## Monthly Expenditure Report



**Reporting Month: November 2024** 

Budget Fiscal Year: 2024-2025

NC Name: Bel Air-Beverly Crest Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance         Total Spent         Remaining Balance         Outstanding         Commitments         Net Availa					Net Available
\$34272.18	\$3337.18	\$30935.00	\$0.00	\$0.00	\$30935.00

Monthly Cash Flow Analysis						
Budget Category	udget Category Adopted Budget Total Spent this Month Unspent Budget Outstandin					
Office		\$3337.18		\$0.00		
Outreach	\$43927.74	\$0.00	\$30935.00	\$0.00	\$30935.00	
Elections		\$0.00		\$0.00		
Community Improvement Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Neighborhood Purpose Grants	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Funding Requests Under Review: \$0.00		Encumbrar	nces: \$0.00	Previous Expend	litures: \$9655.56	

Expenditures							
#	Vendor	Date	Description	Budget Category	Sub-category	Total	
1	GOOGLE GSUITE_BABCNC.	11/01/2024	Google GSuite 11-01-2024 Receipt & Invoice	General Operations Expenditure	Office	\$257.99	
2	THE WEB CORNER, INC.	11/01/2024	The Web Corner, Inc. Invoice/Receipt 11-1-2024 Bel Air-Beverly Crest NC.pdf	General Operations Expenditure	Office	\$199.00	
3	ADOBE ADOBE	11/23/2024	Adobe Adobe Receipt/ Invoice 11-23-2024.pdf	General Operations Expenditure	Office	\$12.99	
4	APPLEONE EMPLOYMENT SERVICES	11/05/2024	Board Administrator Services for the period of 9/16/2024 - 10/25/2024 Invoice Number: 01-6965759, 01-6974036, 01-6979822	General Operations Expenditure	Office	\$2867.20	
	Subtotal:		•	·		\$3337.18	

Outstanding Expenditures						
#	#         Vendor         Date         Description         Budget Category         Sub-category					
Subtotal: Outstanding						\$0.00

# Google<sup>®</sup> Invoice

Invoice number: 5097352776

## Bill to

Robert Ringler Bel Air Beverly Crest Neighborhood Council PO Box 252007 Los Angeles, CA 90025 United States

Details		Google Workspace			
Invoice number	5097352776				
Invoice date	Oct 31, 2024	Total in USD	\$257.99		
Billing ID	7677-2853-5183		+		
Domain namebabcnc.org		Summary for Oct 1, 2024 - Oct 31, 2024			
		Subtotal in USD	\$257.99		
		Tax (0%)	\$0.00		
		Total in USD	\$257.99		

You will be automatically charged for any amount due.

## Google LLC

1600 Amphitheatre Pkwy Mountain View, CA 94043 United States Federal Tax ID: 77-0493581

Subscription	Description	Interval	Quantity	Amount(\$)
Google Workspace Business Starter	Commitment	Oct 1 - Oct 31	43	257.99
	Sub	ototal in USD		\$257.99
	Тах	(0%)		\$0.00
	Tota	al in USD		\$257.99

**Need help understanding the charges on your invoice?** <u>Click here for detailed explanations</u> https://support.google.com/a?p=gsuite-bills-and-charges



Google LLC 1600 Amphitheatre Pkwy Mountain View, CA 94043 United States

Tax identification number 77-0493581

Bel Air Beverly Crest Neighborhood Council Robert Ringler PO Box 252007 Los Angeles, CA 90025 United States

# **Payment Receipt**

Payment date Billing ID Payment method Payment number Nov 1, 2024 7677-2853-5183 Mastercard ••••9582 P16hy7kr

Description	
Payment amount	\$257.99

## The Web Corner, Inc.

Invoice

15300 Ventura Blvd. Suite 400 Sherman Oaks, CA 91403 818-345-7443			Date	Invoice #	Terms
	<b>P</b>		<b>0</b> 1/1/2024	27639	Due on Receipt
Bill To	<u>م</u>	Shi	р То		
Bel Air-Beverly Crest NC					

QTY	Description		Price Each	Amount
1	November 2024 Mc 1.5 hours for; phone requests, & website November 2024 Mc	November 2024 Monthly Maintenance: includes up to 1.5 hours for; phone support, web development, requests, & website adjustments November 2024 Monthly Hosting for babcnc.org (included in Maintenance)		0.00
Thank you for y	your business			
		Total	Total	
		Payments/Credits		-\$199.00
		Balance Due	Balance Due	

Adobe

Adobe Inc. 345 Park Avenue San Jose CA 95110-2704 United States Federal Tax ID: 77-0019522

ORIGINAL

#### **Invoice Information**

Invoice Number	2938188776
Invoice Date	23-NOV-2024
Payment Terms	Credit Card
Purchase Order	HB01682205199CUS
Order Number	7087078124
Customer Number	556539695
Currency	USD

#### Bill To

Robert Ringler CA 90012

# INVOICE

Item Details							
Service Term: 23-N	OV-2024 to 22-DEC-2024						
PRODUCT NUMBER	PRODUCT DESCRIPTION	QUANTITY UNIT	UNIT PRICE	NET AMOUNT	TAX RATE	TAXES	TOTAL
65230474	Acrobat Standard	1 EA	12.99	12.99	0.00%	0.00	12.99

## Invoice Total

NET AMOUNT (USD)	12.99
TAXES (SEE DETAILS FOR RATES)	0.00

GRAND TOTAL (USD)

Comments:

**Billing Contact** 

https://helpx.adobe.com/contact.html

12.99

## Transaction qbe8fvjx

## **Merchant Information**

Merchant	Adobe Inc.
Transaction Information	

Туре	Sale
Amount	\$12.99 USD
Transaction Date	Nov 23 2024, 06:59 AM PST
Tax Exempt	yes
Purchase Order Number	BL2938188776
Order ID	BL2938188776
Approval Code	042789
Status	Settled

## **Payment Information**

Payment Type	Credit Card
Transaction Origin	E-Commerce
Card Type	MasterCard
Cardholder Name	Robert Ringler
Credit Card Number	***********9582

## **Customer Information**

Name	Robert Ringler
Email	council@babcnc.org
Phone	3233047444
Billing Address	Robert Ringler Adobe

Adobe 90012 United States of America

# Invoice



P.O. Box 29048 Glendale CA 91209-9048 818-240-8688 TIN: 95-2580864 Bill To City of LA Done Bel Air-Beverly Crest NC Travis Longcore PO Box 252007 W Los Angeles CA 90025

Purchase OrderNot SpecifiedDepartmentNot Specified

Custon	ner - Site	Invoice Date	Invoice Number	Office		Page		Amount
0095010	01 - 0111	10/09/2024	01-6965759	1002 Downtown	L.A.	1		\$1,536.00
Employee Name		Line Job Description	Weekend Charge	Unit	Rate	Sales Tax	State	Total
Palmer, Catherine	ł	3 Telecommuter	09/21/2024 STD	20.00	25.60	0.00		\$512.00
SB Code :	SB Value :							
CNTRT	C-132956							
Palmer, Catherine	!	2 Telecommuter	09/28/2024 STD	20.00	25.60	0.00		\$512.00
SB Code :	SB Value :							
CNTRT	C-132956							
Palmer, Catherine	!	1 Telecommuter	10/05/2024 STD	20.00	25.60	0.00		\$512.00
SB Code :	SB Value :							

CNTRT C-132956

PAYMENT DUE UPON RECEIPT OF THIS INVOICE.

Unpaid balance 45 days from invoice date shall be subject to a service charge of 1.5% per month (18% per annum). We impose a 2.9% surcharge on most credit card transactions, which is not greater than our cost of acceptance. A surcharge will not be applied to any ACH or debit card transaction. The parties' executed agreement may include terms that prevail over conflicting terms on this invoice.

IF YOU HAVE QUESTIONS ABOUT THIS INVOICE, PLEASE CALL YOUR REPRESENTATIVE AT 213-892-0234

Please detach at the dotted line and return bottom portion with your payment. Thank you.



Remit To: AppleOne Employment Services Accounts Receivable P.O. Box 29048 Glendale CA 91209-9048

## Remittance Copy

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#### Visit www.ApplePay.com or Call (866) 898-7152 for details

Customer #	Customer # Invoice Date Invo		Office	Amount	Amount Paid
00950101 - 0111	10/09/2024	01-6965759	1002 Downtown L.A.	\$1,536.00	

Bill To: City of LA Done Bel Air-Beverly Crest NC Travis Longcore PO Box 252007 W Los Angeles CA 90025

#### 10/09/2024 08:06:01 PM Invoice 01-6965759

nvoice	01-6965759	Line 1	Pal	mer, Cathe	rine					XU258353	324
Web Timecar	d	Em	ployee Name:	Palmer, C	atherine			Week Endin	ig: 10/5/20	024	
Client Name: C	ity of LA Done Bel Air-	Beverly Cre	st NC		Serial no	: XU258353	324	Imaged on:	10/7/2024		
	Date	Time In	Time Out	Lu	Inch	Reg	ular	Overti	me	Doub	le Time
Monday, Se	eptember 30, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Monday Total:	Regular:	4 hour(s) 0 m	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Monday I	Meal Break:	0 hr 0 min								
Tuesday,	October 1, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Tuesday Total:	Regular:	4 hour(s) 0 m	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Tuesday I	Meal Break:	0 hr 0 min								2525
Wednesday	, October 2, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Wednesday Total:	Regular:	4 hour(s) 0 m	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Wednesday I	Meal Break:	0 hr 0 min								
Thursday,	October 3, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Thursday Total:	Regular:	4 hour(s) 0 m	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Thursday I	Meal Break:	0 hr 0 min								
Friday, (	October 4, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Friday Total:	Regular:	4 hour(s) 0 m	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Friday I	Meal Break:	0 hr 0 min								
			W	ork Total:	Regular:	20 hour	0 min	OT: 0 hour	0 min	DT: 0 hou	r 0 min
Submitted: Cath	nerine Palmer cathypal	merx7@gm	ail.com on 10/	06/2024		A	pproved:	Travis Longco	ore 224933	on 10/06/2	024

Processed By: amandah on 10/07/2024

voice 01-6965759	Line 2	Pa	almer, Cathe	rine					XU258344	24
Web Timecard	En	nployee Name	: Palmer, C	atherine			Week Endin	ig: 9/28/20	024	
Client Name: City of LA Done Bel A	r-Beverly Cr	est NC		Serial no	: XU258344	124	Imaged on:	10/7/2024		
Date	Time In	Time Out	t Lu	Inch	Reg	ular	Overti	ime	Doub	le Time
Monday, September 23, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
Monday Total	: Regular:	4 hour(s) 0	minute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
Monday	Meal Break:	0 hr 0 min								
Tuesday, September 24, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
Tuesday Total	: Regular:	4 hour(s) 0	minute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
Tuesday	Meal Break:	0 hr 0 min								
Wednesday, September 25, 2024	6:00 PM	10:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
Wednesday Total	: Regular:	4 hour(s) 0	minute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
Wednesday	Meal Break:	0 hr 0 min								
Thursday, September 26, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
Thursday Total	: Regular:	4 hour(s) 0	minute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
Thursday	Meal Break:	0 hr 0 min								
Friday, September 27, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
Friday Tota	: Regular:	4 hour(s) 0	minute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
Friday	Meal Break:	0 hr 0 min								
		1	Work Total:	Regular:	20 hour	0 min	OT: 0 hour	0 min	DT: 0 hour	r 0 min
Submitted: Catherine Palmer(cathyp	almerx7@gm	ail.com on 10	/06/2024		A	pproved: 1	Fravis Longco	ore 224933	3 on 10/06/2	024

Processed By: amandah on 10/07/2024

#### 10/09/2024 08:06:01 PM Invoice 01-6965759

pice 01	1-6965759	Line 3	Palr	ner, Cathe	rine					XU258335	624
Veb Timecard		Em	ployee Name: I	Palmer, C	atherine			Week Endin	g: 9/21/2	024	
Client Name: City o	of LA Done Bel Air-	Beverly Cre	st NC		Serial no	XU258335	24	Imaged on:	10/7/2024		
Da	te	Time In	Time Out	Lu	Inch	Reg	ular	Overti	me	Doub	le Time
Monday, Septe	mber 16, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Monday Total:	Regular:	4 hour(s) 0 m	inute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Monday M	Meal Break:	0 hr 0 min								
Tuesday, Septe	ember 17, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Tuesday Total:	Regular:	4 hour(s) 0 m	inute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Tuesday M	leal Break:	0 hr 0 min								
Wednesday, Sep	tember 18, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
8	Wednesday Total:	Regular:	4 hour(s) 0 m	inute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Wednesday M	leal Break:	0 hr 0 min								
Thursday, Sept	ember 19, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Thursday Total:	Regular:	4 hour(s) 0 m	inute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Thursday I	leal Break:	0 hr 0 min								
Friday, Septer	mber 20, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Friday Total:	Regular:	4 hour(s) 0 m	inute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Friday I	leal Break:	0 hr 0 min								
			W	ork Total:	Regular:	20 hour	0 min	OT: 0 hour	0 min	DT: 0 hou	r 0 min
uhmitted: Catheri	ne Palmericathypal	merx7@am	ail.com on 10/0	6/2024		A	pproved: 1	Fravis Longco	rel224933	on 10/06/2	024

Submitted: Catherine Palmer|cathypalmerx7@gmail.com on 10/06/2024 Approved: Travis Longcore|224933 on 10/06/202
Processed By: amandah on 10/07/2024

# Invoice



P.O. Box 29048 Glendale CA 91209-9048 818-240-8688 TIN: 95-2580864 Bill To City of LA Done Bel Air-Beverly Crest NC Travis Longcore PO Box 252007 W Los Angeles CA 90025

Purchase OrderNot SpecifiedDepartmentNot Specified

Customer - Site	Invoice Date	Invoice Number	Office	Page		Amount
00950101 - 0111	10/23/2024	01-6974036	1002 Downtown L.A.	1		\$512.00
Employee Name	Line Job Description	Weekend Char	ge Unit Rate	Sales Tax	State	Total
Palmer, Catherine	1 Telecommuter	10/19/2024 STD	20.00 25.60	0.00		\$512.00

SB Code :	SB Value :
CNTRT	C-132956

PAYMENT DUE UPON RECEIPT OF THIS INVOICE.

Unpaid balance 45 days from invoice date shall be subject to a service charge of 1.5% per month (18% per annum).

We impose a 2.9% surcharge on most credit card transactions, which is not greater than our cost of acceptance. A surcharge will not be applied to any ACH or debit card transaction. The parties' executed agreement may include terms that prevail over conflicting terms on this invoice.

IF YOU HAVE QUESTIONS ABOUT THIS INVOICE, PLEASE CALL YOUR REPRESENTATIVE AT 213-892-0234

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Customer #	Invoice Date	Invoice Number	Office	Amount	Amount Paid
00950101 - 0111	10/23/2024	01-6974036	1002 Downtown L.A.	\$512.00	

Bill To: City of LA Done Bel Air-Beverly Crest NC Travis Longcore PO Box 252007 W Los Angeles CA 90025

#### 10/23/2024 08:26:55 PM Invoice 01-6974036

voice	01-6974036	Line 1	Pal	mer, Cathe						XU350234	24
Veb Timecar			ployee Name:					Week Endir	0/19/		
	The Lat			i anner, or					-		
Client Name: C	ity of LA Done Bel Air-	-				: XU350234		Imaged on:			
	Date	Time In	Time Out	Lu	Inch	Reg	ular	Overti	me	Doub	le Time
Monday, C	October 14, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min _
	Monday Total:	Regular:	4 hour(s) 0 n	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Monday I	Meal Break:	0 hr 0 min								-
Tuesday, (	October 15, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Tuesday Total:	Regular:	4 hour(s) 0 n	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Tuesday I	Meal Break:	0 hr 0 min								2022
Wednesday	, October 16, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Wednesday Total:	Regular:	4 hour(s) 0 n	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Wednesday I	Meal Break:	0 hr 0 min								
Thursday,	October 17, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Thursday Total:	Regular:	4 hour(s) 0 n	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Thursday I	Meal Break:	0 hr 0 min								
Friday, O	ctober 18, 2024	9:00 AM	1:00 PM	0 hr	0 min	4 hr	0 min	0 hr	0 min	0 hr	0 min
	Friday Total:	Regular:	4 hour(s) 0 n	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Friday I	Meal Break:	0 hr 0 min								
			N	ork Total:	Regular:	20 hour	0 min	OT: 0 hour	0 min	DT: 0 hou	r 0 min
ubmitted: Cath	nerine Palmer cathypal	merx7@gm	ail.com on 10/	21/2024		A	pproved:	Travis Longco	ore 224933	on 10/21/2	024

Processed By: amandah on 10/21/2024

# Invoice



P.O. Box 29048 Glendale CA 91209-9048 818-240-8688 TIN: 95-2580864 Bill To City of LA Done Bel Air-Beverly Crest NC Travis Longcore PO Box 252007 W Los Angeles CA 90025

Purchase OrderNot SpecifiedDepartmentNot Specified

Customer - Site		Invoice Date	Invoice Number		Office		Page		Amount
00950101 - 0111		11/01/2024	01-6979822		1002 Downtowr	n L.A.	1		\$819.20
Employee Name	Line	Job Description	Weekend	Charge	Unit	Rate	Sales Tax	State	Total
Palmer, Catherine	2	Telecommuter	10/12/2024	STD	17.00	25.60	0.00		\$435.20
SB Code : SB Valu	e :								
CNTRT C-13295	6								
Palmer, Catherine	1	Telecommuter	10/26/2024	STD	15.00	25.60	0.00		\$384.00
SB Code : SB Valu	e :								
CNTRT C-13295	6								

PAYMENT DUE UPON RECEIPT OF THIS INVOICE.

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Customer #	Invoice Date	Invoice Number	Office	Amount	Amount Paid
00950101 - 0111	11/01/2024	01-6979822	1002 Downtown L.A.	\$819.20	

Bill To: City of LA Done Bel Air-Beverly Crest NC Travis Longcore PO Box 252007 W Los Angeles CA 90025

#### 10/30/2024 08:12:05 PM Invoice 01-6979822

voice	01-6979822	Line 1	Paln	ner, Cathe	rine					XU403865	524
Neb Time	card	Em	ployee Name: F	Palmer, C	atherine			Week Endin	ig: 10/26/2	2024	
Client Name	e: City of LA Done Bel Air-	Beverly Cre	st NC		Serial no	: XU40386	524	Imaged on:	10/29/202	4	
	Date	Time In	Time Out	Lu	Inch	Reg	ular	Overti	me	Doub	le Time
Monda	ay, October 21, 2024	9:00 AM	12:30 PM	0 hr	0 min	3 hr	30 min	0 hr	0 min	0 hr	0 min
	Monday Total:	Regular:	3 hour(s) 30 n	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Monday I	Meal Break:	0 hr 0 min								
Tuesda	ay, October 22, 2024	9:00 AM	12:30 PM	0 hr	0 min	3 hr	30 min	0 hr	0 min	0 hr	0 min
	Tuesday Total:	Regular:	3 hour(s) 30 n	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Tuesday I	Meal Break:	0 hr 0 min								835
Wednes	day, October 23, 2024	7:00 PM	10:00 PM	0 hr	0 min	3 hr	0 min	0 hr	0 min	0 hr	0 min
	Wednesday Total:	Regular:	3 hour(s) 0 mi	inute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Wednesday I	Meal Break:	0 hr 0 min								
Thursd	lay, October 24, 2024	9:00 AM	11:30 AM	0 hr	0 min	2 hr	30 min	0 hr	0 min	0 hr	0 min
	Thursday Total:	Regular:	2 hour(s) 30 n	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Thursday I	Meal Break:	0 hr 0 min								
Frida	y, October 25, 2024	9:00 AM	11:30 AM	0 hr	0 min	2 hr	30 min	0 hr	0 min	0 hr	0 min
	Friday Total:	Regular:	2 hour(s) 30 n	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Friday I	Meal Break:	0 hr 0 min								
			We	ork Total:	Regular:	15 hour	0 min	OT: 0 hour	0 min	DT: 0 hou	r 0 min
ubmitted: (	Catherine Palmer cathypal	merx7@qm	ail.com on 10/2	9/2024		A	pproved: 1	Fravis Longco	re 224933	on 10/29/2	024

Processed By: amandah on 10/29/2024

voice	01-6979822	Line 2	Pa	Imer, Cathe	rine					XU4038292	24
Web Timed	ard	En	ployee Name:	Palmer, C	atherine			Week Endin	ig: 10/12/2	2024	
Client Name:	City of LA Done Bel Air-	Beverly Cre	est NC		Serial no	: XU403829	24	Imaged on:	10/29/202	4	
	Date	Time In	Time Out	Lu	Inch	Reg	ular	Overti	ime	Doub	le Time
Monda	y, October 7, 2024	9:00 AM	12:30 PM	0 hr	0 min	3 hr	30 min	0 hr	0 min	0 hr	0 min
	Monday Total:	Regular:	3 hour(s) 30	minute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Monday I	Meal Break:	0 hr 0 min								
Tuesda	ay, October 8, 2024	6:30 PM	9:30 PM	0 hr	0 min	3 hr	0 min	0 hr	0 min	0 hr	0 min
	Tuesday Total:	Regular:	3 hour(s) 0 m	ninute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Tuesday I	Meal Break:	0 hr 0 min								
Wednesd	day, October 9, 2024	9:00 AM	12:30 PM	0 hr	0 min	3 hr	30 min	0 hr	0 min	0 hr	0 min
	Wednesday Total:	Regular:	3 hour(s) 30	minute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Wednesday I	Meal Break:	0 hr 0 min								
Thursda	ay, October 10, 2024	9:00 AM	12:30 PM	0 hr	0 min	3 hr	30 min	0 hr	0 min	0 hr	0 min
	Thursday Total:	Regular:	3 hour(s) 30	minute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Thursday I	Meal Break:	0 hr 0 min								
Friday	, October 11, 2024	9:00 AM	12:30 PM	0 hr	0 min	3 hr	30 min	0 hr	0 min	0 hr	0 min
	Friday Total:	Regular:	3 hour(s) 30	minute(s)		OT:	0 hour(s)	0 minute(s)	DT:	0 hour(s)	0 minute(s)
	Friday I	Meal Break:	0 hr 0 min								
			v	Vork Total:	Regular:	17 hour	0 min	OT: 0 hour	0 min	DT: 0 hour	r 0 min
Submitted: C	atherine Palmer cathypal	merx7@gm	ail.com on 10/	29/2024		A	pproved: 1	Fravis Longco	ore 224933	on 10/29/20	024

Processed By: amandah on 10/29/2024

Office of the City Clerk							
Administrative Services Division						. So souther	STOS ANOT
Neighborhood Council (NC) Funding Progr	am					eix o	
Board Action Certification (BAC) Form						Chy Ch	ADADED THE
NC Name:			Meeting Date:				
Budget Fiscal Year:			Agenda Item No	0:			
Board Motion and/or Public Benefit							
Statement (CIP and NPG):							
Method of Payment: (Select One)	Check		Credit Card		🗆 Board	d Member Reimb	ursement
		Vot	e Count				
Recused Board Members	s must leave the room pri	or to any discus	sion and may no	t return to the ro	oom until after t	he vote is compl	ete.
Board Member's First and Last Name	<b>Board Position</b>	Yes	No	Abstain	Absent	Ineligible	Recused
			1			1	
							7
						1	
Board Quorum:	Total:						
We, the authorized signers of the above r meeting was held in accordance with all l meeting where a quorum of the Board was	aws, policies, and proced						
Authorized Signature			Authorized Sign	ature:			
Print/Type Name:			Print/Type Nam	e:			
Date:			Date:				

Office of the City Clerk
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Administrative Services Division

Neighborhood Council (NC) Funding Program

**Board Action Certification (BAC) Form** 

