

# Application for VNNC Membership



The Van Nuys Neighborhood Council (VNNC) Board Members invite interested residents, stakeholders, business owners, and youths who are at least 18 years old, who reside within the Van Nuys neighborhood boundaries and qualify for a vacant position to complete and submit this application for review. Upon approval of this application by the VNNC Board members, you will be notified to attend the next regular monthly meeting for further discussion.

Name: JEANETTE HOPP

Address: 15550 SATICOY ST.  
VAN NUYS, CA 91406

Telephone/Cell #: (818) 636-7211

Email: jeanette.hopp@vnnc.org

☒ I AM A MEMBER OF THE FRIENDS OF THE LIBRARY.  
Please complete the following questions:

1. List any community service or volunteer work you are currently doing or have done in the past. VNNC FOR 4 YRS, LAUSD 20 YRS, DAC SCHOOL SITE COUNCIL ZONE 8 CHAIR DAC REGION "D" CHAIR DAC, PARENT COLLABORATIVE INAUGURAL MEMBER AND OFFICER 14 YRS, DAC 8 YRS AS CHAIR, INSPECTOR BOTH CITY OF L.A. & COUNTY FOR LOCAL, STATE & FEDERAL ELECTIONS 36 YRS.

2. Briefly describe why you would like to serve on the VNNC. I WANT TO BRING FORMER PROMINENCE OF VAN NUYS BACK, CLEAN-UP OUR CITY, ELIMINATE PROLIFERATION OF POT SHOPS, HOMELESSNESS AND PROSTITUTION.

3. What specific skills do you possess that would help the VNNC achieve its mission to serve as advisors to city decision makers and help to improve the quality of life for those who reside within the VNNC boundaries? I HAVE LEADERSHIP SKILLS. I TAKE COPIOUS NOTES. I AM ABLE TO WORK WITH CITY OFFICIALS TO ACHIEVE OUR GOALS.

4. Which position are you looking to fill and how do you qualify for that seat? NON-PROFIT --- I AM A MEMBER OF THE COLUMBETTES, WHICH IS A NON-PROFIT, WE WORK TO HELP THE POOR IN OUR NEIGHBORHOOD, AS WELL AS SISTER CITIES, WE HAVE FUND RAISERS, ETC. & GLAZA.

Signature: Jeanette Hopp

Date: 6/29/16

## Friends of the Van Nuys Library Membership Form

☒ I want to join/renew my membership at the level of:

☐ Individual.....\$5.00

☐ Family.....\$10.00

☒ Supporter.....\$15.00

☒ I would like to volunteer to help the library

☐ Membership recruitment

☐ Fundraising at the book sale

☐ Literacy program

☒ Read to children

☐ Help sort through book donations

☐ Help with computers

☐ Other

PLEASE PRINT

Name(s): JEANETTE Hopp

Address: 15550 SATICOM ST.

City: VAN NUYS State: CA Zip: 91406

Phone: (818) 636-7211 (day) AND (evening)

Make checks payable to: Friends of the Van Nuys Library (no cash please). Mail or bring to: 6250 Sylmar Ave. Van Nuys, CA 914041.



**Terms and Conditions:**

- \* Please keep this copy for your record of the transaction
- \* Money Orders are not valid for more than \$1000
- \* The sender/drawer agrees to enter the name of the payee and to sign the instrument immediately upon purchase
  - Failure to do so will result in the sender/drawer bearing the risk of any loss or theft of this instrument
- \* The laws of a specific state will consider these funds to be "abandoned" if this Money Order is not cashed by a certain time
- \* Placing a Stop Payment on a Money Order
  - Sender/Drawer can place a stop payment on an unpaid Money Order
  - Please visit a Chase Branch to place a stop and have the item re-issued
- \* Please visit a Chase branch to report a lost, stolen, or destroyed Money Order or for any other information about this item

FOR YOUR PROTECTION SAVE THIS COPY

Customer Copy

**MONEY ORDER**

1082516595

08/01/2016

Pay To The  
Order Of:

FRIENDS OF THE VAN NUYS LIBRARY \$\*\* 15.00 \*\*

Pay:

FIFTEEN DOLLARS AND 00 CENTS

NOT VALID FOR MORE THAN \$1000.00

Memo: MEMBERSHIP

Note: For information only. Comment has no effect on bank's payment.

**NON NEGOTIABLE**

SENDER/DRAWER:

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HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK



**MONEY ORDER**

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK

1082516595 91-2  
1221

Date 08/01/2016

Pay To The  
Order Of:

FRIENDS OF THE VAN NUYS LIBRARY \$\*\* 15.00 \*\*

Pay:

FIFTEEN DOLLARS AND 00 CENTS

NOT VALID FOR MORE THAN \$1000.00

Do not write outside this box

Memo: MEMBERSHIP

Note: For information only. Comment has no effect on bank's payment.

SENDER/DRAWER:

ADDRESS:

JPMorgan Chase Bank, N.A.  
Phoenix, AZ



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