

LFIR # 2393

8. [ 9.	Fiscal Year (yyyy-yy)  Is future funding lil a. If yes, indicate n	Amo Recurring kely to be requeste onrecurring amou	Nonrecurring ed? nt per year.	No Specific Appropriation #  No No I lieu of state funding.	Vetoed		
8. [ 9.	Has this project pro Fiscal Year (уууу-уу)	Amo Recurring kely to be requeste	Nonrecurring	Specific Appropriation #	Vetoed		
	Has this project pro	Amo	ount	Specific Appropriation #	Vetoed		
	Has this project pro	Amo	ount	Specific Appropriation #	Vetoed		
	Has this project pro	•			Vetoed		
		eviously received s	state funding?	No			
		7 101 1 130a1 1 Cai <u>20</u>	LL LULU	270,000	10070		
	Total Project Costs	s for Fiscal Year 20	22-2023	240,000	100%		
	Local Other			40,000 10,000	17% 4%		
F	State (excluding the	amount of this requ	est)	0	0%		
- 1	Federal			0	0%		
- 1	Matching Funds		,	100,000			
	Type of Funding Total State Funds R	eauested (from aue	stion #6)	<b>Amount</b> 190,000	Percentage 79%		
<b>7.</b> ]	•		2-2023 (includin	g matching funds avai		ect)	
- 1	Fixed Capital Outlay			160,000			
F	Operations				30,000		
	Type of Funding			Amount			
	State Agency conta Amount of the Non		for Fiscal Year 2	2022-2023			
	State Agency to rec	-	<b>nds</b> Depart	ment of State			
	Historical Society In It is a mainstay of he The project propose	c. as a public museu eritage tourism in a t s to address deferre 6 windows, exterior	um, containing dé cown which has s ed maintenance c	f the City of Apalachicola écor and artifacts from th uffered from the closure on the exterior of the hou tabilizing of the substruc	ne Antebellum/Terri of Apalachicola Ba use, including work	itorial period in Florida.  ay for oyster harvesting.	
4.	Project/Program Do	escription					
3.	Date of Request	01/06/2022					
۷.	Senate Sponsor	Loranne Ausley					
2	Project Title	Raney House Mu	useum Restoratio	on			



LFIR # 2393

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

Vac	\$5,000	CARES	funde	through	FHC	for salaries.	
1 es.	<b>3</b> 5.000	CARES	Turius	unouan	ГПС	iui salanes.	

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Salary only.	10,000
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	Limited travel to Tallahassee, some equipment needs for volunteer work on windows, supplies for grant administration.	5,000
Consultants/Contracted Services/Study	Historic Preservation Architect consultation.	15,000
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Exterior maintenance including painting (with extensive prep including replacing weakened wood), window re-glazing and repair, repositioning of large 3rd story windows, repairs to sub-floor and foundation at rear of house, upgrading of electrical throughout the house.	160,000
Total State Funds Requested (m	ust equal total from question #6)	190,000

### 12. Program Performance

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

Restoration of the Raney House Museum on Apalachicola, using US Department of Interior Standards (https://www.nps.gov/tps/standards/four-treatments/treatment-restoration.htm). This magnificent example of Territorial Period architecture has been allowed to deteriorate due to lack of funds. Funding will allow restoration of the exterior of the 183 year old home, including work on the columns (already underway), window stabilization and repair, and some substructure/foundation repair. Finally, painting, after extensive preparation will be done and electrical upgrades will be included as needed.

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

Work on the property will be supervised by Historical Society staff, in consultation with a qualified historic preservation architect. National Park Service Preservation standards will be followed in all areas possible.

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

The citizens of Apalachicola depend on the tourism industry for jobs. The Raney House Museum is a significant feature of the "Heritage Tourism" which provides funds to restaurants, accommodations, and shopping. It supports the local economy.

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

Visitors and locals visit the Raney House Museum. Current visitation is low, currently at 3,000, but is expanding.

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



LFIR # 2393

Visitation statistics will be drawn from TDC required visitation logs, and evidence of larger tourism growth will be obtained from the Franklin County Tourist Development Council.

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?

Standard contract penalties are 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.

The City of Apalachicola owns the Raney House, and it is run by the Apalachicola Area Historical Society as a public museum. No funding will go directly to either except for salary to executive director for supervision of project.



LFIR # 2393

14	14. Requestor Contact Information							
	a. First Name	Catharine	)	Last Name	Greene			
	b. Organization	Apalachicola Area Historical Society, Inc.						
	c. E-mail Address	catygreene32320@gmail.com						
	d. Phone Number	(850)323-2305 <b>Ext.</b>						
15	15. Recipient Contact Information							
	a. Organization	Apalachicola Area Historical Society, Inc.						
	b. Municipality and County Franklin							
	c. Organization Type							
	□For Profit Entity	,						
	☑Non Profit 501(c	501(c)(3)						
	□Non Profit 501(c	□Non Profit 501(c)(4)						
	□Local Entity							
	□University or College							
	□Other (please specify)							
	d. First Name	Catharine	)	Last Name	Greene			
	e. E-mail Address	aahs.raney@gmail.com						
	f. Phone Number							
16	16. Lobbyist Contact Information							
	a. Name	None						
	b. Firm Name	None						
	c. E-mail Address							
	d. Phone Number	ne Number						