

**PROPOSED CAPITAL IMPROVEMENTS TO BE MADE UNDER PROVISIONS
NMSA 60-1A-20(A)**

DATE SUBMITTED _____

DATE APPROVED _____

Track Name _____

Project Name _____ Project Number _____

Project Supervisor _____ Priority _____

Estimated Cost _____ Contractor's Estimate Attached? Yes ___ No ___

Amount of total cost to be offset by State Tax Revenue _____

Amount of total cost to be paid by other funds _____
(list all sources of funds on the line below)

Submit upon completion

Final total cost \$ _____ All costs have been submitted? Yes ___ No ___

Over or (Under) estimate _____

Estimated starting date _____ Estimated completion date _____

Upon completion is this improvement subject to depreciation? Yes ___ No ___

Are funds for this project coming from financing? Yes ___ No ___

Will track personnel be used as labor to complete project? Yes ___ No ___
(Requestor must attach details on labor to be used)

In space below, please describe the project in greater detail:

How will the project increase wagering and tourism?