

### Louisville Metro Council City Agency Request

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

**Primary Sponsor:** Bill Hollander

**Amount:** \$1,250 **Date:** May 7, 2018

**Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s):**

Grant to LMPD for Annual National Night Out scheduled for Tuesday, August 7, 2018, at the Peterson-Dumesnil House, 301 S. Peterson Avenue. Funds would be used for child safety ID materials, face paint, restrooms, hand-washing stations and entertainment.

**City Agency:** LMPD

**Contact Person:** Lt. Neil Tenbarge

**Agency Phone:** 502-574-7636

**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.**

9		\$250.00	5/8/18
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:  
LMPD National Night Out

### 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	<i>Barbara Jean Smith</i>	\$ 250 -
District 5	_____	\$ _____
District 6	_____	\$ _____
District 7	<i>[Signature]</i>	\$ 250
District 8	<i>[Signature]</i>	\$ 250
District 9	_____	\$ _____
District 10	<i>Garrett P. McWhirter</i>	\$ 250 -
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	_____	\$ _____

## Ethridge, Kyle

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**From:** Tenbarge, Neil E  
**Sent:** Friday, April 20, 2018 11:56 AM  
**To:** Ethridge, Kyle  
**Subject:** LMPD 5th Division National Night Out, August 7th, 2018

**Follow Up Flag:** Flag for follow up  
**Flag Status:** Flagged

Kyle,

Here is the email I sent to the other district offices. Let me know if you need more specific information. Thanks for your help!

Neil

Greetings,

We are planning our annual National Night Out for August 7<sup>th</sup> at the Peterson-Dumesnil House from 6pm – 9pm. As you know, this is our biggest community event of the year. We will have many public safety organizations there with booths and displays for the public. There will also be food, drinks and prizes.

I am asking that your office, and each of the offices that serve the metro area in the 5<sup>th</sup> Division, contribute \$250 toward this event. The money will be used to cover the costs of things such as: Child safety ID materials, face paint, portable restrooms/hand wash stations, and miscellaneous related supplies. Funding will go through our business office and we will make payments from there.

Please contact me if you have any questions.

For more information about National Night Out, check out these links.

<https://natw.org/about>

<https://www.youtube.com/watch?v=6NAa0fmfYCM>

Thank you for your support!

*Lt. Neil Tenbarge*

LMPD 5<sup>th</sup> Division  
Administrative Lieutenant  
574-7636

## NDF, CIF, MAP OR PAV INTERAGENCY CHECKLIST

**Interagency Name:** LMPD

**Program/Project Name:** National Night Out - 2018

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

Submitted by: Wyle G. Gaudy

Date: 05/07/18