



Department of Neighborhood Empowerment  
 Reporting Month: **SEPTEMBER**  
 NC Name: **Tarzana NC**  
 Submitted: #####

Budget Fiscal Year: **2014-2015**  
 (Must be submitted to the Department within 10 days of Board Approval along with documentation and hard copy)  
**FILL IN ALL THE UNSHADED (WHITE) FIELDS** (for more than 12 expenditures, you may continue entering on page 3 of this worksheet - see below)

EXPENDITURES BY LINE ITEM		BUDGET CATEGORY	VENDOR	INVOICE NUMBER	OUT OF STATE VENDOR	1099 Reportable	TOTAL
A	Date / Item / Service Description						
1	9/3/15/ Food/Meeting Exp	OPERATIONS	Harvey Goldberg	14222			\$145.00
2	9/8/15/Mailing List Maintenance	OUTREACH	Net Atlantic	1002581-101			\$45.00
3	9/21/15/Copies/Land Use Committee	OPERATIONS	Office Depot	7003			\$17.17
4	9/21/15/Space Rental/Taste of Encino	OUTREACH	Encino Chamber ofCommerce	n/a			\$150.00
5	9/24/15/Board Minutes/Transcription	OPERATIONS	AppleOne	S3148188			\$189.12
6	9/25/15/Web site maintenance	OUTREACH	The Web Corner	12171			\$150.00
7	9/28/15/Food supplies/Meeting Expense	OPERATIONS	Smart & Final	367			\$19.96
8	9/29/15/Food/Meeting Exp	OPERATIONS	Arnecl	05984			\$71.18
9	9/30/15/Copies/Land Use Committee	OPERATIONS	Office Depot	7996			\$13.67
10	9/30/15/Update Sign/Events	OUTREACH	FastSigns	548-21606			\$46.33
11							
12							\$847.43
<b>SUBTOTAL: Expenditures by Line Item (May include totals on page 3, if entered)</b>							<b>\$1,226.46</b>
B	<b>CUMULATIVE EXPENDITURES FROM PRIOR MONTHS</b>						
C	<b>OUTSTANDING COMMITMENTS</b>						
	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						
	C 7. Storage						
	C 8. Other Outstanding Commitments ==> Description:						
	<b>SUBTOTAL: Outstanding Commitments</b>						
D	<b>Total Expenditures &amp; Commitments</b>						
E	<b>Total Adjustments by Department (such as use taxes assessed, credits from prior fiscal years, etc)</b>						
F	<b>Approved Budget 2014-2015</b>						
G	<b>Balance of Budget</b>						
							\$0.00
							\$2,073.89
							\$42,189.74
							\$40,115.85

Revision Date 1-26-15

Reporting Month:	SEPTEMBER
NC Name:	Tarzana NC

MONTHLY CASH RECONCILIATION				
Beginning Balance (A)	Funds Deposited (B)	Total Available (C) = (A+B)	Cash Spent this Month (D)	Remaining Balance (E) = C - D
\$8,273.54		\$8,273.54	\$847.43	\$7,426.11

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	\$5,015.00	\$456.10	\$291.46	\$4,267.44
200	Outreach	\$11,740.00	\$391.33	\$685.00	\$10,663.67
300	Community Improvement	\$1,200.00	\$0.00		\$1,200.00
400	NPG	\$1,750.00	\$0.00	\$250.00	\$1,500.00
500	Elections	\$6,000.00	\$0.00		\$6,000.00
900	Unallocated	\$16,484.74	\$0.00		\$16,484.74
	<b>TOTAL</b>	<b>\$42,189.74</b>	<b>\$847.43</b>	<b>\$1,226.46</b>	<b>\$40,115.85</b>

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	Print Name
Date	Date
NC Additional Comments	

Revision Date 1-26-15

Doesn't include ck# 5047 written prior to 6/30/15 that cleared 7/2/15 for \$1381.18. Includes \$189.74 from FYE6/30/15 owed to TNC by DONE; case# 7123. Doesn't include \$68.00 of overdraft fees due to late funding by DONE; case # 8027

Reporting Month:	SEPTEMBER
NC Name:	Tarzana NC

ACCOUNT DETAIL

Account Activity	Search
Business Basics-4365 <span style="float: right;">Download Account Detail</span>	
<b>Available Balance</b>	<b>\$18,216.29</b>
Ledger Balance as of 10/09/2015	\$18,216.29

Select Period: Last 60 Days Show by: Date Save this view

Date	Transactions	Category	Amount	Running Balance
10/06/2015	NET ATLANT SALEM MA SALEM MA	Electronic debits	-\$45.00	\$18,216.29
10/05/2015	AMECI PIZZ WOODLAND HIL CA WOODLAND HIL CA	Electronic debits	-\$284.50	\$18,261.29
10/05/2015	CITY OF LOS ANGE EFT PAYMT PPD *****0735	Electronic Credits	\$11,250.00	\$18,545.79
10/02/2015	COSTCO WHS E #04 NORTHRIDGE CA	Electronic debits	-\$62.32	\$7,295.79
09/30/2015	Check #5057 <i>FAST SIGN 3</i>	Checks	-\$46.33	\$7,358.11
09/30/2015	OFFICE DEP TARZANA CA TARZANA CA	Electronic debits	-\$13.67	\$7,404.44
09/29/2015	AMECI PIZZ WOODLAND HIL CA WOODLAND HIL CA	Electronic debits	-\$71.18	\$7,418.11
09/28/2015	SMARTNFINA L477 ENCINO CA	Electronic debits	-\$19.96	\$7,489.29
09/25/2015	Check #5056 <i>WEB CORNER</i>	Checks	-\$150.00	\$7,509.25
09/24/2015	Check #5055 <i>APPLE ONE</i>	Checks	-\$189.12	\$7,659.25
09/21/2015	ENCINO CHA ENCINO CA ENCINO CA	Electronic debits	-\$150.00	\$7,848.37
09/21/2015	OFFICE DEP TARZANA CA TARZANA CA	Electronic debits	-\$17.17	\$7,998.37
09/08/2015	NET ATLANT SALEM MA SALEM MA	Electronic debits	-\$45.00	\$8,015.54
09/03/2015	Check #5054 <i>H.G. Food</i>	Checks	-\$145.00	\$8,060.54
08/25/2015	COSTCO WHS E #00 VAN NUYS CA	Electronic debits	-\$72.60	\$8,205.54
08/24/2015	MICHAELS S ENCINO CA ENCINO CA	Electronic debits	-\$12.39	\$8,278.14
08/24/2015	OFFICE DEP TARZANA CA TARZANA CA	Electronic debits	-\$0.32	\$8,290.53
08/18/2015	Check #5053	Checks	-\$189.12	\$8,290.85
08/17/2015	OFFICE DEP TARZANA CA TARZANA CA	Electronic debits	-\$6.81	\$8,479.97

*Due from bank  
+68-  
7426.11*

Showing 1 - 19 of 19 transactions

Tip: To nickname your accounts, go to Account Services.

Standard Purchases, cont'd

Trans. date	Post date	Description	Amount
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MEETING EXP.



Qty	Item	Price
1	Extra Large SndPit	\$120.00
	cookies	\$0.00
	cookies	\$0.00
	tips	\$25.00
	Sub Total	\$145.00
	Total (Take Out)	\$145.00
	Credit Card	\$145.00
	Change	\$0.00

Get a Free Cookie! Take our 1 minute survey at [www.tellsubway.com](http://www.tellsubway.com)

Store #28178-0 | 818-344-0999  
 19231 VENTURA BLVD  
 7/28/2015 5:12:44 pm Trans #14222

07/29	07/29	SUBWAY	03281789 TARZANA CA	\$145.00
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**Department of Neighborhood Empowerment  
Funding Request Form**



NC NAME: Tarzana NC  
 Budget Fiscal Year: 20 ~~2014~~ 15 - 16  
 Request Date: 8/25/2015  
 Meeting Date: 8/25/2015  
 Agenda Item: 10

Requestor: Esther Wieder  
 Vendor: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Amount: \$ 145.00  
 # of payments     

- Operations     Outreach     NC Sponsored Event     Neighborhood Purpose Grant  
 Contract / Lease     Board Member Reimbursement     Community Improvement Project  
 Out of State     1099 Expense     One Time Expense     Monthly     Multiple

If a bank card exemption of the daily \$1,000 limit is required for this request, please provide the date(s) and amount needed for the daily limit to be lifted:

**Public Benefit Description** Approve the request from board member Harvey Goldberg to reimburse him for \$145.00 for the purchase of food from Subway for the July 22, 2015 meeting. These monies were already budgeted in Operations, Meeting Expenses  
*HARVEY / ESTHER*

**Vote Spun** (remains the same for all items on the agenda)

Requested Board member must leave the room prior to any discussion and may not return to the room until the vote is completed.

Board Member Name	Board Position	Yes	No	Abstain	Recused	Absent	Ineligible
<i>WEIDER, ESTHER</i>	Board Member	X					
Correll, Robin	Board Member	X					
Dori, Reuben	Board Member	X					
Flehinger, Max	Executive Secretary	X					
Garfinkle, David	Board Member	X					
Goldberg, Harvey	Treasurer			X			
Green, Joyce	Board Member	X					
Greenwood, Sott	Board Member					X	
Heissler, Eran	1st Vice President	X					
Hossaini, Sayed	Board Member	X					
Lawler, Paul	Board Member					X	
Reich, Jonathon	2nd Vice President	X					
Safarian, Linda	Board Member					X	
Schwartz, Kenneth	Board Member	X					
Shaffer, Leonard	President	X					
Silverman, Richard	Board Member	X					
Singh, Sukh	Board Member	X					
Toren, Ornit	Board Member					X	
Weidman, Susan	Board Member	X					
Wertheim, Allen	Board Member	X					
NC Quorum: <u>10</u>	Grand Total (including page 2):	<u>16</u>	<u>0</u>	<u>1</u>	<u>0</u>	<u>4</u>	

We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action.

Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically. No additional Cash Request Form is required.

Treasurer Signature: <i>Harvey Goldberg</i>	Signer Signature: <i>Leonard J. Shaffer</i>
Print/type name: Harvey Goldberg	Print/type name: Leonard J. Shaffer
Date (mm/dd/yy): 08/25/15	Date (mm/dd/yy): 08/25/15
<input type="checkbox"/> Contract <input type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Staff Initials: _____ 1st Level: _____ 2nd Level: _____ Authorization Code: _____

*16 / 1 ABSTAIN / 4 ABSENT*

Net Atlantic, Inc.  
10 Federal St., Suite 26  
Salem, MA 01970  
978-219-1920

# INVOICE



Harvey Goldberg  
Tarzana Neighborhood Council  
19798 Greenbriar Drive  
Tarzana, CA 91356

Invoice Summary	
Account	1002581
Reference	Invoice 1002581-101
Date	2015-09-01
Due Date	<b>2015-10-01</b>
Total (\$)	<b>45.00</b>
Amount Due (\$)	<b>0.00</b>

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<u>Description</u>	<u>Amount (\$)</u>
Pro Bandwidth Usage Max: 0.199 GB Service Name: 'tarzana-neighborhood-council'	0.00
Pro Anno List Max: 3021 Members Service Name: 'tarzana-neighborhood-council'	45.00

PAID IN FULL

*Please tear off and return the bottom portion with your payment. Thank you.*

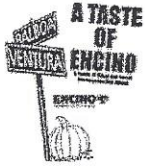
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Harvey Goldberg  
Tarzana Neighborhood Council  
19798 Greenbriar Drive  
Tarzana, CA 91356



Payment Summary	
Account	1002581
Reference	Invoice 1002581-101
Due Date	<b>2015-10-01</b>
Amount Due (\$)	<b>0.00</b>

Net Atlantic, Inc.  
10 Federal St., Suite 26  
Salem, MA 01970



**BUSINESS & NON-PROFIT**  
**Participation Application**  
 28<sup>th</sup> Annual 'A Taste of Encino'  
 Sunday, October 11, 2015

Application,  
 Insurance &  
 Payment Due By:  
**September 10th**

Company Name TARZANA NEIGHBORHOOD COUNCIL Non Profit?: Circle One ~~YES~~ **NO**  
 Contact Person(s) LEONARD SHAFFER  
 Address P.O. Box 571016 TARZANA 91357  
 Phone 818-343-7721 Cell \_\_\_\_\_  
 Fax 818-946-1527 E-Mail L.SHAFFER@TARZANANC.ORG  
 Resale Permit # N/A Website TARZANANC.ORG  
 Insurance Carrier SELF INSURED - SEE ATTACHED

Please Note: A verification of insurance and signed Pages 2 AND 3 MUST accompany your application. See Insurance Information & Indemnification Agreement on page 2 for details on other materials that MUST be provided. Application does not guarantee acceptance.

Description of Service or Products N/A

Wellness Pavilion Location? Circle One YES **(NO)**

PLEASE CHECK YOUR CHOICE(S)...

<input type="checkbox"/> 10 x 10 w/Canopy	\$375	ECC MEMBERS (includes one 8' table and two chairs)
<input type="checkbox"/> 10 x 20 w/Canopy	\$600	ECC MEMBERS (includes two 8' tables and four chairs)
<input type="checkbox"/> 10 x 10 w/Canopy	\$625	Non ECC MEMBER * SEE LAST PAGE FOR DISCOUNT DETAILS
<input type="checkbox"/> 10 x 20 w/Canopy	\$850	Non ECC MEMBER * SEE LAST PAGE FOR DISCOUNT DETAILS

**Non-Profit Participants:**  
 10 x 10 Space Only \$ 75       10 x 20 Space Only \$ 125 (no table or chairs included with space only)  
 10 x 10 w/Canopy \$ 150       10 x 20 w/Canopy \$ 200  
 (1 table & 2 chairs included with 10x10 w/canopy)      (2 tables & 4 chairs included with 10x20 w/canopy)

**ADDITIONAL FEES:**  
 Wellness Pavilion \$ 45       One Electric Outlet \$ 100       Rain Insurance \$ 40  
 (Booth placement is based on electrical needs and determination by the Taste of Encino Directors – see page 3)

Total Enclosed \$ \$150.00 Checks Made Payable to Encino Chamber of Commerce  
 Credit Card # 5581 7409 6241 1390 Exp. Date 10/17 Security # 578  
 Exact Name on Card HARVEY GOLDBERG TARZANA  
 Billing Address 19798 GREENBRIAR DR TARZANA CA 91356  
 Authorized Signature Leonard Shaffer Date 9-17-15

The Encino Chamber of Commerce reserves all rights with respect to presentations, participation & sales permitted at the 'A Taste of Encino', including the right to shut down on the day of the event those not in compliance with the Encino Chamber of Commerce rules or other laws or regulations. All decisions are final at the sole discretion of the Encino Chamber of Commerce. No refunds will be provided.

The Encino Chamber of Commerce, A Taste of Encino, Bureau of Street Services, Department of Transportation, County of Los Angeles and the City of Los Angeles in association with local businesses shall have no liability for damages to participants, their employees, agents, representatives or their property. The Encino Chamber of Commerce, its Officers, Directors, sponsors, agents, representatives, members, employees of the event as well as the Bureau of Street Services, Department of Transportation, County of Los Angeles and the City of Los Angeles are not responsible for any injury, loss, damage caused by or to a patron, guest or invitee of the 'A Taste of Encino', the general public, exhibitor, participant or his or her employee, agent or representative or their property. The participant/exhibitor, upon execution of this application expressly releases the foregoing individuals and entities from any and all claims for such loss, injury or damage and agrees to defend and indemnify each of them from any and all such loss, claim, demand or action arising there from.

**Please Mail, Fax or Email completed application, agreement, insurance & payment to:**  
 Encino Chamber of Commerce 4933 Balboa Blvd. Encino, CA 91316  
 Telephone 818-789-4711 / Fax 818-789-2485 \* info@encinochamber.org

28<sup>th</sup> Annual 'A Taste of Encino' ~ Sunday, October 11, 2015

2015 INSURANCE INFORMATION & INDEMNIFICATION AGREEMENT

**PERMITS AND TAXES:**

Vendor/Exhibitor assumes all responsibility for any and all applicable sales tax as well as income, workers compensation, social security or any related City, County, State or Federal taxes that may be in effect as a result of their obligations at this event. Vendor/Exhibitor is also responsible for all required and proper special event business and health permits that may be required to do business in the City of Los Angeles, the County of Los Angeles and the State of California. Vendor/Exhibitor agrees to defend and indemnify The Encino Chamber of Commerce and its Officers, Directors, Members, agents, employees and representatives from any and all claims, demands or actions relating to any liability relating to all permits and taxes.

**INSURANCE REQUIREMENTS:**

Vendor/Exhibitor will provide and maintain, at its sole expense, insurance as set forth below, and provide a Certificate of Insurance evidencing same, naming A Taste of Encino, Encino Chamber of Commerce, Bureau of Street Services, Department of Transportation, County of Los Angeles and the City of Los Angeles as additional insured's. Said certificate shall be in effect for the period including, but not limited to, 12:00am on Sunday, October 11, 2015 through 11:30pm on Sunday, October 11, 2015.

Said insurance shall be primary to, and not in conflict with any other insurance maintained by the above mentioned "additional insured's". Insurance shall include, but not be limited to, Comprehensive General Liability endorsed to Premises, Operations, Contractual Broad Forms, Property Damage and Personal Injury with a combined single limit of not less than \$1,000,000 per occurrence. If written with an annual aggregate limit, the policy limit should be three times the occurrence limit. Failure of Vendor/Exhibitor to provide and maintain said required insurance shall constitute a material breach of its involvement with the 'A TASTE OF ENCINO' and the Encino Chamber of Commerce shall then be entitled to deny Vendor/Exhibitor from participating at this event with no refund entitlement or other consideration for its paid fees, nor shall it lessen Vendor/Exhibitor's overall liability and responsibility.

If said Certificate of Insurance is written on a Claims Made Form, Vendor/Exhibitor shall continue to name the aforementioned "Additionally Insured's" or provide an extended coverage period for all applicable statutes of limitations beginning upon termination or cancellation of Vendor/Exhibitor involvement in the 2015 'A TASTE OF ENCINO'. Certificates of Insurance must be mailed or faxed to the office of the Encino Chamber of Commerce at 4933 Balboa Blvd., Encino, CA 91316. FAX 818-789-2485. **Insurance Certificates must be received no later than September 10, 2015.** If said copy is transmitted by facsimile, an original must follow by mail to the same address.

**INDEMNIFICATION RELEASE AND WAIVER OF LIABILITY:**

*ZAS*

By its signature below, and in addition to the other provisions herein, Vendor/Exhibitor assumes all responsibility for the sales of its products, materials and/or services and the actions by any of its participants, employees, representatives or agents occurring immediately before, during or after the 2015 A Taste of Encino. By its signature below, Vendor/Exhibitor agrees to indemnify, defend, save and hold harmless the 2015 A Taste of Encino, Encino Chamber of Commerce and its Officers, Directors, Members, agents, employees and representatives, Bureau of Street Services, Department of Transportation, County of Los Angeles and the City of Los Angeles and any officers, agents or employees of agents from any and all claims for damages of any nature whatsoever including, but not limited to, death, personal injury, or property damage arising from or connected to, directly or indirectly, its operations, equipment, products, services, as may occur immediately before, during or after the 2015 'A Taste of Encino'.

**CANCELLATION:**

If the 2015 'A Taste of Encino' is canceled in total or part for any reason/cause by the 2015 'A Taste of Encino', Encino Chamber of Commerce, Bureau of Street Services, Department of Transportation, County of Los Angeles or the City of Los Angeles, the Vendor/Exhibitor shall not be entitled to any refund. Please note that the 2015 'A Taste of Encino' has no scheduled "rain date" or "postponement date". Optional "Rain Insurance" is available at an additional cost.

Please make a reservation in our name for the 2015 'A Taste of Encino' as a participating Vendor/Exhibitor. Enclosed please find a check in the amount of \$ \_\_\_\_\_ (made payable to the ECC). We have read your Vendor/Exhibitor Information Package, as well as, the details of this reservation form including the important paragraphs on Permits, Taxes, Insurances, Indemnification and Cancellation and we agree to be bound by those terms and contents.

**This page MUST be read, signed and sent back along with pages 1 & 3 in order to be considered for acceptance.**

Sponsor/ Vendor / Exhibitor TARZANA NEIGHBORHOOD COUNCIL Date 9-17-15  
Print Name LEONARD SHAFFER Authorized Signature *Leonard Shaffer*  
Title PRESIDENT



## 28<sup>th</sup> Annual 'A Taste of Encino' ~ Participation Agreement Information

### SALES AND BOOTH REQUIREMENTS:

1. Acceptance into the event does not constitute exclusivity. Booth spaces are not guaranteed and are chosen by the Encino Chamber of Commerce at its discretion.
2. Space (Booths) cannot be shared without the authorization of the Taste of Encino Directors. Space (booths) must conform to size restrictions on all sides and not infringe on walkways or neighboring booths/spaces. All spaces (booths) must be appropriate for family viewing. No drug related items will be sold.
3. **No food or beverages may be sold or served in booth or by you or representatives of your company unless you are a designated "Restaurant" booth, have paid the additional fees and have an official event permit.**
4. Alcoholic beverages are prohibited on event grounds except in the designated 'Beverage Garden' area should one exist. The sale and consumption of alcohol is specifically limited to those items sold in the 'Beverage Garden' should one exist and must be consumed in the 'Beverage Garden.' The Encino Chamber reserves the right to not serve or permit any alcoholic beverages throughout the event.
5. Participants must sell from their designated space only; no roving or moving to another location without permission from the Encino Chamber of Commerce or the Taste of Encino Directors.
6. The Encino Chamber of Commerce reserves the right to deny the sale of any item based on quality, uniqueness and product mix. Commercially manufactured wares or exhibits will be allowed in the event. These items will be set up in locations determined by the Encino Chamber of Commerce.
7. Each vendor selling a product must have their California State Board of Equalization sellers permit available for inspection on the day of the event and is responsible for collection of sales tax.
8. Any company or individual providing a medical service, whether for payment or at no cost, must provide a detailed list and description of such services and obtain prior approval of the Encino Chamber of Commerce no later than September 10, 2015.

### SET-UP:

9. **Event hours are from 10am to 5pm;** Setup begins at 6am.
10. Vehicles will enter from Paso Robles South, and move to an assigned location given to you when you enter on Sunday morning. You are permitted to bring only one vehicle onto the setup area.
11. Your vehicle must be immediately removed from the venue after unloading and moved to your assigned parking lot. All vehicles must be off Ventura Blvd. (event site) by 9:00 am. No Exceptions.
12. Your space may be forfeited if you are not completely set up by 9:30am. If you arrive later, you may be denied access to the venue to set up your booth/space.

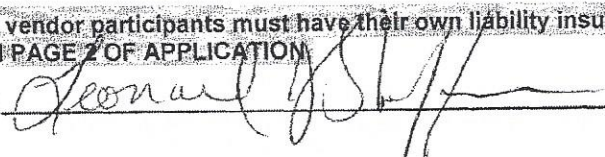
### CLOSING PROCEDURES:

13. **No vendors may vacate their booth until 5:00 p.m. This means, you may not close, breakdown, exit your booth or the event until the Fire Marshall deems it safe and instructed to do so by an authorized 'A Taste of Encino' representative.**
14. Break Down starts at 5pm. Please pack all your belongings before bringing your vehicle on to Ventura Blvd.
15. Vendor and its agents are responsible for removing all personal and other property brought to or for the event, including, but not limited to vendor's and its agent's vehicle, equipment, materials, signage, booth construction, lighting, canopy, chairs, goods, items to be sold and the like from the event site no later than 6:30 p.m. on the date of the event.
16. Participants are responsible for set-up and tear down of their own displays. All participants must clean their area and take all trash to the bin located behind the Encino Chamber office before leaving at the end of day.

### PARTICIPANT/VENDOR RESPONSIBILITIES:

17. A Taste of Encino and the Encino Chamber of Commerce are not responsible for damage, loss, theft or destruction to any item of personal property of vendor, it's employees, representatives or agents or other property brought to or for the event, including, but not limited to vehicles, equipment, materials, signage, booth construction, lighting, canopy, chairs, goods, items to be sold and the like.
18. Participants will cooperate in any way necessary to provide a safe and enjoyable event for festival goers as well as fellow participants. Participants must comply with fire codes and the directions of any fire or police personnel.
19. No dogs or pets of any kind are allowed in or near food preparation areas or within 20 feet of a food booth (except service animals).
20. **All vendor participants must have their own liability insurance. PLEASE SEE INSURANCE DETAILS ON PAGE 2 OF APPLICATION**

Signature



Date

9-17-15

CITY OF LOS ANGELES

CALIFORNIA



ERIC GARCETTI  
MAYOR

MIGUEL A. SANTANA  
CITY ADMINISTRATIVE OFFICER

ASSISTANT  
CITY ADMINISTRATIVE OFFICERS

BEN CEJA  
ROBIN P. ENGEL  
PATRICIA J. HUBER

January 6, 2015

To Whom It May Concern:

**RE: Proof of Insurance for the City of Los Angeles**

This is to certify that the City of Los Angeles self-administers, defends, settles and pays third-party claims for bodily injury, personal injury, death and/or property damage. Protection under this program is warranted to meet or exceed \$5 million, combined single limit, per occurrence.

Additionally, the City is permissively self-insured for Workers' Compensation under California law. The City of Los Angeles will provide 30 days' written notice of any modification or cancellation of the program.

If you need any further information regarding this risk retention program, please contact the Risk Management staff at (213) 978-RISK (7475) located at City Hall East, 200 N. Main St., Room 1240, Los Angeles, CA 90012.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Victor T. Parker', written over a printed name and title.

Victor T. Parker  
Director of Risk Management

**Department of Neighborhood Empowerment  
Funding Request Form**



NC NAME: Tarzana NC

Budget Fiscal Year: 2015-2016

Request Date: 28-Jul-15

Meeting Date: 28-Jul-15

Agenda Item: 12

- Operations     Outreach     NC Sponsored Event     Neighborhood Purpose Grant  
 Contract / Lease     Board Member Reimbursement     Community Improvement Project  
 Out of State     1099 Expense     One Time Expense     Monthly     Multiple

Requestor: Encino Chamber of Commerce

Vendor: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Amount:\$ \$250.00

# of payments     

If a bank card exemption of the daily \$1,000 limit is required for this request, please provide the date(s) and amount needed for the daily limit to be lifted:

Public Benefit  
Description

Resolved, that the TNC approve an expenditure not to exceed \$250.00 for the October 11, 2015 Taste of Encino event. Funds to come from Outreach, Events, Street Fairs. Promote the NC in adjacent communities.

**Vote Count** (continued on page 2 if more than 20 Board Members)

Recused Boardmember must leave the room prior to any discussion and may not return to the room until after the vote is completed.

Board Member Name	Board Position	Yes	No	Abstain	Recused	Absent	Ineligible
Wieder, Esther	Board Member	X					
Correll, Robin	Board Member	X					
Dori, Reuben	Board Member	X					
Fiehinger, Max	Executive Secretary	X					
Garfinkle, David	Board Member					X	
Goldberg, Harvey	Treasurer	X					
Green, Joyce	Board Member	X					
Greenwood, Sott	Board Member					X	
Heissler, Eran	1st Vice President	X					
Hossaini, Sayed	Board Member	X					
Lawler, Paul	Board Member					X	
Reich, Jonathon	2nd Vice President	X					
Safarian, Linda	Board Member	X					
Schwartz, Kenneth	Board Member					X	
Shaffer, Leonard	President	X					
Silverman, Richard	Board Member	X					
Singh, Sukh	Board Member	X					
Toren, Ornit	Board Member	X					
Weidman, Susan	Board Member	X					
Wertheim, Allen	Board Member	X					
NC Quorum:	Grand Total (including page 2):	16	0	0			

We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and that a public meeting was held in accordance with the Brown Act, where with a quorum of Board Members present, the Council approved the above action.

Once the Department approves a Funding Request submitted, the Department will transfer the requested amount into the Neighborhood Council's checking account automatically, i.e. no additional Cash Request Form is required.

Treasurer's Signature: <u>Harvey Goldberg</u>	Signer's Signature: <u>Leonard J. Shaffer</u>
Print/Type name: <u>Harvey Goldberg</u>	Print/Type name: <u>Leonard J. Shaffer</u>
Date (mm/dd/yy): <u>07/28/15</u>	Date (mm/dd/yy): <u>07/28/15</u>
Department Use Only <input type="checkbox"/> Contract <input type="checkbox"/> CIP <input type="checkbox"/> Advanced Payment <input type="checkbox"/> Approved <input type="checkbox"/> >\$2,500 <input type="checkbox"/> NPG <input type="checkbox"/> Sponsored Event <input type="checkbox"/> Denied	Staff Initials: _____ 1st Level: _____ 2nd Level: _____ Authorization Code: _____

1st. HARVEY    2nd. ERAN



AppleOne

AppleOne Employment Services

P.O. Box 29048

Glendale CA 91209-9048

Tel: 818-240-8688

Email: specialbillingvms@a1n1.com

TIN: 95-2580864

CITY OF LOS ANGELES

Attn: Jeff Brill

TARZANA NC

P.O. BOX 571016

TARZANA, CA 91357

Invoice

Customer No: 00950101

Site No: 0048

Period Ending: 08/22/2015

Invoice Date: 08/26/2015

Invoice No: S3148188

Amount Due: \$189.12

Payment Term: NET 30 DAYS

Supervisor	Name	Weekend	Inv Date	Ref Inv No	Reg Hr	Reg Rate	OT Hr	OT Rate	DT Hr	DT Rate	Misc Hr	Misc Rate	ACA Hr	ACA Rate	Tax	Amount
KRAMER, PATRICIA		08/22/2015	08/26/2015	01-3757234	8.00	\$23.10	0.00	\$0.00	0.00	\$0.00	0.00	\$0.00	8.00	\$0.54	\$0.00	\$189.12
<b>Grand Total Invoice Amount</b>																
<b>\$189.12</b>																

Please remit payment to: AppleOne Employment Services

P.O. Box 29048

Glendale, CA 91209-9048

*JULY 2015 MINUTES*

*INTBA-3BPW*

*pd 9/16/15*

Invoice 01-3757234 Line 1,2 Kramer, Patricia XQ24318315

Web TimeCard

Imaged on 8/24/2015

Client Name: City of Los Angeles D.O.N.E. (009501010048)

Employee Name: Kramer, Patricia

Serial Number: XQ24318315

Week Ending: 8/22/2015

Day	Date	IN	OUT	Lunch	Total	Reg	Over	Double
-----	------	----	-----	-------	-------	-----	------	--------

Thu	8/20/2015	8:00 AM	5:00 PM	1:00	8:00	8:00	0:00	0:00
-----	-----------	---------	---------	------	------	------	------	------

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SubTotals 08:00 08:00 00:00 00:00

Submitted By: Patricia Kramer | 341248 on 8/20/2015  
Preapproved By: <not available> on <not available>  
Approved By: LEONARD SHAFFER | 122196 on 8/21/2015  
Processed By: Tgarcia on 8/24/2015

# Verified Timecard List

Friday, August 21, 2015 10:34 AM

Client Name: City of Los Angeles D.O.N.E.  
Name: Kramer, Patricia  
SSN: \*\*\*\*\*9785

Timecard Id: 4214781  
Week Ending: 8/22/2015 12:00:00 AM  
Serial: XQ24318315

	Date	Time In	Time Out	Lunch	Total Reg	Total O.T.	Total Double
SUN							
MON							
TUE							
WED							
THUR	8/20/2015	8:00 AM	5:00 PM	1 hr 0 min	8 hr 0 min		
FRI							
SAT							
Verified by: LEONARD SHAFFER 122196					8 hr 0min	0 hr 0 min	0 hr 0 min

Total No. of TimeCards: 1

*July 2015  
minutes*

The Web Corner, Inc.  
 19509 Ventura Blvd  
 Tarzana, CA 91356

# Invoice

Date	Invoice #
9/1/2015	12171

**PAID**  
**09/25/2015**

Bill To
Tarzana Neighborhood Council PO Box 571016 Tarzana, CA 91357

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
	Phone Support and General Web Development	150.00	150.00
<b>Total</b>			\$150.00

LAND USE COMMITTEE

# Office DEPOT OfficeMax

OFFICE DEPOT #3320  
18211 Ventura Boulevard  
Tarzana, CA 91356  
(818) 668-9067

09/20/2015 15.2.5 2:17 PM  
STR 3320 REG2 TRN 7003 EMP 752197

Product ID	Description	Total
163061	Impression, BWS	
512 @ 0.11		56.32
	Business Solutions Prc	12.80
<b>You Pay</b>		<b>12.80SS</b>
221051	STPL, 1/4", 5000	4.29SS
	Business Solutions Prc	2.95
<b>You Pay</b>		<b>2.95SS</b>

Subtotal: 15.75  
Sales Tax: 1.42  
Total: 17.17  
MasterCard 1390: 17.17

SPC CARD# 9728

\*\*\*\*\*

Total Savings: \$44.86

\*\*\*\*\*



\*\*\* Welcome To Our Encino Store \*\*\*  
Store # 477  
\*\*\*\*\*  
See Us On The WEB www.smartandfinal.com

Cashier: Verenise

DATE 09/28/15 TIME 17:31:46

FS Lunch Napkin 2.99 T  
3 @ 1.59  
SV 8 7/8 Foam Plat 4.77 T  
Was \$5.07 / YOU SAVED -> \$.30  
Crystal Geysers 4.00 F  
Was \$4.99 / YOU SAVED -> \$.99  
+CRV 1.75  
Crystal Geysers 4.00 F  
Was \$4.99 / YOU SAVED -> \$.99  
+CRV 1.75

SUBTOTAL 19.26  
SALES TAX .70  
TOTAL 19.96

ATM / DEBIT CARDS TENDER 19.96  
Acct # \*\*\*\*\*1390  
APPRVL CODE 410240  
Cas Ref# 30  
CASH CHANGE .00

TOTAL NUMBER OF ITEMS THIS VISIT--> 6  
\*\*\*\*\*  
Smart & Final Store # 477  
16847 Ventura Blvd.  
Encino, CA 91316

DATE 09/28/15 TIME 17:39:00  
Account # \*\*\*\*\*1390  
Tender Type Debit  
Reference # 198561  
APPRVL CODE 410240  
Reason Code RMOO Total 19.96  
Trans # 367 Cash back .00  
\*\*\*\*\*

17:32:23 OP# 23022465 09/28/15  
Term:5 Trans # 367 Store # 477

THANK YOU FOR SHOPPING  
YOUR ENCINO SMART&FINAL  
STORE MANAGER: ROBERT NICHOLAS  
1 (818) 789-0242

\*  
\*\*\*\*\*





LAND USE COPIES  
**Office DEPOT**  
**OfficeMax**

OFFICE DEPOT #3320  
 18211 Ventura Boulevard  
 Tarzana, CA 91356  
 (818) 668-9067

SERVER TABLE NO. GUESTS DATE  
 05984

09/29/2015 15.2.5 3:04 PM  
 STR 3320 REG1 TRN 7996 EMP 586825

1	5726	TOPAKA	
2			
3		RON	2669918
4			
5		1/2 PLY TOM	
6			
7		OM	
8			
9		OP	
10			
11		UP BO	
12			
13			
14		30 PLOTS	
15		Wapkins	
16			
17			

Product ID	Description	Total
167060	BW SS Letter	
	111 @ 0.14	15.54
	Bulk @0.025	-2.22
	Retail After Discounts	13.32
	Business Solutions Prc	2.78
	<b>You Pay</b>	<b>2.78SS</b>
166955	BW DS Letter	
	40 @ 0.14	5.60
	Business Solutions Prc	1.00
	<b>You Pay</b>	<b>1.00SS</b>
166955	BW DS Letter	
	40 @ 0.14	5.60
	Business Solutions Prc	1.00
	<b>You Pay</b>	<b>1.00SS</b>
166955	BW DS Letter	
	155 @ 0.14	21.70
	Bulk @0.025	-3.10
	Retail After Discounts	18.60
	Business Solutions Prc	3.88
	<b>You Pay</b>	<b>3.88SS</b>
166955	BW DS Letter	
	155 @ 0.14	21.70
	Bulk @0.025	-3.10
	Retail After Discounts	18.60
	Business Solutions Prc	3.88
	<b>You Pay</b>	<b>3.88SS</b>
	Subtotal:	12.54
	Sales Tax:	1.13
	Total:	13.67
	MasterCard 1390:	13.67
	SPC CARD# 9728	

**6:30** SUB-TOTAL  
 TAX  
 TOTAL **65.18**

DATE AMOUNT  
 DELIVERY 05984  
 21.18



\*\*\*\*\*  
 Total Savings:  
**\$57.60**

Term ID: 001 Ref #: 014  
 Sale  
 XXXXXXXXXXXX1390  
 MASTERCARD Entry Method: Swiped  
 09/28/15 17:43:39  
 Inv #: 000011 Appr Code: 019945  
 Apprvd: Online Batch#: 000635  
 Amount: \$ 65.18  
 DELIVERY 6  
 Total: 71.18

4442-17798887  
 AMERI...ZA & PASTA  
 15805 VENTURA BLVD.  
 WOODLAND HILLS, CA 91364  
 818-348-7900

Customer Copy  
 THANK YOU!



More than fast. More than signs.™

Invoice:

548- 21606

**FASTSIGNS TARZANA**

19229 Ventura Blvd.  
Tarzana, CA 91356  
Phone (818) 776-0107  
Fax. (818) 776-0110  
Email: 548@fastsigns.com

Customer: **Tarzana Neighborhood Council**  
Contact: Esther Weider  
Description: NK: Movie Night Banner Revisions  
Sales Person: Neal Kanoff  
Clerk: Neal Kanoff

ph: (818) 912-0602

Email: eew6858@lausd.net

	Product	Qty	Sides	H x W	Unit Cost	Item Total
1	Vinyl HxW	* 1	1	1 x 1	\$42.50	\$42.50

Description: Printed or complex cut vinyl priced by H x W.  
Text: Banner revisions to Movie and date.

Other Payments:

Shipping Notes:

Form of Payment / Amount / Initials

Ordered: 9/16/2015 4:59:34PM  
Due: 9/18/2015 4:30:00PM  
Printed: 9/16/2015 5:00:10PM

Notes:

*Handwritten notes:*  
Paid 9/24/15  
58045-  
254QC

Line Item Total:	\$42.50
Subtotal:	\$42.50
Taxes:	\$3.83
Total:	\$46.33
Total Payments:	\$0.00
Balance Due:	\$46.33

ATTN: Esther Weider  
Tarzana Neighborhood Council  
PO Box 571016  
Tarzana, CA 91356

Payment due upon completion of order.

Received/Accepted By:

/ /

More than fast. More than signs.™