

LFIR # 2048

. Project Title	Hamilton County Arena	a & Fairgroun	nds			
. Senate Sponsor	Loranne Ausley					
. Date of Request	03/12/2021					
. Project/Program De	escription					
Renovation/construent of cover/roof of exist	ction of existing and additiing arena.	ional facilities	s at the agricultural are	ena and fairgrounds.	Focus on const	
			partment of Agriculture and Consumer vices			
State Agency conta	cted? No					
Amount of the Nonr	ecurring Request for Fig	scal Year 20	21-2022			
Type of Funding			Amou	ınt		
Operations				0		
Fixed Capital Outlay				650,000		
Total State Funds F				650,000		
Type of Funding	annested (from an estimat	10)	Amount	Percentage		
Total State Funds R	equested (from question #	<i>‡</i> 6)	650,000	93%		
Matching Funds						
Federal			0	0%		
State (excluding the amount of this request)			0	0%		
_	amount or and request,					
Local			0	0%		
_	amount or and requesty		50,000	0% 7%		
Local Other	for Fiscal Year 2021-20	22				
Local Other Total Project Costs			50,000	7%		
Local Other Total Project Costs	for Fiscal Year 2021-20		50,000 700,000 No Specific	7%		
Local Other Total Project Costs Has this project pre	for Fiscal Year 2021-20 eviously received state f		50,000 700,000 No	7% 100%		
Local Other Total Project Costs Has this project pre	for Fiscal Year 2021-20 eviously received state f	unding?	50,000 700,000 No Specific	7% 100%		
Local Other Total Project Costs Has this project pre Fiscal Year (уууу-уу)	for Fiscal Year 2021-20 eviously received state f	unding?	50,000 700,000 No Specific	7% 100%		
Local Other Total Project Costs Has this project pre Fiscal Year (уууу-уу) Is future funding like	eviously received state f Amount Recurring Norestelly to be requested?	unding?	50,000 700,000 No Specific Appropriation #	7% 100%		
Local Other Total Project Costs Has this project pro Fiscal Year (уууу-уу) Is future funding like a. If yes, indicate ne	eviously received state f Amount Recurring Nor cely to be requested? conrecurring amount per	unding? nrecurring year.	50,000 700,000 No Specific Appropriation #	7% 100%		
Local Other Total Project Costs Has this project pre Fiscal Year (уууу-уу) Is future funding like a. If yes, indicate ne	eviously received state f Amount Recurring Norestelly to be requested?	unding? nrecurring year.	50,000 700,000 No Specific Appropriation #	7% 100%		
Local Other Total Project Costs Has this project pre Fiscal Year (уууу-уу) Is future funding like a. If yes, indicate ne	eviously received state f Amount Recurring Nor cely to be requested? conrecurring amount per	unding? nrecurring year.	50,000 700,000 No Specific Appropriation #	7% 100%		
Local Other Total Project Costs Has this project pre Fiscal Year (yyyy-yy) Is future funding like a. If yes, indicate no	eviously received state f Amount Recurring Nor sely to be requested? conrecurring amount per	unding? nrecurring year. be used in li	50,000 700,000 No Specific Appropriation # No ieu of state funding.	7% 100% Vetoed	D. namda zaża 2	
Local Other Total Project Costs Has this project pre Fiscal Year (yyyy-yy) Is future funding like a. If yes, indicate no	eviously received state f Amount Recurring Nor cely to be requested? conrecurring amount per	unding? nrecurring year. be used in li	50,000 700,000 No Specific Appropriation # No ieu of state funding.	7% 100% Vetoed	9 pandemic?	
Local Other Total Project Costs Has this project pro Fiscal Year (уууу-уу) Is future funding like a. If yes, indicate no	eviously received state f Amount Recurring Nor sely to be requested? conrecurring amount per	unding? nrecurring year. be used in li	50,000 700,000 No Specific Appropriation # No ieu of state funding.	7% 100% Vetoed	9 pandemic?	



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

Spending Category	Description	Amount	
Administrative Costs:			
Executive Director/Project Head Salary and Benefits		0	
Other Salary and Benefits		0	
Expense/Equipment/Travel/Supplies/ Other		0	
Consultants/Contracted Services/Study		0	
Operational Costs: Other			
Salary and Benefits		0	
Expense/Equipment/Travel/Supplies/ Other		0	
Consultants/Contracted Services/Study		0	
Fixed Capital Construction/Majo	r Renovation:		
Construction/Renovation/Land/ Planning Engineering	Renovation/construction of existing and additional facilities at agricultural arena and fairground primarily cover/roofing of existing arena.	650,000	
Total State Funds Requested (m	ust equal total from question #6)	650,000	

12. Program Performance

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

Improvements will enhance the life and sustainability of agricultural activities of both a recreational and educational nature, it will be utilized to host regional agricultural, livestock and equine events.

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

Project will ensure 365 days of annual utilization/availability of facilities.

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

Ability to use outdoor arena and facilities year around.

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

All ages will be served as well as special needs populations for regional events.

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

Outdoor events will be available year around without consideration of all but the most severe weather events.

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?

Forfeiture of funds if not completed.

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.



LFIR # 2048

The Hamilton Board of County Commissioners owns the facilities.



LFIR # 2048

14	14. Requestor Contact Information								
	a. First Name	Louie		Last Name	Goodin				
	b. Organization	Hamilton Board of County Commissioners							
	c. E-mail Address	hamiltoncounty@windstream.net							
	d. Phone Number	(386)792							
15	15. Recipient Contact Information								
	a. Organization	Hamilton Board of County Commissioners							
	b. Municipality and County Hamilton								
	c. Organization Type								
	□For Profit Entity								
	□Non Profit 501(c	Non Profit 501(c)(3)							
	□Non Profit 501(c)(4)								
	☑Local Entity								
	□University or College								
	□Other (please specify)								
	d. First Name	Louie		Last Name	Goodin				
	e. E-mail Address	hamiltoncounty@windstream.net							
	f. Phone Number	(386)792-6639							
16. Lobbyist Contact Information									
	a. Name	None							
	b. Firm Name	None							
	c. E-mail Address								
	d. Phone Number	per							