Louisville Metro Council City Agency Req 1est Neighborhood Development Fund (N DF) Capital Infrastructure Fund (CIF) Municipal Aid Program (MAP) Paving Fund (PAV)

	r aving runu (r z	17)	
Primary Sponsor: Ma	arianne Butler		
Amount: 14,550	×	Date: August 8, 20	18
location of project/pr	m/project including pu ogram and any externa t with the expenses to ope	l grantee(s):	0 /
City Agency: Metro Pa Contact Person: Mike	Hollett	7	
determined the funds	equest for an expenditu will be used for a publi the receiving department	ic purpose and have th	e attached
$\frac{15}{\text{District #}}$ Council	Member Signature	- <u>3500</u> - Amount	<u>8-13-18</u> Date
Approved by: Appropr Clerk's Office & OMB	ations Committee Chairma	an	Date

Clerk's Office & Offib Ose Offiy.		
Request Amount:	Amended Amount:	
Reference #:	To OMB:	
Budget Revision #:	······································	
Account #:		
To Project Manager:	Completion Date:	
Actual Cost:	Funds Returned:	

Revised May 2016

Department/Project:		
	2018 Jack O' Lantern Parks	

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 MBILA	<u>\$ 1300. W</u>
District 2	*
District 3	\$
District 4	\$
District 5	\$
District 6 Mallom	\$ 250,00
District 7	\$ 1,600
District 8	
District 9 β	\$
District 10 June Manh	<u>\$ 1,500</u>
District 11	\$
District 12 Kil Bhrul	\$ 750
District 13 Nicki Qubrey Welch	\$ 1,500
District 14 (under Jourth	\$ 750 -
District 15	\$
District 16	\$
District 17	\$\$
District 18	\$
District 19	\$\$
District 20	\$
District 21 Vitales Laushine	_ \$ <u>2000, ⁵⁵</u>
District 22	\$\$
District 23	\$
District 24	\$
District 25 Defe	\$ 1,500.00
District 26	\$

JACK O LANTERN 2018

DISTRICT	Donation	Dollar amount	# of coupons	Initials	
	amount of sponsorship	of coupons			
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Total					

Hughes, Susan

From: Sent: To: Cc: Subject: Hallett, Michael A Tuesday, August 7, 2018 1:03 PM Hughes, Susan 'Enelson@louisvilleparksfoundation.org' JOLS 2018

Hi Susan,

On behalf of "Louisville Parks and Recreation, we will accept the funds allocated towards expenses to operate the Jack O' Lantern Spectacular". We thank you for your support of this event which does so much for the Amphitheater, our part of town, and the Parks system overall. Thanks Michael.

Michael Hallett Louisville Metro Parks and Recreation Iroquois Amphitheater – Park Manager Metro Parks Reservations Office 1080 Amphitheatre Road, Louisville KY. 40214 (502) 381-7491 www.iroquois.amphitheater.com http://www.louisvilleky.gov/MetroParks/

Vouchers for \$5 off Jack 'O Lantern Event-2018

- CW Butler is sponsoring a Voucher program for the Jack 'O Lantern event
- Members must sponsor a minimum of \$1,000 to participate in the voucher program. Member will then be able to purchase \$5 off coupons to be distributed.
- The voucher program is advertised by each participating district in any manner they choose
- Vouchers may only be used Monday through Thursday
- Beginning _____', Jefferson County Residents may call Metro Council at 502- 574-2854 and give their address. Administration determines the correct district – and mails the voucher(s) with an event flyer for the event.
- Envelopes are provided by the sponsoring district
- Program is limited to Jefferson County Residents only
- Districts may NOT distribute their own vouchers
- Vouchers are limited to 4 per household
- Available vouchers are limited to the number purchased by that district until in which remaining tickets will be available to any Louisville Metro resident.
- Vouchers have no cash value
- Unclaimed vouchers are non-refundable for district NDF –become additional donations for the event costs
- Parks will provide a report of the number of vouchers used after the event closes

NDF. CIF, MAP OR PAV INTERAGENCY CHECKLIST

Interagency Name:	Metro Parks and Recreation 2018 Jack O' Lantern		
Program/Project Name:			
		Yes/No/NA	
Request Form: Is the Request Signed b Appropriating Funding?	by all Council Member(s)	Yes	
Request Form: If matching funds are account numbers in the request form des	No		
Request Form: If matching funds are to be used, does the amount of the request exclude the matching fund amount?		NA	
Request Form: If other funds are to be disclosed with account numbers in the re	1 0 -		
Funding Source: If CIF is being reques own/will own the real estate, building or funding source is probably NDF.		No	
Funding Source: If CIF is being reques life of more than one year? If not, the fu		NA	
Ordinance Required: Is the NDF reque \$5,000? If so, an ordinance is required.	est to a Metro Agency greater than	Yes	
Ordinance Required: Is the request a tr If so, is the amount given for the fiscal y		No	
Supporting Documentation: Does the a stimate and description of cost?	attachment include a valid	NA	

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Submitted by: ______ shughes _____ Date: Aug 7, 2018