

## Louisville Metro Council City Agency Request

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

**Primary Sponsor:** Councilwoman Hamilton

**Amount:** \$ 750,00                      **Date:** 6-19-14

**Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s):**  
S.P.O.T. Clinic with Low cost Rabies, License & microchips for pets. Saturday, Aug. 2 2014 from 11am - 3pm at the Portland Library 3305 Northwestern Parkway, 40212

**City Agency:** Dept. of Animal Services  
**Contact Person:** Alisa Oerther  
**Agency Phone:** 574-5556

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

5                      Cheri B. Hamilton                      \$750<sup>00</sup>                      6-19-14  
 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: \_\_\_\_\_

**OFFICE OF METRO COUNCIL CLERK**

**REVIEWED**

DATE 7-1-14 TIME 11:17am



DEPARTMENT OF  
**ANIMAL  
SERVICES**

## INVOICE

Date: June 19, 2014	REMITT TO:
	3705 Manslick Rd.
Invoice Number: MAS06192014	Louisville, KY 40215
SOLD TO: Portland Branch	
ATTENTION: Cheri Bryant Hamilton	
ADDRESS 601 West Jefferson St.	
CITY, STATE, ZIP Louisville, KY. 40202	
Att: Sarah Wechman	
CUSTOMER ORDER NO.	SOLD BY
	Alisa Oerther
DESCRIPTION OF EVENT	PRICE 750/event
Saturday, August 2, 2014 11:00 a.m. - 3:00 p.m. Portland Branch: Louisville Public Library 3305 Northwestern Pkwy, Louisville, KY 40212	Total Cost: \$750
<b>TOTAL DUE</b>	<b>\$750.00</b>

# PROTECT YOUR PET.

Low Cost Rabies, License & Microchip Clinic

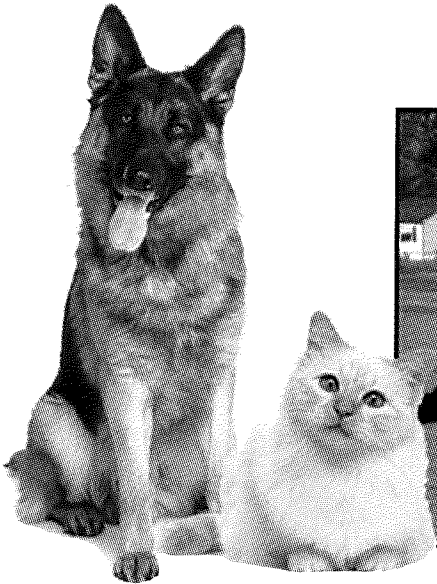
**Saturday, August 2 from 11 a.m. - 3 p.m. at the  
Portland Library  
3305 Northwestern Pkwy  
Sponsored by Councilwoman  
Cheri Bryant Hamilton**



DEPARTMENT OF  
**ANIMAL  
SERVICES**

Getting a license and rabies shot protects you, your friends and your pet from getting rabies. It also improves your furry friend's chance of a free ride home if they ever get lost.

**Free Pet ID tags and information!**



FEES	
License	\$9.00
(Unaltered Pets)	\$50.00
Rabies	\$8.00 (1 year)
Microchips	\$25.00
*Senior citizens receive a discount on license fees	

## NDF OR CIF INTERAGENCY CHECKLIST

Interagency Name: *Metro Animal Services*  
 Program/Project Name: *SPOT Clinic @ Portland Library Aug. 2*

Yes/No/NA

<b>Request Form:</b> Is the NDF Request Signed by all Council Member(s) Appropriating Funding?	<i>Yes</i>
<b>Request Form:</b> If matching funds are to be used, are they disclosed with account numbers in the request form description?	<i>NA</i>
<b>Request Form:</b> If matching funds are to be used, does the amount of the request exclude the matching fund amount?	<i>NA</i>
<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?	<i>NA</i>
<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.	<i>NA</i>
<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.	<i>NA</i>
<b>Ordinance Required:</b> Is the NDF request to a Metro Agency greater than \$5,000?	<i>NA</i>
<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?	<i>NA</i>

Prepared by: *Cheri B. Hamel* Date: *6-23-14*