



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Wakulla County Public Library

2. **Senate Sponsor:** Bill Montford

3. **Date of Submission:** 12/11/2017

4. **Project/Program Description:**

Funds will be used for a new 12,000 sq ft library to provide a centrally located and adequate space to meet citizens' needs. The current library is located in the Medart Community and was built when the population was less than 20,000, and the current population now exceeds 30,000. Over the last couple of years the existing library has seen an average increase of 13% of citizens using the library; 37% increase in the number of programs offered; and an increase of 56% (or 8,000) of children attending offered programs. The current library also provides a teaching garden and hosts 7 annual events, providing programs traditionally offered at community centers. The existing library would be turned into a much needed Fire/EMS station located in the Medart Area.

5. **State Agency Contacted?** No

a. If yes, which state agency?

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?
Department of State

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	472,712	472,712

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 472,712

9. **Previous Year Funding Details:**



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

- Has funding been provided in a previous state budget for this activity? No
- In the previous 5 fiscal years, how many years was funding provided? (Optional)
- What is the most recent fiscal year the project was funded?
- Were the funds provided in the most recent fiscal year subsequently vetoed?
- Complete the following Worksheet.

FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
	Column:	A	B
Funds Description:		Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *
Input Amounts:			

10. Is future-year funding likely to be requested?

Yes

- If yes, indicate non-recurring amount per year.

Yes, funds currently being requested are for design and permitting. Additional funds will be requested for construction, non-recurring, \$2 million in FY 2019-20.

11. Program Performance:

- What is the specific purpose or goal that will be achieved by the funds requested?

The goal is to provide a centrally-located library with adequate space to meet the County's growing population and demand for services.

- What are the activities and services that will be provided to meet the intended purpose of these funds?

An array of educational and community activities will be offered, including STEM classes to supplement current education, computers and training not available through current education institutions, meeting space, teaching garden, community events and other activities that enhance education and quality of life for our citizens.

- How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and		



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Design, Engineering, Permitting	472,712
TOTAL		472,712

d. What are the direct services to be provided to citizens by the appropriations project?

Opportunities to participate in existing and new library, community, and after school programs and activities.

e. Who is the target population served by this project? How many individuals are expected to be served?

All citizens of Wakulla County

f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

All citizens will benefit from a centrally located/larger library. The number of activities offered and participation as well as the number of library users will be tracked to compare with past years.

g. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?

Funding would be on a cost reimbursement basis.

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

Wakulla County Board of County Commissioners is the owner and will receive funds if appropriated.

13. Requestor Contact Information:

a. Name: Sheree Keeler

b. Organization: Wakulla County Board of County Commissioners



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

- c. Email: skeeler@mywakulla.com
- d. Phone Number: (840)926-0919

14. Recipient Contact Information:

- a. Organization: Wakulla County Board of County Commissioners
- b. County: Wakulla
- c. Organization Type:
 - ☐ For Profit
 - ☐ Non Profit 501(c) (3)
 - ☐ Non Profit 501(c) (4)
 - ☒ Local Entity
 - ☐ University or College
 - ☐ Other (Please specify)
- d. Contact Name: Sheree Keeler
- e. E-mail Address: skeeler@mywakulla.com
- f. Phone Number: (840)926-0919

15. If there is a registered lobbyist, fill out the lobbyist information below.

- a. Name: None
- b. Firm: None
- c. Email:
- d. Phone Number: