De	partment of Neighborhoo	od Empowerme	nt						A A
	porting Month:		AUGUST		_	PENDITURE REPORT	EMP	OWER LA	
	Name:		VENICE		Submitted:	9/6/2016 16:59:00	Department	of	
Bu	dget Fiscal Year:	2016-2017					NEIGHBO	RHOOD EMPOWERMENT	
FII	I IN ALL THE LINSHADE	D (WHITE) FIEL	DS (Must has	submitted to the Dens	ertment within 10 day	s of Board Approval along	with documents	tion and hard con	
7 72						tinue entering on page 3 o			y /
A	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / D	ESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
1	Smart & Final	166251	14121	07-29-2016-Supplies-BE	3Q	CIP			\$4.1
2	Smart & Final	167105	14121	07-30-2016-Supplies-BE	3Q	CIP			\$59.7
3	I Power	126823724		07-31-2016-Web Hostin	g	OUTREACH	7		\$20.0
4	I Power	130240150]	08-07-2016-Web hosting	9	OUTREACH	7		\$20.0
5	Office Depot	044589]	08-08-2016-Copies-Ad (Com	OPERATIONS			\$8.2
6	Apple One	S3689831]	08-08-2016-Staff Servic	es	OPERATIONS			\$180.0
7	Constant Contact	147098363]	08-12-2016-E-mail servi	ce	OUTREACH	7		\$60.0
8	Fed-Ex	1015949860]	08-16-2016-Copies-Boa	rd meeting	OPERATIONS			\$49.8
9	Fed-Ex	1015949864		08-16-2016-Copies-Boa	rd meeting	OPERATIONS			\$13.8
10	Extra Space Storage	1002893567]	08-20-2016-Storage fee		OPERATIONS			\$158.0
11	United Site Services	114-4323473	14121	08-24-2016-Toilets-BBC	1	CIP	✓		\$383.7
12	Abbot Kinney District	2795-3837]	08-26-2016-Outreach ta	ble-Abbot Kinney Fest	OUTREACH			\$275.0
	SUBTOTAL: Expenditures	by Line Item (Ma	y include totals	on page 3, if entered)					\$1,232.7
В	CUMULATIVE EXPENDITU	IRES FROM PRIO	R MONTHS (CL	JRRENT FISCAL YR)					\$1,985.4
С	OUTSTANDING COMMITM	IENTS (OBLIGATI	IONS)						
1									
2	!								
3									
4									
5									
6									
7									
8									
9									
10			1						
-10	SUBTOTAL: Outstanding (Commitments (In	cludes total on	nage 3)		<u> </u>			\$0.00
D	Total Expenditures & Com		Clades total off	page 0)					\$3,218.18
_	Total Adjustments (such a		ssed, prior fisca	al years items, etc) (use	'-' for credits, '+' for de	ductions)			\$0.00
F	Approved Budget 2016-20	17							\$37,000.00

\$33,781.82

G Balance of Budget 2016-2017
Revision Date 08/09/16

Reporting Month:	AUGUST
NC Name:	VENICE

MONTHLY CASH RECONCILIATION							
Beginning Balance (A)	Funds Deposited (B)	Total Available (C) = (A+B)	Cash Spent this Month (D)	Remaining Balance (E) = C - D			
\$7,264.56	\$0.00	\$7,264.56	\$1,232.74	\$6,031.82			

	MONTHLY CASH FLOW ANALYSIS							
Category Identifier	Budget Category	Adopted Budget (A)	Total Spent this Month (B)	FY 2015-16 Expenses Cleared in FY 2016-17 (C)	Total Spent in Prior Months (D)	Unspent Budget Balance (E) = A - B - D		
100	Operations	\$7,050.00	\$410.05	\$0.00	\$336.92	\$6,303.03		
200	Outreach	\$14,950.00	\$375.00	\$0.00	\$637.40	\$13,937.60		
300	Community Improvement	\$15,000.00	\$447.69	\$0.00	\$1,011.12	\$13,541.19		
400	NPG		\$0.00	\$0.00		\$0.00		
500	Elections		\$0.00	\$0.00		\$0.00		
	TOTAL	\$37,000.00	\$1,232.74	\$0.00	\$1,985.44	\$33,781.82		

	NEIGHBORHOOD COUNCIL DECLARATION								
We, the Treasurer and	We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and will furn								
	additional documentation to the Department of Neighborhood Empowerment upon request.								
Treasurer Signature		Signer's Signature							
Print Name		Print Name							
Date		Date							
NC Additional Comments									

Revision Date 08/09/16

Reporting Month: AUGUST	
NC Name: VENICE	

		Α	ADDITIONAL EX	XPENDITURES BY LINE ITEM (Optional, do	not print page 3 unless	you use it)		
A	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / DESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								ļ
30								
31								
32								
33								ļ
34								ļ
35								
36								
SI	UBTOTAL: Expenditures by	y Line Item						\$0.0

Reporting Month:	AUGUST
NC Name:	VENICE

		ADDITION	NAL OUTSTAN	DING COMMITTMENTS BY LINE ITEM (Opt	ional, do not print page	3 unless you use it)		
A	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / DESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
11								
12								
3								
4								
15								
16								
17								
8								
9								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								
32								
3								
34								
SI	JBTOTAL: Expenditures b	y Line Item						\$0

Revision Date 08/09/16