

Department of Neighborhood Empowerment

Reporting Month:	MAY	MONTHLY EXPENDITURE REPORT
NC Name:	Lake Balboa	Submitted: 6/3/2015 16:10:44



Budget Fiscal Year: 2014-2015

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	Date / Item / Service Description	BUDGET CATEGORY	VENDOR	INVOICE NUMBER	OUT OF STATE VENDOR	1099 Reportable	TOTAL
1	5/1 2015-102/Sr. Symposium co-sponsor EVE	OUTREACH	Sharky's Mexican Grill	031815		<input checked="" type="checkbox"/>	\$500.00
2	5/5 2015-103/NC /Storage - May MIS	OPERATIONS	Public Storage	549446524		<input checked="" type="checkbox"/>	\$130.00
3	5/7 2015-104/EP Mtg Refreshments - May MEE	OUTREACH	Ralph's Grocery	Ref 000000			\$13.18
4	5/8 2015-105/EP Copies May Mtg MIS	OPERATIONS	Office Depot	Tran 8894		<input checked="" type="checkbox"/>	\$2.16
5	5/8 2015-106/NC Agenda/Min/Reports May MIS	OPERATIONS	Office Depot	Tran 8733		<input checked="" type="checkbox"/>	\$21.89
6	5/15 2015-107/NC Newsletter Apr/May NEW	OUTREACH	The Walking Man	E6342		<input checked="" type="checkbox"/>	\$1,825.00
7	5/18 2015-108/Copies-NC Report MIS	OPERATIONS	Office Depot	Tran 73		<input checked="" type="checkbox"/>	\$1.04
8	5/19 2015-109/Minutetaker-Dec204 Serv. TAC	OPERATIONS	AppleOne	S2797894		<input checked="" type="checkbox"/>	\$138.60
9	5/19 2015-110/Board Members Biz Cards MIS	OPERATIONS	Mike the Printer	60704			\$101.37
10	5/21 2015-111/Phone Msg. Service-May MIS	OPERATIONS	AT&T Messaging	7050388		<input checked="" type="checkbox"/>	\$16.97
11	5/26 2015-112/Mural 3 Project-Snacks/Drinks	CIP	Smart & Final	Tran 159		<input checked="" type="checkbox"/>	\$169.75
12	5/26 2015-113/Mural 3 Project-Mural Supl. CIP	CIP	Dunn-Edwards	Tran 5685196		<input checked="" type="checkbox"/>	\$427.85
SUBTOTAL: Expenditures by Line Item (May include totals on page 3, if entered)							\$3,347.81
B	CUMULATIVE EXPENDITURES FROM PRIOR MONTHS						\$8,100.38
C	OUTSTANDING COMMITMENTS						
	C 1. Outstanding Checks (checks that have been issued, but have not yet cleared the account)						
	C 2. Rent/Lease						\$1,800.00
	C 3. Contractual Services						
	C 4. Large Purchases						\$14,000.00
	C 5. Neighborhood Purpose Grants (pending or in process)						\$1,250.00
	C 6. Temporary Staffing Services						\$936.00
	C 7. Storage						\$635.00
	C 8. Other Outstanding Commitments ==> Description: Operations \$384.00 Outreach \$2,497.00						\$2,881.00
SUBTOTAL: Outstanding Commitments							\$21,502.00
D	Total Expenditures & Commitments						\$32,950.19
E	Total Adjustments by Department (such as use taxes assessed, credits from prior fiscal years, etc)						
F	Approved Budget 2014-2015						\$37,000.00
G	Balance of Budget						\$4,049.81

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MONTHLY CASH RECONCILIATION				
Beginning Balance (A)	Funds Deposited (B)	Total Available (C) = (A+B)	Cash Spent this Month (D)	Remaining Balance (E) = C - D
\$2,154.81	\$2,297.69	\$4,452.50	\$3,347.81	\$1,104.69

MONTHLY BUDGETARY ANALYSIS					
Category Identifier	Budget Category	Adopted Budget (A)	Total Spent this Month (B)	Total Spent in Prior Months (C)	Unspent Budget Balance (D) = A - B - C
100	Operations	\$7,220.00	\$412.03	\$2,563.91	\$4,244.06
200	Outreach	\$24,600.00	\$2,338.18	\$5,536.47	\$16,725.35
300	Community Improvement	\$4,180.00	\$597.60		\$3,582.40
400	NPG	\$1,000.00	\$0.00		\$1,000.00
500	Elections		\$0.00		\$0.00
900	Unallocated		\$0.00		\$0.00
	TOTAL	\$37,000.00	\$3,347.81	\$8,100.38	\$25,551.81

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	Linda Schwering	Print Name	Linda M. Pruet
Date	6/3/2015	Date	6/3/2015
NC Additional Comments			

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ADDITIONAL EXPENDITURES BY LINE ITEM (Optional, do not print page 3 unless you use it)							
A	Date / Item / Service Description	BUDGET CATEGORY	VENDOR	INVOICE NUMBER	OUT OF STATE	1099 Reportable	TOTAL
13							
14							
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SUBTOTAL: Expenditures by Line Item							\$0.00