## Louisville Metro Council City Agency Request

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

Primary Sponsor: James Peden Date: Sep 21, 2018 Amount: \$1,800 Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s): Bleachers will be places along the route of the annual Highview Fall Festival parade. The bleaches will allow the public to sit and watch as local groups and organizations pass. The parade takes place on October 6, 2018. City Agency: Louisville Parks and Recreation Contact Person: Tangala Dumas Agency Phone: 386-5910 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. 23 District # Approved by: \_ Appropriations Committee Chairman Date Clerk's Office & OMB Use Only: Request Amount: \_\_\_\_\_ Amended Amount: \_\_\_\_ To OMB: Budget Revision #: Account #: \_\_\_\_\_ To Project Manager: Completion Date: Actual Cost: Funds Returned:

NDF, CIF, MAP OR PAV INTERAGENCY CHECK	KLIST					
Interagency Name: Louisville Parks and Recreation						
Program/Project Name: Highview Fall Festival Parade Bleachers						
	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: John N. Torsky III Date: Sep 21,	201
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Iroquois Amphitheater 1080 Amphitheater Road Louisville KY 40214 Phone: (502)368-5865

## **RENTAL SALES RECEIPT**

Receipt #
Payment Date:
Household:

**32078** 09/21/18 964

James Peden 601 W Jefferson St Louisville KY 40202 james.peden@louisvilleky.gov

Rental Reservation Reserv. Number: Rental Days: Rental Status: Quantity: Member Name: Rental Period:	Details: 45 Seat Bleacher 935 4 Future 6 James Peden Fri 10/05/2018 @ 11:00 am to N	<u>New Fees</u> 1,800.00 Mon 10/08/2018 @ 12:00 pm	<u>Total Fees</u> 1,800.00	New Paid 0.00	Total Paid 0.00	. <u>Amount Due</u> 1,800.00
Fee Details:	Fee Description 45 Seat Bleacher	Amount 450.00	<u>Count</u> 6.00	Discount 900.00	Sales Tax 0.00	1,800.00
Processed on 09/21/	18 @ 10:24 am by tdumas	Total New Fees		Total Due		1,800.00 1,800.00
		Total Fees Paid Balance From Receip	pt	Total Paid		0.00 0.00 1,800.00