Monthly Expenditure Report



Reporting Month: May 2022 Budget Fiscal Year: 2021-2022

NC Name: Mar Vista Neighborhood

Council

Monthly Cash Reconciliation						
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available	
\$21377.01	\$10011.45	\$11365.56	\$150.00	\$0.00	\$11215.56	

Monthly Cash Flow Analysis						
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available	
Office		\$511.45		\$0.00		
Outreach	\$20711.54	\$0.00	\$7865.56	\$150.00	\$7715.56	
Elections		\$0.00		\$0.00		
Community Improvement Project	\$3500.00	\$0.00	\$3500.00	\$0.00	\$3500.00	
Neighborhood Purpose Grants	\$9500.00	\$9500.00	\$0.00	\$0.00	\$0.00	
Funding Requests Und	der Review: \$0.00	Encumbrar	nces: \$0.00	Previous Expend	itures: \$12334.53	

	Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total	
1	THE WEB CORNER, INC	05/01/2022	Website and email services (MarVista.org)	General Operations Expenditure	Office	\$157.00	
2	NAMETAGWIZARD.COM	05/02/2022	Name tags	General Operations Expenditure	Office	\$98.46	
3	MailChimp	05/28/2022	MailChimp - email newsletter services	General Operations Expenditure	Office	\$39.99	
4	USPS PO 0545430066	05/31/2022	Annual Post Office Box Rental	General Operations Expenditure	Office	\$216.00	
5	Los Angeles Parks Foundation	04/27/2022	The NPG Applicant is the LA Parks Foundation. The MVCC reaffirms the February 16, 2022, vote count for Agenda Item 7.3. The motion was, "Approval of an NPG for \$6,400 to refinish, s	Neighborhood Purpose Grants		\$6400.00	
6	Friends of the Mar Vista Library	04/26/2022	The MVCC Approves an NPG in the amount of \$3,100.00 to the Friends of the Mar Vista Library.	Neighborhood Purpose Grants		\$3100.00	
	Subtotal:					\$10011.45	

Outstanding Expenditures

#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	Mar Vista Neighborhood Association	05/05/2022	Appropriation for Advertising in the Mar Vista Neighborhood Association's Newsletter - Discussion and possible action regarding an expenditure of \$150 to renew the annual advertisin	General Operations Expenditure	Outreach	\$150.00
	Subtotal: Outstanding	g				\$150.00

Invoice

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

Ina				
, Inc.		Date	Invoice #	Due Date
d.			11170100 #	Doc Daic
.	-461	5/1/2022	23847	5/1/2022
05	01	2022		

Bill To	
Mar Vista NC P.O. Box 66871 Mar Vista, CA 90066	

		P.O. No.	Terms	Project
Quantity	Description		Rate	Amount
1	May 2022 Monthly Maintenance: includes support, web development, requests, & we		150.00	150.00
2	May 2022 Email Standard Mailboxes:	-	3.50	7.00
0	2 Accounts for outreach@marvista.org; ch May 2022 Monthly Hosting for marvista.org maintenance)		15.00	0.00
Please remit p	ayment at your earliest convenience.			. :
Thank you for	your business!		Total	\$157.00
			Payments/Cred	its -\$157.00
			Balance Due	\$0.00

Merchant: The Web Corner, Inc

15300 Ventura Blvd. Suite 400 Sherman Oaks, CA 91403

8183457443

US

Order Information

Description: Monthly Maintenance

Order Number: P.O. Number:

Customer ID: Invoice Number: Monthly Maintenance

Billing Information Shipping Information

Kathryn Wheeler Mar Vista NC

Shipping: 0.00

Tax: 0.00 **Total: USD 157.00**

Payment Information

Date/Time: 01-May-2022 06:17:38 MDT

Transaction ID: 43366027269

Transaction Type: Authorization w/ Auto Capture

Transaction Status: Settled Successfully

Authorization Code: 032172

Payment Method: MasterCard XXXX4475



Order #25186940

Order Date: May 2, 2022

Shipping Address

C Honda 3342 GRAND VIEW BLVD LOS ANGELES, California, 90066 United States T: 310-397-3790

Billing Address

Mar VIsta Community Council 200 N SPRING ST LOS ANGELES, California, 90012 United States T: 310-391-8499

Shipping Method

Free Economy - Free Economy Shipping

Payment Method

Credit Card

Card Number (Last 4):

4475

Credit Card Type:

MasterCard

Items Ordered

Product Name SKU Price Qty Subtotal

 Subtotal
 \$99.80

 Shipping
 \$0.00

 Discount (Work10)
 -\$9.98

 Tax
 \$6.65

 Fees (Handling Fee)
 \$1.99

 Grand Total
 \$98.46

Full Color Rectangle Name Tag

Material Type Metal Metal Corners

Small Round

Metal Color Silver 100123- \$9.98 Ordered: \$9.98

100123- \$9.98 Ordered: \$9.98

100123-2 \$9.98 Ordered: \$9.98

\$98.46

Backing

Magnet

Design Custom Design

Size

1.5" x 3"

Full Color Rectangle Name Tag

Material Type Metal

Metal Metal Corners Small Round

Metal Color

Silver Backing

Magnet

Design

Custom Design

Size

1.5" x 3"

Full Color Rectangle Name Tag

Material Type

Metal Metal Corners

Small Round

Metal Color

Silver

Backing

Magnet

Design

Grand Total

Custom Design

Size

1.5" x 3"

Subtotal \$99.80
Shipping \$0.00
Discount (Work10) -\$9.98
Tax \$6.65
Fees (Handling Fee) \$1.99

100123- \$9.98 Ordered: \$9.98

100123- \$9.98 Ordered: \$9.98

100123-2 \$9.98 Ordered: \$9.98

Full Color Rectangle Name Tag

Material Type Metal

Metal Corners Small Round

Small Round Metal Color

Silver

Backing Magnet

Design Custom Design

Size

1.5" x 3"

Full Color Rectangle Name Tag

Material Type

Metal Metal Corners

Small Round

Metal Color White

White Backing

Magnet

Design

Custom Design

Size

1.5" x 3"

Full Color Rectangle Name Tag

Material Type

Metal Metal Corners

Small Round

Metal Color

White

Backing

Magnet

viagii

Design

Custom Design

Size

1.5" x 3"

 Subtotal
 \$99.80

 Shipping
 \$0.00

 Discount (Work10)
 -\$9.98

 Tax
 \$6.65

 Fees (Handling Fee)
 \$1.99

 Grand Total
 \$98.46

100123- \$9.98 Ordered: \$9.98

100123- \$9.98 Ordered: \$9.98

100123-2 \$9.98 Ordered: \$9.98

\$98.46

Full Color Rectangle Name Tag

Material Type Metal

Metal Corners

Small Round

Metal Color White

Backing

Magnet Design

Custom Design

Size

1.5" x 3"

Full Color Rectangle Name Tag

Material Type

Metal Metal Corners

Small Round

Metal Color

White

Backing

Magnet

Design

Custom Design

Size

1.5" x 3"

Full Color Rectangle Name Tag

Material Type

Metal

Metal Corners

Small Round

Metal Color

White

Grand Total

Backing

Magnet

Design

Custom Design

Size

1.5" x 3"

Subtotal \$99.80 Shipping \$0.00 -\$9.98 Discount (Work10) \$6.65 \$1.99 Fees (Handling Fee)

Product Name SKU Price Qty Subtotal

100123- \$9.98 Ordered: \$9.98

Full Color Rectangle Name Tag

Material Type Metal

Metal Corners

Small Round

Metal Color

White

Backing Magnet

Design

Custom Design

Size

1.5" x 3"

 Subtotal
 \$99.80

 Shipping
 \$0.00

 Discount (Work10)
 -\$9.98

 Tax
 \$6.65

 Fees (Handling Fee)
 \$1.99

 Grand Total
 \$98.46

Mailchimp Invoice MC11321557

Issued to

Kathryn Wheeler Mar Vista Community Council Kathryn.Wheeler@MarVista.org Office phone: 424-256-3633 200 N. Spring St Issued by

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

Tax ID: US EIN 58-2554149

Details

Order # MC11321557

Date Paid: May 28, 2022 12:14 am Los

Anaeles

Email Invoice

Billing statement

1501 - 2500 subscribers.

Los Angeles, CA 90012

Monthly plan \$39.99

Paid via Mast ending in 4475 which expires 08/2023 on May 28, 2022

\$39.99

Balance as of May 28, 2022

\$0.00

If a refund is required, it will be issued in the purchase currency for the amount of the original charge. Sales Tax was not applied to this purchase.

Looking for our W-9?

Looking for our United States Residency Certificate?



MAR VISTA 3826 GRAND VIEW BLVD LOS ANGELES, CA 90066-9998 (800) 275-8777

05/31/2022

01:49 PM

Product

Qty Unit Price Price

Box Renewal

\$216.00

ZIP Cøde™: 90066

Box #: 66871 Rental Start Date: 06/01/2022 Next Renewal Date: 05/31/2023 Customer Name: ELLIOT HANNA

\$216.00

Grand Total:

Credit Card Remitted Card Name: MasterCard

\$216.00

XXXXXXXXXXXXX4475 Account #: Approval #: 085031 Transaction #: 892

Chip

AID: A0000000041010 AL: MASTERCARD PIN: Verified

************* Every household in the U.S. is now eligible to receive a third set of 8 free test kits. Go to www.covidtests.gov *************

In a hurry? Self-service kiosks offer quick and easy check-out. Any Retail Associate can show you how.

Preview your Mail Track your Packages Sign up for FREE @ https://informeddelivery.usps.com

All sales final on stamps and postage. Refunds for guaranteed services only. Thank you for your business.

Tell us about your experience. Go to: https://postalexperience.com/Pos or scan this code with your mobile device,



or call 1-800-410-7420.

UFN: 054543-0066

Receipt #: 840-59000059-4-9479316-1

Clerk: 03

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: Mar VIsta Community Council

SEC	TION I- APPLICANT INFORMATION					
1a)	LA Parks Foundation	26	-2358338	Calif	fornia	08/12/2008
ıaj	Organization Name	Fede	ral I.D. # (EIN	State of	Incorporation	Date of 501(c)(3) Status (if applicable)
1b)	2650 N. Commonwealth Avenue	Lo	s Ange	eles	CA	90027
	Organization Mailing Address	City			State	Zip Code
1c)	same as above					
	Business Address (If different)	City			State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:					
	Elisa White	310-39	8-5982	elisa.w	hite@laci	ty.org
	Name	Pho	one		Email	
2)	Type of Organization- Please select one: ☐ Public School (not to include private schools) Attach Signed letter on School Letterhead	or		Non-Profit (oth S Determinati		institutions)
	Carolyn Ramsay, 2650 N. Comm	onwea	th Ave.	Los Ang	eles CA	90027
3)	Name / Address of Affiliated Organization (if app	olicable)	(City	State	Zip Code

SECTION II - PROJECT DESCRIPTION

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

The Mar Vista Recreation Ceter has two indoor gyms. The grant is for the smaller gym to have it's floors refinished. The smaller gym includes a junior basketball court and stage.

Neither floor has been refinished in over a decade. No one remembers the stage floor ever being refinished which would mean over two decades.

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 smaller gym is used for town hall meetings, educational events and forums, public meetings, holiday events, and other community activities which are free and open to the public. There are also seasonal camp programs during the winter, spring and summer with ages 3-12 years old and younger teams which use the facility for basketball training and games.

The grant will be used to improve public property that benefits the entire community and public at large.

PAGE 1 NCFP 107

\$ \$ \$ \$ \$ \$	nay also provide the Budget Outline (on a separate sheet if hecess	ary or requested.	
S S S S S S S S S S	Personnel Related Expenses		Requested of	NC Total Projected Co
S S			\$	\$
Non-Personnel Related Expenses Requested of NC Total Projected Cornel Refinish stage flooring \$2,800.00 \$2,800.00 \$2,800.00 \$2,800.00 \$2,800.00 \$2,800.00 \$2,800.00 \$2,000.00 \$2,100.00			\$	\$
Refinish stage flooring \$2,800.00 \$2,800.00 \$2,800.00 \$2,800.00 \$2,800.00 \$2,800.00 \$2,800.00 \$2,100.00 \$2			\$	\$
Surping small gym floor Clean and wax small gym floor Standard gym floor Clean and wax small gym floor Standard gym floor	Non-Personnel Related Expenses	S	Requested of	NC Total Projected Co
Clean and wax small gym floor \$2,100.00 \$2,100.00 \$1,00 \$2,100.00 \$1,00 \$2,100.00 \$1,00 \$1,00 \$1,00 \$1,00 \$1,00	Refinish stage flooring		\$2,800.00	\$2,800.00
ve you (applicant) applied to any other Neighborhood Councils requesting funds for this project? No	Striping small gym floor		\$1,500.00	\$1,500.00
No	Clean and wax small gym floor		\$2,100.00	\$2,100.00
If Yes, please describe: Source of Funding	No 🗖 Yes If Yes, p	please list names of NCs: N/A	<u> </u>	
Source of Funding Amount Start date: 04 / 11 / 2022 10b) Date Funds Required: 04 / 01 / 2022 10c) Expected Completion Date: 04 / 01 / 01 / 01 / 01 / 01 / 01 / 01 /				
s s s s s s s s s s s s s s s s s s s		applications to other NCs)		
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that is the TOTAL amount of the grant funding requested with this application: Start date: 04 / 11 / 2022 10b) Date Funds Required: 04 / 01 / 2022 10c) Expected Completion Date: 04 / After completion of the project, the applicant should submit a Project Completion Report to the Neighborhold (ION IV - POTENTIAL CONFLICTS OF INTEREST) To you (applicant) have a current or former relationship with a Board Member of the NC? No			\$	\$
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or participates in the discussion and voting of this NPG, the NC Funding Program will deny the payr	TON IV - POTENTIAL CONFLICTS (Do you (applicant) have a current of No □ Yes If Yes, power of NC Board Member No □ Yes If Yes, power of NC Board Member	or former relationship with a please describe below: ard member consult the Officiant if a Board Member of the	Board Member of the Relation R	ne NC? onship to Applicant ey before filing this applic of interest and complete
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Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED* Executive Director of Non-profit Corporation or Assistant School Principal - REQUIRED* Secretary of Non-profit Corporation or Assistant School Principal - REQUIRED*	ION IV - POTENTIAL CONFLICTS (2) To you (applicant) have a current of No Yes If Yes, post Yes, post Yes If Yes, post Yes Yes, did you request that the boar Yes No *(Please note the participates in the discussion yeart in its entirety.) ION V - DECLARATION AND SIGN by affirm that, to the best of my loccurately stated. I further affirm st" of this application and affirm it project/program and that no esses Grant. I affirm that I am not post years of the project of Non-Profit Carolyn Ramsay PRINT Name Secretary of Non-profit Corporations.	or former relationship with a please describe below: ord member consult the Official if a Board Member of the and voting of this NPG, the ATURE knowledge, the information that I have read the document that the proposed project conflict of interest exist the a current Board Member of the grant received is not need immediately to the Neighborn Corporation or School Princ Executive Director Title on or Assistant School Prince	Relation Rel	ne NC? onship to Applicant ey before filing this applic of interest and complete ogram will deny the payr a Public Benefit," and "o (s) fall within the criteria the awarding of the Ne od Council to whom I am ce with the terms of the

SECTION III - PROJECT BUDGET OUTLINE

PAGE 2 NCFP 107

^{*} 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

13654 Victory Blvd. #395 Van Nuys, CA 91401

PROPOSAL

Date	Estimate #
1/28/2022	2021-131

Name / Address

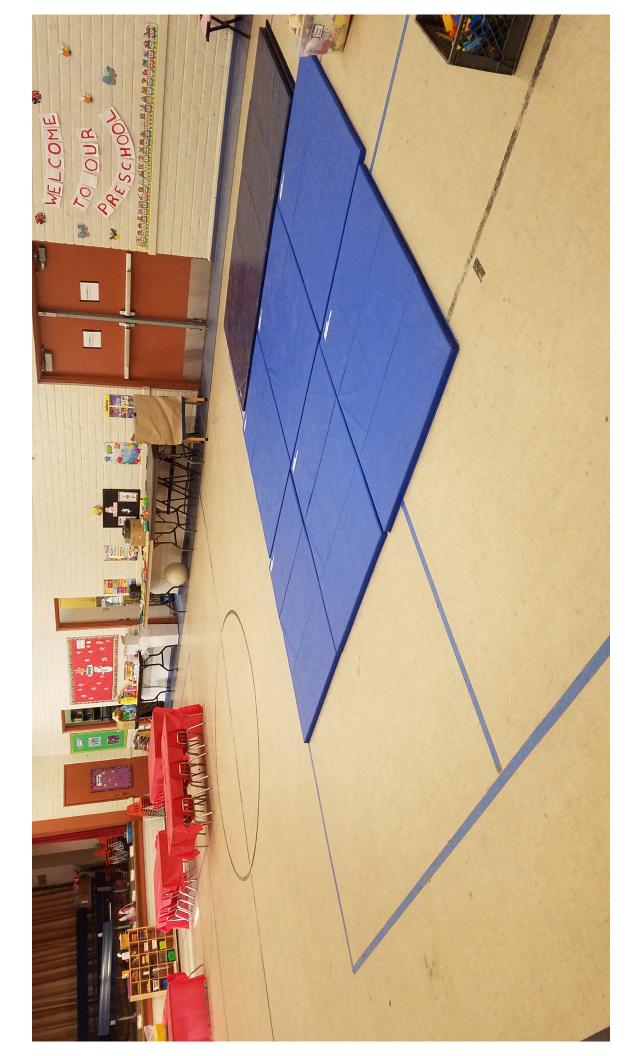
CITY OF LOS ANGELES
Rec & Park (
GSD-Piper Tech Mail Stop 712
555 Ramirez ST Space 312
Los Angelesa, CALIFORNIA 90012

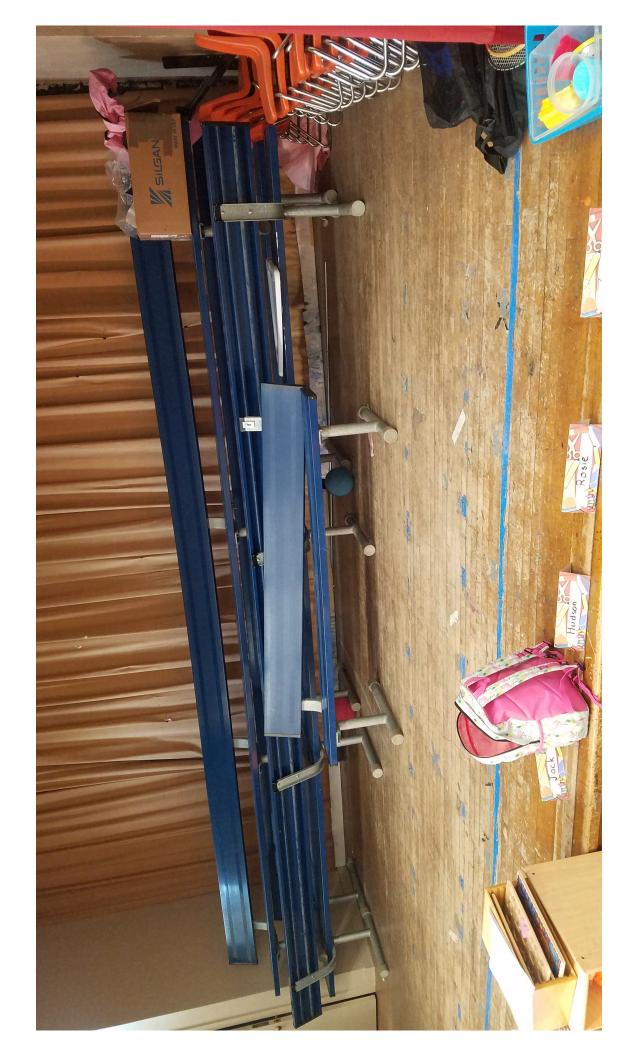
Ship To

MAR VISTA REC CENTER 11430 WOODDBINE AVE LOS ANGELES,CA90066

LSBE/MBE/WBE/	. SBE # 2004299	DUN # 00358	30411	DIR # 1000	007245	STATE	LIC# 637480
Item	Description	on		Qty	Rate		Total
LINE 6 = 30161702	SERVICE,REPAIR COST FOR ITEMS,REGULAR TIME (HAR INSTALLER) REFINISH STAC	DWOOD FLOOR		40		70.00	2,800.00
LINE 12= 301617	SERVICE,STRIPING,GYM FLO SMALL GYM	OOR,REGULAR TIME		3,750		0.40	1,500.00
LINE 6 = 30161702	SERVICE, REPAIR COST FOR ITEMS, REGULAR TIME (HAR INSTALLER) CLEAN, AND W	DWOOD FLOOR		30		70.00	2,100.00
				Total			\$6,400.00

Phone #	Fax #	E-mail	Web Site
818.982.8394	747.500.9944	royflooringinc@gmail.com	www.royflooringinc.com





(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line	e: do not leave this line blank	C.													
	LOS ANGELES PARKS FOUNDATION															
	2 Business name/disregarded entity name, if different from above				-											
n page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate										4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
- S	Individual/sole proprietor or Corporation S Corporation S Corporation	tion L Partnership	L.J Tr	ust/i	estate		Evon	nt nn		ode (if	amá					
tion	Limited liability company. Enter the tax classification (C=C corporation	S-S composition P-Partne	A Inidas			1	EAUIII	br ba)	/ 00 (oce (ii	апуј					
Print or type. See Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classifica LLC if the LLC is classified as a single-member LLC that is disregarded another LLC that is not disregarded from the owner for U.S. federal tax is disregarded from the owner should check the appropriate box for the	ation of the single-member of from the owner unless the	and the same of th													
eci.		NONPROFIT					(Applies	to acco	unts n	ou.hstaine	d autolo	la the U.S	3.)			
S.	5 Address (number, street, and apt. or suite no.) See instructions.		Reques	iter's	s name	an	d add	ress (opti	onal)						
88	2650 NORTH COMMONWEALTH AVENUE															
-	6 City, state, and ZIP code		1													
	LOS ANGELES, CALIF. 90027															
	7 List account number(s) here (optional)				_											
Pari																
Enter y	our TIN in the appropriate box. The TIN provided must match the na	ame given on line 1 to av	oid	So	cial s	эсш	rity nı	ımbe	r							
resider	o withholding. For individuals, this is generally your social security not alien, sole proprietor, or disregarded entity, see the instructions fo	umber (SSN). However, for other	ora				П				T					
entities	s, it is your employer identification number (ÈIN). If you do not have a	number, see How to ge	ta				_			-						
T/N, lai	er.	*		or												
Note: I	f the account is in more than one name, see the instructions for line or To Give the Requester for guidelines on whose number to enter.	1. Also see What Name a	and	Em	ploye	r id	entific	cation	กน	mber						
rearmo	to take the hedgester to guidennes on whose homber to enter.		ļ	2	6		2	3 5	٠,	8 3	3	8				
Part	Certification										L					
	penalties of perjury, I certify that:	ahan dan kamanan tutu a d														
2. i am	number shown on this form is my correct taxpayer identification nun not subject to backup withholding because; (a) I am exempt from ba	nder (or I am waiting for a	I have n	r to	be is	sue	ed to	me);	and	omal	Day	- Thirties				
no lo	ce (IRS) that I am subject to backup withholding as a result of a failt nger subject to backup withholding; and	ure to report all interest of	r divider	ids,	or (c)	th:	e IRS	has	not	fied n	ne th	at I ar	n			
	a U.S. citizen or other U.S. person (defined below); and															
	FATCA code(s) entered on this form (if any) indicating that I am exem															
you have acquisiti	etion Instructions. You must cross out item 2 above if you have been re e falled to report all interest and dividends on your tax return. For real ea on or abandonment of secured property, cancellation of debt, contribut an interest and dividends, you are not required to sign the certification, i	state transactions, item 2 (tions to an individual retire	does not	app	oly. Fo	or m	nortga	ige in	tere	st pai	d,	nte	96			
Sign Here	Signature of Whomes Wes			15"	- I	7	5		,		, ,	3	_			
11010	U.S. person > What July	D:	ate >	C		_	DI		_	20	1					
	eral Instructions	 Form 1099-DIV (divi funds) 														
noted.	references are to the Internal Revenue Code unless otherwise	 Form 1099-MISC (value proceeds) 	arious ty	pes	of in	COF	ne, p	rizes	aw	ards,	or g	ross				
related t	levelopments. For the latest information about developments o Form W-9 and its instructions, such as legislation enacted y were published, go to www.irs.gov/FormW9.	Form 1099-B (stock transactions by broke)	rs)							other						
Purpo	ose of Form	• Form 1099-S (proce										,				
-		• Form 1099-K (merch														
informati identifica	dual or entity (Form W-9 requester) who is required to file an on return with the IRS must obtain your correct taxpayer ation number (TIN) which may be your social security number	 Form 1098 (home me 1098-T (tuition) Form 1099-C (cance) 			rest),	10	30-E	(STUC	ent	ngan	nter	est),				
(SSN), in	dividual taxpayer identification number (ITIN), adoption	• Form 1099-A (acquis		,	nden-	ner	at of a	- ויים	ad -	Name of the last	414					
(EIN), to	identification number (ATIN), or employer identification number report on an information return the amount paid to you, or other reportable on an information return. Examples of information	Use Form W-9 only alien), to provide your	if you are	e a	U.S.				-	-		t				
	nclude, but are not limited to, the following.	If you do not return I	Form W-	9 to	the i	rea	ueste	er vvit	hai	TIN. v	ou n	night				
• Form 1	099-INT (interest earned or paid)	be subject to backup v	vithholdi	ng.	See \	٧h	at is l	oack	up v	vithho	lding),				

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

DEPARTMENT OF THE TREASURY

Date: AUG 12 2008

LOS ANGELES PARKS FOUNDATION C/O ERIC CHO LATHAM & WATKINS LLP 633 W 5TH ST STE 4000 LOS ANGELES, CA 90071

Employer Identification Number: 26-2358338 DLN: 17053155039018 Contact Person: WINNIE W LEE ID# 31208 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Public Charity Status: 170(b)(1)(A)(vi) Form 990 Required: Yes Effective Date of Exemption: February 26, 2008 Contribution Deductibility: Advance Ruling Ending Date: December 31, 2012 Addendum Applies: No

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.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. During your advance ruling period, you will be treated as a public charity. Your advance ruling period begins with the effective date of your exemption and ends with advance ruling ending date shown in the heading of the letter.

Shortly before the end of your advance ruling period, we will send you Form 8734, Support Schedule for Advance Ruling Period. You will have 90 days after the end of your advance ruling period to return the completed form. We will then notify you, in writing, about your public charity status.

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.

LOS ANGELES PARKS FOUNDATION

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

Enclosures: Publication 4221-PC

Statute Extension

	1023 (Rev. 6-2008) Name: Los Angeles Parks Fo	undation	EIN:	26 _ 23583	38	Page 11
Pai						
f	509(a)(4)—an organization organized and operated of 509(a)(1) and 170(b)(1)(A)(iv)—an organization operated by a governmental unit.	exclusively for testing for public sated for the benefit of a college or u	ety. niversity	that is owne	ed or	
g	509(a)(1) and 170(b)(1)(A)(vi)—an organization that re of contributions from publicly supported organization	ceives a substantial part of its finance, from a governmental unit, or from	ncial su om the q	pport in the f general publi	form c.	Z
h	509(a)(2)—an organization that normally receives no investment income and receives more than one-th tees, and gross receipts from activities related to its	rd of its financial support from cor	rtribution	is, members	s hi p	
ı	A publicly supported organization, but unsure if it is decide the correct status.	described in 5g or 5h. The organization	zation w	ould like the	IRS to	
6	If you checked box g, h, or i in question 5 above, you selecting one of the boxes below. Refer to the instruct	must request either an advance or a ons to determine which type of ruling	definition	ve ruling by e eligible to re	ceive.	
а	Request for Advance Ruling: By checking this box the Code you request an advance ruling and agree excise tax under section 4940 of the Code. The tax at the end of the 5-year advance ruling period. The years to 8 years, 4 months, and 15 days beyond the the extension to a mutually agreed-upon period of the Assessment Period, provides a more detailed explain you make. You may obtain Publication 1035 free of toil-free 1-800-829-3676. Signing this consent will notherwise be entitled. If you decide not to extend the ruling.	to extend the statute of limitations will apply only if you do not estable assessment period will be extended and of the first year. You have the ime or issue(s), Publication 1035, Enation of your rights and the consecharge from the IRS web site at word deprive you of any appeal rights e statute of limitations, you are not	on the a ish public of the e right to extending quences ww.irs.g a to which deligible	assessment of the support of the 5 advance or refuse or life of the 7ax of the choke ov or by call the you would for an advantage of the advantage of the support of the su	of ratus ruling mit ces ing	
	Consent Fixing Relied of Smithdors Open Asses	ment of the Units Skettor 1940				
	(Signature of Officer, Director, Trustee, or other authorized official)	Barry A. Sanders (Type or print name of signer) Chairman, President, Director (Type or print title or authority of signer)		MAY (Date)	23	2908
	For IRS Use Only IRS Director, Exempt Organizations			AUG	12	2008
Ь	Request for Definitive Ruling: Check this box if you are requesting a definitive ruling. To confirm you g in line 5 above. Answer line 6b(ii) if you checked b answer both lines 6b(i) and (ii).	r public support status, answer ilne	e 6b(1) if	you checked	xod b	
	(i) (a) Enter 2% of line 8, column (e) on Part IX-A. S(b) Attach a list showing the name and amount of gifts totaled more than the 2% amount. If the	ontributed by each person, compa	ny, or o	rganization w	/hose	
	(ii) (a) For each year amounts are included on lines Expenses, attach a list showing the name of answer is "None," check this box.	1, 2, and 9 of Part iX-A. Statement and amount received from each dis	of Reve equalifie	nues and d person. If	the	
	(b) For each year amounts are included on line 9 a list showing the name of and amount received payments were more than the larger of (1) 1% Expenses, or (2) \$5,000. If the answer is "Nor	ed from each payer, other than a c of line 10, Part IX-A. Statement of	disqualifi	ed person, v	tach vhose	
	Did you receive any unusual grants during any of the Revenues and Expenses? If "Yes," attach a list inclu- amount of the grant, a brief description of the grant,	ding the name of the contributor, th			Yes	Z No

Office of the City Clerk											
Administrative Services Division						aregules 1	30 LOS ANG				
Neighborhood Council (NC) Funding Progr	am					city of Io					
Board Action Certification (BAC) Form						Chy Cle	TO NOT O 118				
NC Name: MVCC			Meeting Date:	3.16.22							
Budget Fiscal Year: 2021-2022			Agenda Item No								
Board Motion and/or Public Benefit Statement (CIP and NPG): The NPG Applicant is the LA Parks Foundation. The MVCC reaffirms the February 16, 2022, vote count for Agenda ltem 7.3. The motion was, "Approval of an NPG for \$6,400 to refinish, strip, clean, and wax the floors of the small gym and stage in the Mar Vista Recreation Center." Approved 8-7-0.											
Method of Payment: (Select One)	☐ Check		☐ Credit Card		☐ Board	l Member Reimb	ursement				
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 Mary Beth Blakey	Board Position ALD	Yes	No X	Abstain	Absent	Ineligible	Recused				
-	ALD		X								
Stacey Greenwald	ALD	X	^								
Carolyn Honda	Z1D										
Tyler Laferriere	Z3D		Х								
Andrew Marton		Х									
Faith Myhra	Z7D		Х								
Jordan Paul	ALD		Х								
Kathy Rodriguez	ALD	X									
Martin Rubin	Z2D	X									
Drew Ruesch	Z5D		Х								
Jennifer Rafeedie	Z4D	X									
Charlene Samiley	ALD	X									
Bitta Sharma	ALD		Х								
Holly Tilson	Z6D	X									
Kathryn Wheeler	CD	Х									
Board Quorum: 8	Total:	8	7								
Dourd Quordini O	I TOTAL.	0	, , , , , , , , , , , , , , , , , , ,								

We, the authorized signers of the above named Neighborhood Council, declare that the information presented on this form's 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: Drew Ruesch

Date: 3.16.22

Date: March 28, 2022

NCFP 101 BAC Rev020118

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.

Mar Vista Community Council

SEC	TION I- APPLICANT INFORMATION	953894714	California	07/31/2014
1a)	Friends of the Mar Vista Library Organization Name	Federal I.D. # (EIN#)	State of Incorporation	Date of 501(c)(3) Status (if applicable
1b)	12006 Venice Blvd	Los Angeles	s CA	90066
	Organization Mailing Address	City	State	Zip Code
1c)	Business Address (If different)	City	State	Zip Code
1d)	PRIMARY CONTACT INFORMATION:			in the same of the
	Carole M. Kealoha	(310) 390-36	63 ckeald	ha@lapl.org
	Name	Phone	Email	
2)	Type of Organization- Please select one: ☐ Public School (not to include private schools) Attach Signed letter on School Letterhead		on-Profit (other than religiou Determination Letter	s institutions)
3)	Name / Address of Affiliated Organization (if appli	cable) Cit	y State	Zip Code

SECTION II - PROJECT DESCRIPTION

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

Funds to allow Children's Librarian to replace heavily used children's books. Funds to allow Mar Vista Staff to order Literature holder for lobby, and funds to order a revolving dictionary displayer to be located on the back of the Reference Desk for patrons to peruse.

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)

Replacement books benefit the children of Mar Vista as they use the library and the books for learning to read, homework and pleasure. Patrons will have access to flyers and other non-profit information in literature holder. One of the paperback towers on the paperback rounder broke. We need a replacement for our browsing paperback collection.

sonnel Related Expenses	if necessary or requested. Requested of NC	miles
	\$	\$
	\$	\$
	\$	\$
on-Personnel Related Expenses	Requested of NO	Total Projected Cost
urchase of replacement books	\$2400.00	\$2400.00
pestanding Literature displayer	\$ 402.00	\$ 402.00
er single replacement tower for paperback rounder	\$ 386.21	\$386.21
rou (applicant) applied to any other Neighborhood Yes If Yes, please list names of implementation of this specific program or purposes or funding? (Including NPG applications to oth	r NCs:se described in Question 4 con	tingent on any other facto Yes, please describe:
ource of Funding	Amount	Total Projected Cost
•	\$	\$
	\$	\$
	\$	3,100.00
rou (applicant) have a current or former relations o	low:	ship to Applicant
ille of No Board Member		
	ult the Office of the City Attorne	y before filing this applica
Dr. +/Diana mate that if a Doord Man	nhar of the NC has a conflict (of fillerest and completes
. Du t/Diana mate that if a Doord Man	nhar of the NC has a conflict (of fillerest and completes
Yes ☐ No *(Please note that if a Board Men participates in the discussion and voting of the	nhar of the NC has a conflict (of fillerest and completes
Yes □ No *(Please note that if a Board Men participates in the discussion and voting of the rant in its entirety.)	nber of the NC has a conflict on his NPG, the NC Funding Pro-	gram will deny the paym
f yes, did you request that the board member consuly Yes □ No *(Please note that if a Board Member participates in the discussion and voting of the grant in its entirety.) FION V - DECLARATION AND SIGNATURE Beby affirm that, to the best of my knowledge, the inaccurately stated. I further affirm that I have reasest" of this application and affirm that the proposifit project/program and that no conflict of interespectives Grant. I affirm that I am not a current Board application. I further affirm that if the grant received there, said funds shall be returned immediately the proposition of the conflict of the confliction of the conf	nber of the NC has a conflict of his NPG, the NC Funding Pro- nformation provided herein and the documents "What is a sed project(s) and/or programmest exist that would prevent Member of the Neighborhoo yed is not used in accordance.	d communicated otherw Public Benefit," and "C s) fall within the criteria the awarding of the Neight
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Yes No *(Please note that if a Board Men- participates in the discussion and voting of the int in its entirety.) NV-DECLARATION AND SIGNATURE of affirm that, to the best of my knowledge, the incurately stated. I further affirm that I have rea "of this application and affirm that the propose project/program and that no conflict of interest of grant. I affirm that I am not a current Board plication. I further affirm that if the grant receivere, said funds shall be returned immediately the propose that it is the grant receivere, said funds shall be returned immediately the propose that it is the grant receiverere, said funds shall be returned immediately the propose that it is the grant receiverere.	is NPG, the NC Funding Pro- nis NPG, the NC F	d communicated otherw Public Benefit," and "C s) fall within the criteria the awarding of the Neight awarding of the S with the terms of the s with the terms of the s
(Please note that if a Board Men'r participates in the discussion and voting of the rant in its entirety.) ON V - DECLARATION AND SIGNATURE by affirm that, to the best of my knowledge, the incurately stated. I further affirm that I have real still of this application and affirm that the proposity project/program and that no conflict of intereses Grant. I affirm that I am not a current Board populication. I further affirm that if the grant received here, said funds shall be returned immediately the Executive Director of Non-Profit Corporation or Society.	information provided herein and the documents "What is a deed project(s) and/or programmest exist that would prevent I Member of the Neighborhoo wed is not used in accordance to the Neighborhood Council chool Principal - REQUIRED	d communicated otherw Public Benefit," and "C s) fall within the criteria the awarding of the Neight awarding of the S with the terms of the s with the terms of the s
Yes No *(Please note that if a Board Menor participates in the discussion and voting of the grant in its entirety.) *(ION V - DECLARATION AND SIGNATURE) *(Iby affirm that, to the best of my knowledge, the induction of this application and affirm that I have real pest" of this application and affirm that the proposes Grant. I affirm that I am not a current Board application. I further affirm that if the grant received here, said funds shall be returned immediately application. I further affirm that if the grant received here, said funds shall be returned immediately application. I further affirm that if the grant received here, said funds shall be returned immediately application. I further affirm that if the grant received here, said funds shall be returned immediately application. I further affirm that if the grant received here, said funds shall be returned immediately application. I further affirm that if the grant received here, said funds shall be returned immediately application. I further affirm that if the grant received here.	information provided herein and the documents "What is a seed project(s) and/or programmest exist that would prevent in Member of the Neighborhoo wed is not used in accordance to the Neighborhood Council chool Principal - REQUIRED* Signate School Principal REQUIRED*	ad communic Public Bene s) fall within the awarding d Council to be with the te

NCFP 107

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

Date: AUG 08 2014

FRIENDS OF THE MAR VISTA LIBRARY 12006 VENICE BLVD LOS ANGELES, CA 90066 Employer Identification Number: 95-3894714 DLN: 604217171 Contact Person: TD# 31954 CUSTOMER SERVICE Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Public Charity Status: 509(a)(2) Form 990/990-EZ/990-N Required: Effective Date of Exemption: July 31, 2014 Contribution Deductibility: Addendum Applies:

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

Based on the information you submitted on your application, we approved your request for reinstatement under Section 7 of Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is the submission date of your application.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar

FRIENDS OF THE MAR VISTA LIBRARY

to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Director, Exempt Organizations

Form 990-N

Electronic Notice (e-Postcard)

OMB No. 1545-2085

Department of the Treasury Internal Revenue Service for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2020

Open to Public Inspection

	ar the	2020	Colondor	MOST C	or tov	(OOF	haginning	2020-01-01	and ending	2020-12-31
-۹ г	or me	ZUZU	Calendar	eal,	JI Lak	year	Dedinining	2020-01-01	and onding	LULU IL UI

B Check if available

C Name of Organization: FRIENDS OF THE MAR VISTA

D Employee Identification

Terminated for Business

LIBRARY

Number 95-3894714

Gross receipts are normally \$50,000 or less

S12006 Venice Blvd, Los Angeles, CA, US, 90066

E Website:

F Name of Principal Officer: Linda Farkas-Jones

Los Angeles, CA, US,

90066

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.



PO BOX 1286 Rancho Cordova CA 95741-1286

FRIENDS OF THE MAR VISTA LIBRARY 12006 VENICE BL LOS ANGELES CA 90066

Date:

03.20.15

Case: Case Unit:

26600569672235530 26600569672235536

In reply refer to: 760:MQD:F120

Regarding:

Tax-Exempt Status

Organization's Name:

Friends of the Mar Vista Library

3711749

Charitable

Purpose:

CCN:

R&TC Section:

23701d

Form of Organization:

Affirmation Incorporated

Accounting Period Ending:

12/31

Tax-Exempt Status Effective:

07/31/2014

Exempt Acknowledgement Letter

We have received your federal determination letter that shows tax exemption under Internal Revenue Code (IRC) Section 501(c)(3).

Under California law, Revenue and Taxation Code (R&TC) Section 23701 provides that an organization is exempt from taxes imposed under Part 11 upon submission of the federal determination letter approving the organization's tax-exempt status.

Generally, the effective date of an organization's California tax-exempt status is the same date as the federal tax-exempt status.

To retain tax-exempt status, the organization must be organized and operating for nonprofit purposes within the provisions of the above R&TC section. An inactive organization is not entitled to tax-exempt status.

In order for us to determine any effect on the tax-exempt status, the organization must immediately report to us any change in:

- Operation
- Character
- Purpose
- Name
- Address

For filing requirements, refer to FTB Pub.1068, Exempt Organizations - Filing Requirements and Filing Fees. Go to ftb.ca.gov and search for 1068.

This exemption is for state franchise or income tax purposes only. For information regarding sales tax exemption, contact the State Board of Equalization at 800.400.7115 or go to their website at **boe.ca.gov.**

Marcos Q. Diez Jr Telephone: 916.845.4171 Fax: 916.843.2525

cc: Jean Ballantine



MAR VISTA BRANCH

To: Mar Vista Community Council

From: Carole M. Kealoha, Senior Librarian

Date: 4/5/2022

Re: Request for funds for replacement of Children's books at the

Mar Vista Library.

The Mar Vista branch library is requesting funds to replace many of the following items. We are using Amazon for these items as they were not available on library vendor sites. These are not all the titles and it will depend upon the prices when we actually purchase them. We appreciate your support so much, as I'm sure the children in the area appreciate it as well! We will make donation labels to put in each book stating that they were donated by the Mar Vista Community Council, MarVista.org.

Replacement paperbacks for popular series

The bad guys box set 1-5 - \$21.42 (MSRP: \$29.95)

The bad guys box set 6-10 - \$19.49 (MSRP: \$29.95)

The Boxcar Children Mysteries box set - \$42.99 (MSRP \$62.99)

The complete Moonbase Alpha series 3 bks - \$18.20 (MSRP \$26.99)

Dragon Masters box set 1-20 - \$89.99 (MSRP: \$129.99)

Funjungle paperback collection – 3 titles \$19.69 (MSRP \$26.99)

Funjungle mystery madness collection – 3 titles \$18.99 (MSRP \$26.99)

Mercy Watson

My weird school box set - \$29.44 (MSRP: \$55.99)

My weirder school box set - \$42.87 (MSRP: \$58.88)

Pokémon box set - \$57.78

Pokémon Independent readers box set - \$45.99 (MSRP: \$59.90)

Spy School vs. Spyder 7 titles - \$38.49 (MSRP \$62.99)

Wings of fire 1-14 - \$89.90

Warriors box set 1-6 - \$27.98 (MSRP \$47.94)

Replacement paperbacks/hardcovers for popular children's fiction titles

Charman, Katrina – The ember stone – \$5.99

Colfer, Chris – Land of Stories series box set - \$48.99 (MSRP \$55.00)

Rowling, J.K. – Harry Potter series

Sutherland, Tui – The flames of hope, Wings of Fire #15 - \$12.55 (MSRP \$16.99)

Replacement for popular picture books

Arnold, Ted - Fly guy presents dinosaurs - \$11.99

Berenstatin, Stan – C is for clown - \$5.75
Brown, Laurene Krasny – How to be a friend - \$24.96
Cuyler, Margery – Skeleton for dinner – \$26.99
Lane, Jeanette - Pokemon great pancake race - \$15.80
Wallace, Adam – How to catch the Easter bunny - \$7.23 (MSRP: \$10.99)
Willems, Mo – Elephant & Piggie: the complete collection – 2 sets \$81.99 (MSRP \$150.00 each

• Replacement for popular graphic novels

Amulet –Stonekeepers Cuse - 2 copies - \$18.49 each
Archie comics – no sets – 26 title \$10.99 per title
Babysitters Club
Big Nate
Disney's Encanto - \$11.69 (MSRP 12.99)
Dogman
Naruto 3-in-1 vol. 1 - \$13.49
Raina Telgemeier titles – Sisters - \$14.09 (2 copies) and Smile \$21.49 (2 copies)
Wings of Fire graphic novels - \$38.80 (MSRP 51.96)
Witch hat atelier v.4 - \$12.99



Visit online at www.shopbrodart.com

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Columbus, OH 43260 - 0001

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Bids & Quotes, FAX: 800.578.1064

Quote #: 33841

Issue Date: 4/4/2022

Expiration Date: 5/4/2022

Sales Order #:

Total Page Count: 1

To: CAROLE KEALOHA

Institution: *MAR VISTA BRANCH LIBRARY

Account #: 044665

City: LOS ANGELES

State: CA Zip: 90066

FAX:

Phone: 310-390-7173

Email: CKEALOHA@LAPL.ORG

From: Nancy Reiff FAX: 800-283-6087 Phone: 800-233-8467

Email: Nancy.Reiff@brodart.com

Catalog Discount

Discounted

Total

Department: Customer Service

Quote Comments:

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Brodart Select Discount

Catalog

Line	Number	Description	UOM	Quantity	Price	%	Price	Price
1	86756001	D LIT DISPL 12 PKT 64H LT OAK	EA	1	\$402.00	15	\$341.7000	\$341.70
							Subtotal:	\$341.70
Tax will be calculated when Invoiced Tax:							d Tax:	
							Shipping:	\$60.30
							Total:	402.00

Destination Control Statement

These items are controlled by the U.S. Government and authorized for export only to the country of ultimate destination for use by the ultimate consignee or end-user(s) herein identified. They may not be resold, transferred, or otherwise disposed of, to any other country or to any person other than the authorized ultimate consignee or end-user(s), either in their original form or after being incorporated into other items, without first obtaining approval from the U.S. Government or as otherwise authorized by U.S. law and regulations.



QUOTATION

P.O. Box 7488 Madison, WI 53707-7488 PH 800-356-1200 FAX 800-245-1329 Reference: W2082200 Contract/Bid ID: CTL003

Today: 3/23/22

Quote Expiration Date: 4/22/22

NAME: Mar Vista Branch Library
CONTACT: MS CAROLE KEALOHA
PHONE: 310-390-3663

Line		Product Description	Colors/Finished/Options	Unit Price	Discount	Ext Total
Line	Qty 110uuct	Troduct Description	colors, rimshed, options	Omerrice	Discount	LAC TOTAL
1	1 W14100660	6 Tier Single Replacement	Tower Shelf color?	267.99	6%	251.92
			Putty			
		PLEASE NOTE: This item may no	t be returned unless damaged or defective.			
			Order S	Subtotal		251.92
						
				ng/Processing		100.77
			Sales T			33.52
			Grand I	Total		386.21

BILL TO:

Mar Vista Branch Library 12006 Venice Blvd Los Angeles CA 90066-3810 SHIP TO:

Carole Kealoha Mar Vista Branch Library 12006 Venice Blvd Los Angeles CA 90066-3810 CONTACT:

MS CAROLE KEALOHA
MAR VISTA BRANCH LIBRARY
12006 VENICE BLVD
LOS ANGELES CA 90066-3810



MAR VISTA BRANCH

To: Mar Vista Community Council

From: Carole M. Kealoha, Senior Librarian

Date: 4/6/2022

Re: Attendance at 4/14/22 MVCC meeting

I will be on vacation beginning Thursday, April 14th through Tuesday April 19th. I am flying to Phoenix that day. I will do my best to attend the meeting on Zoom if I arrive in time. I am definitely able to attend the meeting on Wednesday, April 20th. Thank you for all of your assistance.

Office of the City Clerk							-			
Administrative Services Division						mark 1				
Neighborhood Council (NC) Funding Progr	ram					St. Care				
Board Action Certification (BAC) Form						TOG The				
NC Name: Mar Vista Community Co	uncil		Meeting Date:	April 20, 2022	2					
Budget Fiscal Year: 2021-2022			Agenda Item N				7			
Board Motion and/or Public Benefit Statement (CIP and NPG):	The MVCC approves a Neighborhood Purpose Grant in the amour to the Friends of Mar Vista Library.									
Method of Payment: (Select One)	☐ Check		☐ Credit Card		☐ Board	d Member Reimb	ursement			
	s must leave the room prio		te Count ssion and may no	t return to the ro	oom until after t	the vote is comple	ete.			
Board Member's First and Last Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused			
MaryBeth Blakey	At-Large	Х								
Stacey Greenwald	At-Large	Х								
Carolyn Honda	At-Large	Х								
Tyler Laferriere	Zone Director	Χ								
Andrew Marton	Zone Director	X								
Faith Myhra	Zone Director	Х								
Jordan Paul	At-Large	Х								
Jennifer Rafeedie	Zone Director	Х								
Kathy Rodriguez	At-Large	X								
Martin Rubin	Zone Director	Х								
Drew Ruesch	Zone Director				Х					
Charlene Samiley	At-Large	Х								
Bitta Sharma	At-Large	Х								
Holly Tilson	Zone Director	Х								
Kathryn Wheeler	Community Int									
							81			
Board Quorum: 8 We, the authorized signers of the above n	Total:	14			1					

meeting was held in accordance with all jaws 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 Authorized Signature: Print/Type Name: Kathryn Wheeler Print/Type Name: Andrew Marton Date: April 20, 2022 Date: April 21, 2022