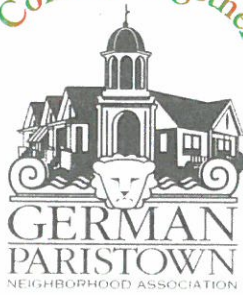


Coming Together



12.5.17

This is page 1 of 3 for
pages I'm sending
to both of you.
Steve 12/5/17
A

Dear Geoff & JoAnne,

This is in response to your request of my correcting
Page 7 Concerning Revenue Sources. By way of explanation I
pulled the 3 numbers from a pre-lim worksheet and not from
the final worksheet. Based on 2016 experiences Concessions were
to be moved up \$200. This was due to anticipated better attendance
at our weekly bingo. Bingo Income was projected to increase
slightly by \$300 from 2016 budgeted amount. The two line items
equal the added \$500 "ix" I had on the final draft but
did not apply to the original grant application I forwarded.
I am forwarding two other sheets by scan then. The first is
the new page 7, I title it "As Amended" at the top of
the page and cross out the old and apply the new numbers accordingly.
The 2nd page will be the detailed back up showing the budgeted
amounts for Concessions & Bingo Income line items & the new total
of \$58,500. Baber left my initials on both pages with the date 12/5/17

Steve Maguire 855.0223

"do Amended" at 12/15/17

Page 2 of 3
of scanned
documents
sent @
12/15/17

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities	2300	2100	4400
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (See Detailed List on Page 8)			
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)			
J: Machinery & Equipment			
K: Capital Project		1300	1300
L: Other Expenses (See Detailed List on Page 8)	4200	18100	60300
*TOTAL PROGRAM/PROJECT FUNDS	6500	19500	66000
% of Program Budget	%	%	100%

List funding sources for total program/project costs in Column 2, Non-Metro Funds:

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	1,000
Fees Collected from Program Participants	
Other (please specify) ATTACHED - NEXT PAGE	58,500
Total Revenue for Columns 2 Expenses **	59,500

*Total of Column 1 MUST match "Total Request on Page 1, Section 2"

**Must equal or exceed total in column 2.

[Handwritten initials and signatures]
12/15/17

CALENDAR YEAR BUDGET FOR 2017

REVENUE SOURCES	Budgeted \$	GPNA \$	City Grant
Association Membership Fess	1000	1000	
Concessions Sales at Center	1200	1200	
Bingo Income	56300	56300	
Donations and Sponsorships	1000	1000	
City Grants	6500		6500
Totals	66000	59500	6500

EXPENSE ITEMS	Budgeted \$	GPNA \$	City Grant
Building Maintenance	2800	850	1950
Building Insurance	2100	800	1300
Building Utilities	4400	2100	2300
Building Reparis	2000	1150	850
Technology	300	300	
Community Relations	2700	2600	100
Sponsorships	2500	2500	
Bingo Expenses	46900	46900	
Outside Work Projects	1000	1000	
Capital Improvements	1300	1300	
Totals	66000	59500	6500

SECTION 6 FOR OTHER INCOME LINE ITEM	Budgeted \$	City Grant
TITLE OF ACCOUNT		58500
Membership	1000	
Concessions	1200	
Bingo Income	56300	
TOTAL FOR "OTHER INCOME" LINE	58500	58500

*Page 3 of 3 for
 scanned document
 benjaet @ 12/5/17*

[Handwritten signature in blue ink]