Louisville Metro Council City Agency Request

Neighborhood Development Fund (NDF)

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

| Amount: \$312.00 | Date: January 16, 2019 | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|--|--|--|--|--|
| Description of program/project including location of project/program and any exter | g public purpose, additional funding sources, ernal grantee(s): | | | | | |
| Grant to Economic Development for PARC to win and the Keats & Frankfort parking lot. | nterize the water fountains at Karen Lynch Park | | | | | |
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| City Agency: Economic Development | | | | | | |
| Contact Person: Justin Robinson | | | | | | |
| Agency Phone: 502-574-3542 | | | | | | |
| I have reviewed this request for an expend | | | | | | |
| determined the funds will be used for a public purpose and have the attached documentation from the receiving department concerning the project/expenditure. | | | | | | |
| A A | ment concerning the project/expenditure. | | | | | |
| · Bul Holade | _ \$312.00 1/17/19 | | | | | |
| District # Council Member Signature | Amount Date | | | | | |
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| A | | | | | | |
| Approved by: Appropriations Committee Chair | irman Date | | | | | |
| Clerk's Office & OMB Use Only: | | | | | | |
| Request Amount: | | | | | | |
| Reference #: | | | | | | |
| Budget Revision #: | | | | | | |
| Account #: | | | | | | |
| To Project Manager: | | | | | | |
| Actual Cost: | Funds Returned: | | | | | |

Primary Sponsor: Bill Hollander

NDF, CIF, MAP OR PAV INTERAGENCY CHECKLIST Interagency Name: Economic Development Program/Project Name: Winterize water fountains at Frankfort/Keats parking lot & Karen Lynch Park Yes/No/NA **Request Form:** Is the Request Signed by all Council Member(s) Yes Appropriating Funding? Request Form: If matching funds are to be used, are they disclosed with account numbers in the request form description? NA 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 used for this project, are they disclosed with account numbers in the request form description? NA Funding Source: If CIF is being requested, does Metro Louisville own/will own the real estate, building or equipment? If not, the Yes funding source is probably NDF. Funding Source: If CIF is being requested, does the project have a useful Y life of more than one year? If not, the funding source is probably NDF. Yes **Ordinance Required:** Is the NDF request to a Metro Agency greater than \$5,000? If so, an ordinance is required. No Ordinance Required: 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 Supporting Documentation: Does the attachment include a valid Yes estimate and description of cost?

Submitted by: Date: ||[[

LOUISVILLE / JEFFERSON CO. METRO GOVERNMENT INTERDEPARTMENT BILLING



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| | | | | FISCAL PERIOD FY-19 | BATCH NO | | | |
| | | | | | JOURNAL NO | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | | DOCUMENT NO | | |
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| | BILLI | ED DEPA | ARTMENT: | District 9 | | | | |
| . т | RII I IN | IC DEPA | ARTMENT: | DADC | | | | |
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| FUND | DEPT | DIV | UNIT | ACCOUNT | BY BILLING DEPARTMEN AMOUNT (CREDIT) | DESCRIPTION | | |
| 9502 | 954 | 9054 | 954000 | 562001 | 156.00 | Keats Park - Winterize fountain | | |
| 9502 | 954 | 9054 | 954000 | 562001 | 156.00 | Lynch - Winterize fountain | | |
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| TOTAL REVENUE BILLED 312.00 | | | | | | | | |
| PREPARED BY TITLE Business Manager | | | | | | | | |
| APPROV | VED BY | | phen/CL | | TITLE Business Administrat | or | | |
| | ************************************** | 77 | pinn, C | - window | | | | |
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| *************************************** | ······ | TOTAL | EXPENSE | CHARGED | | | | |
| PREPAR | ED DV | | | • | TITLE | DATE | | |
| | | | **** | | | | | |
| APPROV | $t \in D \times Y$ | , | | | TITLE | DATE | | |



Remit to:

P.O. Box 701620

Cincinnati, OH 45270-1620

BILLED BY: DAWN DUNLAP

211 W. MUHAMMAD ALI BLVD.

LOUISVILLE, KY 40202

INVOICE 00968653

DATE

CUSTOMER:

JOB ADDRESS:

11/13/18

35247

PARC

84567

WILLIAM

KAREN LYNCH PARK (PARC) PLUMBING

BUCHANON & STORY AVE LOUISVILLE, KY 40206

502-574-4442

Customer PO No.: WILLIAM HEIT

Ticket Number: 001318-000057584

Bill Contract: 0060257472

REFERENCE DESCRIPTION

AMOUNT

LOU METRO KAREN LYNCH PARK - WINTERIZE THE DRINKING FOUNTAINS

Labor

156.00

A Service Charge of 1.5% per Month

SUB-TOTAL

156.00

will be charged on All Past Due Accts.

TAX AMOUNT PAID

.00

AMOUNT DUE

.00

ORIGINAL

DUE ON RECEIPT

156.00



Remit to:

P.O. Box 701620

Cincinnati, OH 45270-1620

BILLED BY: DAWN DUNLAP

INVOICB 00968650 DATE 11/13/18

CUSTOMER:

35238

LOUISVILLE METRO GOVERNMENT 611 WEST JEFFERSON ST 8CSINESS OPERATIONS LOUISVILLE, KY 40202 502-574-5247 JOB ADDRESS:

85899 WILLIAM HEITZMAN KEATS PARK (PLUMB) 2327 FRANKFORT AVE LOUISVILLE, KY 40206

Customer PO No.: WILLIAM HRIT

Ticket Number: 001318-000057583

Bill Contract: 0060257471

REFERENCE DESCRIPTION

MOUNT

LOU METRO KEATS PARK WINTERIZE THE FOUNTAINS

Labor

156.00

A Service Charge of 1.5% per Month will be charged on All Past Due Accts.

SUB-TOTAL TAX

156.00

AMOUNT PAID AMOUNT DUE .00

ORIGINAL

DUE ON RECEIPT

156.00

DeGre-Kuempel

3976 Southern Avenue

Cincinnati, Ohio 45227

Phone 513-271-6500

Fax 513-271-4676