Department of	of Neighborhood E	mpowerment	^			T 1		el .	
Board Vote	Form .	11.0 Hall	1		EMPO	WER_LA			
NC NAME:	M(0) (8	NU NOITY TIELS WOL	Department of THIS CODE FOR NEIGHBORHOOD EMPOWERMENT						
Board Vote Form NC NAME:  Budget Fiscal Year:  Meeting Date:  Agende Norm			USE THIS FORM FOR STORBORROUD EMPOWERMENT  □ APPROVAL OF MONTHLY EXPENDITURE REPORT						
Agenda Item:			BUDGET PACKAGE APPROVAL / AMENDMENT						
Agenda Item. (1 q			APPOINTMENT OF FUNDING OFFICER / CARDHOLDER						
	•			THER: NON-FU	NDING ACTION ITE	M		,	
	Description:	casurer's Report: Appr	ove FY	2016-2	017 bui	get.			
*Recus	ed-Boardmember m	nust leave the room prior to any disc	ussion and r	nay not retur	n to the room	until after the	vote is com	pleted.	
Board Member Name		Board Position	Yes	No	Abstain	*Recused	Absent	Ineligible	
Mary Garcia		President	X						
Paul Storiale		Vice President	X						
Brian Allman		Secretary	K				,		
James Askew		Treasurer	X						
Adria Brodie		District 4 Resident Representative	X						
Irene Covarrubias		District 1 Business Representative	K						
Ken Dorfman		District 4 At Large	×						
Linda Fulton		Community/Non Profit Organization	×						
Joseph Gitto		District 4 Business Representative					×		
Gloria Gold		Community/Non Profit Organization					X		
John Paul Green		District 3 Resident Representative	X						
Michael Lara		District 2 Resident Representative			X	2			
Donna Moss		District 1 At Large	X						
Patricia Murphy		District 2 Business Representative	X						
Donald Neal		Community/Non Profit Organization	X						
Bob Peppermuller		District 5 At Large	X						
Jo Ann Rivas		School Representative					X		
Allan Salinas		District 2 At Large					X		
Robyn Sumners		Community Interest Representative	X						
Carol Wyner		Religious Representative	X						
NC Quorum:	15	Totals:	15	0	\	8	4	Ø	
We the Treas	urer and Signer of the eld in accordance wit	e above indicated Council, declare that th the Brown Act, where with a quorum	t the information of Board Mei	on presented mbers presen	on this form is t, the Council a	accurate and capproved the ab	omplete, and pove action.	that a public	
Treasurer's Signature:				Signer's Signature: May Garcia					
	Print/Type name:	James Laker		Print/Type name: MARY GARCIA					
	Date:	9/12/16		Date: Sept 12, 2016					
NC Additional						/			