2026 - 2030 Capital Budget Summary Page									
Department Agency Number	870-A	Contact Name	Dr. Sandra Wilson						
Department Name	Registrar of Voters	Contact Number	(504) 658-8300						
Date	05/08/2025	Contact Email							
Department Ranking	Priority Criteria Ranking	Project Name	Project Amount	2026	2027	2028	2029	2030	
1	102	Registrar of Voters Capital Budgets	\$475,000.00	\$475,000.00		-		-	
TOTAL			\$475,000.00	\$475,000.00		-	-	-	

Agency Number Project Name Office Facilities updates and office Security Department Priority Ranking 1	Capital Budget Request Form								
Project Type Public Facilities Is a Land acquisition needed? (Y/N) False Will this project be a permanent immovable improvement? Project Address City Wide Council District Detailed Summary: Include Scope of work, parking requirements, landscaping, etc. Main Office- replacing the front counter for ADA Compliance, Cages in the basement for the office separate other offices located in the basement to be customed designed and installed by proper management, flooring, paint and security of machines Algiers office- security and access control, door hardware, and security of machines. Five Year Summary Has an Architect or Engineer prepared drawings for this project? Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities) False Please provide estimate of increase operating costs.	Agency Number		Department Name	870-A - Registrar of Voters					
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your department's current operating expenses? (i.e. False increase or decrease operating costs. require additional staff, maintenance, utilities)	epared drawings for this		this was funded and current						
Proposed Funding Source	ur department's current perating expenses? (i.e. equire additional staff,	False	increase or decrease						
	oposed Funding Source								
Does this project fall in line with the current Zoning requirements False If no please list required change	vith the current Zoning	False							
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	project conforms to objectives and ecommendations of the								
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.	runoff water quality or reduce the impacts of coding? If yes, please explain how this is chieved, describing the a that is impacted. If no, please describe any egative impacts, and the								
For what year are you requesting the Project? What Benefit(s) will be									
provided to Public from this project? 2026 \$475,000.00									
2027 \$0.00 2028 \$0.00				'					
2029 \$0.00									
2030 \$0.00									

Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	False	If no please discuss required improvements and estimated costs						
Capital Budget Request Priority Rating Form								
Agency Number	870 - Orleans Parish Registrar of Voters	Department Name	870-A - Registrar of Voters					
Project Name	Office Facilities updates and office Security	Department Priority Ranking	1					
Categories	Rating	s	core					
Public Health and Safety	4		9					
External Requirements	4		9					
Protection of Capital Stock	4		9					
Economic Development	1		0					
Operating Budget	3		6					
Life Expectancy of Project	3		6					
Percent of Population Served by Projects	4		9					
Relation to Adopted Plans	2		3					
Intensity of Use	4		9					
Scheduling	4		9					
Benefit/ Cost	4		9					
Potential for Duplication	3		6					
Availability of Financing	1		0					
Special Need	3		6					
Energy Consumption	3		6					
Timeliness/ External	1		0					
Public Support	2		3					
Environmental Quality and Stormwater Management	2		3					

TOTAL Ranking