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

CITY COUNCIL PROJECT FUNDS APPLICATION



CCPF Ordinances	INTER	NAL OR EX	CTERNAL (CCPF APPL	LICATION		Ins	structions	
Project Name: Mobile shower trailer to serve homeless Today's date: 12/11/2018						✓ i	Are you submitting an: Internal Application External Application		
		APPLIC	ANT INFO	RMATION		CO TEN			
Applicant Last Name: Rees Council District Request (May se	First: Tracy		Middle:		Lie	*Please	nt Requesting \$77,000.00 note that any aw quire City Counc	ard over \$10,000	
☑District 1 ☑District 2 ☑District 3			☑ District 6	✓ District 7	✓ District 8	✓ District 9	District 10	✓Mayor	
City Council finds that investment of 0 guidelines established under this ordin Promoting the health, safety and we Promoting family, social and econo Promoting community education ar Promoting community recreation, Preventing homelessness; and Revitalizing neighborhoods	ance serve the elfare of the com unic stability, and training, which	municipal pu munity;	blic purposes	of:					
Please identify your project reque	st:								
 ☑ District / Gommunity Events ☑ Education ☑ Youth / Senior Activities 									
City Council finds that the following qualif	fy as <u>eligible</u> Ap	plicants for CC	PF:						
A City Council District Office for	district events;								
A non-profit entity that: a) is exert determined by the Internal Reverous corporation; b) is able to show prothat the proposed services, program	nue Service unde of of exemption	er section 501(from franchise	c)(3) of the Un taxes by the To	ited States Inte	rnal Revenue C	code, or is an aff	filiate of a non-p	orofit, tax-exempt	

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 CGPF 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 Gity.

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			PROJEC	T INFORMATIO	N			
		railer to serve hom Describe in 200-300		Project Liaison: T	. Rees for CM	Treviño Date of E	Event:	
We have an i with me in ur mobile shows	nexpensive and dated identaking a "deed or trailer for their	irect way to position ds, not words" effortuse. This trailer ca	vely impact to	he lives of the home homeless individua throughout our City ployed around the	Is with a little t			
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	tant Note: Please, Phone Number:	if you are not a re http://www	w.sanantonio	dor with the City of o.gov/purchasing/5	AePS.aspx	isit this website to	register:	
20 -	trict/Organization		Email: 1	Theresa.rees@sanan				
			ST OF ALL	RELATED EXPE	Box 839966, 7	8283		
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Fiscal Approval:		Department (If Ap	oplicable):	- Ulli	ved Funding:	Date Date	12,19	118
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		19.123	5					
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		PROJ	ECT INFORMATION				
Project Name: Mobile shower tra	iler to serve hom	reless	Project Liaison: T. Rees i	for CM Tre	viño Date of E	venti	
Description of Event/Purpose (1)e.	scribe in 200-30	() words):					
We have an inexpensive and din with me in undertaking a "deeds mobile shower trailer for their us in all areas of the city and it can	, not words" effe se. This trailer of	on to prov	ide homeless individuals with ed throughout our City Counc	a little mo	no dianity by nu	enhagina a	
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Important Note; Please, i	fyou are not a to	gistered v	endor with the City of San Ar	ntonia, visi	Libra website to	notister.	
	http://v/w	w.sananto	oniu.gov/purchasing/5AePS.a	aspx		1 4 24 1 1 4 1	
Project Liaison Phone Number:	207-7279	Emai	il: Theresa,rees@sanantonio.g	šov			
Department District Organization:	DI		Address: P.O. Box 8.	39966, 782	83		
	Li	ST OF A	LL RELATED EXPENSES				
Date Vendor		Expens	se Item / Explanation		Paid / UnPaid	Amount	Add
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			CLOBI A WILLIAM		Total Exp	enses	
All fields are required to	u be filled out priu	e to submit	SIGNATURE Tung. Applications will be consider	lered incomp	leta of missing inj	urmation,	
I certify that the statements	contained in th	is City Co	nuncil Project Fund Applica enses, and are true, correct	lion done	Lette cont	4.5	edge
Signature (or printed name) of	f Applicant: 1	Fracy Re	es		Date:	12 11 2018	eture.
		APP	ROVAL OF FUNDS				
Signature of Councilmember (If A)	oplicable);		M/a	M	Date	3.1.1	7
Signature of Department Director/I	Department (If A	pplicable)	Muc	all	Date	3.1.1	,18
iscal Approval:			Approved F	unding:	BMOW		-
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APPROVAL OF PUNDS

Signature of Councilmember (If Applicable):

Date:

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Description of	of Event/Purpose (Des	cribe in 200-300 words	;)				
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	n Phone Number:		ail: Theresa,rees	_			,
Department/D	istrict/Organization: I)	Addres	s: P.O. Box 839966	, 78283		
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A SECTION A	ll fields are required to	be filled out prior to subm	itting. Application	will be considered inc	complete if missing info	ormation.	
↓ I certify is	that the statements c	ontained in this City (-07-0761, including ex	Commell Books are			PROPERTY OF THE PROPERTY OF TH	dge
Signature	(or printed name) of A	Applicant: Tracy R	ees		Date:	12/11/2018	
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No. 150 - MG-01	Mary Seat Programme Co.	CONTRACT OF STREET		71 5	a a	19844	
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ignature of De	partment Director/De	partment (If Applicable	e):(<u>/</u>	In Call		12,19	
iscal Approval	l:		-133-7%	Approved Funding		60	
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		-7279 Email:	Theresa.rees@sanantonio.go					
Department	District/Organization: D1	Water Market and American	Address: P.O. Box 839	9966, 78283				
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Signatur		cant: Tracy Ree		Date:	12/11/2018			
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Project Nar	me: Mobile shower tra	iler to serve hon	neless Pro	oject Liaison: T. Rees fe	or CM Treviño Date of	Event:	2000
Description	of Event/Purpose (De	scribe in 200-30					
mobile she	i undertaking a "deeds	s, not words" effe se. This trailer ca	ort to provide hon an be rotated thro	neless individuals with ughout our City Counci	pulation of San Antonio. a little more dignity by p il Districts to serve home		
☐ Invoices missing invo	of how funds will be	allocated (I cert	ify that I have atta	sched all invoices relate	ed to this request. I unde as cards, livestock, equip	rstand that an ment or suppl	ies
lm	portant Note: Please, i	f you are not a re	egistered vendor v	with the City of San An	tonio, visit this website to	register:	
		http://ww	/w.sanantonio.go	v/purchasing/SAePS.a	spx		
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and be	lief. re (or printed name) o		Tracy Rees	and study contact a	Date:	12/11/2018	
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