

# Monthly Expenditure Report



**Reporting Month: February 2026**

**Budget Fiscal Year: 2025-2026**

**NC Name: Mar Vista Neighborhood Council**

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$27756.19	\$4211.00	\$23545.19	\$5000.00	\$0.00	\$18545.19

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office	\$19084.74	\$211.00	\$15795.19	\$0.00	\$15795.19
Outreach		\$0.00		\$0.00	
Elections		\$0.00		\$0.00	
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Neighborhood Purpose Grants	\$14000.00	\$4000.00	\$7750.00	\$5000.00	\$2750.00
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$5328.55	

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	THE WEB CORNER, INC.	02/15/2026	10.2 MVCC approves the budget adjustments in Jan 2026 meeting including Web Corner expenses	General Operations Expenditure	Office	\$157.00
2	MAILCHIMP	02/18/2026	10.2 MVCC Budget Approval for Budget Adjustments for office expenditures for Mail Chimp	General Operations Expenditure	Office	\$54.00
3	Community Disaster Preparedness Foundation	01/20/2026	13.4 - Nov MVCC Board approves \$ 4000 for a NPG for Community Disaster Preparedness for Westside Village in the MVCC area - staging area kit for Neighborhood CERT team	Neighborhood Purpose Grants		\$4000.00
<b>Subtotal:</b>						<b>\$4211.00</b>

Outstanding Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	Nuestros Alimentos	12/12/2025	13.6 Nov BOD NPG Nurish LA The MVCC approves a Neighborhood Purposes Grant (NPG) in the amount of \$5,000 to help support the expansion of Nourish LA's operation to include a Food Recovery app develop...	Neighborhood Purpose Grants		\$5000.00
<b>Subtotal: Outstanding</b>						<b>\$5000.00</b>

**The Web Corner, Inc.**

**Invoice**

15300 Ventura Blvd. Suite 400  
 Sherman Oaks, CA 91403  
 818-345-7443

**PAID**  
**02/15/2026**

Date	Invoice #	Terms
2/15/2026	29370	

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

Ship To

QTY	Description	Price Each	Amount
1	February 2026 Monthly Maintenance: includes up to 1 hour for; phone support, web development, requests, & website adjustment	150.00	150.00
2	February 2026 Email Standard Mailboxes: 2 Accounts for outreach@marvista.org; chair@marvista.org	3.50	7.00
0	February 2026 Monthly Hosting for marvista.org (included in maintenance)	15.00	0.00

Please remit payment at your earliest convenience.  Thank you for your business!	<b>Total</b>	\$157.00
	<b>Payments/Credits</b>	-\$157.00
	<b>Balance Due</b>	<b>\$0.00</b>





Your order has been processed.

**Invoice MC25139739**

Processed on February 17, 2026 10:22 PM Los Angeles.

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<b>Monthly plan</b>	<b>\$54.00</b>
1501 - 2500 subscribers.	

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<b>Paid via Mast</b> ending in <b>8496</b> which expires <b>12/2026</b>	<b>\$54.00</b>
on February 18, 2026	

<b>Balance as of February 18, 2026</b>	<b>\$0.00</b>
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*Issued to*

Charlene Samiley  
[outreach@marvista.org](mailto:outreach@marvista.org)  
charlene.marvista@gmail.com  
Mar Vista Community Council  
200 N. Spring St Los Angeles, CA 90012

*Issued by*

Mailchimp  
c/o The Rocket Science Group, LLC  
405 N. Angier Ave. NE, Atlanta, GA 30308 USA  
[www.mailchimp.com](http://www.mailchimp.com)  
Tax ID: US EIN 58-2554149





**SECTION III - PROJECT BUDGET OUTLINE**

You may also provide the Budget Outline on a separate sheet if necessary or requested.

6a)	<b>Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
		\$	\$
		\$	\$
		\$	\$

6b)	<b>Non-Personnel Related Expenses</b>	<b>Requested of NC</b>	<b>Total Projected Cost</b>
	storage box and supplies--see attached	\$ 3000.00	\$ 3000.00
	installation of kit in accessible location - proposed at St. John's Episcopal Church	\$ 1000.00	\$ 1000.00
		\$	\$

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

8) Is the implementation of this specific program or purpose described in Question 4 contingent on any other factors or sources or funding? (Including NPG applications to other NCs)  No     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: \$ 4000.00

10a) Start date: 12 / 30 / 25    10b) Date Funds Required: 1 / 15 / 26    10c) Expected Completion Date: 02 / 28 / 26  
 (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    **\*(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.)**

**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\*

Patrick Botz-Forbes                      Executive Director                                            12/19/25  
 PRINT Name                                      Title                                      Signature                                      Date

12b) Secretary of Non-profit Corporation or Assistant School Principal - RI

Glenn Dollar                                      Board Member/Secretary                                                                            2025-12-22  
 PRINT Name                                      Title                                      Signature                                      Date

\* 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](mailto:clerk.ncfunding@lacity.org) for instructions on completing this form

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

DEPARTMENT OF THE TREASURY

Date: JUN 15 2016

MONTEREY HILLS FOUNDATION  
PO BOX 32164  
LOS ANGELES, CA 90032-0000

Employer Identification Number:  
81-2808902  
DLN:  
26053560002746  
Contact Person:  
CUSTOMER SERVICE ID# 31954  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
May 31  
Public Charity Status:  
509(a)(2)  
Form 990/990-EZ/990-N Required:  
Yes  
Effective Date of Exemption:  
May 2, 2016  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

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.

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](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 5436

MONTEREY HILLS FOUNDATION

Sincerely,

A handwritten signature in black ink, appearing to read "Jeffrey I. Cooper". The signature is stylized and cursive.

Jeffrey I. Cooper  
Director, Exempt Organizations  
Rulings and Agreements

YOUR RETURN MAILING ADDRESS

NAME: MONTEREY HILLS FOUNDATION

ADDRESS: 616 CABRILLO VILLAS

CITY: LOS ANGELES

STATE: CA ZIP CODE: 90042

2018003092



FILED EXPIRES  
Jan 4 2018 Jan 4 2023  
Dean C. Logan, Registrar-Recorder/County Clerk  
Electronically signed by ESTRELLIETA POLICARPIO

# FICTITIOUS BUSINESS NAME STATEMENT

TYPE OF FILING AND FILING FEE (Check one)

- Original- \$26.00 (FOR ORIGINAL FILING WITH ONE BUSINESS NAME ON STATEMENT)
  - Amended (New) Filing- \$26.00 (CHANGES IN FACTS FROM ORIGINAL FILING- REQUIRES PUBLICATION)
  - Refile- \$26.00 (NO CHANGES IN THE FACTS FROM ORIGINAL FILING)
- \$5.00 - FOR EACH ADDITIONAL BUSINESS NAME FILED ON SAME STATEMENT, DOING BUSINESS AT THE SAME LOCATION \$5.00- FOR EACH ADDITIONAL OWNER IN EXCESS OF ONE OWNER

The following person(s) is (are) doing business as:

\*1. COMMUNITY DISASTER PREPAREDNESS FOUNDATION 2. \_\_\_\_\_  
 \*\* 616 CABRILLO VILLAS  
 Street address of principal place of business Mailing address if different  
 Los Angeles CA 90042 LA COUNTY Los Angeles  
 City State /Country Zip COUNTY City State /Country Zip

Articles of Incorporation or Organization Number (if applicable): AI #ON 3903114

\*\*\*REGISTERED OWNER(S):

<p>1. MONTEREY HILLS FOUNDATION        Full Name/Corp/LLC (P.O. Box not accepted)        616 CABRILLO VILLAS        Residence Address        LOS ANGELES CA 90042        City State/Country Zip        CA        If Corporation or LLC - Print State of Incorporation/Organization</p>	<p>2. _____        Full Name/Corp/LLC (P.O. Box not accepted)        Residence Address        City State/Country Zip        If Corporation or LLC - Print State of Incorporation/Organization</p>
<p>3. _____        Full Name/Corp/LLC (P.O. Box not accepted)        Residence Address        City State/Country Zip        If Corporation or LLC - Print State of Incorporation/Organization</p>	<p>4. _____        Full Name/Corp/LLC (P.O. Box not accepted)        Residence Address        City State/Country Zip        If Corporation or LLC - Print State of Incorporation/Organization</p>

IF MORE THAN FOUR REGISTRANTS, ATTACH ADDITIONAL SHEET SHOWING OWNER INFORMATION

\*\*\*\*THIS BUSINESS IS CONDUCTED BY: (Check one)

- an Individual  a General Partnership  a Limited Partnership  a Limited Liability Company
- an Unincorporated Association other than a Partnership  a Corporation  a Trust  Copartners
- a Married Couple  Joint Venture  State or Local Registered Domestic Partners  a Limited Liability Partnership

\*\*\*\*\*The date registrant started to transact business under the fictitious business name or names listed above: N/A  
(Insert N/A above if you haven't started to transact business)

I declare that all information in this statement is true and correct.  
(A registrant who declares as true any material matter pursuant to Section 17913 of the Business and Professions Code that the registrant knows to be false is guilty of a misdemeanor punishable by a fine not to exceed one thousand dollars (\$1,000).)

REGISTRANT(S)/CORP/LLCNAME (PRINT) MONTEREY HILLS FOUNDATION TITLE President  
REGISTRANT SIGNATURE \_\_\_\_\_ IF CORP OR LLC, PRINT NAME PATRICK BOTZ-FORBES

If corporation, also print corporate title of officer. If LLC, also print title of officer or manager.

This statement was filed with the County Clerk of LOS ANGELES on the date indicated by the filed stamp in the upper right corner

NOTICE - IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION. EFFECTIVE JANUARY 1, 2014, THE FICTITIOUS BUSINESS NAME STATEMENT MUST BE ACCOMPANIED BY THE AFFIDAVIT OF IDENTITY FORM.

THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE).

I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.

DEAN C. LOGAN, LOS ANGELES COUNTY CLERK

BY: ESTRELLIETA POLICARPIO, Deputy

