							
Office of the City Clerk							pagetr.
Administrative Services Division							
Neighborhood Council (NC) Fundin	g Program	856				-5	SA PARA
Board Action Certification Form							<u> </u>
NC Name:	Meeting Date:						
Budget Fiscal Year:	Agenda Item No:						
Board Motion and/or Public							
Benefit Statement (CIP and NPG):							
Vote Count Recused Boardmembers must leave the room prior to any discussion and may not return to the roon until after the vote is complete.							
			T T		-76		
Board Member Name	Board Position	Yes	No	Abstain	Absent	Ineligible	Recused
		-	 				
						-	
							7.7
			-				
Totals						L	
We, the Treasurer and the Second Signer 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.							
Treasurer's Signature			Second Signer's Signature				
neasurer s signature			Second Signer Signature				
Print/Type Name:			Print/Type Name:				
			Dite				
Date:	Date:						