

**Louisville Metro Council City Agency Request**  
**Neighborhood Development Fund (NDF)**  
**■ Capital Infrastructure Fund (CIF)**  
**Municipal Aid Program (MAP)**  
**Paving Fund (PAV)**

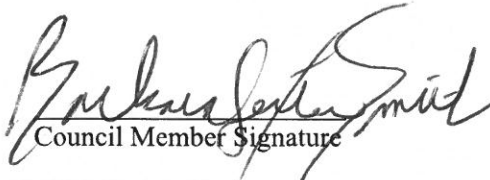
**Primary Sponsor:** Barbara Sexton Smith

**Amount:** \$188 **Date:** 2-19-18

**Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s):**  
Street sign honoring Rev. Carl Jones

**City Agency:** Public Works  
**Contact Person:** William Hines  
**Agency Phone:** 502.574-3091

**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.**

4   \$188.00 2-19-18  
District # 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: \_\_\_\_\_

**Department/Project:**  
Rev. Carl Jones Honorary Street Sign

**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	_____	\$ _____
District 13	_____	\$ _____
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:** Public Works

**Program/Project Name:** Rev. Carl Jones Honorary Street Sign

	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.	Yes <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.	Yes <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.	NA <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?	NA <input type="checkbox"/>
<b>Supporting Documentation:</b> Does the attachment include a valid estimate and description of cost?	Yes <input type="checkbox"/>

**Submitted by:** \_\_\_\_\_ Christa Robinson \_\_\_\_\_

**Date:** 2-19-18

## Robinson, Christa

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**From:** Hines, William A  
**Sent:** Monday, February 19, 2018 10:33 AM  
**To:** Robinson, Christa  
**Subject:** RE: Honorary Street Sign for Rev. Carl Jones

Cost for (1) sign is \$188.

Sent from Samsung Galaxy S5

----- Original message -----

**From:** "Robinson, Christa" <[Christa.Robinson@louisvilleky.gov](mailto:Christa.Robinson@louisvilleky.gov)>  
**Date:** 2/19/18 10:16 AM (GMT-05:00)  
**To:** "Hines, William A" <[William.Hines@louisvilleky.gov](mailto:William.Hines@louisvilleky.gov)>  
**Subject:** Honorary Street Sign for Rev. Carl Jones

Hi sir,  
Could you tell me what the cost will be for this sign?

Thank you!

**Christa Robinson**

Legislative Assistant  
Metro Council District Four  
Councilwoman Barbara Sexton Smith  
Office: (502)574-1104

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