



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 1746

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This 1961 building reflects the postmodern architecture of that era and is located in Starke, Florida. It was built under the minimum construction codes and currently requires upgrading to meet present day safety to life and ADA requirements. This includes re-roofing, re-flooring, upgrading the electrical, adding air conditioning, interior and exterior improvements, and ADA upgrades for the restrooms.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	350,000
<b>Total State Funds Requested</b>	<b>350,000</b>

7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	350,000	74%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	92,058	20%
Local	29,582	6%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2021-2022</b>	<b>471,640</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2020-21		319,000	2279A	Yes

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 1746

#### 11. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Roof replacement (\$95,000); replace HVAC system (\$60,000); replace electrical power and lighting (\$40,000); ADA upgrades for restrooms (\$30,000); replace flooring (\$40,000); replace exterior doors (\$12,000); site drainage (\$6,000); replace wood flooring (\$14,000); replace basketball goals (\$12,000); replace south wall (\$14,000); replace wood bleachers (\$15,000); and re-paint interior and exterior surfaces (\$12,000).	350,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>350,000</b>

#### 12. Program Performance

##### a. What specific purpose or goal will be achieved by the funds requested?

The RJE Gymnasium was dedicated for public use by the Bradford County School Board in 1961. Since 1983, no major repairs or renovations have been completed to maintain the gym. Funds requested will make repairs according to the project's architect and preliminary report.

##### b. What activities and services will be provided to meet the intended purpose of these funds?

Funding will upgrade the RJE Gymnasium for continued use for summer day camp, after-school programs, math and reading classes, community events (ex: MLK observance with an annual average of 300 people), basketball games, and fitness classes.

##### c. What direct services will be provided to citizens by the appropriation project?

The RJE Gymnasium offers the only inside recreational programs for local residents. The requested funding would help to preserve the facility for continued use. An older gymnasium in the downtown area was demolished years ago.

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

During the 8-weeks of spring basketball season there are 12 teams and 24 home games. A yearly annual average attendance of 1,200 (50 or more per game) represents approximately 22% of the City of Starke's estimated 2018 population of 5,370 people. This does not include attendance for the summer day camp (annual average of 43 students) or the math and reading classes annual average 50 students).

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



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 1746

Concerned Citizens of Bradford County, Inc., is an outreach organization primarily dedicated to disadvantaged youth. Having use of the RJE Gymnasium helps the organization's goal of teaching character building and confidence behaviors. For example, math and reading test results showed substantial progress above the baseline assessments following the end of the basketball and summer-day camp programs.

**f. 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 the contract?**

A future loss of the RJE Gymnasium Renovation due to lack of repairs would mean the end of current programs and activities that the community has come to depend upon. Standard contract penalties will be sufficient.

**13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.**

Currently this structure and associated buildings and facilities are owned and operated by the Concerned Citizens of Bradford County, Inc.



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 1746

#### 14. Requestor Contact Information

a. First Name  Last Name   
b. Organization   
c. E-mail Address   
d. Phone Number  Ext.

#### 15. Recipient Contact Information

a. Organization   
b. Municipality and County

#### c. Organization Type

- ☐ For Profit Entity  
☒ Non Profit 501(c)(3)  
☐ Non Profit 501(c)(4)  
☐ Local Entity  
☐ University or College  
☐ Other (please specify)

d. First Name  Last Name   
e. E-mail Address   
f. Phone Number

#### 16. Lobbyist Contact Information

a. Name   
b. Firm Name   
c. E-mail Address   
d. Phone Number