

Appropriations Requests for Legislatively Directed Spending Items

- 1. The sponsoring representative's first name: Joseph
- 2. The sponsoring representative's last name: Aragona
- The cosponsoring representatives' names. All cosponsors must be listed. If none, please type 'n/a.' A signed letter from the sponsor approving the co-sponsorship and a signed letter from the member wishing to co-sponsor are required. Attach letters at question #9 below.
 N/A
- 4. Name of the entity that the spending item is intended for: Clinton Township
- 5. Physical address of the entity that the spending item is intended for: 40700 Romeo Plank Road Clinton Township, MI 48038-2900
- 6. If there is not a specific recipient, the intended location of the project or activity: Garfield between 18 Mile and Hall Roads in Clinton Township
- Name of the representative and the district number where the legislatively directed spending item is located: Aragona, 60
- 8. Purpose of the legislatively directed spending item. Please include how it provides a public benefit and why it is an appropriate use of taxpayer funding. Please also demonstrate that the item does not violate Article IV, S 30 of the Michigan Constitution. The improvements along Garfield Road are to address existing sidewalk gaps. This protects public safety and accessibility for pedestrians, particularly bus users and disabled individuals, by providing safer passage on a busy roadway. The project benefits the public by improving connectivity to amenities, the Macomb Intermediate School District, and Macomb Community College, encouraging pedestrian activity. It is an appropriate use of taxpayer funds, supporting essential public infrastructure and ensuring all individuals have the ability to safely access the sidewalk
- 9. Attach documents here if needed:

Attachments added to the end of this file.

- 10. The amount of state funding requested for the legislatively directed spending item. 650000
- 11. Has the legislatively directed spending item previously received any of the following types of funding? Check all that apply.["Local"]
- 12. Please select one of the following groups that describes the entity requesting the legislatively directed spending item: Local unit government
- 13. For a non-profit organization, has the organization been operating within Michigan for the preceding 36 months? Not applicable
- 14. For a non-profit organization, has the entity had a physical office within Michigan for the preceding 12 months? Not applicable
- 15. For a non-profit organization, does the organization have a board of directors? Not applicable
- 16. For a non-profit organization, list all the active members on the organization's board of directors and any other officers. If this question is not applicable, please type 'n/a.' n/a.
- 17. "I certify that neither the sponsoring representative nor the sponsoring representative's staff or immediate family has a direct or indirect pecuniary interest in the legislatively directed spending item."

Yes, this is correct

- 18. Anticipated start and end dates for the legislatively directed spending item: 10/1/25-9/1/26
- 19. "I hereby certify that all information provided in this request is true and accurate." Yes