Monthly Expenditure Report

Reporting Month: March 2020 **Budget Fiscal Year: 2019-2020**

NC Name: Coastal San Pedro Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance	**Total Spent**	**Remaining Balance**	**Outstanding**	**Commitments**	**Net Available**
$36210.02	$8201.25	$28008.77	$9050.00	$1100.00	$17858.77

Monthly Cash Flow Analysis					
Budget Category	**Adopted Budget**	**Total Spent this Month**	**Unspent Budget Balance**	**Outstanding**	**Net Available**
Office	$31579.78	$2201.25	$19008.77	$300.00	$17958.77
Outreach		$0.00		$750.00	
Elections		$0.00		$0.00	
Community Improvement Project	$0.00	$0.00	$0.00	$0.00	$0.00
Neighborhood Purpose Grants	$15000.00	$6000.00	$9000.00	$8000.00	$1000.00
Funding Requests Under Review: $0.00		Encumbrances: $1100.00		Previous Expenditures: $10369.76	

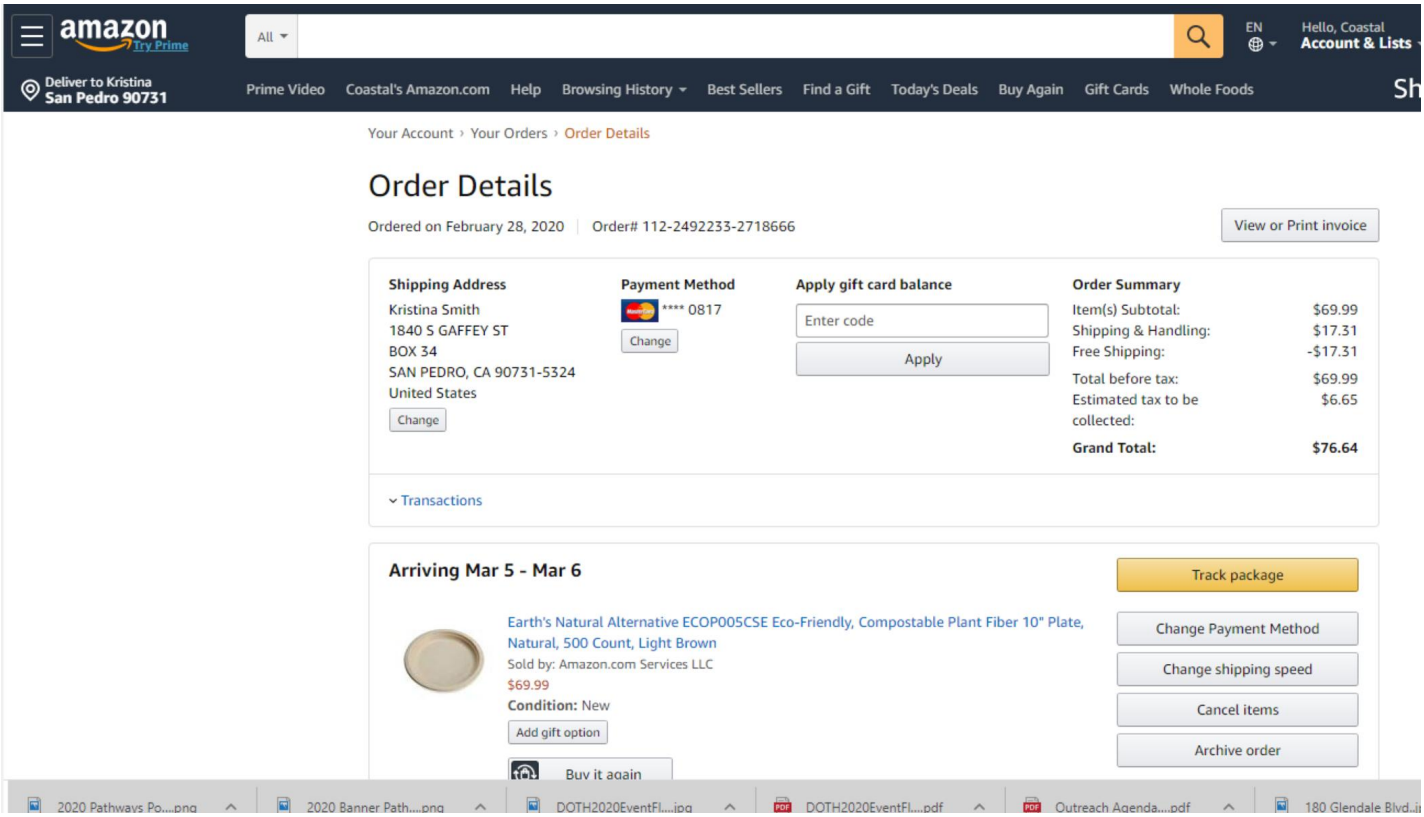
Expenditures						
#	**Vendor**	**Date**	**Description**	**Budget Category**	**Sub-category**	**Total**
1	Amazon.com BW51K55W3	03/03/2020	(Credit card transaction)	General Operations Expenditure	Office	$76.64
2	AMZN Mktp US 4L6LP5MQ3	03/03/2020	(Credit card transaction)	General Operations Expenditure	Office	$55.17
3	AMZN Mktp US FN3W07PH3	03/04/2020	(Credit card transaction)	General Operations Expenditure	Office	$350.39
4	IN THE MAILROOM	03/08/2020	(Credit card transaction)	General Operations Expenditure	Office	$295.00
5	APPLEONE EMPLOYMENT SV	03/11/2020	(Credit card transaction)	General Operations Expenditure	Office	$173.25
6	APPLEONE EMPLOYMENT SV	03/11/2020	(Credit card transaction)	General Operations Expenditure	Office	$161.70
7	LLOYD STAFFING INC	03/26/2020	(Credit card transaction)	General Operations Expenditure	Office	$1000.00
8	LLOYD STAFFING INC	03/31/2020	(Credit card transaction)	General Operations Expenditure	Office	$89.10

9	Marine Mammal Care Center	02/25/2020	Resolved, the Coastal San Pedro Neighborhood Council allocates and authorizes the expenditure of $5,000 to support the Marine Mammal Care Center	Neighborhood Purpose Grants		$5000.00
10	Angels Gate Cultural Center	03/19/2020	Resolved, the Coastal San Pedro Neighborhood Council shall provide $1,000 for Neighborhood Purpose Grant from Angels Gate Cultural Center	Neighborhood Purpose Grants		$1000.00
	Subtotal:					**$8201.25**

Outstanding Expenditures						
#	**Vendor**	**Date**	**Description**	**Budget Category**	**Sub-category**	**Total**
1	Rotary Club of San Pedro	02/14/2020	Resolved, the Coastal San Pedro Neighborhood Council allocates and authorizes the expenditure of $750 to be paid to the San Pedro Rotary Club for a sponsorship fee for the Ninth Annual &I...	General Operations Expenditure	Outreach	$750.00
2	Angels Gate Cultural Center	03/02/2020	APPROVAL OF MONTHLY EXPENSES, INCLUDING APPROVAL OF TREASURER'S PAYMENT OF ALL RECURRING NEIGHBORHOOD COUNCIL EXPENSES INCLUDING (BUT NOT LIMITED TO) LLOYD STAFFING, THE MAILRO...	General Operations Expenditure	Office	$300.00
3	San Pedro Art Association	03/19/2020	Resolved, the Coastal San Pedro Neighborhood Council shall provide $500 for Neighborhood Purpose Grant from San Pedro Art Association	Neighborhood Purpose Grants		$500.00
4	FEED AND BE FED	03/19/2020	Resolved, the Coastal San Pedro Neighborhood Council shall provide $1,100 for Neighborhood Purpose Grant from Feed and be Fed	Neighborhood Purpose Grants		$1100.00
5	INTERNATIONAL BIRD RESCUE	03/19/2020	Resolved, the Coastal San Pedro Neighborhood Council shall provide $1,100 for Neighborhood Purpose Grant from International Bird Rescue	Neighborhood Purpose Grants		$1100.00
6	POINT FERMIN ELEMENTARY PARENT TEACHER ORGANIZATION	03/20/2020	Resolved, the Coastal San Pedro Neighborhood Council shall provide $1,100 for Neighborhood Purpose Grant from Point Fermin Elementary School PTO	Neighborhood Purpose Grants		$1100.00
7	The Literacy Club	03/24/2020	Resolved, the Coastal San Pedro Neighborhood Council shall provide $1,100 for Neighborhood Purpose Grant from The Literacy Club	Neighborhood Purpose Grants		$1100.00

8	SAN PEDRO FILM FESTIVAL	03/24/2020	Resolved, the Coastal San Pedro Neighborhood Council shall provide $1,000 for Neighborhood Purpose Grant from San Pedro Film Festival	Neighborhood Purpose Grants		$1000.00
9	White Point Elementary School Parent Faculty Organization	03/24/2020	Resolved, the Coastal San Pedro Neighborhood Council shall provide $1,100 for Neighborhood Purpose Grant from White Point Elementary PFO	Neighborhood Purpose Grants		$1100.00
10	FRIENDS OF THE LA MARITIME MUSEUM	04/01/2020	Resolved, the Coastal San Pedro Neighborhood Council shall provide $1,000 for Neighborhood Purpose Grant from Friends of the Los Angeles Maritime Museum	Neighborhood Purpose Grants		$1000.00
	Subtotal: Outstanding					**$9050.00**

Receipts:


amazon
Try Prime
All
EN
Hello, Coastal
Account & Lists
Deliver to Kristina
San Pedro 90731
Prime Video
Coastal's Amazon.com
Help
Browsing History
Best Sellers
Find a Gift
Today's Deals
Buy Again
Gift Cards
Whole Foods
Your Account › Your Orders › Order Details
Order Details
Ordered on February 28, 2020
Order# 112-2492233-2718666
View or Print invoice
Shipping Address
Kristina Smith
1840 S GAFFEY ST
BOX 34
SAN PEDRO, CA 90731-5324
United States
Change
Payment Method
**** 0817
Change
Apply gift card balance
Enter code
Apply
Order Summary
Item(s) Subtotal: $69.99
Shipping & Handling: $17.31
Free Shipping: -$17.31
Total before tax: $69.99
Estimated tax to be collected: $6.65
Grand Total: $76.64
Transactions
Arriving Mar 5 - Mar 6
Track package
Earth's Natural Alternative ECOP005CSE Eco-Friendly, Compostable Plant Fiber 10" Plate, Natural, 500 Count, Light Brown
Sold by: Amazon.com Services LLC
$69.99
Condition: New
Add gift option
Buy it again
Change Payment Method
Change shipping speed
Cancel items
Archive order
2020 Pathways Po....png
2020 Banner Path....png
DOTH2020EventFl....jpg
DOTH2020EventFl....pdf
Outreach Agenda....pdf
180 Glendale Blvd..i

amazon.com

Final Details for Order #112-7844170-5891449

Print this page for your records.

Order Placed: February 25, 2020
Amazon.com order number: 112-7844170-5891449
Order Total: $405.56

Shipped on February 28, 2020

Items Ordered	Price
1 of: *AmazonBasics Multipurpose Copy Printer Paper - White, 8.5 x 11 Inches, 8 Ream Case (4,000 Sheets)* Sold by: Amazon.com Services LLC Condition: New	$26.39

Shipping Address:
Kristina Smith
1840 S GAFFEY ST
BOX 34
SAN PEDRO, CA 90731-5324
United States

Shipping Speed:
FREE Shipping

Shipped on February 25, 2020

Items Ordered	Price
1 of: *E-Z Ink (TM) Compatible Ink Bottle Replacement for Epson 502 T502 High Yield to use with ET-2760,ET-3710,ET-2750,ET-3700,ET-4760,ET-3750,ET-3760,ET-2700 Printer(Black, Cyan, Magenta, Yellow, 4 Pack* Sold by: Effectrust (seller profile) Condition: New	$23.99

Shipping Address:
Kristina Smith
1840 S GAFFEY ST
BOX 34
SAN PEDRO, CA 90731-5324
United States

Shipping Speed:
FREE Shipping

Shipped on March 3, 2020

Items Ordered	Price
1 of: *Epson EcoTank ET-3710 Wireless Color All-in-One Cartridge-Free Supertank Printer with Scanner, Copier and Ethernet, Regular, White* Sold by: Amazon.com Services LLC Condition: New	$319.99

Shipping Address:
Kristina Smith
1840 S GAFFEY ST
BOX 34
SAN PEDRO, CA 90731-5324
United States

Shipping Speed:
FREE Shipping

Payment information

Payment Method:
MasterCard | Last digits: 0817

Billing address
Coastal San Pedro Neighborhood Council
200 N Spring Street
Los Angeles, CA 90012
United States

Item(s) Subtotal:	$370.37
Shipping & Handling:	$32.50
Free Shipping:	-$32.50

Total before tax:	$370.37
Estimated tax to be collected:	$35.19

Grand Total:	**$405.56**

Credit Card transactions

MasterCard ending in 0817: March 4, 2020: $350.39
MasterCard ending in 0817: March 3, 2020: $55.17

To view the status of your order, return to Order Summary.

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amazon.com

Final Details for Order #112-7844170-5891449

Print this page for your records.

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1840 S GAFFEY ST
BOX 34
SAN PEDRO, CA 90731-5324
United States

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FREE Shipping

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Payment information

Payment Method:
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Billing address
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Los Angeles, CA 90012
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To view the status of your order, return to Order Summary.

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INVOICE

Invoice #: 0908-CSPNC
Invoice Date: Mar 7, 2020
Reference: FEB 2020 SERVICES
Due date: Mar 17, 2020

Amount due:
$295.00

The Mailroom-Virtual Office Services

Attn: Kristina Smith
1840 S Gaffey St
Suite 102
San Pedro, CA 90731
United States

Phone: 310-918-8650
ksmith-mailroom@mail.com
City of Los Angeles BTRC# 0000109027-0001-9

Bill To:

Coastal San Pedro Neighborhood Council

l.dominguez@yahoo.com

Description	Quantity	Price	Amount
FEBRUARY 2020 Services VIRTUAL OFFICE SERVICES: Includes printing and assembly of agenda packets for monthly meeting, printing of committee reports, agendas & meeting support documents requested by committee chairs; and physical posting of notices at Mailroom. Also includes telephone answering service. Flat monthly rate $125.	1	$125.00	$125.00
MONTHLY WEBSITE SERVICES FEB 2020 Uploading and general maintenance of website files including announcement of upcoming meetings and events, posting of agendas/minutes and other related files. Flat monthly rate of $50.	1	$50.00	$50.00
MONTHLY STORAGE FEES. FEB 2020 Storage fees for storing sound equipment, file cabinet w/files, current printer, old outdated printer & sorter, paper goods, canopy, banners, etc.	1	$50.00	$50.00
SOCIAL MEDIA/EMAIL BLAST MONTHLY FEE FEB 2020: Emails sent through Constant Contact to stakeholder list announcing upcoming committee meetings and monthly meetings. Also includes posting of meetings on CSPNC Facebook page.	1	$25.00	$25.00

Constant Contact - FEB 2020

Constant Contact Service @ $45 per month. Paid by Mailroom due to CSPNC purchase card on file no longer being valid.	1	$45.00	$45.00

Subtotal	$295.00
Discount ($0.00)	$0.00
Shipping	$0.00
Total	**$295.00 USD**

THE MAILROOM

1840 S. GAFFEY STREET
SUITE 102
SAN PEDRO, CA 90731
3105141797

03/07/2020 - 16:25 PST

Sale

Total	$295.00
MasterCard	...0817
Name on Card	
Auth Code	093675
Trans ID	PH0015974777
Merchant No	...3929

Thank you for your business!

Customer copy

FW: Visa/Mastercard Charge Confirmation

From: Doug Epperhart (epperhart@cox.net)

To: sakerblom@yahoo.com

Date: Tuesday, March 17, 2020, 1:31 PM PDT

This is all I have from AppleOne

From: no-reply-erp@mail.all-in-1.com <no-reply-erp@mail.all-in-1.com>
Sent: Tuesday, March 10, 2020 2:52 PM
To: epperhart@cox.net
Subject: Visa/Mastercard Charge Confirmation

From: Appleone Employment Svc

The following authorized payment transactions have been received from your credit card on file:

No	Trans Date	Reference No	Card No	Transaction Description	Amount
1	03/10/2020	VM0037EH0	0817	Invoice S8157227	$173.25
2	03/10/2020	VM0037EJ0	0817	Invoice S8117536	$161.70

AppleOne

AppleOne Employment
P.O. Box 29048
Glendale CA 91209-9048
Tel: 818-240-8688
Email:
TIN 95-2580864

City of LA- COASTAL SAN PEDRO NC

Accounts Payable

Room 2005
Los Angeles, CA 90012

Invoice

Customer 00950101
Site No: 0049
Period 12/21/2019
Invoice No: S8117536
Amount Due: $161.70
Payment NET 30 DAYS

Contract #	Requestor	Location	Name	Weekend	Invoice Date	Reg Hrs	Reg Rate	OT Hrs	OT Rate	Misc Hrs	Misc Rate	Amount
C-132956	Epprehart, Doug	Coastal San Pedro Nc	Akerblom, Sheryl	12/21/2019	12/25/2019	7.00	$23.10	0.00	$0.00	0.00	$0.00	$161.70
Sub Total For:	**S8117536**					**7.00**		**0.00**		**0.00**		**$161.70**
Grand Total Invoice Amount						**7.00**		**0.00**		**0.00**		**$161.70**

Please remit payment to:
Appleone Employment Services
P.O. Box 29048
Glendale, CA 91209-9048

You can now pay electronically through
ApplePay
Visit www.ApplePay.com or Call (866)898-7152 for details

AppleOne
AppleOne Employment Services

City Of LA - DONE -

Invoice	S8117536	Line 1	177602	XH70508619

Web TimeCard

Imaged on 12/23/2019

Client Name: City of LA- Coastal San Pedro NC (009501010049)
Employee Name: Akerblom, Sheryl
Serial Number: XH70508619

Week Ending: 12/21/2019

Day	Date	IN	OUT	Lunch	Total	Reg	Over	Double
Mon	12/16/2019	6:00 PM	9:30 PM	0:00	3:30	3:30	0:00	0:00
Tue	12/17/2019	8:00 AM	11:30 AM	0:00	3:30	3:30	0:00	0:00
SubTotals					07:00	07:00	00:00	00:00

Submitted By: Sheryl Akerblom|sakerblom@yahoo.com on 12/17/2019
Preapproved By: <not available> on <not available>
Approved By: DOUG EPPERHART|207072 on 12/17/2019
Processed By: valeriaa on 12/23/2019

FW: Visa/Mastercard Charge Confirmation

From: Doug Epperhart (epperhart@cox.net)

To: sakerblom@yahoo.com

Date: Tuesday, March 17, 2020, 1:31 PM PDT

This is all I have from AppleOne

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2	03/10/2020	VM0037EJ0	0817	Invoice S8117536	$161.70

AppleOne

AppleOne Employment
P.O. Box 29048
Glendale CA 91209-9048
Tel: 818-240-8688
Email:
TIN 95-2580864

City of LA- COASTAL SAN PEDRO NC

Accounts Payable

Room 2005
Los Angeles, CA 90012

Invoice

Customer 00950101
Site No: 0049
Period 01/25/2020
Invoice No: S8157227
Amount Due: $173.25
Payment NET 30 DAYS

Contract #	Requestor	Location	Name	Weekend	Invoice Date	Reg Hrs	Reg Rate	OT Hrs	OT Rate	Misc Hrs	Misc Rate	Amount
C-132956	Epprehart, Doug	Coastal San Pedro Nc	Akerblom, Sheryl	01/25/2020	01/29/2020	7.50	$23.10	0.00	$0.00	0.00	$0.00	$173.25
Sub Total For:	**S8157227**					**7.50**		**0.00**		**0.00**		**$173.25**
Grand Total Invoice Amount						**7.50**		**0.00**		**0.00**		**$173.25**

Please remit payment to:
Appleone Employment Services
P.O. Box 29048
Glendale, CA 91209-9048

You can now pay electronically through
ApplePay
Visit www.ApplePay.com or Call (866)898-7152 for details

AppleOne
AppleOne Employment Services

City of Los Angeles

Invoice	S8157227	Line 1	177602	XI03021320

Web TimeCard

Imaged on 1/27/2020

Client Name: City of LA- Coastal San Pedro NC (009501010049)
Employee Name: Akerblom, Sheryl
Serial Number: XI03021320

Week Ending: 1/25/2020

Day	Date	IN	OUT	Lunch	Total	Reg	Over	Double
Tue	1/21/2020	6:00 PM	9:30 PM	0:00	3:30	3:30	0:00	0:00
Wed	1/22/2020	8:00 AM	12:00 PM	0:00	4:00	4:00	0:00	0:00
SubTotals					07:30	07:30	00:00	00:00

Submitted By: Sheryl Akerblom|sakerblom@yahoo.com on 1/24/2020
Preapproved By: <not available> on <not available>
Approved By: DOUG EPPERHART|207072 on 1/24/2020
Processed By: valeriaa on 1/27/2020

LLOYD STAFFING INC Transaction Receipt - Reference Number 312698695

From: LLOYD STAFFING INC (notifications@paytrace.com)

To: sakerblom@yahoo.com

Date: Thursday, April 2, 2020, 12:58 PM PDT

LLOYD STAFFING INC
445 BROADHOLLOW RD
MELVILLE, NY 11747
631-777-7600
3/26/2020 3:44:43 PM

Reference Number:	312698695
Total:	$1,000.00
Transaction Type:	Sale
Transaction Status:	Settled 407
Card Type:	MasterCard
Card Number:	xxxxxxxxxxxx0817
Entry Method:	Keyed
Approval Code:	098128
Approval Message:	APPROVAL
CSC Result:	Match
Customer Name:	Coastal San Pedro NC
Invoice:	410809,411013,413028,413124,413125

Thank You

INVOICE

You may pay by ACH/wire to:
Wells Fargo Bank, N.A.
Routing #: 121000248
Account #: 4060542594

Credit Cards Accepted

Please remit payment to:
LLoyd Staffing, Inc.
PO Box 780994
Philadelphia, PA 19178-0994
Billing inquiries: 631.370.7434

BILL TO:
Attention of: Louis Dominguez
Coastal San Pedro Neighborhood Council
1353 W 25th Street
Suite #223
San Pedro, CA 90732

PO#

Thank you for choosing Lloyd Staffing

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:
06/09/2019	410809	1	116950	Due Upon Receipt

PERIOD	DESCRIPTION & EMPLOYEE		HOURS	RATE	AMOUNT
06/03/19-06/09/19	TRANSCRIPT	Akerblom, Sheryl	8.00	27.95	$223.60

Thank you for your part in our Placements with a Purpose program. Every placement generated by LLoyd supports JDRF with a donation to help fight diabetes.

PAY THIS AMOUNT > **TOTAL** **$223.60**

Employee Timesheet Submission

Employee Name	Akerblom, Sheryl	Customer Name	Coastal San Pedro NC
Assignment Number	260715	Department	
Period Ending Date	6/9/2019 12:00:00 AM	Report To	Doug Epperhart
Timesheet Approved By	epperhart@cox.net	Timesheet Approved On	6/6/2019 4:19:03 PM

Date	IN 1	OUT 1	IN 2	OUT 2	IN 3	OUT 3	IN 4	OUT 4	Total Hours	Expenses	Pay Code	Approval
06/03/2019	08:00 AM	12:00 PM							4.00	0.00	R	APPROVED
06/05/2019	05:30 PM	09:30 PM							4.00	0.00	R	APPROVED
Totals									8.00	0.00		

Employee Comments	Wednesday, June 5, 2019 HANC meeting
Client Comments	

INVOICE

You may pay by ACH/wire to:
Wells Fargo Bank, N.A.
Routing #: 121000248
Account #: 4060542594

Credit Cards Accepted

Please remit payment to:
LLoyd Staffing, Inc.
PO Box 780994
Philadelphia, PA 19178-0994
Billing inquiries: 631.370.7434

Attention of: Louis Dominguez
BILL TO: Coastal San Pedro

Thank you for choosing Lloyd Staffing

PO#

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:
06/23/2019	411013	1	116950	Due Upon Receipt

PERIOD	DESCRIPTION & EMPLOYEE		HOURS	RATE	AMOUNT
06/17/19-06/23/19	BOOK	Akerblom, Sheryl	5.00	29.75	$148.75

Thank you for your part in our Placements with a Purpose program. Every placement generated by LLoyd supports JDRF with a donation to help fight diabetes.

PAY THIS AMOUNT > TOTAL **$148.75**

Employee Timesheet Submission

Employee Name	Akerblom, Sheryl	Customer Name	Coastal San Pedro NC
Assignment Number	260714	Department	Accounting and Finance
Period Ending Date	6/23/2019 12:00:00 AM	Report To	Doug Epperhart
Timesheet Approved By	epperhart@cox.net	Timesheet Approved On	6/18/2019 1:34:29 PM

Date	IN 1	OUT 1	IN 2	OUT 2	IN 3	OUT 3	IN 4	OUT 4	Total Hours	Expenses	Pay Code	Approval
06/17/2019	07:00 AM	12:00 PM							5.00	0.00	R	APPROVED
Totals									5.00	0.00		

Employee Comments	Bookkeeping for June 2 of 2
Client Comments	

INVOICE

Lloyd

Please remit payment to:
Lloyd Staffing, Inc.
PO Box 780994
Philadelphia, PA 19178-0994
Billing inquiries: 631.370.7434

You may pay by ACH/wire to:
Wells Fargo Bank, N.A.
Routing #: 121000248
Account #: 4060542594

Credit Cards Accepted

BILL TO:
Attention of: Louis Dominguez
Coastal San Pedro Neighborhood Council
1840 S. Gaffey Street, #3#
San Pedro, CA 90731

Thank you for choosing Lloyd Staffing

PO#

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:
11/17/2019	413028	1	116950	Due Upon Receipt

PERIOD	DESCRIPTION & EMPLOYEE		HOURS	RATE	AMOUNT
11/04/19-11/10/19	TRANSCRIPT	Akerblom, Sheryl	8.00	27.95	$223.60

Thank you for your part in our Placements with a Purpose program. Every placement generated by LLoyd supports JDRF with a donation to help fight diabetes.

PAY THIS AMOUNT > **TOTAL** **$223.60**

INVOICE

You may pay by ACH/wire to:
Wells Fargo Bank, N.A.
Routing #: 121000248
Account #: 4060542594

Credit Cards Accepted

Please remit payment to:
LLoyd Staffing, Inc.
PO Box 780994
Philadelphia, PA 19178-0994
Billing inquiries: 631.370.7434

BILL TO:
Attention of: Louis Dominguez
Coastal San Pedro Neighborhood Council
1840 S. Gaffey Street, #34
San Pedro, CA 90731

Thank you for choosing Lloyd Staffing

PO#

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:
11/24/2019	413124	1	116950	Due Upon Receipt

PERIOD	DESCRIPTION & EMPLOYEE		HOURS	RATE	AMOUNT
11/18/19-11/24/19	TRANSCRIPT	Akerblom, Sheryl	7.00	27.95	$195.65

Thank you for your part in our Placements with a Purpose program. Every placement generated by LLoyd supports JDRF with a donation to help fight diabetes.

PAY THIS AMOUNT > **TOTAL** **$195.65**

INVOICE

You may pay by ACH/wire to:
Wells Fargo Bank, N.A.
Routing #: 121000248
Account #: 4060542594

Credit Cards Accepted

Please remit payment to:
LLoyd Staffing, Inc.
PO Box 780994
Philadelphia, PA 19178-0994
Billing inquiries: **631.370.7434**

BILL TO:
Attention of: Louis Dominguez
COASTAL SAN PEDRO
1840 S. GAFFEY STREET, #34
SAN PEDRO, CA 90731

Thank you for choosing Lloyd Staffing

PO#

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:
11/24/2019	413125	1	116950	Due Upon Receipt

PERIOD	DESCRIPTION & EMPLOYEE		HOURS	RATE	AMOUNT
11/18/19-11/24/19	BOOK	Akerblom, Sheryl	10.00	29.75	$297.50

payments
3-26-20 ($1,000) $208.40 applied to this Invoice
3-31-20 $89.10 for balance due

Thank you for your part in our Placements with a Purpose program. Every placement generated by LLoyd supports JDRF with a donation to help fight diabetes.

PAY THIS AMOUNT > **TOTAL** **$297.50**

LLOYD STAFFING INC Transaction Receipt - Reference Number 313295329

From: LLOYD STAFFING INC (notifications@paytrace.com)

To: sakerblom@yahoo.com

Date: Monday, March 30, 2020, 7:01 PM PDT

LLOYD STAFFING INC
445 BROADHOLLOW RD
MELVILLE, NY 11747
631-777-7600
3/30/2020 9:59:04 PM

Reference Number:	313295329
Total:	$89.10
Transaction Type:	Sale
Transaction Status:	Pending Settlement
Card Type:	MasterCard
Card Number:	xxxxxxxxxxxx0817
Entry Method:	Keyed
Approval Code:	098841
Approval Message:	APPROVAL
CSC Result:	Unknown
Customer Name:	Coastal San Pedro NC
Invoice:	413125

Thank You

INVOICE

lloyd

Please remit payment to:
LLoyd Staffing, Inc.
PO Box 780994
Philadelphia, PA 19178-0994
Billing inquiries: **631.370.7434**

You may pay by ACH/wire to:
Wells Fargo Bank, N.A.
Routing #: 121000248
Account #: 4060542594

Credit Cards Accepted

BILL TO:
Attention of: Louis Dominguez
COASTAL SAN PEDRO
1840 S. GAFFEY STREET, #34
SAN PEDRO, CA 90731

Thank you for choosing Lloyd Staffing

PO#

DATE	INVOICE NO.	PAGE	ACCOUNT NO.	TERMS:
11/24/2019	413125	1	116950	Due Upon Receipt

PERIOD	DESCRIPTION & EMPLOYEE	HOURS	RATE	AMOUNT
11/18/19-11/24/19	BOOK Akerblom, Sheryl	10.00	29.75	$297.50

payments
3-26-20 ($1,000) $208.40 applied to this Invoice
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Thank you for your part in our Placements with a Purpose program. Every placement generated by LLoyd supports JDRF with a donation to help fight diabetes.

PAY THIS AMOUNT >

TOTAL **$297.50**

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: Coastal San Pedro

SECTION I- APPLICANT INFORMATION

1a) Marine Mammal Care Center | 47-5249182 | CA | 10/01/2015

Organization Name | *Federal I.D. # (EIN#)* | *State of Incorporation* | *Date of 501(c)(3) Status (if applicable)*

1b) 3601 S. Gaffey St.#8 | San Pedro | CA | 90731

Organization Mailing Address | *City* | *State* | *Zip Code*

1c) | | | |

Business Address (if different) | *City* | *State* | *Zip Code*

1d) ***PRIMARY CONTACT INFORMATION:***

Elizabeth Galowich | 310-989-2523 | EGalowich@marinemammalcare.org

Name | *Phone* | *Email*

2) **Type of Organization- Please select one:**

☐ Public School *(not to include private schools)* **Attach Signed letter on School Letterhead** **or** ☒ 501(c)(3) Non-Profit *(other than religious institutions)* **Attach IRS Determination Letter**

3) *Name / Address of Affiliated Organization (if applicable)* | *City* | *State* | *Zip Code*

SECTION II - PROJECT DESCRIPTION

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

To provide badly needed funding that will be used for the housing, care and feeding of injured and sick animals at Marine Mammal Care Center, San Pedro

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)**

Since 1992, MMCC has taken care of over 8,000 sick or injured marine mammals stranded on the beaches of Los Angeles County. The continued survival of MMCC is essential to provide sick and injured marine mammals the care needed to recover until they can be returned to their ocean homes. MMCC, which is open to the public, increases public awareness of ocean conservation and stewardship. MMCC provides a safe haven for sick or injured animals to recover away from the beach, thus assuring health and safety of the beach going public.

SECTION III - PROJECT BUDGET OUTLINE

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

6a)

Personnel Related Expenses	Requested of NC	Total Projected Cost
	$	$
	$	$
	$	$

6b)

Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
Equipment and utilities for animal habitat and medicine, food and hospital supplies for animal care	$ 5000	$ 209,000
	$	$
	$	$

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: $ 5000

10a) Start date: 02 / 01 / 20 **10b) Date Funds Required:** 02 / 17 / 20 **10c) Expected Completion Date:** 06 / 15 / 20
(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*

Amber Becerra	President	Amber Becerra Digitally signed by Amber Becerra Date: 2020.02.12 13:39:09 -08'00'	02/10/20
PRINT Name	*Title*	*Signature*	*Date*

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

Donna Dutcher	Secretary	Donna Dutcher Digitally signed by Donna Dutcher Date: 2020.02.12 13:39:24 -08'00'	02/10/20
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 for instructions on completing this form**

Office of the City Clerk

Administrative Services Division

Neighborhood Council (NC) Funding Program

Board Action Certification (BAC) Form

NC Name: COASTAL SAN PEDRO	**Meeting Date:** January 21, 2020
Budget Fiscal Year: 2019-2020	**Agenda Item No:** 20. Marine Mammal Care Center
Board Motion and/or Public Benefit Statement (CIP and NPG):	Resolved, the Coastal San Pedro Neighborhood Council allocates and authorizes the expenditure of $5,000 to support the Marine Mammal Care Center.
Method of Payment: (Select One)	■ Check ☐ Credit Card ☐ Board Member Reimbursement

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.

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	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Isiah Cade	At-Large				X		
Louis Dominguez	Treasurer	X					
Doug Epperhart	President	X					
Bob Gelfand	At-Large	X					
Noel Gould	At-Large	X					
Richard Havenick	At-Large	X					
Andrea Herman	At-Large	X					
Erika Hernandez	At-Large	X					
Daniel Kohn	At-Large				X		
John Kopczynski	At-Large	X					
Kathleen Martin	Secretary	X					
Kavitha Muthuswamy	At-Large				X		
Dean Pentcheff	Vice President				X		
Shannon Ross	At-Large				X		
Robin Rudisill	At-Large	X					
Jose Vargas	At-Large	X					
Greg Ellis	At-Large					X	
Board Quorum: 9	Total:	11	—	—	5	1	—

We, the authorized signers of the above named Neighborhood Council, declare that the information presented on this form is 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	Authorized Signature: D Epperhart
Print/Type Name: Louis Dominguez	Print/Type Name: Doug Epperhart
Date: January 21, 2020	Date: January 21, 2020

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: Coastal San Pedro Neighborhood Council

SECTION I- APPLICANT INFORMATION

1a) Angels Gate Cultural Center | 95-3688214 | CA | 7/26/1982
Organization Name | *Federal I.D. # (EIN#)* | *State of Incorporation* | *Date of 501(c)(3) Status (if applicable)*

1b) 3601 S. Gaffey St. Box 1 | San Pedro | CA | 90731
Organization Mailing Address | *City* | *State* | *Zip Code*

1c) 3601 S. Gaffey St. Building A | San Pedro | CA | 90731
Business Address (If different) | *City* | *State* | *Zip Code*

1d) *PRIMARY CONTACT INFORMATION:*

Amy Eriksen | (310) 5190-0936 | Amy@angelsgateart.org
Name | *Phone* | *Email*

2) **Type of Organization- Please select one:**

☐ Public School *(not to include private schools)* **Attach Signed letter on School Letterhead** or ■ 501(c)(3) Non-Profit *(other than religious institutions)* **Attach IRS Determination Letter**

3) *Name / Address of Affiliated Organization (if applicable)* | *City* | *State* | *Zip Code*

SECTION II - PROJECT DESCRIPTION

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

Angels Gate Cultural Center (AGCC) is requesting support from the Coastal San Pedro Neighborhood Council to benefit the improvement of our Building G classroom infrastructure, to include replacement of tables, protective covers, and chairs. The tables we currently have are riddled with deep cuts from use in art classes/workshops, resulting in uneven table top surfaces. Furthermore, some of the tables have faulty leg locking mechanisms as a result of years of use. Similarly, the chairs in our inventory are weathered, many of which have warped seats and are unbalanced when sat in.

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)**

AGCC hosts a variety of community classes, workshops, and rents the space for meetings held by local organizations, many of which are held in our Building G classroom. The space is routinely used for our Figure Drawing, Master Painting, Artful Minds (art class for ages 7-12) community classes, our monthly Family Art Workshops and our Bridging San Pedro free community art workshops. All classes and workshops are open to the public, and offered at low-cost in an effort to increase access to the arts in the LA Harbor region. AGCC regularly rents the classroom to local groups, including the Coastal San Pedro Neighborhood Council, to conduct meetings. With new tables and chairs AGCC will better serve our community as we will provide more adequate workspace for class, workshop and meeting participants.

SECTION III - PROJECT BUDGET OUTLINE

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

6a)

Personnel Related Expenses	Requested of NC	Total Projected Cost
	$	$
	$	$
	$	$

6b)

Non-Personnel Related Expenses	Requested of NC	Total Projected Cost
1 Set of 10 Resin Folding Tables	$619.48	$619.48
30 Folding Chairs	$340.50	$340.50
15 Yards of Protective Drop Cloth Fabric	$150	$150

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
Classroom Rentals	$109.98	$109.98
	$	$
	$	$

9) What is the TOTAL amount of the grant funding requested with this application: $1,000

10a) Start date: 03/01/20 10b) Date Funds Required: 03/01/20 10c) Expected Completion Date: 03/31/20
(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*

Amy Eriksen	Executive Director	[signature]	11/4/19
PRINT Name	*Title*	*Signature*	*Date*

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

Angela Romero	Board Secretary	[signature]	11/7/19
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 for instructions on completing this form

Office of the City Clerk

Administrative Services Division

Neighborhood Council (NC) Funding Program

Board Action Certification (BAC) Form

NC Name: COASTAL SAN PEDRO	Meeting Date: February 18, 2020
Budget Fiscal Year: 2019-2020	Agenda Item No: 8. NPGs
Board Motion and/or Public Benefit Statement (CIP and NPG):	Resolved, the Coastal San Pedro Neighborhood Council shall provide $1,000 for Neighborhood Purpose Grant from Angels Gate Cultural Center
Method of Payment: (Select One)	■ Check ☐ Credit Card ☐ Board Member Reimbursement

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	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
Isiah Cade	At-Large	X					
Louis Dominguez	Treasurer	X					
Greg Ellis	At-Large	X					
Doug Epperhart	President						X
Bob Gelfand	At-Large						X
Noel Gould	At-Large	X					
Richard Havenick	At-Large	X					
Andrea Herman	At-Large				X		
Erika Hernandez	At-Large	X					
Daniel Kohn	At-Large	X					
John Kopczynski	At-Large	X					
Kathleen Martin	Secretary	X					
Kavitha Muthuswamy	At-Large	X					
Dean Pentcheff	Vice President	X					
Shannon Ross	At-Large						X
Robin Rudisill	At-Large	X					
Jose Vargas	At-Large				X		
Board Quorum: 9	Total:	12	—	—	2	—	3

We, the authorized signers of the above named Neighborhood Council, declare that the information presented on this form is 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	Authorized Signature: D Epperhart
Print/Type Name: Louis Dominguez	Print/Type Name: Doug Epperhart
Date: February 18, 2020	Date: February 18, 2020