

East County Transitional Living Center  
 1527 E. Main St.  
 El Cajon, Ca. 92021


**Invoice**

Date	Invoice#
12414	12414

#16910

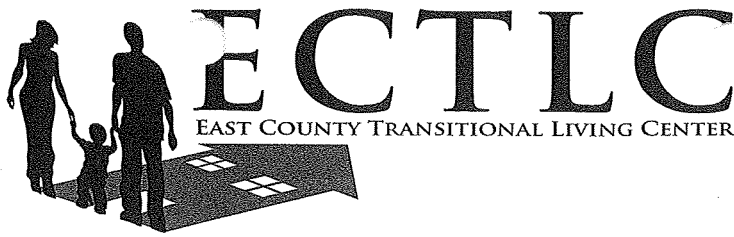
<b>Bill To:</b> City of El Cajon, Redevelopment and Housing	<b>Phone#</b> (619) 441-1786
Attn: Jamie Kavikis 200 Civic Center Way El Cajon, Ca. 92020	

Quantity	Description	Rate	Amount
October 2014	HUD/CDBG (Emergency Shelter Program) reimbursement (10/1 – 10/31/14)	n/a	\$1,732.50

270900-8530-00113  
 \$1,732.50  


**Total: \$1,732.50**

Serving the needs of  
San Diego County



1527 East Main St.  
El Cajon, CA 92021  
(619) 442-0457  
(619) 442-2534 fax

[www.ectlc.org](http://www.ectlc.org)

Programs

Discipleship Training  
Family Restoration  
Emergency Shelter  
Transitional Living  
Adopt-a-Family Project

December 2, 2014

City of El Cajon  
Redevelopment and Housing  
200 Civic Center Way  
El Cajon, CA 92020-3916

Attn: Jamie Kasvikis, Senior Management Analyst

Enclosed you will find the October 2014 CDBG/HUD Emergency Shelter Program reimbursement documentation and invoice amounting to \$1,732.50. Should you have any questions, please contact Ivan Andujar at (619) 442-0457 ext: 1118.

Cordially,

Harold Brown  
Chief Executive Officer  
East County Transitional Living Center

ECTLC is a  
501(c) (3) non-profit  
organization.

**EIN: 27-0865318**

*"Providing a Hand Up"*

**FY2013-14 COMMUNITY DEVELOPMENT BLOCK GRANT  
REQUEST FOR PAYMENT**

\*\*NOTE: To request Electronic Version of this form, send an e-mail to jkasviki@cityofelcajon.us

This Request for Payment is presented to the City of El Cajon to obtain reimbursement for the operation of the Project named below for the Payment Period listed below. The payment is requested for the portion of the contract budget stated in Column B.

SUBRECIPIENT East County Transitional Living Center, Inc. PROJECT Emergency Shelter Program FY 2014-15

PAYMENT PERIOD October 1 - 31, 2014 TOTAL PAYMENT \$1,732.50

PREPARED BY Ivan Andujar Name \_\_\_\_\_ Phone (619) 442-0457

FY 2014-15	Contract Budget	Expenditures to Date	Balance	JUL Total	AUG Total	SEP Total	OCT Total	NOV Total	DEC Total	JAN Total	FEB Total	MAR Total	APR Total	MAY Total	JUN Total	
Job Title		\$0.00	\$0.00													
Job Title		\$0.00	\$0.00													
Job Title		\$0.00	\$0.00													
Salaries & Wages		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Payroll Taxes		\$0.00	\$0.00													
Fringe Benefits		\$0.00	\$0.00													
<b>PERSONNEL</b>	<b>\$0</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

Office Supplies		\$0.00	\$0.00													
Postage		\$0.00	\$0.00													
Rent and Utilities		\$0.00	\$0.00													
Telephone		\$0.00	\$0.00													
Other		\$0.00	\$0.00													
Other		\$0.00	\$0.00													
Other		\$0.00	\$0.00													
Other		\$0.00	\$0.00													
Other-Shelter Pgrm.	\$75,000	\$2,871.00	\$72,129.00	\$0.00	\$0.00	\$1,138.50	\$1,732.50									
<b>NON-PERSONNEL</b>	<b>\$75,000</b>	<b>\$2,871.00</b>	<b>\$72,129.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$1,138.50</b>	<b>\$1,732.50</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

<b>TOTAL PROGRAM</b>	<b>\$75,000</b>	<b>\$2,871.00</b>	<b>\$72,129.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$1,138.50</b>	<b>\$1,732.50</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
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I hereby certify the above expenditures were incurred in carrying out the objective of the project contract, are authorized in the approved contract budget, and that contracted services were performed in accordance with the Agreement.

Ivan Andujar  
Signature & Title of Subrecipient Executive

12-2-14  
Date

**East County Transitional Living Center  
 (1527 E. Main St., El Cajon CA.)  
 Billing Report 10/1 - 10/31/14**

Room #	Name (Client)	Slip #	Race/Gender	Dates Billed	Amount Billed	Outcome
1297	[REDACTED]	005	BikM + BikF	10/1 - 10/2/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/2 - 10/3/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/3 - 10/4/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/4 - 10/5/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/5 - 10/6/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/6 - 10/7/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/7 - 10/8/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/8 - 10/9/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/9 - 10/10/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/10 - 10/11/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/11 - 10/12/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/12 - 10/13/14	\$49.50	See attachment
1297	[REDACTED]	005	BikM + BikF	10/13 - 10/14/14	\$49.50	See attachment
n/a	[REDACTED]	n/a	n/a	10/14 - 10/15/14		See attachment
n/a	[REDACTED]	n/a	n/a	10/15 - 10/16/14		See attachment
n/a	No assistance provided	n/a	n/a	10/16 - 10/17/14		See attachment
n/a	No assistance provided	n/a	n/a	10/17 - 10/18/14		See attachment
n/a	No assistance provided	n/a	n/a	10/18 - 10/19/14		See attachment
n/a	[REDACTED]	n/a	n/a	10/19 - 10/20/14		See attachment
n/a	[REDACTED]	n/a	n/a	10/20 - 10/21/14		See attachment
n/a	[REDACTED]	n/a	n/a	10/21 - 10/22/14		See attachment
1270	[REDACTED]	007	Cau/M	10/22 - 10/23/14	\$49.50	See attachment

1270		007	Cau/M	10/23 - 10/24/14	\$49.50	See attachment
1270		007	Cau/M	10/24 - 10/25/14	\$49.50	See attachment
1203		010	Cau?M + Cau/F		\$49.50	
1270		007	Cau/M	10/25 - 10/26/14	\$49.50	See attachment
1203		010	Cau?M + Cau/F		\$49.50	
1220		006	Cau/F	10/26 - 10/27/14	\$49.50	See attachment
1270		007	Cau/M		\$49.50	
1203		010	Cau?M + Cau/F		\$49.50	
1270		007	Cau/M	10/27 - 10/28/14	\$49.50	See attachment
1203		010	Cau?M + Cau/F		\$49.50	
1270		007	Cau/M	10/28 - 10/29/14	\$49.50	See attachment
1271		008	Cau/M + Cau/F		\$49.50	
1203		010	Cau?M + Cau/F		\$49.50	
1271		008	Cau/M + Cau/F	10/29 - 10/30/14	\$49.50	See attachment
1203		010	Cau?M + Cau/F		\$49.50	
1271		008	Cau/M + Cau/F	10/30 - 10/31/14	\$49.50	See attachment
1302		009	Blk/F + Blk/M		\$49.50	
1203		010	Cau?M + Cau/F		\$49.50	
1271		008	Cau/M + Cau/F	10/31 - 11/1/14	\$49.50	See attachment
1302		009	Blk/F + Blk/M		\$49.50	
1203		010	Cau?M + Cau/F		\$49.50	

**TOTAL** \$1,732.50

**East County Transitional Living Center  
(1527 E. Main St., El Cajon CA.)**

**CBDG/HUD Funds Client Outcome Report - OCTOBER 2014**

	Name (Client)	Household Size	Days Housed	Outcome
1		2	13	Moved into apartment
2		1	7	Entered Transitional Living @ ECTLC
3		1	1	Left and did not indicated where they were going. None committal to programs offered.
4		2	4	Continuing assistance into November 2014
5		5	2	Continuing assistance into November 2014
6	children	3	8	Continuing assistance into November 2014
7				
8				
9				
10				

Totals

14

35