



## Legislation Text

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**File #:** 24-2561, **Version:** 1

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**Department:** Commissioner, Precinct 4

**Department Head/Elected Official:** Lesley Briones, Commissioner

**Regular or Supplemental RCA:** Supplemental RCA

**Type of Request:** Financial Authorization

**Project ID (if applicable):** N/A

**Vendor/Entity Legal Name (if applicable):** N/A

**MWDBE Contracted Goal (if applicable):** N/A

**MWDBE Current Participation (if applicable):** N/A

**Justification for 0% MWDBE Participation Goal:** N/A - Goal not applicable to request

**Request Summary (Agenda Caption):**

Request by the Commissioner of Precinct 4 for approval to sponsor *Families with Pride* Children's Event in an amount not to exceed \$5,000.00 and made payable to Houston Civic Events, Inc.

**Background and Discussion:**

On Saturday, June 1, 2024, Houston City Council Member Abbie Kamin will host the third annual *Families with Pride* Children's Event. It will be a family-friendly event at Discovery Green Park for LGBTQIA+ children, families, and allies as part of Houston's Pride Month.

**Expected Impact:**

This sponsorship will offset costs for the event, including games, activities, hands-on projects, and face painting.

**Alternative Options:** N/A

**Alignment with Goal(s):**

- Justice and Safety
- Economic Opportunity
- Housing
- Public Health
- Transportation
- Flooding
- Environment
- Governance and Customer Service

**Prior Court Action (if any):**

Date	Agenda Item #	Action Taken
N/A	N/A	N/A

**Location:**

Address (if applicable): 1500 McKinney St. Houston, Texas 77002

Precinct(s): Countywide

<b>Fiscal and Personnel Summary</b>				
Service Name				
	Current Fiscal Year Cost			Annual Fiscal Cost
	Labor	Non-Labor	Total	Recurring Expenses
<b>Funding Sources</b>				
<b>Existing Budget</b>				
1000 - General Fund	\$	\$5,000	\$ 5,000	\$
Choose an item.	\$	\$	\$	\$
Choose an item.	\$	\$	\$	\$
<b>Total Current Budget</b>	\$	\$5,000	\$ 5,000	\$
<b>Additional Budget Request (Requires Fiscal Review Request Form)</b>				
Choose an item.	\$	\$	\$	\$
Choose an item.	\$	\$	\$	\$
Choose an item.	\$	\$	\$	\$
<b>Total Additional Budget Request</b>	\$	\$	\$	\$
<b>Total Funding Request</b>	\$	\$5,000	\$5,000	\$
<b>Personnel (Fill out section only if requesting new PCNs)</b>				
Current Position Count for Service	-	-	-	-
Additional Positions Request	-	-	-	-
<b>Total Personnel</b>	-	-	-	-

**Anticipated Court Date: April 23, 2024**

**Anticipated Implementation Date (if different from Court date): June 1, 2024**

**Emergency/Disaster Recovery Note:** Not an emergency, disaster, or COVID-19 related item

**Contact(s) name, title, department:** Alma D. Rincon, Chief of Administration, Harris County Commissioner Precinct 4

**Attachments (if applicable):** Sponsorship Form