

# Monthly Expenditure Report



**Reporting Month: August 2023**

**Budget Fiscal Year: 2023-2024**

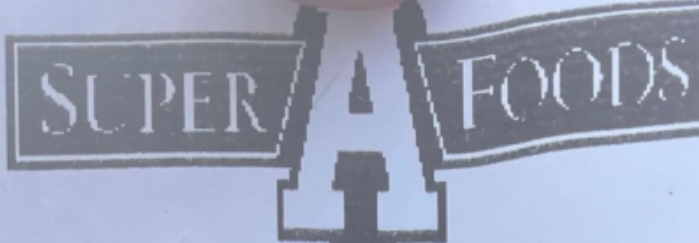
**NC Name: Greater Cypress Park  
Neighborhood Council**

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$38352.04	\$2619.91	\$35732.13	\$450.00	\$0.00	\$35282.13

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office	\$19000.00	\$1410.31	\$17113.83	\$450.00	\$16663.83
Outreach		\$209.60		\$0.00	
Elections		\$0.00		\$0.00	
Community Improvement Project	\$3000.00	\$0.00	\$3000.00	\$0.00	\$3000.00
Neighborhood Purpose Grants	\$10000.00	\$1000.00	\$9000.00	\$0.00	\$9000.00
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$266.26	

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	PARTNERS IN DIVERSITY	08/03/2023	Interpretation	General Operations Expenditure	Office	\$95.68
2	RESTAURANTE TIERRA CAL	08/07/2023	Meeting meal (note receipt image is two pages and includes tip)	General Operations Expenditure	Outreach	\$181.30
3	SUPER A FOODS NO.7	08/08/2023	Water and paper plates/utensils for meeting	General Operations Expenditure	Outreach	\$28.30
4	STORQUEST-LOS ANGEL	08/08/2023	storage	General Operations Expenditure	Office	\$270.75
5	WEB BLUEHOST.COM	08/30/2023	Webhosting	General Operations Expenditure	Office	\$143.88
6	Interpreters Unlimited	08/08/2023	Approval of 2023-24 Admin packet and budget.	General Operations Expenditure	Office	\$200.00
7	Interpreters Unlimited	08/08/2023	Approval of 2023-24 Admin packet and budget.	General Operations Expenditure	Office	\$250.00
8	Interpreters Unlimited	08/08/2023	Approval of 2023-24 Admin packet and budget.	General Operations Expenditure	Office	\$250.00





2925 Division St.  
Los Angeles, CA 90065  
(323) 222-3804 Mgr: Manny  
All Sales Final Until Further Notice

GROCERY

NIAGARA DRINKING WTR	3.59	F
CRV GROC 24PK	1.20	F

TAX GROCERY

CHINET LUNCH PLATE	9.99	T
SV NAPKINS	1.49	T
GLAD ASSORTED CUTLRY	9.99	T

SUB TOTAL	26.26
TOTAL TAX	2.04

BALANCE DUE	28.30
Master Card	28.30
Auth Code = 052373	

08/08/2023	16:11:05
MASTERCARD	Entry Method: Chip
CARD #:	XXXXXXXXXXXX5094
PURCHASE	- APPROVED
AUTH CODE:052373	

Mode:	Issuer
AID:	A0000000041010
TVR:	0000008000
IAD:	0110A0400122000000000000000000
000FF	
TSI: E800	ARC: 00
TC:	24E682E623384EA9
MID: 080620	RRN: 041557
TID: 001	

Total:	USD\$ 28.30
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CHANGE	0.00
--------	------

Total number of items sold = 5

CASHIER NAME: Maria  
STORE:05407 REGISTER:004 CASHIER:4704  
TICKET#:2921 8AUG2023 16:11:07

THANK YOU FOR SHOPPING AT  
SUPER A FOODS #7108



**PARTNERS IN DIVERSITY, INC.**  
A Small Business, Women Owned Enterprise

**Remit to: Partners In Diversity, Inc.**

P.O. Box 654

South Pasadena, CA 91031-0654

# INVOICE

**Invoice Amount**

**\$95.68**

**Payment Terms**

Due On Receipt

**Invoice Date**

07/24/2023

**Invoice No.**

40804

**Customer No.**

1971

Neighborhood Council-Greater Cypress Park

1150 Cypress Avenue

Los Angeles, CA 90065

Customer Name	Department	Customer No.	Payment Terms
Neighborhood Council-Greater Cypress Park	Corporate	1971	Due On Receipt

Description	Type	Units	Rate	Amount
<b>Week ending: 07/16/2023</b>				
POZO, MICHAEL A Minute Taker	Reg	3.27	\$29.26	\$95.68
Total This Week ending:				\$95.68

<b>Reg: 3.27 OT: 0 DT: 0</b>	<b>Total - This Invoice:</b>	<b>\$95.68</b>
------------------------------	------------------------------	----------------

Partners In Diversity, Inc. recruits and hires qualified candidates without regard to race, religion, color, sex, sexual orientation, age, national origin, ancestry, citizenship, veteran, or disability status, or any factor prohibited by law, and as such affirms in policy and practice to support and promote the concept of equal employment opportunity and affirmative action, in accordance with all applicable federal, state and municipal laws.

EmployeeName	CustomerName	DepartmentName	ApprovedDate	ApprovedBy	WeekEndDate	TransactionType	DateWorked	DayLabel	StartTime	BreakOut	BreakIn	EndTime	BillUnit	PayUnit	BreakHours
POZO, MICHAEL A	Neighborhood Council-Greater Cypress Park	Corporate	7/24/2023 12:44	Ash Kramer	7/16/2023	Reg	7/11/2023	Tuesday	19:00:00			20:46:00	1.77	1.77	0
POZO, MICHAEL A	Neighborhood Council-Greater Cypress Park	Corporate	7/24/2023 12:44	Ash Kramer	7/16/2023	Reg	7/16/2023	Sunday	20:00:00			21:30:00	1.5	1.5	0

PARTNERS IN DIVERSITY  
690 E GREEN ST STE 101  
PASADENA, CA 91101-2190  
626-793-0020

PARTNERS IN DIVERSITY

Date: 08/03/2023 01:41:48 PM

CREDIT CARD SALE

MASTERCARD  
CARD NUMBER: \*\*\*\*\*5094 K

TOTAL AMOUNT: \$95.68

APPROVAL CD: 084517  
RECORD #: 000  
CLERK ID: Officeassist1  
CUST CODE: 1971  
INVOICE #: 40804

Customer Copy



Tierra Caliente

Date: 8/7/23, 6:02 pm  
Card Type: MASTERCARD  
Acct #: XXXXXXXXXXXX5094  
Customer: ASHLEY C KRAMER  
Card Entry: DIPPED  
AID: A0000000041010  
Appl. Label: MASTERCARD  
Terminal ID: \*\*\*9879  
Merchant ID: \*\*\*9569  
IAD: 0110a040012200006963000000000000  
00ff  
TSI: c800  
ARC: 00  
TVR: 0000008000  
Auth Mode: Issuer  
Payment Net: MASTERCARD  
Auth Code: 023458  
Check: 1025  
To Go: Cypress park council  
Server: Jesse V.

Amount: \$153.30

+TIP

=TOTAL

Suggested Tips:

15% = \$21.00

18% = \$25.20

20% = \$28.00

I agree to pay the above total amount pursuant  
to the card issuer agreement.

X

Thank You!

Merchant Copy



Restaurante Tierra Caliente - Division

Check #: 1025

8/7/23

Server: Jesse V.

3:51pm

To Go: Cypress park council

20 Taco Asada (@\$2.00/ea)	\$40.00
20 Taco Chicken (@\$2.00/ea)	\$40.00
10 Taco Papa Mex (@\$2.00/ea)	\$20.00
2 Open Food (@\$20.00/ea)	\$40.00

Sub-total	\$140.00
Total Tax	\$13.30
TOTAL	\$153.30

Balance Due	\$153.30
-------------	----------

Suggested Tips:

15% = \$21.00

18% = \$25.20

20% = \$28.00

Thank You!

PAY FROM YOUR PHONE



Scan the QR code to pay your bill



1007 StorQuest - Los Angeles / Figueroa  
2222 North Figueroa  
Los Angeles, CA 90065

PAYMENT RECEIPT

Account Number:  
1003575944

Greater Cypress Park NC 1150 Cypress Ave Los Angeles, CA 90065 (213) 840-1980	RECEIPT ID	PAYMENT DATE	CHANGE DUE	AMOUNT
	637122947	8/8/2023	\$0.00	\$270.75

Invoice	Item	Qty	Rate	Discount	Subtotal	Tax	Total	Paid
#29434	XERCOR-1 Xercor Insurance Services LLC - \$3,000.00 (7/29/2023 - 8/28/2023)		\$12.00		\$12.00	\$0.00	\$12.00	\$12.00
#29434	Unit #1151 Rent Unit 1151 - 4x10x0 (7/29/2023 - 8/28/2023)		\$225.00		\$225.00	\$0.00	\$225.00	\$225.00
#29434- FC1	LATE_FEE_1 Late Fee 1		\$33.75		\$33.75	\$0.00	\$33.75	\$33.75
							Total Paid	
Aug 08, 2023 10:39 AM      Mastercard ****5094							\$270.75	

Unit #1151 paid through 8/28/2023  
.....

If you have any past due amounts for your storage unit(s), those balances will appear below.



Ash Kramer &lt;ashleyckramer@gmail.com&gt;

---

## BLUEHOST ORDER COMPLETE

---

noreply@bluehost.com <noreply@bluehost.com>  
To: ash.gcpnc@gmail.com

Wed, Aug 30, 2023 at 6:25 PM

Your Bluehost order has been confirmed.

[Account Login](#)

### Payment Confirmation

Thank you again for choosing Bluehost. Our best-in-class solutions are designed to meet all of your online needs.

Your payment has been confirmed and you're all set to go. Log in to your account [here](#).

#### Receipt Details

Invoice Number: 77132720

Date: 31 August 2023

---

#### Billing Information

Ashley Kramer

GCPNC

[200 N Spring Street Suite 224](#)[Los Angeles, CA 90012](#)

---

#### Payment Details

Payment Method: MC 5094

Status: Authorized

Transaction Type: MC ending in 5094

### Billing Information

Ashley Kramer

GCPNC

[200 N Spring Street Suite 224](#)[Los Angeles, CA 90012](#)

### Payment Details

Payment Method: MC 5094

Status: Authorized

Transaction Type: MC ending in 5094

## Receipt Details

Invoice Number: 77132720

Date: 31 August 2023

Description	Domain	Term	Expiration	Price
Basic	<a href="#">cypressparknc.com</a>	12 months	15 August 2024	\$143.88

### Basic

Domain [cypressparknc.com](#)

Term 12 months

Expiration 15 August 2024

Price \$143.88

---

Subtotal: \$143.88

Total: \$143.88

**All plans and products automatically renew approximately 15 days before the expiration unless you cancel.** The renewal will be for the same term length and at the [regular rates](#) reflected in your Control Panel under [My Account](#). The payment method you provide today, or we have on file, will be used for renewals, unless you change it or cancel. You may cancel at any time by calling customer support at 888-401-4678 or by [logging into your account](#). Please note, if you purchased a Microsoft product, additional [Microsoft terms](#) apply.

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## Interpreters Unlimited, Inc.

City of Los Angeles - Office of the City Clerk  
200 North Spring Street,  
Room 224,  
Los Angeles, CA, 90012

Invoice No: 344213

### INVOICE FOR PROFESSIONAL LANGUAGE SERVICES

Invoice Date: 2023-04-11  
Type: Onsite  
Interpreee: Neighborhood Council  
Language: Spanish  
Date Of Service: 2023-04-11 at 07:00 PM  
Event Number: E1191284  
Appt Type: Neighborhood Council Meeting  
Reference: SIMULTANEOUS  
Requested by: Ash Kramer  
Event Duration : 2 Hours 00 Minutes  
Location: Cypress Park Rec Center , 2630 Pepper St,  
Los Angeles, California, 90065  
Notes:  
Agreement # C-142350

Base \$ 200.00

Total: \$ 200.00

**Please include your invoice number with your payment.**

Visit [www.interpreters.com](http://www.interpreters.com) to make a payment.  
You can now schedule appointments online, please call to get your login information.

Interpreters Unlimited, Inc.

P.O. Box 27660, San Diego, CA 92198

Phone (800) 726-9891 | Fax (800) 726-9822 | [info@interpreters.com](mailto:info@interpreters.com) | [interpreters.com](http://interpreters.com)

FEIN 20-5905641



Approval of 2023-2024 Fiscal Year Administrative Packet, including budget.

☐ **Board Member Reimbursement**

**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
Carmen Morales	Chair				/		
Bryan Kramer	Vice Chair	/					
Ash Kramer	Treasurer	/					
Teresa Roman	At-Large				/		
Dolores Bernal	At-Large	/					
Mayra Duque	At-Large	/					
Brenda Wong	At-Large	/					
Julian Pina	At-Large				/		
Vacant	At-Large				/		
Board Quorum: 5	Total:	5	0	0	4	0	0

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.

Date: 7/25/23





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## Interpreters Unlimited, Inc.

City of Los Angeles - Office of the City Clerk  
200 North Spring Street,  
Room 224,  
Los Angeles, CA, 90012

Invoice No: 351364

### INVOICE FOR PROFESSIONAL LANGUAGE SERVICES

Invoice Date: 2023-06-13  
Type: Onsite  
Interpree: Neighborhood Council  
Language: Spanish  
Date Of Service: 2023-06-13 at 07:00 PM  
Event Number: E1196336  
Appt Type: Cypress Park Neighborhood Council  
Requested by: Ash Kramer  
Event Duration : 2 Hours 30 Minutes  
Location: Cypress Park Rec Center , 2630 Pepper St,  
Los Angeles, California, 90065

Notes:

Agreement # C-142350

Base \$ 250.00

Total: \$ 250.00

**Please include your invoice number with your payment.**

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Carmen Morales	Chair				/		
Bryan Kramer	Vice Chair	/					
Ash Kramer	Treasurer	/					
Teresa Roman	At-Large				/		
Dolores Bernal	At-Large	/					
Mayra Duque	At-Large	/					
Brenda Wong	At-Large	/					
Julian Pina	At-Large				/		
Vacant	At-Large				/		
<b>Board Quorum: 5</b>	<b>Total:</b>	5	0	0	4	0	0

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**Authorized Signature:**

Print/Type Name:

Date: 7/25/23



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## Interpreters Unlimited, Inc.

City of Los Angeles - Office of the City Clerk  
200 North Spring Street,  
Room 224,  
Los Angeles, CA, 90012

Invoice No: 354299

### INVOICE FOR PROFESSIONAL LANGUAGE SERVICES

Invoice Date: 2023-07-11  
Type: Onsite  
Interpree: Neighborhood Council  
Language: Spanish  
Date Of Service: 2023-07-11 at 07:00 PM  
Event Number: E1196335  
Appt Type: Cypress Park Neighborhood Council  
Requested by: Ash Kramer  
Event Duration : 2 Hours 30 Minutes  
Location: Cypress Park Rec Center , 2630 Pepper St,  
Los Angeles, California, 90065

#### Notes:

Agreement # C-142350

Base \$ 250.00

Total: \$ 250.00

**Please include your invoice number with your payment.**

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FEIN 20-5905641





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Date: 7/25/23



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## Interpreters Unlimited, Inc.

City of Los Angeles - Office of the City Clerk  
200 North Spring Street,  
Room 224,  
Los Angeles, CA, 90012

Invoice No: 355650

### INVOICE FOR PROFESSIONAL LANGUAGE SERVICES

Invoice Date: 2023-07-25  
Type: Onsite  
Interpretee: Greater Cypress Park Neighborhood Council  
Language: Spanish  
Date Of Service: 2023-07-25 at 07:00 PM  
Event Number: E1205044  
Appt Type: Greater Cypress Park Neighborhood Council  
Requested by: Ash Kramer  
Event Outcome: Late Cancellation  
Location: Cypress Park Branch Library, 1150 Cypress Ave,  
Los Angeles, California, 90065

Notes:

Agreement # C-142350

Base \$ 200.00

Total: \$ 200.00

**Please include your invoice number with your payment.**

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Dolores Bernal	At-Large	/					
Mayra Duque	At-Large	/					
Brenda Wong	At-Large	/					
Julian Pina	At-Large				/		
Vacant	At-Large				/		
Board Quorum: 5	Total:	5	0	0	4	0	0

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Authorized Signature Ash Kramer

**Authorized Signature:**

Print/Type Name: 7-25-23

Print/Type Name: Pradeep

Date:

Date: 7/25/23



# 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: \_\_\_\_\_

### SECTION I - APPLICANT INFORMATION

1a) \_\_\_\_\_  
*Organization Name*                      *Federal I.D. # (EIN#)*      *State of Incorporation*      *Date of 501(c)(3) Status (if applicable)*

1b) \_\_\_\_\_  
*Organization Mailing Address*                      *City*                      *State*                      *Zip Code*

1c) \_\_\_\_\_  
*Business Address (If different)*                      *City*                      *State*                      *Zip Code*

1d) **PRIMARY CONTACT INFORMATION:**

\_\_\_\_\_ *Name*                      *Phone*                      *Email*

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

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

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)

**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>
		\$	\$
		\$	\$
		\$	\$

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:

<b>Source of Funding</b>	<b>Amount</b>	<b>Total Projected Cost</b>
	\$	\$
	\$	\$
	\$	\$

9) What is the TOTAL amount of the grant funding requested with this application: \$ \_\_\_\_\_

10a) Start date: \_\_\_\_/\_\_\_\_/\_\_\_\_ 10b) Date Funds Required: \_\_\_\_/\_\_\_\_/\_\_\_\_ 10c) Expected Completion Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(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:

<b>Name of NC Board Member</b>	<b>Relationship to Applicant</b>

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\*

\_\_\_\_\_  
**PRINT Name**                      **Title**                      **Signature**                      **Date**

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

\_\_\_\_\_  
**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



**Department of the Treasury**  
**Internal Revenue Service**  
**Tax Exempt and Government Entities**  
P.O. Box 2508  
Cincinnati, OH 45201

COYOTL MACEHUALLI  
155 S EL MOLINO AVENUE SUITE 104  
PASADENA, CA 91101

**Date:**  
08/06/2021  
**Employer ID number:**  
86-3195962  
**Person to contact:**  
Name: Customer Service  
ID number: 31954  
Telephone: (877) 829-5500  
**Accounting period ending:**  
December 31  
**Public charity status:**  
170(b)(1)(A)(vi)  
**Form 990 / 990-EZ / 990-N required:**  
Yes  
**Effective date of exemption:**  
March 12, 2020  
**Contribution deductibility:**  
Yes  
**Addendum applies:**  
No  
**DLN:**  
26053513001811

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.

Sincerely,

Stephen A. Martin  
Director, Exempt Organizations  
Rulings and Agreements

