NEIGHBORHOOD COUNCIL FUNDING PROGRAM

REQUEST FOR DEMAND WARRANT

EMPOWER LA Department of NEIGHBORHOOD EMPOWERMENT

DW

Submit via: *Mail: 200 N. Spring St., LA, CA 90012; Fax : (213) 978-1751; or Email: done.funding@lacity.org www.empowerla.org*

REQUEST DATE: 8/29/2013 ***Check Request Amount:*** $ 500.00

NEIGHBORHOOD COUNCIL: Downtown Los Angeles Neighborhood Council

NC MAILING ADDRESS: 453 S Spring Street Suite 1020 **CITY** Los Angeles **ZIP** 90013

Please select a category. Refer to the checklist for the required supporting documents.

OPERATIONS	OUTREACH	NBHD Improvement	GRANT	OTHER
❑ AUD ❑ OFF	❑ ADV ❑ MEE	❑ Beautification Project Type:	■ 501(c)3 Non-Profit	❑ Board Member Reimbursement
❑ EDU ❑ POS	❑ ELE ❑ NEW			❑ Transfer to City Dept.
❑ FAC ❑ TAC	❑ EVE ❑ WEB	❑ Capital Project Facility:	❑ Public School	❑ NC Joint Payment
❑ MIS ❑ TRL	_____ # Attended			*NC 1:*
❑ Other	❑ Other	❑ Other		*NC 2:*

CHECKLIST OF REQUIRED DOCUMENTS:

❑ Invoice #_____ ❑ W-9 Form ❑ Business Tax Registration Certificate

❑ Artwork/Flyer ❑ Other

For NPG's only: ■ NPG ❑ Official School Letter ■ IRS Determination Letter

For Board Member Reimbursements only: ❑ Original Receipts ❑ Copy of Cancelled Check / Bank Statement

Please complete the information below for the payee:

Make check payable to: Melya Kaplan - Voice for the Animals

Remittance Address: 2633 Lincoln Blvd #202

Santa Monia *City* | CA *State* | 90405-4656 *Zip Code*

BOARD BENEFIT STATEMENT - Description and Purpose of Expenditure:

This organization is working to eradicate ringworm disease in stray kittens in the downtown Los Angeles area. Ringworm is transferrable to humans.

BOARD APPROVAL ❑ Budget Line Item (provide date of budget approval and vote count)

DECLARATION

We, the authorized signatories of the Neighborhood Council listed above, under penalty of perjury, declare that a Brown Act noticed public meeting was held with a quorum of the board present and the expenditure detailed on this demand warrant was approved as an official action of the governing board. We further declare that: (1) the undersigned are authorized to make this request, (2) this funding request is exclusively intended for the Neighborhood Council named above, (3) all reasonable precautions shall be exercised by the undersigned to safeguard and account for use of the funds, and (4) the amount of the check requested will be deducted from the total available balance in my Neighborhood Council Funding Program account.

Date of Board Action: ____ / ____ / ____ **Board Vote:** ____ yes ____ no ____ abstentions

Treasurer and 2nd Signatory signatures are required.

Treasurer Signature: _____ 2nd Signatory Signature: _____

Print Name: _____ Print Name: _____

Phone: _____ Phone: _____

DEPARTMENT USE ONLY

Vendor Code | APPR Acct. # | Approval Signature | Date

Approval Signature | Date

revised 01/16/13