



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 1747

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The final phase of the expansion project was delayed due to the pandemic in 2020 and 2021 at the Northeast Florida Fairgrounds. This facility is used for yearly community events including our agricultural fair, staging area for emergency operations, training clinics for law enforcement officers, animal evacuations during storms, fires, and flooding. This past year Covid testing and vaccinations were given at this site. Food drives are presently being held monthly at the fairgrounds. The present facility is not adequate to meet the rapid growth of Nassau and surrounding counties. This arena type building will also be used for multi-purpose year round for 4H and FFA Programs , graduations, and many other events. These buildings are all ADA compliant. The completion of Phase II, which replaces 2 buildings that are beyond repair, is presently underway, and our plan is to erect at least two additional buildings. Phase III will include an arena type building that is ADA compliant.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	990,000
Total State Funds Requested	990,000

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	990,000	17%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	2,786,000	49%
Local	50,000	1%
Other	1,913,145	33%
Total Project Costs for Fiscal Year 2022-2023	5,739,145	100%

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2021-22	0	990,000	1463B	No

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.



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

No

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

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/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Completion of the three agricultural buildings, including electrical, plumbing, and concrete work; and bathrooms which are ADA compliant, will be completed with this funding.	990,000
Total State Funds Requested (must equal total from question #6)		990,000

12. Program Performance

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

Completion of the three agricultural buildings which will be used for many purposes. Electrical, plumbing, concrete work and bathrooms, all ADA compliant, will be completed with this funding. A retention pond, and engineering will also be completed for the riding arena.

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

Our yearly Northeast Florida Fair held in October; and rental of the facility year round for community activities.

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

This facility has many purposes. Food Drives are held each month. Emergency Operations have been conducted there when inclement weather comes. This benefits citizens all over Florida. Animal Rescue has been conducted at this facility. Vaccination clinics and Covid testing have been conducted on site. Fundraisers for local non-profits and school groups are held during the fair to raise funds for their yearly projects. Law Enforcement Training, 4H and FFA activities are held at our facility whenever requested. This is at no cost to the taxpayer.

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

Our target population is all surrounding counties of Northeast Florida. Nassau, Duval, Clay, Baker, St Johns, Columbia, and others if the need arises. This year we served over 54,000 patrons at our fall fair.

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



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The measurable outcomes will reflect that this facility is used by many citizens and taxpayers of Florida. Numbers of attendees is measured by ticket sales and response. Random polls are taken which gives some area zip codes so that we may have a measurable outcome for the event.

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?

If our performance level fails with this project, then the State would withhold any future funding.

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.

Nassau County School Board (NCSB) is the owner and lessee of this property to the Northeast Florida Fair Association. If the association were to dissolve, the NCSB would remain owners of the property and all improvements. There is currently a 99 year lease.



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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