

Louisville Metro Council City Agency Request

- **Neighborhood Development Fund (NDF)**
- Capital Infrastructure Fund (CIF)**
- Municipal Aid Program (MAP)**
- Paving Fund (PAV)**

Primary Sponsor: Councilwoman Madonna Flood

Amount: \$500 **Date:** 3/15/2022

Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s):
 Low Coat Rabies Clinic for the District 24 and 13 area. It will be held July 23, 2022 at the Eagles Lodge-Saturday, July 23, 2022 from 9am-1pm.

City Agency: Metro Animal Services
Contact Person: Skip Kalkhof
Agency Phone: 502 574-5385

I have reviewed this request for an expenditure of city tax dollars, and have determined the funds will be used for a public purpose and have the attached documentation from the receiving department concerning the project/expenditure.

24	<input checked="" type="checkbox"/>		\$250	3-15-2022
District #		Council Member Signature	Amount	Date

Approved by: _____ **Date** _____
 Appropriations Committee Chairman

Clerk's Office & OMB Use Only:

Request Amount: _____ Amended Amount: _____

Reference #: NDF051122MASmA To OMB: _____

Budget Revision #: _____

Account #: _____

To Project Manager: _____ Completion Date: _____

Actual Cost: _____ Funds Returned: _____

Department/Project: Metro Animal Services/
Low Cost Rabies Clinic, July 23, 2022

Additional Signatures

I have reviewed this request for an expenditure of city tax dollars, and have determined the funds will be used for a public purpose.

Council Member Signature and Amount

District 1	_____	\$ _____
District 2	_____	\$ _____
District 3	_____	\$ _____
District 4	_____	\$ _____
District 5	_____	\$ _____
District 6	_____	\$ _____
District 7	_____	\$ _____
District 8	_____	\$ _____
District 9	_____	\$ _____
District 10	_____	\$ _____
District 11	_____	\$ _____
District 12	_____	\$ _____
X District 13	<i>M. Ann Fry</i>	\$ <i>250.00</i>
District 14	_____	\$ _____
District 15	_____	\$ _____
District 16	_____	\$ _____
District 17	_____	\$ _____
District 18	_____	\$ _____
District 19	_____	\$ _____
District 20	_____	\$ _____
District 21	_____	\$ _____
District 22	_____	\$ _____
District 23	_____	\$ _____
District 24	_____	\$ _____
District 25	_____	\$ _____
District 26	_____	\$ _____

NDF, CIF, MAP OR PAV INTERAGENCY CHECKLIST

Interagency Name: Metro Animal Services

Program/Project Name: Low-Cost Rabies Clinic, July 23, 2022

	Yes/No/NA
Request Form: Is the Request Signed by all Council Member(s) Appropriating Funding?	Yes <input type="checkbox"/>
Request Form: If matching funds are to be used, are they disclosed with account numbers in the request form description?	NA <input type="checkbox"/>
Request Form: If matching funds are to be used, does the amount of the request exclude the matching fund amount?	NA <input type="checkbox"/>
Request Form: If other funds are to be used for this project, are they disclosed with account numbers in the request form description?	NA <input type="checkbox"/>
Funding Source: If CIF is being requested, does Metro Louisville own/will own the real estate, building or equipment? If not, the funding source is probably NDF.	NA <input type="checkbox"/>
Funding Source: If CIF is being requested, does the project have a useful life of more than one year? If not, the funding source is probably NDF.	NA <input type="checkbox"/>
Ordinance Required: Is the NDF request to a Metro Agency greater than \$5,000? If so, an ordinance is required.	NA No <input type="checkbox"/>
Ordinance Required: Is the request a transfer from NDF to cost center? If so, is the amount given for the fiscal year \$25,000 or less?	NA <input type="checkbox"/>
Supporting Documentation: Does the attachment include a valid estimate and description of cost?	Yes <input type="checkbox"/>

Submitted by: Andrea Derouen

Date: 3-15-2022



INVOICE

Date: July 23, 2022	REMITT TO:
July 23, 2022 Rabies Clinic	3516 Newburg Rd. Louisville, KY 40218
SOLD TO: District 24	
ATTENTION: Andrea Derouen	
Cost for July 23, 2022 Rabies Clinic	
Eagles Club	
Pre/Post Preparation	\$25.00
Off-Site Veterinarian	\$210.00
Vet Asshtant	\$70.00
Clerical Staff	\$175.00
Office Supplies	\$20.00
CUSTOMER ORDER NO. MAS07232022	
TOTAL DUE	\$500.00

Andrea Crider Derouen

Administrative Clerk
Councilwoman Madonna Flood
District 24
(502) 574-1124

From: Kalkhof, Skip <Skip.Kalkhof@louisvilleky.gov>
Sent: Tuesday, March 8, 2022 7:37 AM
To: Book, Ashley B. <Ashley.Book@louisvilleky.gov>; Derouen, Andrea C. <Andrea.Derouen@louisvilleky.gov>
Subject: RE: Eagles Lodge-Saturday, July 23rd 9-1

Andrea,
Please find attached the Rabie Clinic invoice for the July 23, 2022 event being held at the Eagles Club.

If you need anything else please feel free to call me at any time.

Derouen, Andrea C.

From: Kalkhof, Skip
Sent: Tuesday, March 15, 2022 9:58 AM
To: Derouen, Andrea C.
Cc: Stover, Xiang; Book, Ashley B.
Subject: RE: Eagles Lodge-Saturday, July 23rd 9-1

Andrea,
Yes. Our Fiscal Administer is Xiang Stover.

Skip

Skip Kalkhof
Administrative Coordinator
Metro Animal Services
Office: 502-574-5385
Cell: 513-235-6325
Fax: 502-451-0074
Skip.kalkhof@louisvilleky.gov



From: Derouen, Andrea C. <Andrea.Derouen@louisvilleky.gov>
Sent: Tuesday, March 15, 2022 9:56 AM
To: Kalkhof, Skip <Skip.Kalkhof@louisvilleky.gov>
Subject: RE: Eagles Lodge-Saturday, July 23rd 9-1

Mr. Kalkhof—

Will you accept these funds on behalf of The Department of Animal Services?