

Department of Neighborhood Empowerment

Reporting Month:	FEBRUARY	MONTHLY EXPENDITURE REPORT
NC Name:	Porter Ranch	Submitted: 3/4/2015 12:03:03
Budget Fiscal Year:	2014-2015	



FILL IN ALL THE UNSHADED (WHITE) FIELDS (Must be submitted to the Department within 10 days of Board Approval along with documentation and hard copy)

EXPENDITURES BY LINE ITEM (for more than 12 expenditures, you may continue entering on page 3 of this worksheet - see below)							
A	Date / Item / Service Description	BUDGET CATEGORY	VENDOR	INVOICE NUMBER	OUT OF STATE VENDOR	1099 Reportable	TOTAL
1	2/24 Newswriting and Webservices	OUTREACH	Moore Business Results	PRNC 022015	<input type="checkbox"/>		\$750.00
2	2/3 Transcription Services	OPERATIONS	Apple One	PRNC Jan/Feb 2015	<input type="checkbox"/>		\$467.78
3	2/24 Meeting Advertisement Oil Drilling	OUTREACH	Valley Korean News		<input type="checkbox"/>		\$200.00
4	2/4 Water	OUTREACH	Ralphs		<input type="checkbox"/>		\$14.79
5	2/5 Food for Board Meeting	OUTREACH	Ameci's		<input type="checkbox"/>		\$313.02
6	2/12 web hosting	OUTREACH	Host Gator		<input checked="" type="checkbox"/>		\$8.95
7	2/17 Email Newsletter	OUTREACH	Constant Contact		<input checked="" type="checkbox"/>		\$55.00
8	2/25 Food for Land Use meeting	OUTREACH	Ameci's		<input type="checkbox"/>		\$86.88
9	2/25 Phone Dialer	OUTREACH	One Call Now		<input type="checkbox"/>		\$372.55
10							
11							
12							
SUBTOTAL: Expenditures by Line Item (May include totals on page 3, if entered)							\$2,268.97
B	CUMULATIVE EXPENDITURES FROM PRIOR MONTHS						\$14,949.56
C	OUTSTANDING COMMITMENTS						
C 1. Outstanding Checks (checks that have been issued, but have not yet cleared the account)							
C 2. Rent/Lease							
C 3. Contractual Services							
C 4. Large Purchases							
C 5. Neighborhood Purpose Grants (pending or in process)							
C 6. Temporary Staffing Services							\$1,000.00
C 7. Storage							
C 8. Other Outstanding Commitments		==>	Description: Signs LA - Becky Leveque Motion				\$625.00
SUBTOTAL: Outstanding Commitments							\$1,625.00
D	Total Expenditures & Commitments						\$18,843.53
E Total Adjustments by Department (such as use taxes assessed, credits from prior fiscal years, etc)							
F Approved Budget 2014-2015							\$37,000.00
G Balance of Budget							\$18,156.47

Revision Date 1-26-15

Reporting Month:	FEBRUARY
NC Name:	Porter Ranch

Page 2

MONTHLY CASH RECONCILIATION				
Beginning Balance (A)	Funds Deposited (B)	Total Available (C) = (A+B)	Cash Spent this Month (D)	Remaining Balance (E) = C - D
\$2,603.33	\$1,396.77	\$4,000.10	\$2,268.97	\$1,731.13

MONTHLY BUDGETARY ANALYSIS					
Category Identifier	Budget Category	Adopted Budget (A)	Total Spent this Month (B)	Total Spent in Prior Months (C)	Unspent Budget Balance (D) = A - B - C
100	Operations	\$4,250.00	\$467.78	\$1,455.59	\$2,326.63
200	Outreach	\$19,208.00	\$1,801.19	\$10,493.97	\$6,912.84
300	Community Improvement	\$5,542.00	\$0.00	\$0.00	\$5,542.00
400	NPG	\$8,000.00	\$0.00	\$3,000.00	\$5,000.00
500	Elections	\$0.00	\$0.00	\$0.00	\$0.00
900	Unallocated	\$0.00	\$0.00	\$0.00	\$0.00
	TOTAL	\$37,000.00	\$2,268.97	\$14,949.56	\$19,781.47

NEIGHBORHOOD COUNCIL DECLARATION			
We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and will furnish additional documentation to the Department of Neighborhood Empowerment upon request.			
Treasurer Signature		Signer's Signature	
Print Name	Sean O'Rourke	Print Name	Armando Nunez

Date	3/4/15	Date	3/4/15
NC Additional Comments			

Revision Date 1-26-15

Reporting Month:	FEBRUARY
NC Name:	Porter Ranch

ADDITIONAL EXPENDITURES BY LINE ITEM (Optional, do not print page 3 unless you use it)							
A	Date / Item / Service Description	BUDGET CATEGORY	VENDOR	INVOICE NUMBER	OUT OF STATE VENDOR	1099 Reportable	TOTAL
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							
32							
33							
34							
35							
36							
SUBTOTAL: Expenditures by Line Item							\$0.00

Revision Date 1-26-15

03/04/15

PORTER RANCH NC
Profit and Loss Budget vs. Actual
July 2014 through February 2015

	Jul '14 - Feb '15	Budget	\$ Over Budget	% of Budget
Income	0.00	0.00	0.00	0.0%
Expense				
100 - Operations				
100EDU - Board Retreat	0.00	1,000.00	-1,000.00	0.0%
100MIS - Miscellaneous	179.11			
100OFF - Office Supplies	89.95	500.00	-410.05	18.0%
100POS - Postage	0.00	350.00	-350.00	0.0%
100TRL - Transcription Translat	1,654.31	2,400.00	-745.69	68.9%
Total 100 - Operations	1,923.37	4,250.00	-2,326.63	45.3%
200 - Outreach				
200ADV - Graphics/Flyers	677.38	1,400.00	-722.62	48.4%
200ADV1 - Promotional Items	199.35	1,000.00	-800.65	19.9%
200EVE - Holiday Party	1,134.36	2,500.00	-1,365.64	45.4%
200EVE1 - Disaster Preparedness	499.23	500.00	-0.77	99.8%
200EVE2 - NC Alliance Outreach	150.01	1,500.00	-1,349.99	10.0%
200MEE - Meeting Food	1,633.45	1,500.00	133.45	108.9%
200MEE1 - Phone Dialer	760.62	1,158.00	-397.38	65.7%
200NEW - Constant Contact	430.00	450.00	-20.00	95.6%
200WEB - prnc.org	6,667.00	9,000.00	-2,333.00	74.1%
200WEB1 - Web Hosting	143.76	200.00	-56.24	71.9%
Total 200 - Outreach	12,295.16	19,208.00	-6,912.84	64.0%
300 - Community Improvement				
300CIP - Unallocated Community	0.00	542.00	-542.00	0.0%
300CIP - Trees/Watering	0.00	1,500.00	-1,500.00	0.0%
300CIP1 - LAPD	0.00	2,500.00	-2,500.00	0.0%
300CIP2 - LAFD	0.00	1,000.00	-1,000.00	0.0%
Total 300 - Community Improve...	0.00	5,542.00	-5,542.00	0.0%
400 - NPG				
400GRT - Senior Dance	0.00	500.00	-500.00	0.0%
400GRT1 - Castlebay Elementary	0.00	2,000.00	-2,000.00	0.0%
400GRT2 - PRCS	0.00	2,000.00	-2,000.00	0.0%
400GRT3 - YMCA Thanksgiving	500.00	500.00	0.00	100.0%
400GRT4 - Chatsworth Family	0.00	500.00	-500.00	0.0%
400GRT7 - July 4th	2,500.00	2,500.00	0.00	100.0%
Total 400 - NPG	3,000.00	8,000.00	-5,000.00	37.5%
Total Expense	17,218.53	37,000.00	-19,781.47	46.5%
Net Income	-17,218.53	-37,000.00	19,781.47	46.5%



STATEMENT OF ACCOUNTS

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

PORTER RANCH NEIGHBORHOOD COUNCIL
200 N SPRING ST FL 20
LOS ANGELES CA 90012-4801

Page 1 of 2
Statement Number: 0063214498
01/31/15 - 02/27/15

Telephone Banking

For 24-hour Automated Direct Service
800-238-4486
800-826-7345(TDD)
Representatives are available
Monday through Saturday

To open additional accounts,
or apply for loans, call your
banking office at 310-551-8900

You may also access your account online
at unionbank.com

Thank you for banking with us
since 2014

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

Business Basics Checking Summary

Account Number: 0063214498

Days in statement period: 28

Balance on 1/31	\$	2,603.23
Additions		1,396.77
Subtractions		-2,268.97
	Checks	-1,417.78
	Purchases	-851.19
Balance on 2/27	\$	1,731.03
Statement Average Ledger Balance		3,001.10

We waived your service charge this statement period.

Additions

Date	Description/Location	Reference	Amount
2/2	CITY OF LOS ANGE EFT PAYMT PPD *****0735	55351462	\$ 1,396.77

Checks

Number	Date	Reference	Amount	Number	Date	Reference	Amount
5013	2/24	07514310	750.00	5017*	2/24	08336976	200.00
5014	2/3	06000446	467.78				
Total							\$ 1,417.78

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

Purchases ATM card and Debit card™ purchases

Date	Description/Location	Reference	Amount
2/4	RALPHS 19781 RINALDI S NORTHRIDGE CA	70351931	\$ 14.79
2/5	AMECI'S PI 11229 TAMPA AVE NORTHRIDGE CA	70353249	313.02
2/12	HOSTGATOR. 5005 MITCHELLDA 08669642867 TX	70438404	8.95
2/17	CTC*CONSTA 1601 Trapelo Ro 855-2295506 MA	70446029	55.00
2/25	AMECI'S PI 11229 TAMPA AVE NORTHRIDGE CA	70555417	86.88
2/25	ONE CALL N 726 GRANT ST. 877-698-3262 OH	70561315	372.55
Total			\$ 851.19

Information and Banking Office Services

For each monthly statement period your account includes:

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

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



Invoice #2015 0215
Number

Date February 15, 2015

Ms. Paula Cracium
President
Porter Ranch Neighborhood Council
P.O. Box 7337
Porter Ranch, CA 91327-7337

Please remit to:

Wendy L. Moore
Moore Business Results
19300 Rinaldi St. #7164
Northridge, CA 91327

818 252-9399
<http://www.moorebusinessresults.com/>
City of LA Tax #549794-29

Professional Fees for stakeholder communications services: website, PR, and email for February 2015.	\$750
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Total Amount Due:	\$750
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CITY OF LOS ANGELES

Attn: Accounts Payable

AppleOne Employment Services
P.O. Box 29048
Glendale CA 91209-9048

Tel: 818-240-8688
Email: specialbill@ingvms@ain1.com

TIN: 95-2580864

PORTER RANCH NC
200 N. Main Street, Room 2005
LOS ANGELES, CA 90012

Customer No: 00950101
Site No: 0071
Period Ending: 10/04/2014
Invoice Date: 10/08/2014
Invoice No: S2696536
Amount Due: \$103.95
Payment Term: NET 30 DAYS

Invoice

Supervisor	Name	Weekend	Inv Date	Ref Inv No	Reg Hr	Reg Rate	OT Hr	OT Rate	DT Hr	DT Rate	Misc Hr	Misc Rate	Tax	Amount	State	Office
	MITCHELLE	10/04/2014	10/08/2014	01-3399984	4.50	\$23.10	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	\$0.00	\$103.95	CA	1002
Grand Total Invoice Amount														\$103.95		

Please remit payment to: AppleOne Employment Services
P.O. Box 29048
Glendale, CA 91209-9048



CITY OF LOS ANGELES

Attn: Accounts Payable

AppleOne Employment Services
P.O. Box 29048
Glendale CA 91209-9048

Tel: 818-240-8688
Email: specialbillinquiries@ain1.com

TIN: 95-2580864

PORTER RANCH NC
200 N. Main Street, Room 2005
LOS ANGELES, CA 90012

Customer No: 00950101
Site No: 0071
Period Ending: 01/10/2015
Invoice Date: 01/14/2015
Invoice No: S2830104
Amount Due: \$115.50
Payment Term: NET 30 DAYS

Invoice

Supervisor	Name	Weekend	Inv Date	Ref Inv No	Reg Hr	Reg Rate	OT Hr	OT Rate	DT Hr	DT Rate	Misc Hr	Misc Rate	Tax	Amount	State	Office
	RITCHIE, MICHELLE	01/10/2015	01/14/2015	01-3515050	5.00	\$23.10	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	\$0.00	\$115.50	CA	1002
Grand Total Invoice Amount														\$115.50		

Please remit payment to: AppleOne Employment Services
P.O. Box 29048
Glendale, CA 91209-9048

Tc serial No
PN326144

Client Verification	
Company Name:	City of Los Angeles D.O.N.E./Credit
Total Hours Worked (in Numbers):	Total Hours Worked (in Words):
<p>I am an authorized representative of City of Los Angeles D.O.N.E./Credit and certify that the employee(s) worked the hours indicated with services performed satisfactorily.</p> <p>Client Name and Title: City of Los Angeles D.O.N.E./Credit 002</p> <p>(Please Print)</p> <p>Client Signature: _____</p>	

Employee name	Richie, Michelle				Assignment Completed	Yes	No
Week Ending	0	1	1	0	1	5	
Saturday	Month				Day	Year	
If yes, call your office.							

	Start Time	Finish time	Less Lunch	Total	Reg	Total O.T.	Total Double	O.T. Approval
	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins
SUN								
MON								
TUE								
WED	17	30	20	30	3	0		
THUR								
FRI	19	0	21	0	2	0		
SAT								
Total Hours & Minutes Worked This Week	5	0	0	0	0	0	0	
Office Use Only:								
Hours & Minutes Converted to Netwrest Minute								
Corporate Use Only:								

<p>I certify that these hours and dates are correct and have been approved by the client. I further certify that I suffered no injuries during the work period. I represent as an employee of Apichone and it is my responsibility to contact the company for reassignment. Provided that, a.) I have submitted this timesheet for all hours worked during the week, b.) I have not worked more than 40 hours per week, and c.) I have not been paid for my services on the Friday of the week following the week covered by this timesheet, I agree to be paid for my services on the Friday of the week following the week covered by this timesheet. I agree that I am not available for reassignment and I have been discharged, or</p> <p>1.) I notify Apichone that I have resigned and do not wish to be reassigned, in the state of my employment, if such law requires payment in advance of the next scheduled pay date. I agree for a period of six (6) months after completion of my employment, I will provide my services to this client as an employee or contractor or as an employee of any other temporary or outsourcing service, (CONFIRM I HAVE NO OTHER EMPLOYMENT) I agree to be paid for my services on the Friday of the week following the week covered by this timesheet. (IF DENIED AN MEAL/REST BREAK, CONTACT (800) 270-9120 IMMEDIATELY TO REPORT VIOLATION).</p>	<p>3</p> <p>0</p> <p>3</p> <p>3</p>
<p>Supervisor's Name</p>	<p>Box2</p>
<p>Box3</p>	<p>Box4</p>
<p>Office Use Only: Total</p>	<p>Box5</p>
<p>Hour:</p>	<p>Box6</p>
<p>Employee Signature</p>	<p>Date</p>
<p>Dept / Cost Center</p>	<p>Project</p>
<p>Supervisor's Phone #</p>	<p>Box7</p>

City & State of Residence

I have read and agreed to the Condition of Service as follows except where a Condition is superseded by a contractual agreement with AppleOne (COMPANY,

[illegible]

Reference ID: 3936665



VALLEY KOREAN NEWS

17611 Chase Street, Northridge, CA 91325

Tel (818) 344 - 6257 · Fax (818) 344 - 5952

Advertisement

INVOICE

To : Eric Nam

Invoice No.: 0801_201

Attention :

Date : 08-15-14

Address :

Date	Description	Reg. Price	Discount	Amount	Paid	BALANCE
August-01	Valley Korean News AD-Full Color	\$400	\$200			\$200.00

Thank you very much.....

Balance : \$	Late Charge : \$	Current : \$	Total : \$ 200.00
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get real
 {low prices}
 @ **Ralphs**

19781 Rinaldi St.
 (818) 832-5955
 YOUR CASHIER WAS SELF CHECKOUT

	RA WATER 32/16.9Z	RC	3.79 F
	CA REDEM VAL		1.60 F
SC	RALPHS SAVED YOU	0.50	
	RA WATER 32/16.9Z	RC	3.79 F
	CA REDEM VAL		1.60 F
SC	RALPHS SAVED YOU	0.50	
	COKE ZERO	RC	1.79 B
	CA REDEM VAL		0.05 B
SC	RALPHS SAVED YOU	0.20	
	COKE ZERO	RC	1.79 B
	CA REDEM VAL		0.05 B
SC	RALPHS SAVED YOU	0.20	
	RALPHS rewards CUSTOMER		*****0469
	TAX		0.33
	**** BALANCE		14.79

703 Ralphs #127
 19781 Rinaldi St.
 Northridge CA 91326
 MASTERCARD Purchase
 *****3343
 TOTAL: 14.79
 REF#: 000000

MASTERCARD 14.79
 CHANGE 0.00
 TOTAL NUMBER OF ITEMS SOLD = 8
 02/04/15 05:33pm 127 81 72 999

 We Are Doing!

City of Los Angeles – Department of Neighborhood Empowerment



**Neighborhood Council
Funding Program**

Missing Receipt Affidavit
(One per Receipt)

Name of Authorized Neighborhood Council Member (Requestor)	Title of Authorized Neighborhood Council Member	Name of Neighborhood Council
Sean O'Rourke	Treasurer	Porter Ranch

Name of Vendor	Date	Total Amount	Transaction/Ref No	Treasurer
Ameci's	2/5/15	313.02	70353249	Sean O'Rourke

Please provide a **detailed description** and **list items** on the receipt:

See attached

Please **explain purpose of expense** and attach any additional information (flyer, agenda, minutes) detailing the use of item(s).

Food for meeting

I have (check one):

☐

not received

☐

lost

☒

misplaced

☐

a copy of

the receipt documenting payment for the expense described above. I certify that the amount shown above was expended for official Neighborhood Council business purposes.

The Neighborhood Council is submitting this affidavit in lieu of original receipt.

Neighborhood Council Signature	Date
X	

APPROVAL

Department Head	Date
X	

PIZZA & PASTA
ameci

PRESTO

SERVER 12204

TABLE NO.

GUESTS

DATE

645167

- | | | | |
|----|-----------------------|----------------|--------|
| 1 | | | |
| 2 | 2 @ P- | 2 MB @ | |
| 3 | | | |
| 4 | 2 @ | 2 TUNGS | |
| 5 | | | |
| 6 | 2 @ M + <u>leaves</u> | 2 TUNE | |
| 7 | | 2 EP. | |
| 8 | 2 @ UBS. | 2 CIC @ | |
| 9 | | | |
| 10 | 2 @ CIB, pin | 1 CIC @ plate | |
| 11 | | 1 MB @ | |
| 12 | | no center pop. | |
| 13 | | | |
| 14 | SE 45 | 293.02 | chris |
| 15 | | | reper |
| 16 | 2-4-15 | | nuties |
| 17 | | | Portea |

ser-

SUB-TOTAL

TAX

TOTAL

COMMIT

Schoo

convec

645167

DATE _____ AMOUNT _____

PIZZA & PASTA
ameci

PRESTO

[Billing \(/billing/invoices\)](#) » [Billing History \(/billing/invoices\)](#) » Show Invoice

Invoice 38615701

Billed From

HostGator.com
5005 Mitchelldale Suite #100
Houston, TX 77092
United States of America
(866) 964-2867

Billed To

Sean O'Rourke
20260 Pienza Lane
Porter Ranch, CA 91326
US
8185267044

Invoice ID:
38615701

Due Date:
2015-02-16

Date Paid:
2015-02-11

Customer ID:
2189572

Invoice Contents

Hosting**Expanded Details**

Invoice ID:
38615701

Line Item ID:
36688863

Domain:
prnc.org

Package ID:
SH-2177556

Package Type:
Hatchling

Service Term:
\$8.95/mo - 1 Month *

\$8.95

Coupon Code:
--

Coupon Discount:
--

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Service Total: \$8.95**Services Subtotal: \$8.95****Amount Due: \$8.95**



[Print](#)

Billing Activity

Porter Ranch NC

Attn: Sean ORourke

PO Box 7337

Porter Ranch CA 91326-1810

US

P: 818-370-3413

Today's Date: 03/04/2015

User Name: porterranchnc

Billing Activity from 02/04/2015 to 03/04/2015

Date	Description	Charge Amount	Credit Amount
02/13/2015	Payment - Credit Card - 3343		\$55.00 USD
02/13/2015	Invoice #1423829834237	\$55.00 USD	
	Email Marketing		

Billing questions? [Contact Support](#)

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



City of Los Angeles – Department of Neighborhood Empowerment

Neighborhood Council
Funding Program

Missing Receipt Affidavit
(One per Receipt)

Name of Authorized Neighborhood Council Member (Requestor)	Title of Authorized Neighborhood Council Member	Name of Neighborhood Council
Sean O'Rourke	Treasurer	Porter Ranch

Name of Vendor	Date	Total Amount	Transaction/Ref No	Treasurer
Ameci's	2/25/15	86.88	70555417	Sean O'Rourke

Please provide a **detailed description** and **list items** on the receipt:

See attached

Please **explain purpose of expense** and attach any additional information (flyer, agenda, minutes) detailing the use of item(s).

Food for meeting

I have (check one):

☐

not received

☐

lost

☒

misplaced

☐

a copy of

the receipt documenting payment for the expense described above. I certify that the amount shown above was expended for official Neighborhood Council business purposes.

The Neighborhood Council is submitting this affidavit in lieu of original receipt.

Neighborhood Council Signature	Date
X	

APPROVAL

Department Head	Date
X	



FRICK
SERV. TABLE NO. GUESTS DATE 110684

1 310 622 5903

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

LP

LP

LP

5581 7904 3648 3343

5:50

zip. 91326

20260

SUB-TOTAL

TAX

TOT. BACK.

DATE AMOUNT 110684





Sean O'Rourke <crosiseast@gmail.com>

One Call Now: Cash Sale #CS240761

1 message

Billing Department <billing@onecallnow.com>

Mon, Feb 23, 2015 at 8:55 PM

Reply-To: Billing Department <transactions.268496.2499498_user_3463182.365927d795@transactions.netsuite.com>

To: seanorourke@prnc.org



One Call Now
6450 Poe Avenue
Suite 500
Dayton OH 45414
United States
[877-698-3262](tel:877-698-3262)
www.onecallnow.com

Bill To

Sean O'Rourke
Porter Ranch Neighborhood Council
P.O. Box 7337
Porter Ranch CA 91326
United States

Cash Sale

Date 2/23/2015
Sale # CS240761
Group ID 127017
Group Name Porter Ranch Neighborhood Council
Service From 2/23/2015
Service To 2/23/2016
Memo
Payment Method Master Card
Check #
Credit Card # *****3343

Item	Quantity	Description	Rate	RR Fee	Amount
PPCN-4000	1	Pay Per Call Standard: Reach people anytime on a per-call basis. Purchase a block of 4,000 call deliveries and add more call credits at anytime. Credits expire in 12 months without renewal.	359.95	Yes	359.95
Service begins upon receipt of payment.					
Subtotal					359.95
RRF035 - Regulatory Recovery Fee: 3.5%					12.60
Total					\$372.55

Invoice - PAID in Full