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

Primary Sponsor: Or Shanking

Amount: 14500

Date: 7-3-18

Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s): Fillst Aeighboth and worlds with communities to Provide Hended and accessible health, education, employ ment and human services that support children and families in their Progress toward Seif-Sufficiency. The reguested funds will be used to assist with the Purchasing back to School Supplies to backlacks.

neighborhood Place **City Agency:** Contact Person: Ricky Owens Agency Phone: 502 - 313 - 4541

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.

2	Barbare Should .	500,00	6/27/1
District #	Council Member Signature	Amount	Date

Approved by: Appropriations Committee Chairm Clerk's Office & OMB Use Only:	nan Date	_
Request Amount:	Amended Amount:	_
Reference #:	To OMB:	
Budget Revision #:		
Account #:		
To Project Manager: Completion Date:		_
Actual Cost:	ost: Funds Returned:	

Revised May 2016

Department/Project: First Resphorhood Place Back pack

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 MORG 9/20	\$ 20.00	
District 2 Abarborn Should	\$ 500,00	
District 3 Mary Shouling	\$ 500.00	
District 4 Jackara Jerton Smith	\$ 500,00	
District 5 Cheri Br Hamilton	\$ 500,00	
District 6 Concentration	\$ 500. 20	
District 7 A CLOS	\$250.00	
District 8		
District 9	\$	
District 10 part Manuel	\$ SZD-	
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	\$ <u>500</u>	
District 24	\$_500	
District 25		
District 26	\$	

Revised May 2016

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NDF, CIF, MAP OR PAV INTERAGENCY CHECKLIST			
Interagency Name: First Neighboor hood Place			
Program/Project Name: back to School fest.			
	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?	<u>M</u> A		
<b>Request Form:</b> If matching funds are to be used, does the amount of the request exclude the matching fund amount?	MA		
<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.	MA		
<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.	MA		
<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?	<u>no</u>		
<b>Supporting Documentation:</b> Does the attachment include a valid estimate and description of cost?	<u>9es</u>		

Submitted by: Barbar Shanking Date: 4/29/18

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#### Smith, Rickey, Jr

From:	Shanklin, Barbara
Sent:	Tuesday, July 3, 2018 7:39 AM
То:	Smith Jr, Rickey W
Subject:	Fwd: Description Of Applicant Agency/Organization and the 2018 Back-To-School
	Festival Budget form.
Attachments:	image002.png; ATT00001.htm; Description Of Applicant Agency_Organization.pdf; ATT00002.htm

Sent from my iPhone

Begin forwarded message:

From: "Logan, Rosia J" <<u>Rosia.Logan@louisvilleky.gov</u>> Date: June 11, 2018 at 2:16:24 PM EDT To: "Shanklin, Barbara" <<u>Barbara.Shanklin@louisvilleky.gov</u>> Cc: "Miller, Cassandra L. (CS)" <<u>Cassandra.Miller@louisvilleky.gov</u>> Subject: Description Of Applicant Agency/Organization and the 2018 Back-To-School Festival Budget form.

Good Afternoon Dr. Shanklin,

Please see the 2 attached forms: Description Of Applicant Agency/Organization and the 2018 Back-To-School Festival Budget form.

I am signing off on the application on behalf of the First Neighborhood Place, Back-To-School Committee and the approval of my manager, Cassandra Miller. Have A Great Day!

### **Thank You**

Rosía J. Logan, Administrator

Louisville Metro Office of Resilience and Community Services First Neighborhood Place \_ at TJ Middle School 1503 Rangeland Road, Louisville, KY 40219 Phone: (502) 313-4728



#### **IDENTIFYING INFORMATION**

II. Organization number as listed with the Kentucky Secretary of State: \_\_\_\_\_

111. List any "working" or "does business as" names for organization:

- IV. Address of main office: (street and zip + 4) \_\_\_\_\_ 1503 RANGE And Road,
- V. P. O. / mailing address if different: <u>Same AME AS Abous</u> (zip + 4) \_\_\_\_\_

Phone # (502) . 3/3- 4728 -4762 Fax# (502) VI. E-Mail RosiA. LogAnd Louisville Ky. 9 VII. VIII.

VIII. Agency's Legal Signatory/Title Name <u>Kosia Log An</u>

C.

SERVICE PROGRAM SupERVISOR 1/Adminis FRATOR Title SAC

IX. Contact person responsible for application: A. Name: <u>ROSIM</u> LOGAN

E-Mail KOSIAO

B. Phone # (502) 3/3 - 4728

Fax# (502) 313 - 4162 @ louisvilleky, gov

**DESCRIPTION OF AGENCY** Describe your Agency's vision, mission and services; Rhond WORKS

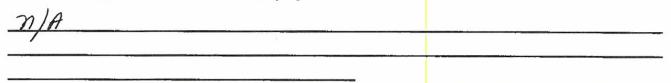
with communities to ma SUDDORT 35 JOWA R

Man	Drafit Application	
Non- H.	-Profit Application Total number of Board members <u><u></u><u></u><u><u></u><u></u><u></u><u></u><u></u><u></u><u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u></u></u></u>	2
111.	Number of Board meetings held to date in current fiscal year	<u>n/A</u>
IV.	Average attendance at Board meetings $\underline{n/A}$	7
FAC	CILITIES /	
I.	CILITIES    List location(s) and terms (owned, rented, leased, or donated)    A.  Thomas JEffectson Middle Sci    B.	hool-1503 Rangeland Road
	В	Louisville, Ky 40219
	C.	
	D	
11.	Are all facilities handicapped accessible? Yes $X$ No	
111.	If no, please explain:	
-		
FINA		
l.	ANCIAL INFORMATION Agency's fiscal year from (month) <u>July</u> to (m	nonth) June
11.	Does your Agency anticipate a significant increase or decrease	
		No X Yes
III.	lf yes, please explain.	
IV.	For the current fiscal year, list funds received from Louisville	e Metro Government including funds
	from any department office, etc. in either the former City of L	quiquille or leffermen County
\$ 2	291,800,00 Source: Community SERVICE	- HENERAL Funds
¢	Source:	
₽	Source:	
\$	Source:	

#### Non-Profit Application

#### V. Attach <u>one copy</u> of each of the following required documents:

- A. Articles of Incorporation.
- B. Approved budget or executive summary for your Agency's current fiscal year.
- C. Proof of IRS 501(C) status, or application for this IRS status, if applicable.
- D. Board member list; specify chair, vice-chair, secretary, and treasurer.
- Attach one copy of each of the following, as appropriate.
- A. If your agency has paid staff: Staffing structure for entire Agency, including organizational chart.
- B. If your Agency is an employer required to have a written Affirmative Action/Equal Employment Opportunity policy: copy of policy.
- C. If rent/occupancy costs are being requested: copy of the signed lease.
- D. If program participants have the opportunity to evaluate the services received: one copy each of any forms used.
- VI. List below any relationship any members of your Board of Directors or employees have with any Metro Council Member, Council Member's family, Council Member's staff, or any Louisville Metro Government employee.



VII. I certify under the penalty of law that the information in this application is accurate to the best of my knowledge. I am aware that my Agency will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am authorized to sign this application for the Agency.

Name of Legal Signatory: (type or print) SupERVISOR 1/Administrator PROGRAM S Signature Date

\* Failure to completely and properly fill out this application and attach all necessary documents may result in a delay of the item being heard by the Appropriations Committee.

Louisville Metro Council Members

June 08, 2018

Dear Members of Metro Council,

The Annual First Neighborhood Place Back to School Festival is schedule for Saturday, August 11, 2018 from 10:00 a.m. – 1:00 p.m. We anticipate providing 1,000 to 1,500 kids with backpacks and school supplies. We have serviced well over 15,000 kids over the past 11 years. Once again, we foresee 20 schools-elementary, middle and high-working together with us on this project. Last year we provided supplies to students who attend over 75 different schools. Annually, this is one of the best attended and organized Back to School events in the city. Last year the council helped out with approximately \$4,000 and we were able to give away more supplies than ever before. With your help this year we would like to duplicate or surpass last year's effort.

Again this year, are in need of financial assistance in this endeavor. Below is a projected budget for expenses. Assistance can come in the form of financial donations or supplies. We would be willing to shop for the supplies and provide you with receipts or you could buy the supplies and give them to the drive. Whatever works best for you fiscally speaking we certainly can work with you.

#### Budget

2018 Back to School Festival Budget School Supplies \$2,000.00 3000 pencils 1500 filler notebooks 7500 pocket folders 750 colored pencils 750 crayons 1500 glue sticks 750 scissors In-Kind contributions from JCPS = \$1,500 **Metro Council donation = \$500.00** \*Backpacks \$4.00 each X 1500 = \$6,000.00 In-Kind contribution from JCPS = \$2,000.00 Total cost \$8,000.00 In-kind contribution \$3,500.00 JCPS Metro Council contribution \$4,500.00

We thank you in advance for whatever assistance you can provide.

The Back to School Festival Committee For FRYSCs and First Neighborhood Place

# FRYSC/1<sup>st</sup> Neighborhood Place Back to School Fest 2018

\*FREE LUNCHES for kids Served by JCPS Nutrition Services, must be 18 or under. Located inside the school.

School Supplies - Free! Free! Free, grade-appropriate school supplies Must be accompanied by a parent or guardian

**Community Resource Fair** Health Insurance, Diabetes and blood pressure checks, YMCA program, voters registration, Library and more For More information or to donate or to volunteer call Krista Campisano Luhr Elementary Family Resource Center 313-4498

Lots of music and fun!!

Saturday, August 11th 10:00 am-1:00 pm



Thomas Jefferson Middle School 1501 Rangeland Road

