

### Louisville Metro Council City Agency Request

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


**Primary Sponsor:** Councilman Pat Mulvihill D10

**Amount:** \$4,000 **Date:** August, 18, 2017

**Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s):**  
 The World's Largest Halloween Party hosted by the Louisville Zoo located in Metro Council District 10. Please see the information provided by Terri-Lenahan Downs, Sponsorship Director for the Louisville Zoo.

**City Agency:** The Louisville Zoo  
**Contact Person:** Terri lenahan-Downs  
**Agency Phone:** (502) 238-5330

**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.**

10 <input type="checkbox"/>		\$4,000	8/18/2017
District #	Councilman Pat Mulvihill Council Member Signature	Amount	Date

**Approved by:** \_\_\_\_\_  
 Appropriations Committee Chairman Date

**Clerk's Office & OMB Use Only:**

Request Amount: \_\_\_\_\_ Amended Amount: \_\_\_\_\_

Reference #: \_\_\_\_\_ To OMB: \_\_\_\_\_

Budget Revision #: \_\_\_\_\_

Account #: \_\_\_\_\_

To Project Manager: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Actual Cost: \_\_\_\_\_ Funds Returned: \_\_\_\_\_

## NDF, CIF, MAP OR PAV INTERAGENCY CHECKLIST

**Interagency Name:** \_\_\_\_\_

**Program/Project Name:** \_\_\_\_\_

	Yes/No/NA	
<b>Request Form:</b> Is the Request Signed by all Council Member(s) Appropriating Funding?	Yes	<input type="checkbox"/>
<b>Request Form:</b> If matching funds are to be used, are they disclosed with account numbers in the request form description?	NA	<input type="checkbox"/>
<b>Request Form:</b> If matching funds are to be used, does the amount of the request exclude the matching fund amount?	NA	<input type="checkbox"/>
<b>Request Form:</b> 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"/>
<b>Funding Source:</b> 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"/>
<b>Funding Source:</b> 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"/>
<b>Ordinance Required:</b> Is the NDF request to a Metro Agency greater than \$5,000? If so, an ordinance is required.	No	<input type="checkbox"/>
<b>Ordinance Required:</b> Is the request a transfer from NDF to cost center? If so, is the amount given for the fiscal year \$25,000 or less?	Yes	<input type="checkbox"/>
<b>Supporting Documentation:</b> Does the attachment include a valid estimate and description of cost?	Yes	<input type="checkbox"/>

**Submitted by:** \_\_\_\_\_ Geoff Wohl D10 LA

**Date:** 8/18/2017