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

## CITY COUNCIL PROJECT FUNDS APPLICATION



			INTER	(AL OR EX	CTERNAL C	CPF APPL	ACATION		ins ins	itructions
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Today's da	ite: 01/26/2	2016							nternal Applic	cation
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		en en en en en en La companyone de la co	El Million (ST	APPLIC	ANT INFO	RMATION				
	Last Name:	<u> </u>	Fîrst:		Middle:				nt Requesting	*.
Jimenez			Patricia	a					\$12,000.00  note that any awa	ard over \$10.000
Council D	istrict Requ	est (May sen	ıd to multiple	z districts):					puire City Counci	
District 1	☑ District 2	District 3	✓ District 4	☑District 5	☑ District 6	District 7	☑District 8	District 9	District 10	Mayor
Project l	Request - 0	ECPF FU	NDS (Deli	egate Agei	ncies Exclı	ided):				
City Counci	Il finds that inv	estment of C	CPF in progra	ıms, activities	, events, schol	arships, good	s or services d	leemed eligibl	e under the crit	eria and
guidelines e	stablished und	ler this ordina	ince serve the i	municipal pul						
<ul> <li>Prom</li> </ul>	oting the health, oting family, soc	cial and econom	nic stability;							
A THE RESERVE OF THE PARTY OF T	oting community oting community	Markey Michael Profession Ball (Published Street	training, which	i, in part, prepa	tes the workford	e for productiv	e employment a	and meets the pr	rofessional Aceds	of the City;
A STATE OF THE STA	inting homelessi alizing neighbor	<b>国际的信息的证明的表示的人员的证明的证明的工作。</b> "可能								
Please ldei	ntify.your pro	iject requesi	10 - 10 - 10 - 11 <b>D</b> 2 - 12 - 21		ru — proposition Note: Differen					
. Distric	t / Communi	ty Events								
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☐ Youth	/ Senior Acti	vities is an a								A STATE OF THE STA
City Council finds that the following qualify as <u>eligible</u> Applicants for CCPF:										
l) AG	ity Comed Distr	ict Office for d	istrict events;							
2) A no	m-profit entity t	Aat: a) is exemp	pt from federal	income/hix or i	s able to show p	roof at the time	of application I	for CCPP of hav	ving filed for tax	exempt status as
согра	oration; b) is abl	le to show proof	f of exemption (	trom franchise (	laxes by the To	xas State Comp	doller at the fur	ie of application	Hinte of a non-pr n for CCPF; and	c) demonstrates
Section 2	the proposed ser				Section 1995			Ashan I se	erving the comm	en e
				From School						
	ber government et iv it not reastr								is, who is request he City	ing corrust a

The Raul Jimenez Thanksgiving Dinner is a 501c3 rimmings to feed 25,000 senior citizens, underprise homebound senior citizens and disabled individual volunteers and generous sponsors and donors the fantonio community.  Invoices of how funds will be allocated (1 certifications)	organization that prepares a traditional vileged families and the homeless on Thatuals who cannot leave their homes. This	anksgiving Day. Meals are also delivered
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ising invoices will not be covered by Jurias and pu m city departments and delegate agencies):	v that I have attached all invoices related archases need to exclude alcohol, gift/gas	
Important New Please. If you are not a reg	distered vendor with the City of San Arto	nuc visa this website to expision
http://www	sanantonio.gov/purchasing/SAePS.asp	x
oject Liaison Phone Number: 210-884-3033	Email: pjimenez@satx.rr.com	
partment/District/Organization: Raul Jimenez The	anksgiving Din. Address: 8700 Crownh	ill Blvd., Suite 802
FOR All fields are required to have the attachmants of	EXTERNAL APPLICANTS ONLY when submitting. Applications will be considered	ered incomplete if missine information.
Agency Board Roster:		
I certify that I have attached a list of board men	whers and their contact information.	
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Agency Fact:		
I certify that I have attached a copy of the orga- name of the project and program description fo		that the organization offers along with the
Organization Verification of Federal Tax Ide	entification #:	
I certify that I have attached a copy of the orga		zr.
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cknowledgement Agreement: [Terms & Condit Disagreement with these terms will cancel the s		Agree with the terms
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All fields are required to be filled out prior	SIGNATURE to submitting. Applications will be considered	d incomplete if missing information.
I certify that the statements contained in this best of my knowledge and belief.	s City Council Project Fund Application	on are true, correct and complete to the
Signature of Applicant:	MARIE	Date: 01/26/2016
	APPROVAL OF FUNDS	
nature of Councilmember (If Applicable):		Date: / /
unature of Department Director/Department (If Ag	A CONTRACT C	Date: / /
cal Approval:	Approved Fun	iding: 11,LUU.UU

	PROJECT INFORMATION				
Project Name:	Project Liaison:	Date of Event:			
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 on Thanksgiving Day. Meals are also delivered to homebound senior citizens and disabled individuals who cannot leave their homes. This year, with the help of thousands of volunteers and generous sponsors and donors the Raul Jimenez Thanksgiving Dinner will celebrate 37 years of serving the San Antonio community.					
Invoices of how funds will be allocated (I certify missing invoices will not be covered by funds and put from city departments and delegate agencies):					
Important New Please, if you are not a reg	distored vendor with the Chy of Sun Arnonso.	visa this website to register:			
http://www	sanantonio.gov/purchasing/SAePS.aspx				
Project Liaison Phone Number: 210-884-3033	Email: pjimenez@satx.rr.com				
Department/District/Organization: Raul Jimenez Th	anksgiving Din. Address: 8700 Crownhill E	Blvd., Suite 802			
FOR	EXTERNAL APPLICANTS ONLY when submutting. Applications will be considered	I incomplete if missing information.			
<ul> <li>✓ Agency Board Roster:         <ul> <li>I certify that I have attached a list of board members and their contact information.</li> </ul> </li> <li>✓ Agency Fact:         <ul> <li>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.</li> </ul> </li> <li>✓ Organization Verification of Federal Tax Identification #:         <ul> <li>I certify that I have attached a copy of the organization's Federal Tax Identification letter.</li> </ul> </li> <li>Acknowledgement Agreement: [Terms &amp; Conditions]         <ul> <li>Disagreement with these terms will cancel the submission of this grant application.</li></ul></li></ul>					
Signature of Applicant:  Signature of Councilmember (If Applicable):	APPROVAL OF FUNDS	Date: 01/26/2016  Date: 3 /8 / 6  Date: 3 / 4 / 6			
Signature of Department Director/Department (If Approval:	Approved Fundin	<b>حا.</b> ما ۸۸ ا			

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http://www	sanantonio.gov/purchasing/SAePS.asp.	X	
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☑ Organization Verification of Federal Tax Ide	ntification #:		
I certify that I have attached a copy of the organ	nízatíon's Federal Tax Identification lett	er.	
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✓ I certify that the statements contained in this	City Council Project Fund Applicati	on are true, correct and	I complete to the
best of my knowledge and bejief.	3		
Jan			
Signature of Applicant:	MARKE	Date:	01/26/2016
	APPROVAL OF FUNDS		
Signature of Councilmember (If Applicable):	Cua Latil &	Rey Julian Dai	e: 3/9/16
Signature of Department Director/Department (If Ap	plicable):	V	e 3/14/16
Fiscal Approval:	Approved Fu	nding: \$\(\sigma \)\(\sigma \)\(\sigma \)	) =

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Invoices of how funds will be allocated (I cert missing invoices will not be covered by funds and p from city departments and delegate agencies):	ify that I have attached all invoices related to purchases need to exclude alcohol, gift/gas c	o this request. I understand that any cards, livestock, equipment or supplies
•	egistered vendor with the City of Nac Naced www.sanantonio.gov/purchasing/SAePS.aspx	
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I certify that I have attached a copy of the org		
Acknowledgement Agreement: [Terms & Conc	itions I	,
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Signature of Applicant:	Toman	Date: 01/26/2016
	APPROVAL OF FUNDS	
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lignature of Department Director/Department (If A	Applicable):	Date: 3 /14 / [0
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http://www	.sanantonio.gov/purchasing/SAePS.asp:	x
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Signature of Applicant:	MINE	Date: 01/26/2016
	APPROVAL OF FUNDS	
Signature of Councilmember (If Applicable):	Kay Loper (U	Date: 3 /10 / 16
Signature of Department Director/Department (If Ap	plicable):	#1101000 Date: 3,14,19
Fiscal Approval:	Approved Fund	ding: 411-1-
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	APPROVAL OF FUNDS	
Signature of Councilmember (If Applicable):	lug ?.	Date: 3 /14 /16
Signature of Department Director/Department (If Ap	oplicable):	Date: 3 /14 /16
Fiscal Approval:	Approved Fur	nding: <b>9</b> 1, 203
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