

March 2, 2017

SENATE PRESIDENT PRO TEMPORE KEVIN DE LEÓN Twenty-Fourth District



Certificate of Appreciation is hereby presented to

MySafe:LA

On behalf of the 12th and 15th Council District of the City of Los Angeles, we honor MySafe:LA for their unwavering commitment to delivering fire and life safety education to the residents of the City of Los Angeles and making the City of Los Angeles a safer place to work, live and play.

March 1, 2017

JOE BUSCAINO
Councilmember 15th District



MITCHELL E IGLANDER Councilmemter 12th District CALIFORNIA LEGISLATURE



CERTIFICATE OF RECOGNITION

My Safe: LA

On behalf of the California State Assembly, I would like to honor MySafe: LA for your ongoing and unwavering dedication to the residents of Los Angeles. Programs such as FireSmart: LA, QuakeSmart: LA and WaterSmart: LA have kept residents well prepared and informed. Thank you for serving as the Fire and Life Safety Education Partner of the Los Angeles Fire Department. I wish you continued success and fulfillment in all future endeavors.

DATED THIS 1ST DAY OF MARCH 2017

Rul Baurena

RAUL BOCANEGRA

MEMBER OF THE ASSEMBLY 39TH ASSEMBLY DISTRICT MAJORITY WHIP













EVACUATION CHECKLIST

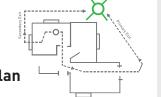
The key to a safe, calm evacuation is **preparation**.

■ Have emergency kits for family and pets prepared in advance of fire season.		Œ
■ Have bottled drinking water on hand.		
■ Fill a fireproof box with important documents and cash.	-	\$
■ Know where your water, gas and electric shut-off controls are and how to use them.		O ON OI
■ Know your escape routes, emergency numbers and out-of-state contacts.	-	
Review your contacts and escape routes with all members of your household.		†
Park your car facing the road.	-	
Pack the car with pet supplies and emergency supply kits. Don't forget extra batteries and water.	-	*
Monitor local radio and TV stations along with emergency websites for evacuation orders.		NEWS
Place a ladder (preferably non-combustible) against your house for roof access.		
Turn the lights ON in your house.		- \
Shut off the air conditioner.	-	OFF
Close ALL doors and windows.	—	
■ When told by fire or police to evacuate, GO!	-	

TELL YOUR NEIGHBORS ABOUT READY, SET, GO! Ask them if they have a family emergency escape plan!

JOIN THE DISCUSSION ON FACEBOOK AT: fmysafela.org

Get your FREE family escape plan (PDF) at: www.mysafela.org/familyescapeplan





Nobody wants to leave their home. When disaster strikes, knowing what to do can be a matter of life and death. Protect your family, pets, and valuables by knowing how to prepare and evacuate when asked to by authorities. Use this brochure as a working guide to get you started.

PETS AND LARGE ANIMALS

All of your pets, from dogs and cats to horses and other large animals need to be included in your evacuation plan. If you have large animals, practice trailering them before disaster strikes. Practice makes perfect.

LEARN MORE ABOUT ANIMAL EVACUATION AT: www.readyforwildfire.org/animal-evacuation

IMPORTANT WEBSITES



www.lafd.org www.mysafela.org www.readyla.com

www.ready.gov www.wildlandfiresrsg.org www.readyforwildfire.org

Stay Connected!

MySafe:LA is a non-profit public education organization focused on delivering fire and life safety education to everyone in Southern California. Our website is continually updated with new information to help you be prepared in the event of disaster.

VISIT WWW.MYSAFELA.ORG TO STAY CONNECTED TO THE LATEST TIPS AND EDUCATION ON FIRE AND LIFE SAFETY.

RSG Brochure, version 1702-1 © 2017 The Safe Community Project, All rights reserved. MySafe:LA is a unit of the Safe Community Project. Visit any LA City website to learn about legal protections and requirements for LA City intellectual property, including logos, brands, and digital technology.

EMERGENCY GO KIT CHECKLIST!



Everyone in your home should have an emergency GO kit of supplies close at hand. Keep yours under your bed, or near the door. In the event of an emergency or evacuation - grab your kit and GO!

HERE IS WHAT YOU SHOULD KEEP IN YOUR KIT:



Bottled water



Flashlight



■ Whistle



■ Medications (one week supply)



■ Emergency contact information





Extra pair of glasses or contacts



Important documents, identification cards





Keys (house and car)



Comfortable shoes, warm jacket, and a change of clothes



Money (coins and bills)



■ Snacks



Toiletries



Small first aid kit

Phone charger

ADDITIONAL ITEMS TO KEEP IN YOUR VEHICLE:

- Map of California and surrounding area
- Jumper cables
- □ Tool kit
- Flares
- Fire Extinguisher



FOR A COMPLETE LIST OF ITEMS, GO TO MYSAFELA.ORG/SURVIVAL-KIT/



SMOKE AND CARBON MONOXIDE ALARMS



SMOKE ALARMS

When was the last time you thought about yours? They can make the difference between life and death. It just takes a few minutes to make you and your family safer.



INSTALL

SMOKE ALARMS SHOULD BE...

- on every level of your home
- in every room where someone sleeps
- in every hallway outside of a sleeping area



- ◆ DO place alarms on the wall 4-12" from the ceiling.
- ◆ DON'T install smoke alarms in your kitchen.
- DON'T put alarms near vents, fans, or exterior doors and windows.

BATTERY-ONLY VS. WIRED

BATTERY-ONLY

SEALED ALARM

- Use a 10-year lithium battery in a sealed compartment
- No need to change the battery

JNSEALED

 Replace batteries twice a year, when you change your clocks in the spring and fall.

WIRED

- Wired alarms are powered by your home's electrical system
- Most alarms have a battery
 backup



 A licensed electrician should handle the maintenance and replacement of these alarms

PRO TIP: Check the back of your alarms for the manufacturer date and replace alarms that are older than 10 years.

CARBON MONOXIDE ALARMS

Carbon monoxide (CO) is a odorless, colorless, deadly gas. Place CO alarms on a wall, chest high or lower. CO detectors need to be replaced every 7 years.



LEARN MORE ABOUT SMOKE ALARMS AT WWW.MYSMOKEALARM.ORG

FAMILY ESCAPE PLAN

PLAN

Creating a plan is easy! Start by drawing a map of your home.

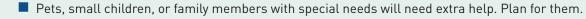
Download your Escape Plan at www.mysafela.org/family-escape-plan/



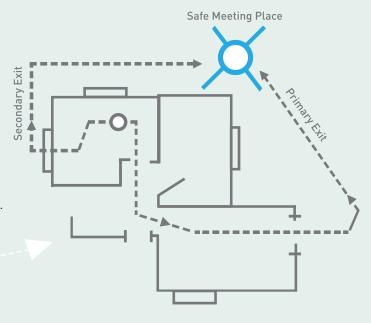
- Know 2 ways out of every room and out of the house.
- Keep exits clear of furniture and clutter.
- Store a fire safety ladder near upstairs window.



- Choose a safe meeting place outside that is stationary and away from your home.
- NEVER go back inside during an emergency.



If you have security bars on your window, make sure everyone knows how to open them.



PRACTICE

- Practice your escape plan once a month.
- Use the back of your hand to check door cracks for heat. If the door is hot, DO NOT OPEN!

PRO TIP: A home sprinkler system can help limit the spread of fire, and protect your family and valuables.

HOW FIRESMART IS YOUR HOME?

FIRE SAFETY

CHECKLIST





GENERAL

- Keep a fire extinguisher in your home. Learn how to use it. Need a refresher?
 - Go to www.mysafela.org/buy-a-fire-extinguisher/
- Never overload electrical sockets or individual circuits in your home.
- Check for worn wires. Never run extension cords or wires under rugs or furniture.
- Place space heaters away from drapes and other flammables.Make sure it cannot tip over.
 - ☐ Have a chimney? Get it cleaned and inspected every year.
 - Use a metal mesh screen in front of your fireplace.

 Leave glass doors OPEN when you have a fire burning.

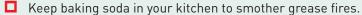


KITCHEN

Never leave your cooking unattended.



☐ Check that your stove and other appliances are off before going to bed.





TELL YOUR FAMILY MEMBERS!

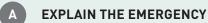
- Keep lighters, matches, fireworks, flares and other combustibles away from children.
- Never empty an ashtray into a trashcan.
- Don't smoke when you're tired. Don't smoke in bed.

Go to **MySafeLA.org** to learn more about being FireSmart:LA!



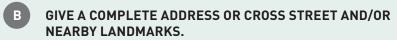
CALLING 9-1-1 KEY THINGS TO DO!





Clear, concise communication is important!





Remember: the 911 system can pick up your location from a landline, but not a cellphone.



GIVE YOUR PHONE NUMBER IN CASE YOU GET DISCONNECTED!



IN CASE OF EMERGENCY:

Local Emergency Contact:
Out of State Contact:
Our Safe Meeting Location is:
Local Fire Station:
Local Police Station:
Poison Control Hotline:
Physician:
Veterinarian:

Make certain to save these numbers to your phone!

FIRE & LIFE SAFETY

DELIVERED IN A UNIQUE WAY

MySafe:LA delivers fire and life safety education to residents in the City and County of Los Angeles. We are one of the first private professional fire prevention organizations in the country, and we're working hard to make a difference in people's lives. We've been on the leading edge of Community Risk Reduction (CRR) since 2009.

WE VISIT SCHOOLS!

We visit Los Angeles Unified School District campuses as well as charter and private schools. Our visits are filled with video, interactivity, and live demonstrations. We give students a learning experience they'll never forget.

WE VISIT OTHER PLACES TOO!

You don't have to be a school kid to have MySafe:LA and the LAFD stop by to teach you fire and life safety. We deliver programs to recreation and parks facilities, museums, senior centers, libraries, and on occasion, fire stations! We teach people about surviving earthquakes, how to perform Hands Only CPR, the importance of having a family escape plan, water safety, and much more.

WE'RE INTO NUMBERS

We don't rest on our laurels. We've earned a few, but that's not what we're about. When we started this organization in 2008, we knew the best way to get better at what we were doing was to analyze our work product. We got kind of addicted to the power of metrics.

CONNECT WITH US

Visit us online at **www.mysafela.org** and get tips, watch videos, and download safety materials. We want to hear from you! And don't forget to keep in touch with the Los Angeles Fire Department online:

www.lafd.org

WE'RE SOCIAL!



MySafeLA



MySafeLA.org



MySafeLA

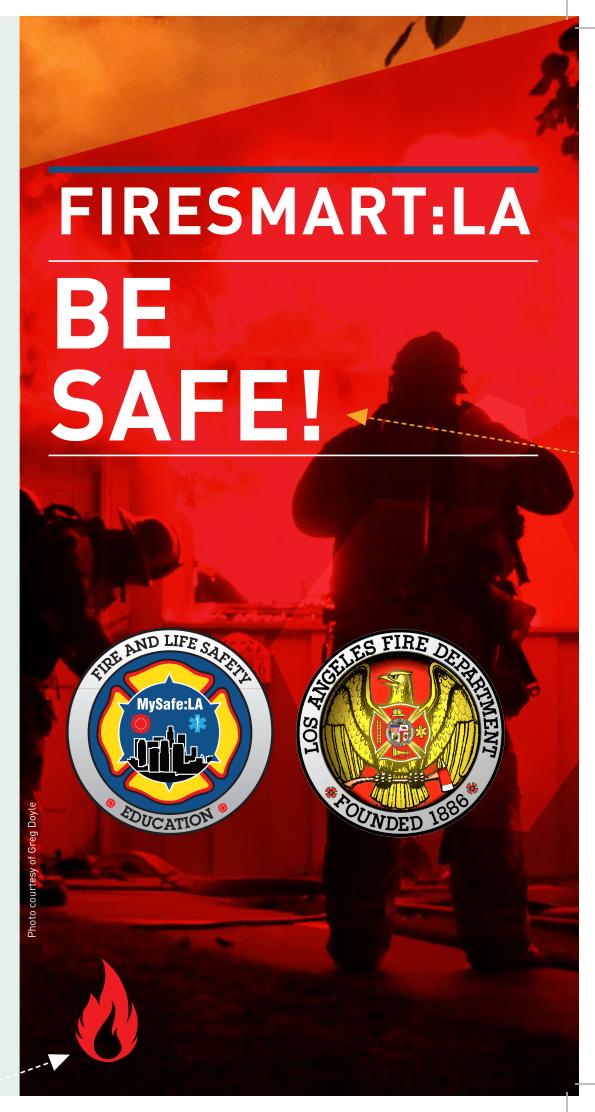


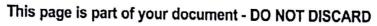






FireSmart:LA Brochure, version 1702F-1 © 2017 The Safe Community Project, All rights reserved. MySafe:LA is a unit of the Safe Community Project. Visit any LA City website to learn about legal protections and requirements for LA City intellectual property, including logos, brands, and digital technology.







Pages: 0002



20091521098



Recorded/Filed in Official Records Recorder's Office, Los Angeles County, California

10/06/09 AT 03:43PM

23.00

TAXES: 0.00

FEES:

OTHER: 0.00

PAID: 23.00



LEADSHEET



200910060510036

00001311782



002345060

SEQ:

DAR - Counter (Hard Copy)



THIS FORM IS NOT TO BE DUPLICATED

YOUR RETURN MAILING ADDRESS NAME: DAVID BARRETT ADDRESS: 6767 SUNSET BLVD. 8-488

CITY: LA

STATE: CA

ZIP CODE: 90028



FICTITIOUS BUSINESS NAME STATEMENT

TYPE OF FILING AND FILING FEE (Check one)

Original- \$23.00 (FOR ORIGINAL FILING WITH ONE BUSINESS NAME ON STATEMENT)

Refile- \$18.00 (NO CHANGES IN THE FACTS FROM ORIGINAL FILING-REQUIRES PUBLICATION)

Refile- \$18.00 (NO CHANGES IN THE FACTS FROM ORIGINAL FILING)

\$4.00- FOR EACH ADDITIONAL BUSINESS NAME FILED ON SAME STATEMENT, DOING BUSINESS AT THE SAME LOCATION \$4.00- FOR EACH ADDITIONAL OWNER IN EXCESS OF TWO OWNERS

		×I	he following p	erson(s)	is (are) doing but	siness as:	
* _{1.} MYSAFE	E:LA_		2.	2			
** 6767 SUN	NSET BLVD. 8	3-488	P	rint Fictitious	Business Name(s)		
	Street address of princ	ipal place of business		Λ	Mai	ling address if different	
LA	CA	900		H	1		
City	State	Zip	co	UNTY	City	State	Zip
Articles of Incorporation	on or Organization Num	ber (if applicable): A	1#ON_C322955	56			
*** PECISTER	RED OWNER(S):						
1 THE CAR	RED OWNER(S):	E) / DDO :===		0			
Full Name	E COMMUNI	TY PROJECT		_ 2.	Full Name		
S PONDONINA TO TO	TONIO DA DIGIA	V I 4 "400			Full Name		
Residence Add	TONIO PARKWA	NY L1#488		_	Residence Address		
MISSION V		C4	92694		Residence Address		
City	TEJU	CA State	Zip		City	State	Zip
City		State	Zip				
If Corporation or	r LLC - Print State of In	corporation/Organiza	tion	_	If Corporation or LLC -	Print State of Incorporation/Organization	
3				_ 4.	E national	<u> </u>	_
Full Name					Full Name		
				_	Residence Address		-
Residence Addre	ess				Residence Address		
		State	Zip	_	City	State	Zip
City		State	2.10		,		
If Companion or	LLC - Print State of Inc	orporation/Organizati	on		If Corporation or LLC -	Print State of Incorporation/Organization	
ir Corporation or	LLC - Fillit State of the			ATTACH AD	DITIONAL SHEET SHOW	VING OWNER INFORMATION	
				ATTACTTAD	BITTOTIAL OTTELL OTTO		
	INESS IS COND	OCTED BA: (CI	neck one)	a Limita	d Partnership	□ a Limited Liability Compan	W
an Indiv		□ a General Pa			☑ a Corporatio		opartners
	corporated Assoc	ciation other tha	n a Partnership	ool Pogi	stered Domestic P		
□ Husban	d and Wife □	Joint Venture	□ State of Lo	ocal Regi	stered Domestic r		ity i artiferomp
						2/01/00	
**** The registra	ant commenced to	transact business	under the fictition	us busines	s name or names lis	ited above on 2/01/09 (Insert N/A above if you haven't started	to transact business)
		I doolare the	t all informat	ion in t	nis statement is	s true and correct.	1 to transact business)
	(A regist	rant who declare	s as true inform	ation whi	ch he or she knows	s to be false is guilty of a crime	.)
GISTRANTS NAME (PI	_{RINT)} DAVID BA	RRETT/THE	SAFE COMMU	JNITYP	ROJECT TITLE C	EU	
	'>	Q(I)		-			
EGISTRANT SIG		XW/					
corporation, a	lso print corpo	rate title of of	ficer. If LLC,	also prir	nt title of officer	or manager.	
TIOE IN ACCORDA	NOT WITH CHEDNIC	ON (-) OF SECTION	17020 A EICTITION	IS NAME ST	np in the upper right corr	Y EXPIRES AT THE END OF FIVE YEAR	S FROM THE DATE (
HICH IT WAS FILED IN	N THE OFFICE OF THE	E COUNTY CLERK, I	EXCEPT, AS PROVID SECTION 17913 OTH	DED IN SUB HER THAN A	DIVISION (b) OF SECTION CHANGE IN THE RESION BEFORE THE EXPIRA	DENCE ADDRESS	S AFTER ANY CHAN
DER FEDERAL STAT	TE. OR COMMON LAW	(SEE SECTION 144	111 ET SEQ., BUSINE	ESS AND PE	ROFESSIONS CODE).	NESS NAME IN VIOLATION OF THE RIC ON FILE IN MY OFFICE.	SHTS OF ANOTHER
						The second second	, Deputy
DEAN C. LO	GAN, LOS ANGEL	ES COUNTY CLI	EKK	B1:_		4	
v. 06/2009	P.O. BOX 53	592, LOS ANGELES,	CA 90053-0592		PH: (562) 462-2177	WEB ADDRESS: L	AVOTENET