

**NEIGHBORHOOD DEVELOPMENT FUND
Not-for-Profit Transmittal and Approval Form**

DATE: Applicant/Program:

PRIMARY SPONSOR (~~District to contact with any questions~~): Executive Summary of Request

Name of Applicant: _____

I/We have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I/We have read the organization's statement of public purpose to be furthered by the funds requested and I/We agree that the public purpose is legitimate. I/We have also completed the disclosure section below, if required.

Is this program/project a fundraiser?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is this applicant a faith based organization?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does this application include funding for sub-grantee(s)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

_____	_____	_____	_____
District #	Primary Sponsor Signature	Amount	Date

Council Office Primary Sponsor Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

Approved by:

_____	_____
Appropriations Committee Chairman	Date

Clerk's Office Only:

Request Amount: _____ Committee Amended Appropriation: _____

Original Appropriation: _____ Council Amended Appropriation: _____

Name of Applicant/Program:

Additional Disclosure and Signatures

Additional Council Office Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

_____	_____	_____	_____
District #	Council Member Signature	Amount	Date
_____	_____	_____	_____
District #	Council Member Signature	Amount	Date
_____	_____	_____	_____
District #	Council Member Signature	Amount	Date
_____	_____	_____	_____
District #	Council Member Signature	Amount	Date
_____	_____	_____	_____
District #	Council Member Signature	Amount	Date
_____	_____	_____	_____
District #	Council Member Signature	Amount	Date