Van Nuys Neighborhood Council



Kathy Schreiner kathy.schreiner@vnnc.org President

Maduka Nkuku maduka.nkuku@vnnc.org Vice President

John Hendry john.hendry@vnnc.org Secretary

David Harari david.harari@vnnc.org Treasurer

Myrra Bolla myrra.bolla@vnnc.org Parliamentarian

<u>Members</u> Samuel Apikyan Hakop 'Jack' Azatyan John Camera Josue Chavez Brian Edelman Jarred Piña Ann Kalb Yena Kim David Kopelev Britt Vaughan Cyle Zezotarski Van Nuys Neighborhood Council Budget and Finance Committee AGENDA

Monday, October 30th, 2023 7:00PM

> Van Nuys Branch Library

6250Sylmar Ave.

Van Nuys, CA 91401

Community Room



Van Nuys Neighborhood Council P.O. Box 3118 Van Nuys, CA 91407-3118

Email: <u>info@vnnc.org</u> WWW.VNNC.Org

Comments from the public on agenda items will be heard only when the respective item is being considered. Comments from the public on other matters not appearing on the agenda that are within the Board's jurisdiction will be heard during the General Public Comment period. Please note that under the Brown Act, the Board/Committee is prevented from acting on a matter that you bring to its attention during the General Public Comment period; however, the issue raised by a member of the public may become the subject of a future Board or Committee meeting.

Public comment is limited to a maximum of 2 minutes per speaker per item with a maximum of 10 minutes total per meeting, unless adjusted by the presiding officer of the Board.

Speakers shall limit their comments to matters relevant to the item on the agenda. The Chair may rule that the speaker is out of order if the comments are not germane to the item under consideration. Speakers shall direct their comments to the Committee (not to an individual).

Chair of Budget & Finance Committee: David Harari Members: Hakop Azatyan, Myrra Bolla, David Kopelev, Kathy Schreiner,

- 1. Roll Call and Pledge of Allegiance
- 2. Discussion and possible action to approve the September 2023 MER (Monthly Expenditure Report) **see attached top sheet**

https://vnnc.org/wp-content/uploads/2023/10/VNNC_MER_092023.pdf

3. Discussion and possible action to approve reimbursement to David Harari for \$120.45 for purchasing food for the October 11th, 2023 General Board Meeting.

https://vnnc.org/wp-content/uploads/2023/10/VNNC_GB_FoodReceiptOct2023_DH.pdf

4. Discussion and possible action to approve \$500 NPG for the Valley Presbyterian Annual Toy Drive, which will take place on December 17th, 2023.

https://vnnc.org/wp-content/uploads/2023/10/VPH_NPGAPP.pdf

- 5. Discussion and possible action to approve a date for committee members to conduct an inventory of VNNC assets at our storage facility (All Right Storage 6900 Van Nuys Blvd. 91405)
- 6. General Public Comment on Non-Agenda Items (2 min per stakeholder). Note that topics discussed must be within the jurisdiction of the VNNC.
- 7. Identification of topics Committee members would like to discuss at a future meeting.
- 8. Adjournment

THE AMERICN WITH DISABILITIES ACT - 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 and other auxiliary aids and/or services, may be provided upon request. To ensure availability of services, please make your request at least 72 hours prior to the meeting you wish to attend by contacting VNNC by via email at: info@vnnc.org

SERVICIOS DE TRADUCCION - Si requiere servicios de traducción, favor de avisar al Concejo Vecinal 72 horas antes del evento. Por favor contacte a <u>info@vnnc.org</u> por correo electrónico para avisar al Concejo Vecinal.

PUBLIC POSTING OF AGENDAS – VNNC agendas are posted publicly near the front door to the conference room of the Marvin Braude Constituents Building, 6262 Van Nuys Blvd., Van Nuys, CA 91401 and also online at www.vnnc.org. You can also receive our agendas via email by subscribing to L.A. City's Early Notification System at <u>https://www.lacity.org/subscriptions</u>

PUBLIC ACCESS OF RECORDS – 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, 6262 Van Nuys Blvd, Van Nuys, CA 91401, at our website: <u>http://www.vnnc.org/</u> 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 via email: <u>info@vnnc.org</u>

RECONSIDERATION AND GRIEVANCE PROCESS - For information on the VNNC's process for board action reconsideration, stakeholder grievance policy, or any other procedural matters related to this Council, please consult the VNNC By-laws. The By-laws are available at our Board meetings and our website <u>http://www.vnnc.org</u>

Notice to Paid Representatives - If you are compensated to monitor, attend, or speak at this meeting, City law may require you to register as a lobbyist and report your activity. See Los Angeles Municipal Code §§ 48.01 et seq. More information is available at <u>ethics.lacity.org/lobbying</u>. For assistance, please contact the Ethics Commission at (213) 978-1960 or <u>ethics.commission@lacity.org</u>

Monthly Expenditure Report



Reporting Month: September 2023 Budget Fiscal Year: 2023-2024

NC Name: Van Nuys Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance Total Sp		Remaining Balance	Outstanding	Commitments	Net Available
\$33769.58	\$195.00	\$33574.58	\$1419.76	\$1228.92	\$30925.90

Monthly Cash Flow Analysis						
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available	
Office		\$195.00		\$1419.76		
Outreach	\$27142.00	\$0.00	\$25069.98	\$0.00	\$23650.22	
Elections		\$0.00		\$0.00		
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Neighborhood Purpose Grants	\$4858.00	\$0.00	\$4858.00	\$0.00	\$4858.00	
Funding Requests Under Review: \$1228.92		Encumbrances: \$0.00		Previous Expenditures: \$1877.02		

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	PY ALL RIGHT STORAGE	09/09/2023	Monthly payment for VNNC storage unit.	General Operations Expenditure	Office	\$195.00
	Subtotal:					\$195.00

	Outstanding Expenditures							
#	Vendor	Date	Description	Budget Category	Sub-category	Total		
1	WENDY L. MOORE / MOORE BUSINESS RESULTS	10/05/2023	Internet/Website Admin. and Agenda Posting Services for Sept. 2023	General Operations Expenditure	Office	\$419.76		
2	BRIDGEGAP TEMPORARY STAFFING AND SERVICES AGENCY	10/06/2023	Admin. Services June 2023 - Sept. 2023	General Operations Expenditure	Office	\$1000.00		
	Subtotal: Outstanding							

All Right Storage - Van Nuys 6900 Van Nuys Blvd Van Nuys, CA 91405

(818) 786 4335

Payment Receipt

Tenant Company Address City, State, Zip	Van Nuys Neigl c/o: Kathy Schro PO Box 3118 Van Nuys CA		Pay Uni Ava Cur Paio	e Printed ment Date t ilable Credit rent Balance l Thru eipt Number	1	er 9, 2023 er 9, 2023 9, 2023	4:41 PM By MV		
Date U	Init Descriptio	on	Charge	Discount	Tax	Total	Payment	Method	
09/10/23 2	370 Rent 9/10-	-10/9	195.00	0.00	0.00	195.00	195.00	Master	Card
				Taxes			0.00		
				Payment (less			195.00		
			Payment Subtotal			195.00			
				Credits Appli			0.00		
			-	Refunds Appli			0.00		
				Total Applied	l to Accou	nt	195.00		
	Current Account Balance					0.00			
			1	Paid By			Master Card	1 *****0	814
			i	Paid Thru Dat	e		October 9,	2023	
Transaction	Type Sale								

Authorization 090243 Reference pl_txn_64fd02c9eaae9144b127b4f

I agree to pay the above amount according to the card issuer statement.

x ____

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



This form is to be completed by the applicant seeking the Neighborhood Purposes Grant and submitted to the Neighborhood Council from whom the grant is being sought. All applications for grants must be reviewed and approved in a public meeting. Upon approval of the application the Neighborhood Council (NC) shall submit the application along with all required documentation to the Office of the City Clerk, NC Funding Program.

Name of NC from which you are seeking this grant: Van Nuys Neighborhood Council

SECTION I- APPLICANT INFORMATION

1a)	Valley Presbyterian Hospital Organization Name		945832 eral I.D. # (EIN#)	CA State of Incorpo	oration	03/27/1963 Date of 501(c)(3) Status (if applicable)
1b)	15107 Vanowen St	Van	Nuys	СА		91405
	Organization Mailing Address	City		State	Э	Zip Code
1c)	Business Address (If different)	City		State		Zip Code
1d)	PRIMARY CONTACT INFORMATION:					
	Evelyn Pacis	818-902	-5709	evelyn.pa	acis@val	leypres.org
	Name	Ph	one	Email		
2)	Type of Organization- Please select one: Public School (not to include private schools) Attach Signed letter on School Letterhead					institutions)
3)	Name / Address of Affiliated Organization (if appli	icable)	City	5. 	State	Zip Code
SEC	TION II - PROJECT DESCRIPTION					

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

Grant will be used to provide attendees of our community toy distribution to provide children with a holiday healthy snack such as (milk & oatmeal cookies) as they walk through to pick up their toy.

In addition, the hospital will provide a \$20 grocery gift card (per family) to all who participate.

5) How will this grant be used to primarily support or serve a public purpose and benefit the public at-large. (Grants cannot be used as rewards or prizes for individuals)

The event serves largely low income families within our service area and is free and open to the community.

SEC	TION III - PROJECT BUDGET OUTLINE		
Your	nay also provide the Budget Outline on a separate shee	et if necessary or requested.	
6a)	Personnel Related Expenses	Requested of NC	Total Projected Cost
,	Volunteer Based	\$0	\$0
		\$	\$
		\$	\$
6b)	Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
	Purchase of food items	\$500.00	\$2,000.00
		\$	\$
		\$	\$

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

8)	Is the implementation of this specific program or purpose described	l in	Question 4 co	ntingent on any other factors or
	sources or funding? (Including NPG applications to other NCs)	ю	□ Yes	If Yes, please describe:

Source of Funding	Amount	Total Projected Cost
·	\$	\$
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: $\frac{500.00}{100}$

10a) Start date: <u>ルン パンス</u>10b) Date Funds Required: <u>ノン パンス</u>10c) Expected Completion Date: <u>ルン パンス</u> (After completion of the project, the applicant should submit a Project Completion Report to the Neighborhood Council)

SECTION IV - POTENTIAL CONFLICTS OF INTEREST

11a) Do you (applicant) have a current or former relationship with a Board Member of the NC?

No Yes If Yes, please describe below:	
Name of NC Board Member	Relationship to Applicant

11b) If yes, did you request that the board member consult the Office of the City Attorney before filing this application? Yes No <u>*(Please note that if a Board Member of the NC has a conflict of interest and completes this form, or participates in the discussion and voting of this NPG, the NC Funding Program will deny the payment of this grant in its entirety.)</u>

SECTION V - DECLARATION AND SIGNATURE

I hereby affirm that, to the best of my knowledge, the information provided herein and communicated otherwise is truly and accurately stated. I further affirm that I have read the documents "What is a Public Benefit," and "Conflicts of Interest" of this application and affirm that the proposed project(s) and/or program(s) fall within the criteria of a public benefit project/program and that no conflict of interest exist that would prevent the awarding of the Neighborhood Purposes Grant. I affirm that I am not a current Board Member of the Neighborhood Council to whom I am submitting this application. I further affirm that if the grant received is not used in accordance with the terms of the application stated here, said funds shall be returned immediately to the Neighborhood Council.

12a) Executive Director of Non-Profit Corporation or School Principal - REQUIRED Śignature 12b) Secretary of Non-profit Corporation or Assistant School Principal amala Choma VP/6C fanalo An PRINT Name Title Signal

* If a current Board Member holds the position of Executive Director or Secretary, please contact the NC Funding Program at (213) 978-1058 or <u>clerk.ncfunding@lacity.org</u> for instructions on completing this form



BA20230298543

For Office Use Only



File No.: BA20230298543 Date Filed: 2/21/2023

	STATE OF CALIFORNIA Office of the Secretary of S STATEMENT OF INFORM CA NONPROFIT CORPO California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 653-3516
Entity Details	

of the Secretary of State EMENT OF INFORMATION ONPROFIT CORPORATION ia Secretary of State Lth Street ento, California 95814 53-3516

Corporation Name			VALLEY PRESBYTERIAN HOSPITAL				
Entity No.	ntity No.			0231189			
Formed In			CALIFORNIA				
Street Address of California Principal Offic	e of Corporation						
Street Address of California Office	9		VANOWEN STRE UYS, CA 91405	ET			
Mailing Address of Corporation							
Mailing Address			VANOWEN STRE UYS, CA 91405	ET			
Attention							
Officers							
Officer Name		Officer Ad	dress	Position(s)			
TAMALA CHOMA		NOWEN STRI S, CA 91405	EET	Secretary			
LORI E CARDLE		15107 VANOWEN STREET VAN NUYS, CA 91405		Chief Financial Officer			
GUSTAVO A VALDESPINO		15107 VANOWEN STREET VAN NUYS, CA 91405		Chief Executive Officer			
Additional Officers							
Officer Name	Officer Address		Position	Stated Position			
	N	one Entered					
Agent for Service of Process							
Agent Name			LA CHOMA				
Agent Address			VANOWEN STRE UYS, CA 91405	ET			
Email Notifications							
Opt-in Email Notifications		Yes, I	opt-in to receive e	ntity notifications via email.			
Electronic Signature							
By signing, I affirm that the in	nformation herein is true a	and correct an	ld that I am author	ized by California law to sign.			
Tamala Choma		02/21/2	02/21/2023				
Signature		Date					



U. S. TREASURY DEPARTMENT INTERNAL REVENUE SERVICE WASHINGTON 25, D. C.

MAR 2 7 1963

IN REPLY REFER TO T:R:EO: 4

	PURPOSE
Valley Presbyterian Hospital-Olmsted Memorial	Charitable
15107 Vanowen Street Van Nuys, California	ADDRESS INQUIRIES & FILE RETURNS WITH DISTRICT DIRECTOR OF INTERNAL REVENUE Los Angeles, California
Gentlemen:	FORM 990-A REQUIRED X YES NO October 31

Based upon the evidence submitted, it is held that you are exempt from Federal income tax as an organization described in section 501(c)(3) of the Internal Revenue Code, as it is shown that you are organized and operated exclusively for the purpose shown above. Any questions concerning excise, employment or other Federal taxes should be submitted to your District Director.

You are not required to file Federal income tax returns so long as you retain an exempt status, unless you are subject to the tax on unrelated business income imposed by section 511 of the Code and are required to file Form 990-T for the purpose of reporting unrelated business taxable income. Any changes in your organization's character, purposes or method of operation should be reported immediately to your District Director for consideration of their effect upon your exempt status. You should also report any change in your name or address. Your liability for filing the annual information return, Form 990A, is set forth above. That return, if required, must be filed after the close of your annual accounting period indicated above.

Contributions made to you are deductible by donors as provided in section 170 of the Code. Bequests, legacies, devises, transfers or gifts to or for your use are deductible for Federal estate and gift tax purposes under the provisions of sections 2055, 2106 and 2522 of the Code.

You are not liable for the taxes imposed under the Federal Insurance Contributions Act (social security taxes) unless you file a waiver of exemption certificate as provided in such act. You are not liable for the tax imposed under the Federal Unemployment Tax Act. Inquiries about the waiver of exemption certificate for social security taxes should be addressed to your District Director.

Your District Director is being advised of this action.

Very truly yours,

Exempt Organizations Branch



FORM 6977 (REV. 8-62)