

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

Instructions

Today's date: 12/15/14

Are you submitting an:

- Internal Application  
 External Application

APPLICANT INFORMATION

Applicant Last Name:  
Gonzales

First:  
Norma

Middle:  
J

Amount Requesting\*:  
\$12,916.36

\*Please note that any award over \$10,000 will require City Council Approval.

Council District Request (May send to multiple districts):

- District 1  District 2  District 3  District 4  District 5  District 6  District 7  District 8  District 9  District 10  Mayor

Project Request - CCPF FUNDS (Delegate Agencies Excluded):

City Council finds that investment of CCPF in programs, activities, events, scholarships, goods or services deemed eligible under the criteria and guidelines established under this ordinance serve the municipal public purposes of:

- Promoting the health, safety and welfare of the community;
- Promoting family, social and economic stability;
- Promoting community education and training, which, in part, prepares the workforce for productive employment and meets the professional needs of the City;
- Promoting community recreation;
- Preventing homelessness; and
- Revitalizing neighborhoods.

Please identify your project request:

- District Community Events  
 Education  
 Youth / Senior Activities

City Council finds that the following qualify as eligible Applicants for CCPF:

- 1) A City Council District Office for district events;
- 2) A non-profit entity that: a) is exempt from federal income tax or is able to show proof at the time of application for CCPF of having filed for tax exempt status as determined by the Internal Revenue Service under section 501(c)(3) of the United States Internal Revenue Code, or is an affiliate of a non-profit, tax-exempt corporation; b) is able to show proof of exemption from franchise taxes by the Texas State Comptroller at the time of application for CCPF; and c) demonstrates that the proposed services, programs and events funded by CCPF will be open to the public;
- 3) A neighborhood association or other legally formed entity whose purpose as stated in its organizational documents is defined as serving the community;
- 4) Another governmental entity, such as municipality, county, school district, or other political subdivision of the State of Texas, who is requesting CCPF for a project it is not required to carry under its own charter or mandates by state or federal law, unless it involves a joint project with the City.

**PROJECT INFORMATION**

Project Name: District 7 Christmas Tree Lighting

Project Liaison: Norma J. Gonzales

Date of Event: 12/09/14

Description of Event/Purpose (Describe in 200-300 words):

12/09/14

District 7 Annual Award Excellence Leadership Banquet free and open to all District 7 residents. This event fosters community and fellowship.

Invoices of how funds will be allocated (I certify that I have attached all invoices related to this request. I understand that any missing invoices will not be covered by funds and purchases need to exclude alcohol, gift/gas cards, livestock, equipment or supplies from city departments and delegate agencies):

Important Note: Please, if you are not a registered vendor with the City of San Antonio, visit this website to register:  
<http://www.sanantonio.gov/purchasing/SAePS.aspx>

Project Liaison Phone Number: (210) 207-7044

Email: norma.j.gonzales@sanantonio.gov

Department/District/Organization: City Council District 7

Address: 100 Military Plaza, 4th fl.

**SIGNATURE**

All fields are required to be filled out prior to submitting. Applications will be considered incomplete if missing information.

I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: Norma J. Gonzales

Date: 12/15/2014

**APPROVAL OF FUNDS**

Signature of Councilmember (If Applicable):

Date: 12/15/14

Signature of Department Director/Department (If Applicable):

Date: 1/1

Fiscal Approval:

Approved Funding: 12,914.34



15.084

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION

Rec: ~~\$ 8000~~  
or  
\$ 2300



INTERNAL OR EXTERNAL CCPF APPLICATION

Instructions

Today's date: 09/30/2014

Are you submitting an:

- Internal Application
- External Application

APPLICANT INFORMATION

Applicant Last Name:  
Jimenez

First:  
Patricia

Middle:

Amount Requesting\*:  
\$13,500.00

\*Please note that any award over \$10,000 will require City Council Approval.

Council District Request (May send to multiple districts):

- District 1
- District 2
- District 3
- District 4
- District 5
- District 6
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- District 8
- District 9
- District 10
- Mayor

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- Promoting community recreation;
- Preventing homelessness; and
- Revitalizing neighborhoods.

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- District / Community Events
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**PROJECT INFORMATION**

Project Name: The Raul Jimenez Thanksgiving Dinner      Project Liaison: Patricia Jimenez      Date of Event: 11/27/2014

Description of Event/Purpose (Describe in 200-300 words):

The Raul Jimenez Thanksgiving Dinner is a 501c3 organization that prepares a traditional thanksgiving meal with all of the trimmings to feed 25,000 senior citizens, underprivileged families and the homeless. 3,000 of the 25,000 are designated for homebound meal delivery to senior citizens and the physically challenged who are not able to leave their home. With the support of the entire community we are celebrating our 35th anniversary this year.

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<http://www.sanantonio.gov/purchasing/SAePS.aspx>

Project Liaison Phone Number: 210-884-3033      Email: [pjimenez@satx.rr.com](mailto:pjimenez@satx.rr.com)

Department/District/Organization: Raul Jimenez Thanksgiving Din      Address: 8700 Crownhill Blvd., Suite 802, San Antonio, TX 78209

**FOR EXTERNAL APPLICANTS ONLY**

All fields are required to have the attachments when submitting. Applications will be considered incomplete if missing information.

Agency Board Roster:

I certify that I have attached a list of board members and their contact information.

Agency Fact:

I certify that I have attached a copy of the organization purpose or mission, the services that the organization offers along with the name of the project and program description for which funds are being requested.

Organization Verification of Federal Tax Identification #:

I certify that I have attached a copy of the organization's Federal Tax Identification letter.

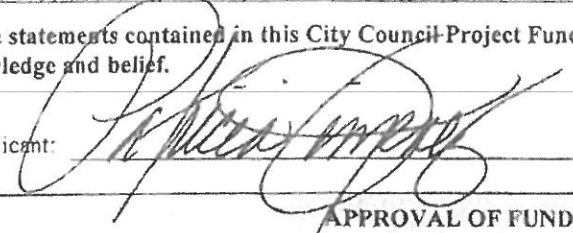
Acknowledgement Agreement: [Terms & Conditions]

Disagreement with these terms will cancel the submission of this grant application.       Agree with the terms

**SIGNATURE**

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I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: 

Date: 09/30/2014

**APPROVAL OF FUNDS**

Signature of Councilmember (If Applicable):

Date: 1/22/15

Signature of Department Director/Department (If Applicable): 

Date: 12/2/14

Fiscal Approval: 

Approved Funding: \$2300

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

Instructions

Today's date: 09/30/2014

Are you submitting an:

- Internal Application  
 External Application

APPLICANT INFORMATION

Applicant Last Name:  
Jimenez

First:  
Patricia

Middle:

Amount Requesting\*:  
\$13,500.00

Council District Request (May send to multiple districts):

\*Please note that any award over \$10,000 will require City Council approval.

District 1  District 2  District 3  District 4  District 5  District 6  District 7  District 8  District 9  District 10  Mayor

Project Request - CCPF FUNDS (Delegate Agencies Excluded):

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- Promoting community education and training, which, in part, prepares the workforce for productive employment and meets the professional needs of the City.
- Promoting community recreation.
- Preventing homelessness, and
- Revitalizing neighborhoods

Please identify your project request:

- District Community Events  
 Education  
 Youth/Senior Activities

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PROJECT INFORMATION

Project Name: The Raul Jimenez Thanksgiving Dinner

Project Liaison: Patricia Jimenez

Date of Event: 11/27/2014

Description of Event/Purpose (Describe in 200-300 words):

The Raul Jimenez Thanksgiving Dinner is a 501c3 organization that prepares a traditional thanksgiving meal with all of the trimmings to feed 25,000 senior citizens, underprivileged families and the homeless. 3,000 of the 25,000 are designated for homebound meal delivery to senior citizens and the physically challenged who are not able to leave their home. With the support of the entire community we are celebrating our 35th anniversary this year.

Invoices of how funds will be allocated (I certify that I have attached all invoices related to this request. I understand that any missing invoices will not be covered by funds and purchases need to exclude alcohol, gift/gas cards, livestock, equipment or supplies from city departments and delegate agencies):

Important Note: Please, if you are not a registered vendor with the City of San Antonio, visit this website to register: <http://www.sanantonio.gov/purchasing/SAePS.aspx>

Project Liaison Phone Number: 210-884-3033

Email: [pjimenez@satx.rr.com](mailto:pjimenez@satx.rr.com)

Department/District/Organization: Raul Jimenez Thanksgiving Din Address: 8700 Crownhill Blvd., Suite 802, San Antonio, TX 78209

FOR EXTERNAL APPLICANTS ONLY

All fields are required to have the attachments when submitting. Applications will be considered incomplete if missing information.

Agency Board Roster:

I certify that I have attached a list of board members and their contact information.

Agency Fact:

I certify that I have attached a copy of the organization purpose or mission, the services that the organization offers along with the name of the project and program description for which funds are being requested.

Organization Verification of Federal Tax Identification #:

I certify that I have attached a copy of the organization's Federal Tax Identification letter.

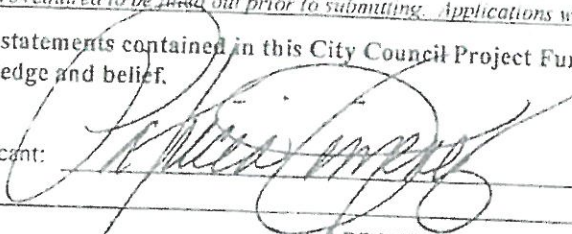
Acknowledgement Agreement: [Terms & Conditions]

Disagreement with these terms will cancel the submission of this grant application.  Agree with the terms

SIGNATURE

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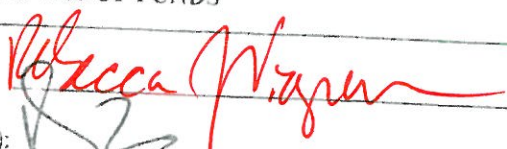
I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: 

Date: 09/30/2014

APPROVAL OF FUNDS

Signature of Councilmember (If Applicable):



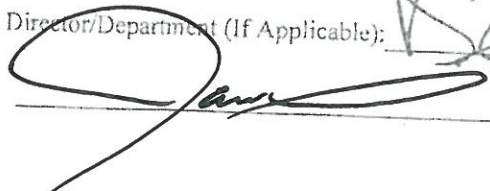
Date: 12/17/14

Signature of Department Director/Department (If Applicable):



Date: 12/2/14

Fiscal Approval:



Approved Funding: \$2,000

D3

15084

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

instructions

Today's date: 09/30/2014

Are you submitting an:

- Internal Application
- External Application

APPLICANT INFORMATION

Applicant Last Name:  
Jimenez

First:  
Patricia

Middle:

Amount Requesting\*:  
\$13,500.00

\*Please note that any award over \$10,000 will require City Council Approval.

Council District Request (May send to multiple districts):

- District 1
- District 2
- District 3
- District 4
- District 5
- District 6
- District 7
- District 8
- District 9
- District 10
- Mayor

Project Request - CCPF FUNDS (Delegate Agencies Excluded)

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- Promoting family, social and economic stability.
- Promoting community education and training, which, in part, prepares the work force for productive employment and meets the professional needs of the City.
- Promoting community recreation.
- Preventing homelessness, and
- Revitalizing neighborhoods

Please identify your project request:

- District / Community events
- Education
- Youth / Senior Activities

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PROJECT INFORMATION

Project Name: The Raul Jimenez Thanksgiving Dinner Project Liaison: Patricia Jimenez Date of Event: 11/27/2014

Description of Event/Purpose (Describe in 200-300 words):

The Raul Jimenez Thanksgiving Dinner is a 501c3 organization that prepares a traditional thanksgiving meal with all of the trimmings to feed 25,000 senior citizens, underprivileged families and the homeless. 3,000 of the 25,000 are designated for homebound meal delivery to senior citizens and the physically challenged who are not able to leave their home. With the support of the entire community we are celebrating our 35th anniversary this year.

Invoices of how funds will be allocated (I certify that I have attached all invoices related to this request. I understand that any missing invoices will not be covered by funds and purchases need to exclude alcohol, gift/gas cards, livestock, equipment or supplies from city departments and delegate agencies):

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Project Liaison Phone Number: 210-884-3033 Email: pjimenez@satx.rr.com

Department/District/Organization: Raul Jimenez Thanksgiving Din Address 8700 Crownhill Blvd., Suite 802, San Antonio, TX 78209

FOR EXTERNAL APPLICANTS ONLY

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Agency Board Roster:

I certify that I have attached a list of board members and their contact information.

Agency Fact:

I certify that I have attached a copy of the organization purpose or mission, the services that the organization offers along with the name of the project and program description for which funds are being requested.

Organization Verification of Federal Tax Identification #:

I certify that I have attached a copy of the organization's Federal Tax Identification letter.

Acknowledgement Agreement: [Terms & Conditions]

Disagreement with these terms will cancel the submission of this grant application. Agree with the terms

SIGNATURE

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I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant:

Date: 09/30/2014

APPROVAL OF FUNDS

Signature of Councilmember (If Applicable):

Signature: [Handwritten Signature] Date: 12/19/14

Signature of Department Director/Department (If Applicable):

Signature: [Handwritten Signature] Date: 12/2/14

Fiscal Approval:

Signature: [Handwritten Signature]

Approved Funding:

\$1,500.00

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

Instructions

Today's date: 09/30/2014

Are you submitting an:

- Internal Application  
 External Application

APPLICANT INFORMATION

Applicant Last Name: Jimenez First: Patricia Middle: Amount Requesting\*: \$13,500.00

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Council District Request (May send to multiple districts):

- District 1  District 2  District 3  District 4  District 5  District 6  District 7  District 8  District 9  District 10  Mayor

Project Request - CCPF FUNDS (Delegate Agencies Excluded):

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PROJECT INFORMATION

15 084

Project Name: The Raul Jimenez Thanksgiving Dinner

Project Liaison: Patricia Jimenez

Date of Event: 11/27/2014

Description of Event/Purpose (Describe in 200-300 words):

The Raul Jimenez Thanksgiving Dinner is a 501c3 organization that prepares a traditional thanksgiving meal with all of the trimmings to feed 25,000 senior citizens, underprivileged families and the homeless. 3,000 of the 25,000 are designated for homebound meal delivery to senior citizens and the physically challenged who are not able to leave their home. With the support of the entire community we are celebrating our 35th anniversary this year.

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Project Liaison Phone Number: 210-884-3033 Email: pjimenez@satx.tx.com

Department/District/Organization: Raul Jimenez Thanksgiving Din Address: 8700 Crownhill Blvd., Suite 802, San Antonio, TX 78209

FOR EXTERNAL APPLICANTS ONLY

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Signature of Applicant:

Date: 09/30/2014

APPROVAL OF FUNDS

Signature of Councilmember (If Applicable):

Date: 12/18/14

Signature of Department Director/Department (If Applicable):

Date: 12/2/14

Fiscal Approval:

Approved Funding:

1,066,00

DELIVERED DEC 1 9 2014

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



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APPLICANT INFORMATION

Applicant Last Name:  
Jimenez

First:  
Patricia

Middle:

Amount Requesting\*:  
\$13,500.00

Council District Request (May send to multiple districts):

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PROJECT INFORMATION

Project Name: The Raul Jimenez Thanksgiving Dinner

Project Liaison: Patricia Jimenez

Date of Event: 11/27/2014

Description of Event/Purpose (Describe in 200-300 words):

The Raul Jimenez Thanksgiving Dinner is a 501c3 organization that prepares a traditional thanksgiving meal with all of the trimmings to feed 25,000 senior citizens, underprivileged families and the homeless. 3,000 of the 25,000 are designated for homebound meal delivery to senior citizens and the physically challenged who are not able to leave their home. With the support of the entire community we are celebrating our 35th anniversary this year.

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Project Liaison Phone Number: 210-884-3033

Email: pjimenez@satx.rr.com

Department/District/Organization: Raul Jimenez Thanksgiving Din Address: 8700 Crownhill Blvd., Suite 802, San Antonio, TX 78209

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Signature of Applicant:

Date: 09/30/2014

APPROVAL OF FUNDS

Signature of Councilmember (If Applicable):

Date: 11 / 4 / 14

Signature of Department Director/Department (If Applicable):

Date: 12 / 2 / 14

Fiscal Approval:

Approved Funding:

\$6252.00

15.084

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

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Instructions

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- Internal Application
- External Application

APPLICANT INFORMATION

Applicant Last Name: Jimenez      First: Patricia      Middle:      Amount Requesting\*: \$13,500.00

\*Please note that any award over \$10,000 will require City Council Approval.

Council District Request (May send to multiple districts):

- District 1    District 2    District 3    District 4    District 5    District 6    District 7    District 8    District 9    District 10    Mayor

Project Request - CCPF FUNDS (Delegate Agencies Excluded):

City Council finds that investment of CCPF in programs, activities, events, scholarships, goods or services deemed eligible under the criteria and guidelines established under this ordinance serve the municipal public purposes of:

- Promoting the health, safety and welfare of the community;
- Promoting family, social and economic stability;
- Promoting community education and training, which, in part, prepares the workforce for productive employment and meets the professional needs of the City;
- Promoting community recreation;
- Preventing homelessness, and
- Revitalizing neighborhoods

Please identify your project request:

- District / Community Events
- Education
- Youth / Senior Activities

City Council finds that the following qualify as eligible Applicants for CCPF:

- 1) A City Council District Office for district events.
- 2) A non-profit entity that: a) is exempt from federal income tax or is able to show proof at the time of application for CCPF of having filed for tax exempt status as determined by the Internal Revenue Service under section 501(c)(3) of the United States Internal Revenue Code, or is an affiliate of a non-profit, tax-exempt corporation, b) is able to show proof of exemption from franchise taxes by the Texas State Comptroller at the time of application for CCPF, and c) demonstrates that the proposed services, programs and events funded by CCPF will be open to the public;
- 3) A neighborhood association or other legally formed entity whose purpose as stated in its organizational documents is defined as serving the community;
- 4) Another governmental entity, such as municipality, county, school district, or other political subdivision of the State of Texas, who is requesting CCPF for a project it is not required to carry under its own charter or mandates by state or federal law, unless it involves a joint project with the City.

**PROJECT INFORMATION**

Project Name: The Raul Jimenez Thanksgiving Dinner

Project Liaison: Patricia Jimenez

Date of Event: 11/27/2014

Description of Event/Purpose (Describe in 200-300 words):

The Raul Jimenez Thanksgiving Dinner is a 501c3 organization that prepares a traditional thanksgiving meal with all of the trimmings to feed 25,000 senior citizens, underprivileged families and the homeless. 3,000 of the 25,000 are designated for homebound meal delivery to senior citizens and the physically challenged who are not able to leave their home. With the support of the entire community we are celebrating our 35th anniversary this year.

Invoices of how funds will be allocated (I certify that I have attached all invoices related to this request. I understand that any missing invoices will not be covered by funds and purchases need to exclude alcohol, gift/gas cards, livestock, equipment or supplies from city departments and delegate agencies):

Important Note: Please, if you are not a registered vendor with the City of San Antonio, visit this website to register:  
<http://www.sanantonio.gov/purchasing/SAePS.aspx>

Project Liaison Phone Number: 210-884-3033

Email: [pjimenez@satx.rr.com](mailto:pjimenez@satx.rr.com)

Department/District/Organization: Raul Jimenez Thanksgiving Din Address: 8700 Crownhill Blvd., Suite 802, San Antonio, TX 78209

**FOR EXTERNAL APPLICANTS ONLY**

All fields are required to have the attachments when submitting. Applications will be considered incomplete if missing information.

Agency Board Roster:

I certify that I have attached a list of board members and their contact information.

Agency Fact:

I certify that I have attached a copy of the organization purpose or mission, the services that the organization offers along with the name of the project and program description for which funds are being requested.

Organization Verification of Federal Tax Identification #:

I certify that I have attached a copy of the organization's Federal Tax Identification letter.

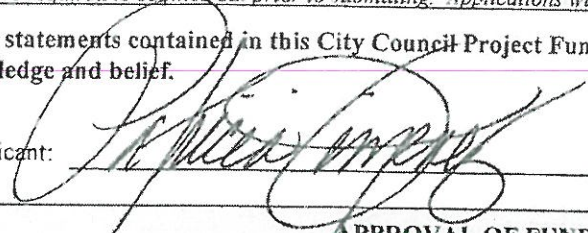
Acknowledgement Agreement: [Terms & Conditions]

Disagreement with these terms will cancel the submission of this grant application.  Agree with the terms

**SIGNATURE**

All fields are required to be filled out prior to submitting. Applications will be considered incomplete if missing information.

I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: 

Date: 09/30/2014

**APPROVAL OF FUNDS**

Signature of Councilmember (If Applicable):



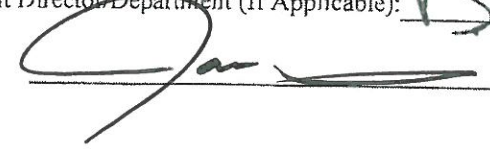
Date: 11/23/15

Signature of Department Director/Department (If Applicable):



Date: 12/2/14

Fiscal Approval:



Approved Funding:

\$ 1,100.00





The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

Instructions

Today's date: 01/07/2015

Are you submitting an:

- Internal Application  
 External Application

APPLICANT INFORMATION

Applicant Last Name: **Rodriguez** First: **Andi** Middle:

Amount Requesting\*:

**\$10,000.00** *LOOK*

*\*Please note that any award over \$10,000 will require City Council Approval.*

Council District Request (May send to multiple districts):

- District 1  District 2  District 3  District 4  District 5  District 6  District 7  District 8  District 9  District 10  Mayor

Project Request - CCPF FUNDS (Delegate Agencies Excluded):

City Council finds that investment of CCPF in programs, activities, events, scholarships, goods or services deemed eligible under the criteria and guidelines established under this ordinance serve the municipal public purposes of:

- Promoting the health, safety and welfare of the community;
- Promoting family, social and economic stability;
- Promoting community education and training, which, in part, prepares the workforce for productive employment and meets the professional needs of the City;
- Promoting community recreation;
- Preventing homelessness; and
- Revitalizing neighborhoods.

Please identify your project request:

- District / Community Events  
 Education  
 Youth / Senior Activities

City Council finds that the following qualify as eligible Applicants for CCPF:

- 1) A City Council District Office for district events;
- 2) A non-profit entity that: a) is exempt from federal income tax or is able to show proof at the time of application for CCPF of having filed for tax exempt status as determined by the Internal Revenue Service under section 501(c)(3) of the United States Internal Revenue Code, or is an affiliate of a non-profit, tax-exempt corporation; b) is able to show proof of exemption from franchise taxes by the Texas State Comptroller at the time of application for CCPF; and c) demonstrates that the proposed services, programs and events funded by CCPF will be open to the public;
- 3) A neighborhood association or other legally formed entity whose purpose as stated in its organizational documents is defined as serving the community;
- 4) Another governmental entity, such as municipality, county, school district, or other political subdivision of the State of Texas, who is requesting CCPF for a project it is not required to carry under its own charter or mandates by state or federal law, unless it involves a joint project with the City.

**PROJECT INFORMATION**

Project Name: Pathways To Leadership Scholarship      Project Liaison: Jennifer Ramirez      Date of Event: 08/03/2015

Description of Event/Purpose (*Describe in 200-300 words*):

The Mayor's Commission on the Status of Women in conjunction with International Women's Day luncheon work to provide funds for the Pathway's to Leadership Scholarship fund. The student must be a female graduating from any high school in Bexar County; plan to pursue a degree or certification at any two- or four-year accredited college, university or vocational or technical school; demonstrate leadership ability and be involved in community and/or outside school activities. Student must be unable to attend college without financial assistance or have a physical disability. Funding will be allocated to the student in August 2015.

Invoices of how funds will be allocated (*I certify that I have attached all invoices related to this request. I understand that any missing invoices will not be covered by funds and purchases need to exclude alcohol, gift gas cards, livestock, equipment or supplies from city departments and delegate agencies*):

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<http://www.sanantonio.gov/purchasing/SAePS.aspx>

Project Liaison Phone Number: (210) 207-8258      Email: [jennifer.ramirez@sanantonio.gov](mailto:jennifer.ramirez@sanantonio.gov)

Department/District/Organization: City Manager's Office      Address: City Hall

**SIGNATURE**

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I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: Andi Rodriguez

Date: 01-07-2015

**APPROVAL OF FUNDS**

Signature of Councilmember (If Applicable):

Date: 1/27/15

Signature of Department Director/Department (If Applicable):

Date: 1.19.15

Fiscal Approval:

Approved Funding:

\$2500

15.0910

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

[Instructions](#)

Today's date: 01/07/2015

Are you submitting an:

- Internal Application
- External Application

APPLICANT INFORMATION

Applicant Last Name: **Rodriguez** First: **Andi** Middle:

Amount Requesting\*:

~~\$10,000.00~~ **LOOK**

\*Please note that any award over \$10,000 will require City Council Approval.

Council District Request (May send to multiple districts):

- District 1
- District 2
- District 3
- District 4
- District 5
- District 6
- District 7
- District 8
- District 9
- District 10
- Mayor

Project Request - CCPF FUNDS (Delegate Agencies Excluded):

**\$ 2000**

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Please identify your project request:

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- Education
- Youth / Senior Activities

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**PROJECT INFORMATION**

Project Name: Pathways To Leadership Scholarship      Project Liaison: Jennifer Ramirez      Date of Event: 08/03/2015

Description of Event/Purpose (*Describe in 200-300 words*):

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Project Liaison Phone Number: (210) 207-8258      Email: [jennifer.ramirez@sanantonio.gov](mailto:jennifer.ramirez@sanantonio.gov)

Department/District Organization: City Manager's Office      Address: City Hall

**SIGNATURE**

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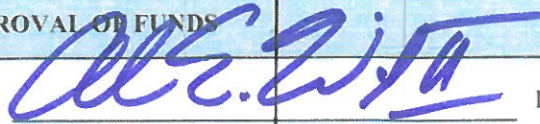
I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: Andi Rodriguez

Date: 01/07/2015

**APPROVAL OF FUNDS**

Signature of Councilmember (If Applicable):



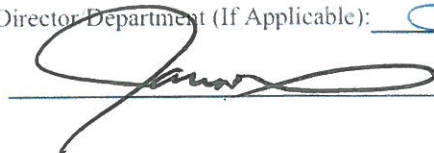
Date: 1/19/15

Signature of Department Director/Department (If Applicable):



Date: 1.19.15

Fiscal Approval:



Approved Funding:

\$200-

15.090

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

RECEIVED

JAN 09 2015

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

Instructions

Today's date: 01/07/2015

Are you submitting an:

- Internal Application
- External Application

APPLICANT INFORMATION

Applicant Last Name: **Rodriguez**      First: **Andi**      Middle:

Amount Requesting\*: **\$10,000.00** *WOK*  
 \*Please note that any award over \$10,000 will require City Council Approval.

Council District Request (May send to multiple districts):

- District 1    District 2    District 3    District 4    District 5    District 6    District 7    District 8    District 9    District 10    Mayor

Project Request - CCPF FUNDS (Delegate Agencies Excluded):

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- Revitalizing neighborhoods.

Please identify your project request:

- District / Community Events
- Education
- Youth / Senior Activities

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**PROJECT INFORMATION**

Project Name: Pathways To Leadership Scholarship      Project Liaison: Jennifer Ramirez      Date of Event: 08/03/2015

Description of Event/Purpose (*Describe in 200-300 words*):

The Mayor's Commission on the Status of Women in conjunction with International Women's Day luncheon work to provide funds for the Pathway's to Leadership Scholarship fund. The student must be a female graduating from any high school in Bexar County; plan to pursue a degree or certification at any two- or four-year accredited college, university or vocational or technical school; demonstrate leadership ability and be involved in community and/or outside school activities. Student must be unable to attend college without financial assistance or have a physical disability. Funding will be allocated to the student in August 2015.

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Project Liaison Phone Number: (210) 207-8258      Email: [jennifer.ramirez@sanantonio.gov](mailto:jennifer.ramirez@sanantonio.gov)

Department/District/Organization: City Manager's Office      Address: City Hall

**SIGNATURE**

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I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: Andi Rodriguez

Date: 01/07/2015

**APPROVAL OF FUNDS**

Signature of Councilmember (If Applicable):

     Date: 1/13/15

Signature of Department Director/Department (If Applicable):

     Date: 1.19.15

Fiscal Approval:

Approved Funding:

\$10,000.00

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

Instructions

Today's date: 01/07/2015

Are you submitting an:

- Internal Application  
 External Application

APPLICANT INFORMATION

Applicant Last Name: **Rodriguez** First: **Andi** Middle:

Amount Requesting\*:

**\$10,000.00** *LOOK*

*\*Please note that any award over \$10,000 will require City Council Approval.*

Council District Request (May send to multiple districts):

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Please identify your project request:

- District Community Events  
 Education  
 Youth/Senior Activities

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**PROJECT INFORMATION**

Project Name: Pathways To Leadership Scholarship

Project Liaison: Jennifer Ramirez

Date of Event: 08/03/2015

Description of Event Purpose (*Describe in 200-300 words*):

The Mayor's Commission on the Status of Women in conjunction with International Women's Day luncheon work to provide funds for the Pathway's to Leadership Scholarship fund. The student must be a female graduating from any high school in Bexar County; plan to pursue a degree or certification at any two- or four-year accredited college, university or vocational or technical school; demonstrate leadership ability and be involved in community and/or outside school activities. Student must be unable to attend college without financial assistance or have a physical disability. Funding will be allocated to the student in August 2015.

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Project Liaison Phone Number: (210) 207-8258

Email: [jennifer.ramirez@sanantonio.gov](mailto:jennifer.ramirez@sanantonio.gov)

Department/District/Organization: City Manager's Office

Address: City Hall

**SIGNATURE**

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I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: Andi Rodriguez

Date: 01/07/2015

**APPROVAL OF FUNDS**

Signature of Councilmember (If Applicable):

Ray Lopez (W)

Date: 1/27/15

Signature of Department Director/Department (If Applicable):

Leanti

Date: 1.19.15

Fiscal Approval:

[Signature]

Approved Funding:

\$1000.00



The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

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Are you submitting an:

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 External Application

APPLICANT INFORMATION

Applicant Last Name:  
**Rodriguez**

First:  
**Andi**

Middle:

Amount Requesting\*:

~~\$10,000.00~~ **600K**

\*Please note that any award over \$10,000 will require City Council Approval.

Council District Request (May send to multiple districts):

- District 1  District 2  District 3  District 4  District 5  District 6  District 7  District 8  District 9  District 10  Mayor

Project Request - CCPF FUNDS (Delegate Agencies Excluded):

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**PROJECT INFORMATION**

Project Name: Pathways To Leadership Scholarship      Project Liaison: Jennifer Ramirez      Date of Event: 08/03/2015

Description of Event/Purpose (Describe in 200-300 words):

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Department/District/Organization: City Manager's Office      Address: City Hall

**SIGNATURE**

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I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: Andi Rodriguez

Date: 01/07/2015

**APPROVAL OF FUNDS**

Signature of Councilmember (If Applicable):

Joe Kue

Date: 1/23/15

Signature of Department Director/Department (If Applicable):

Scotti

Date: 1.19.15

Fiscal Approval:

Jama

Approved Funding:

\$5,000<sup>00</sup>

15.090

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

Instructions

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APPLICANT INFORMATION

Applicant Last Name: **Rodríguez**      First: **Andi**      Middle:

Amount Requesting\*:

**\$10,000.00** *LOK*

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**PROJECT INFORMATION**

Project Name: Pathways To Leadership Scholarship

Project Liaison: Jennifer Ramirez

Date of Event: 08/03/2015

Description of Event/Purpose (Describe in 200-300 words):

The Mayor's Commission on the Status of Women in conjunction with International Women's Day luncheon work to provide funds for the Pathway's to Leadership Scholarship fund. The student must be a female graduating from any high school in Bexar County; plan to pursue a degree or certification at any two- or four-year accredited college, university or vocational or technical school; demonstrate leadership ability and be involved in community and/or outside school activities. Student must be unable to attend college without financial assistance or have a physical disability. Funding will be allocated to the student in August 2015.

Invoices of how funds will be allocated (I certify that I have attached all invoices related to this request. I understand that any missing invoices will not be covered by funds and purchases need to exclude alcohol, gift cards, livestock, equipment or supplies from city departments and delegate agencies):

Important Note: Please, if you are not a registered vendor with the City of San Antonio, visit this website to register:  
<http://www.sanantonio.gov/purchasing/SAePS.aspx>

Project Liaison Phone Number: (210) 207-8258

Email: [jennifer.ramirez@sanantonio.gov](mailto:jennifer.ramirez@sanantonio.gov)

Department/District/Organization: City Manager's Office

Address: City Hall

**SIGNATURE**

All fields are required to be filled out prior to submitting. Applications will be considered incomplete if missing information.

I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: Andi Rodriguez

Date: 01-07-2015

**APPROVAL OF FUNDS**

Signature of Councilmember (If Applicable):

[Signature]

Date: 1 19 15

Signature of Department Director/Department (If Applicable):

[Signature]

Date: 1. 19. 15

Fiscal Approval:

[Signature]

Approved Funding:

\$ 2,000.00



**The City of San Antonio, Texas**  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



**INTERNAL OR EXTERNAL CCPF APPLICATION**

Instructions

Today's date: 09/15/2014

**Are you submitting an:**

- Internal Application  
 External Application

**APPLICANT INFORMATION**

Applicant Last Name: **Hune**      First: **Mario**      Middle:

Amount Requesting\*:  
**\$21,000.00**

**Council District Request** (May send to multiple districts):

- District 1    District 2    District 3    District 4    District 5    District 6    District 7    District 8    District 9    District 10    Mayor

*\*Please note that any award over \$10,000 will require City Council Approval*

**Project Request - CCPF FUNDS** (Delegate Agencies Excluded):

City Council finds that investment of CCPF in programs, activities, events, scholarships, goods or services deemed eligible under the criteria and guidelines established under this ordinance serve the municipal public purposes of:

- Promoting the health, safety and welfare of the community;
- Promoting family, social and economic stability;
- Promoting community education and training, which, in part, prepares the workforce for productive employment and meets the professional needs of the City;
- Promoting community recreation;
- Preventing homelessness; and
- Revitalizing neighborhoods.

*Please identify your project request:*

- District Community Events  
 Education  
 Youth / Senior Activities

City Council finds that the following qualify as eligible Applicants for CCPF:

- 1) A City Council District Office for district events;
- 2) A non-profit entity that: a) is exempt from federal income tax or is able to show proof at the time of application for CCPF of having filed for tax exempt status as determined by the Internal Revenue Service under section 501(c)(3) of the United States Internal Revenue Code, or is an affiliate of a non-profit, tax-exempt corporation; b) is able to show proof of exemption from franchise taxes by the Texas State Comptroller at the time of application for CCPF; and c) demonstrates that the proposed services, programs and events funded by CCPF will be open to the public;
- 3) A neighborhood association or other legally formed entity whose purpose as stated in its organizational documents is defined as serving the community;
- 4) Another governmental entity, such as municipality, county, school district, or other political subdivision of the State of Texas, who is requesting CCPF for a project it is not required to carry under its own charter or mandates by state or federal law, unless it involves a joint project with the City

**PROJECT INFORMATION**

Project Name: District 10 School Safety Program

Project Liaison: Allison Cohen

Date of Event: 09/26/2014

Description of Event/Purpose (*Describe in 200-300 words*):

The District 10 School Safety Program will improve school zone safety by addressing school zone crossing areas and other efforts to make school zones safer. The office will work with TCI for implementation.

Invoices of how funds will be allocated (*I certify that I have attached all invoices related to this request. I understand that any missing invoices will not be covered by funds and purchases need to exclude alcohol, gift/gas cards, livestock, equipment or supplies from city departments and delegate agencies*):

*Important Note:* Please, if you are not a registered vendor with the City of San Antonio, visit this website to register: <http://www.sanantonio.gov/purchasing/SAePS.aspx>

Project Liaison Phone Number: (210) 207-0998

Email: Allison.Cohen@sanantonio.gov

Department/District/Organization: District 10

Address: 1635 NE Loop 410, Suite 604

**SIGNATURE**

*All fields are required to be filled out prior to submitting. Applications will be considered incomplete if missing information.*

I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: Mario Hune

Date: 09/11/2014

**APPROVAL OF FUNDS**

Signature of Councilmember (If Applicable):

Date: 9/16/14

Signature of Department Director/Department (If Applicable):

Date: 8/19/14

Fiscal Approval:

Approved Funding:

\$21,000

The City of San Antonio, Texas  
OFFICE OF THE CITY COUNCIL/MAYOR

CITY COUNCIL PROJECT FUNDS APPLICATION



INTERNAL OR EXTERNAL CCPF APPLICATION

[Instructions](#)

Today's date: 01/27/2015

Are you submitting an:

- Internal Application  
 External Application

APPLICANT INFORMATION

Applicant Last Name:  
**Roberts**

First:  
**Derek**

Middle:  
**F**

Amount Requesting\*:  
**\$19,957.90**

*\*Please note that any award over \$10,000 will require City Council Approval.*

**Council District Request** (May send to multiple districts):

- District 1  District 2  District 3  District 4  District 5  District 6  District 7  District 8  District 9  District 10  Mayor

**Project Request - CCPF FUNDS** (Delegate Agencies Excluded):

City Council finds that investment of CCPF in programs, activities, events, scholarships, goods or services deemed eligible under the criteria and guidelines established under this ordinance serve the municipal public purposes of:

- Promoting the health, safety and welfare of the community;
- Promoting family, social and economic stability;
- Promoting community education and training, which, in part, prepares the workforce for productive employment and meets the professional needs of the City;
- Promoting community recreation;
- Preventing homelessness; and
- Revitalizing neighborhoods.

**Please identify your project request:**

- District / Community Events**  
 **Education**  
 **Youth / Senior Activities**

City Council finds that the following qualify as eligible Applicants for CCPF:

- 1) A City Council District Office for district events;
- 2) A non-profit entity that: a) is exempt from federal income tax or is able to show proof at the time of application for CCPF of having filed for tax exempt status as determined by the Internal Revenue Service under section 501(c)(3) of the United States Internal Revenue Code, or is an affiliate of a non-profit, tax-exempt corporation; b) is able to show proof of exemption from franchise taxes by the Texas State Comptroller at the time of application for CCPF; and c) demonstrates that the proposed services, programs and events funded by CCPF will be open to the public;
- 3) A neighborhood association or other legally formed entity whose purpose as stated in its organizational documents is defined as serving the community;
- 4) Another governmental entity, such as municipality, county, school district, or other political subdivision of the State of Texas, who is requesting CCPF for a project it is not required to carry under its own charter or mandates by state or federal law, unless it involves a joint project with the City.



PROJECT INFORMATION

Project Name: Security Lighting- Pittman Sullivan BBCourts Project Liaison: Derek Roberts Date of Event: 01/27/2015

Description of Event/Purpose (Describe in 200-300 words):

Currently, court lighting is inadequate for activities on the Pittman-Sullivan Basketball Courts at night. The installation of these new lights will provide LED lighting for full illumination of the entirety of courts. Installation of these lights will increase visibility and safety at night which should lead to an increase in positive activity for neighborhood youth.

[X] Invoices of how funds will be allocated (I certify that I have attached all invoices related to this request. I understand that any missing invoices will not be covered by funds and purchases need to exclude alcohol, gift/gas cards, livestock, equipment or supplies from city departments and delegate agencies):

Important Note: Please, if you are not a registered vendor with the City of San Antonio, visit this website to register: http://www.sanantonio.gov/purchasing/SAePS.aspx

Project Liaison Phone Number: 2106677943 Email: derek.roberts@sanantonio.gov

Department/District/Organization: CM. Alan E. Warrick, II- D2 Address: City Hall

SIGNATURE

All fields are required to be filled out prior to submitting. Applications will be considered incomplete if missing information.

[X] I certify that the statements contained in this City Council Project Fund Application are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant: Derek F. Roberts

Date: 01/27/2015

APPROVAL OF FUNDS

Signature of Councilmember (If Applicable): [Signature]

Date: 1/27/15

Signature of Department Director/Department (If Applicable): [Signature]

Date: 1/27/15

Fiscal Approval: [Signature]

Approved Funding: \$19,957.00