



FILL IN ALL THE UNSHADED (WHITE) FIELDS (Must be submitted to the Department within 10 days of Board Approval along with documentation and hard copy)
EXPENDITURES BY LINE ITEM (for more than 12 expenditures, you may continue entering on page 3 of this worksheet - see below)

A	VENDOR	INVOICE NUMBER	APPROVAL CODE	DATE / DESCRIPTION	BUDGET CATEGORY	OUT OF STATE VENDOR	1099 Reportable	TOTAL
1	CTC Constant Contact	Auto Online Bill Pay		10/3 / Monthly Webmail Dues	OUTREACH			\$40.00
2	Public Storage	Auto Online Bill Pay		10/3 / Monthly Storage Fees	OPERATIONS			\$137.00
3	Dominos Pizza	P-Card		10/4 / Council - Board Meeting - Food	OUTREACH			\$141.31
4	Brownstone Bistro	P-Card		10/12 / M.A.D. Mixer - Food & Bev	OUTREACH			\$1,635.08
5	Intuit/Quickbooks	Auto Online Bill Pay		10/17 / Monthly Online Bookkeeping Software Dues	OPERATIONS			\$30.00
6	Amazon	P-Card		10/19 / Council - Office Supplies - Printer Ink	OPERATIONS			\$267.90
7	USPS	Auto Online Bill Pay		10/24 / Quarterly P.O. Box Dues	OPERATIONS			\$200.00
8	CTC Constant Contact	Auto Online Bill Pay		10/27 / Monthly Webmail Dues	OUTREACH			\$40.00
9	Ralphs	P-Card		10/26 / Reimb. (B. Strong) - Board Meeting - Bev	OUTREACH			\$6.15
10	Party Unlimited	P-Card		10/27 / M.A.D. Mixer - Balloons	OUTREACH			\$45.84
11	Angel Maid Bakery	P-Card		10/27 / M.A.D. Mixer - Cake	OUTREACH			\$98.00
12	Moore Business Results	Online Bill Pay/OPNC 2016 1001		10/28 / Monthly Web Maintenance	OUTREACH			\$275.74
SUBTOTAL: Expenditures by Line Item (May include totals on page 3, if entered)								\$3,052.16
B CUMULATIVE EXPENDITURES FROM PRIOR MONTHS (CURRENT FISCAL YR)								\$5,152.71
C OUTSTANDING COMMITMENTS (OBLIGATIONS)								
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
SUBTOTAL: Outstanding Commitments (Includes total on page 3)								\$0.00
D Total Expenditures & Commitments								\$8,204.87
E Total Adjustments (such as use taxes assessed, prior fiscal years items, etc) (use '-' for credits, '+' for deductions)								\$0.00
F Approved Budget 2016-2017								\$37,000.00
G Balance of Budget 2016-2017								\$28,795.13

Reporting Month: **OCTOBER**
 NC Name: **Olympic Park**

MONTHLY CASH RECONCILIATION				
Beginning Balance (A)	Funds Deposited (B)	Total Available (C) = (A+B)	Cash Spent this Month (D)	Remaining Balance (E) = C - D
\$5,795.13	\$9,250.00	\$15,045.13	\$3,052.16	\$11,992.97

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	\$21,400.00	\$770.04	\$0.00	\$3,670.55	\$16,959.41
200	Outreach	\$8,100.00	\$2,282.12	\$0.00	\$1,482.16	\$4,335.72
300	Community Improvement	\$3,000.00	\$0.00	\$0.00		\$3,000.00
400	NPG	\$3,000.00	\$0.00	\$0.00		\$3,000.00
500	Elections	\$1,500.00	\$0.00	\$0.00		\$1,500.00
	TOTAL	\$37,000.00	\$3,052.16	\$0.00	\$5,152.71	\$28,795.13

NEIGHBORHOOD COUNCIL DECLARATION

We, the Treasurer and Signer of the above indicated Council, declare that the information presented on this form is accurate and complete, and will furnish additional documentation to the Department of Neighborhood Empowerment upon request.

Treasurer Signature		Signer's Signature	
Print Name	FAALANIGA T SMITH	Print Name	LAURA D RUDISON
Date		Date	

NC Additional Comments

Revision Date 08/09/16

Reporting Month: OCTOBER
 NC Name: Olympic Park

ADDITIONAL EXPENDITURES 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	Staples	P-Card		10/31 / Council - Office Supplies	OPERATIONS			\$135.14
14								
15								
16								
17								
18								
19								
20								
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22								
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33								
34								
35								
36								
SUBTOTAL: Expenditures by Line Item								\$135.14

Reporting Month: OCTOBER
 NC Name: Olympic Park

ADDITIONAL OUTSTANDING COMMITMENTS 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
11								
12								
13								
14								
15								
16								
17								
18								
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24								
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26								
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31								
32								
33								
34								
SUBTOTAL: Expenditures by Line Item								\$0.00

Revision Date 08/09/16

