

# Monthly Expenditure Report



Reporting Month: August 2025

Budget Fiscal Year: 2025-2026

NC Name: Olympic Park  
Neighborhood Council

Monthly Cash Reconciliation					
Beginning Balance	Total Spent	Remaining Balance	Outstanding	Commitments	Net Available
\$24557.00	\$1703.49	\$22853.51	\$515.64	\$0.00	\$22337.87

Monthly Cash Flow Analysis					
Budget Category	Adopted Budget	Total Spent this Month	Unspent Budget Balance	Outstanding	Net Available
Office	\$14100.00	\$703.49	\$12953.51	\$515.64	\$12437.87
Outreach		\$0.00		\$0.00	
Elections		\$0.00		\$0.00	
Community Improvement Project	\$1000.00	\$0.00	\$1000.00	\$0.00	\$1000.00
Neighborhood Purpose Grants	\$17000.00	\$1000.00	\$16000.00	\$0.00	\$16000.00
Funding Requests Under Review: \$0.00		Encumbrances: \$0.00		Previous Expenditures: \$443.00	

Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	PUBLIC STORAGE 23031	08/14/2025	Monthly public storage payment	General Operations Expenditure	Office	\$235.75
2	WENDY L. MOORE / MOORE BUSINESS RESULTS	08/07/2025	Approval of up to \$600 monthly for Wendy Moore Communication Services	General Operations Expenditure	Office	\$467.74
3	OBA Foundation	08/07/2025	Approval of an NPG for the LAPD OBA Foundation for National Night out in an amount of \$1,000	Neighborhood Purpose Grants		\$1000.00
<b>Subtotal:</b>						<b>\$1703.49</b>

Outstanding Expenditures						
#	Vendor	Date	Description	Budget Category	Sub-category	Total
1	WENDY L. MOORE / MOORE BUSINESS RESULTS	09/05/2025	Approval of 2025-2026 Admin Packet / Wendy Moore communication expenses not to exceed \$600 a month.	General Operations Expenditure	Office	\$515.64
<b>Subtotal: Outstanding</b>						<b>\$515.64</b>



## Payment History

**Space #: 585 - 5' x 5'**

### Payment Amount

\$235.75

### Payment Method

CC \*\*\*\* \* 4337

### Date Received

08/13/2025

### Transaction Type

Payment

### Transaction Number

#323007657

### Space Details

4174 W Pico Blvd

Space #585

Space Size -5' x 5'



Home



Payments



Access



Account



Invoice # OPNC 2025 801  
Number

Date August 1, 2025

Olympic Park NC  
PO Box 19348  
Los Angeles, CA 90019

Please remit to:  
Wendy L. Moore  
Moore Business Results  
19300 Rinaldi, #7524  
Northridge, CA 91327

818 252-9399  
<http://www.moorebusinessresults.com/>  
City of LA Tax #549794-29

Communication services	\$420.24
Developer services	47.50
Total Amount Due:	\$467.74

Thank you for your business. We appreciate working with you.

Please pay within 21 days of invoice date. Payments not received by that date may incur a late fee of \$25. We may also assess a 1.5% interest charge per month on late payments. Interest accrues retroactively from the invoice date. If the invoice is not paid within 90 days, additional collections fees may apply. Returned checks are \$25.

Date	Service	Hours
7/4/2025	Board agenda, eblast, social	0.50
7/7/2025	Update board page, CC template and contacts. CicLAvia on calendar	1.42
7/9/2025	Update officers.	0.17
7/11/2025	Events on calendar. Eblast	0.50
7/18/2025	Meeting graphic. Movies in the park on calendar. Eblast. NNO on calendar	0.50
	Communications Total	3.09
7/16/2025	Developer upgrades WordPress and plugins	0.50



**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: Olympic Park Neighborhood Council

**SECTION I - APPLICANT INFORMATION**

1a) OBA Foundation 26-3898882 California 11/26/08  
*Organization Name* *Federal I.D. # (EIN#)* *State of Incorporation* *Date of 501(c)(3) Status (if applicable)*

1b) 1130 S. Vermont Av Los Angeles CA 90006  
*Organization Mailing Address* *City* *State* *Zip Code*

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

1d) **PRIMARY CONTACT INFORMATION:**  
Harris Cho 213-793-0649 33817@lapd.online  
*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) OBA Foundation / 1130 S. Vermont Av Los Angeles CA 90006  
*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.**  
 LAPD Olympic Division will be hosting their annual National Night Out event in front of our station. We are partnering with numerous organizations to have a resource fair in conjunction with National Night Out. We are requesting funds to help offset the cost of a stage, canopies, tables and chair rentals as well as food and drinks for the event.
- 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)**  
 The event is open to the public and usually attracts several hundred participants. The participants will have the opportunity to visit our partner organization's booths to receive resources and outreach.

**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>
	Canopies, tables, stage, food, and drinks.	\$1000.00	\$4,000.00
		\$	\$
		\$	\$

7) Have you (applicant) applied to any other Neighborhood Councils requesting funds for this project?  
 No  Yes If Yes, please list names of NCs: PUNC, GWNC, WCKNC

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: \$1000.00

10a) Start date: 08/05/25 10b) Date Funds Required: 08/05/25 10c) Expected Completion Date: 08/05/25  
 (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\*

Chang Lee President  7/1/25  
 PRINT Name Title Signature Date

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

Sam Shin Yang Secretary  07/01/25  
 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

Office of the City Clerk

Administrative Services Division

Neighborhood Council (NC) Funding Program

Board Action Certification (BAC) Form



NC Name: Meeting Date:

Budget Fiscal Year: Agenda Item No:

Board Motion and/or Public Benefit Statement (CIP and NPG):

Method of Payment: (Select One) [ ] Check [ ] Credit Card [ ] Board Member Reimbursement

Vote Count
Recused Board Members must leave the room prior to any discussion and may not return to the room until after the vote is complete.

Table with 8 columns: Board Member's First and Last Name, Board Position, Yes, No, Abstain, Absent, Ineligible, Recused. Multiple empty rows for data entry.

Board Quorum: Total:

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.

Authorized Signature: Ransay Doyal

Authorized Signature: Kate Kungman Chan

Print/Type Name:

Print/Type Name:

Date:

Date: