

LFIR # 2646

	Am	ount Nonrecurring	Specific Appropriation #	Vetoed	
3. Has this project pr	eviously received	state funding?	Yes		
Total Project Costs	s for Fiscal Year 2	022-2023	400,000	100%	
Other			0	0%	
State (excluding the Local	amount of this req	uest)	0	0% 0%	
Federal			0	0%	
Matching Funds					
Total State Funds R	equested (from qu	estion #6)	400,000	100%	
Type of Funding			Amount	Percentage	,
	<u> </u>	22-2023 (includin	g matching funds avai		ect)
Fixed Capital Outlay  Total State Funds				400,000 <b>400,000</b>	
Operations				0	
Type of Funding			Amo	unt	
. Amount of the Non	recurring Reques	t for Fiscal Year 2	2022-2023		
State Agency conta	•				
system.  5. State Agency to re	ceive requested fi	unds Depart	ment of Education		
system will improve	nitted to fund an el safety and security	ectronic access co	ontrol key system for eaceachers, and staff within	ch school in the dis n the Lafayette Cou	trict. The addition of this
4. Project/Program D					
3. Date of Request	01/26/2022				
2. Senate Sponsor	Jennifer Bradley	/			



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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	Electronic Access Key Control System	400,000		
Total State Funds Requested (must equal total from question #6) 400,00				

### 12. Program Performance

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

The request is submitted to fund an electronic access control key system for each school in the district. This system will allow for a better response to an active assailant situation, allow for one step lockdown of critical buildings, notification of unsecured/propped doors, improved response time for first responders, and allow for monitoring of ingress and egress when needed. System will drastically improve the overall safety and security of each school in the district.

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

Increased level of security for access to all school buildings within the district. Addition of system will improve safety and security for all students, teachers and staff.

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

Access control system will provide increased safety and security for the students of Lafayette County.

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

Project will serve students in grades PK-12 throughout Lafayette County. Approximately 1300 students, faculty, and staff will be served by this project.

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

Increased options in active assailant response, increase in monitoring capabilities, reduction in propped/unsecured classroom doors, and reduction in unwanted building/campus access.

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?

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Reduce of repay funding	J .	



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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.

Lafayette County District Schools owns all facilities where fixed capital outlay funding will be utilized.



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14.	14. Requestor Contact Information						
	a. First Name	Robert		Last Name	Edwards		
	b. Organization	Lafayette County District Schools					
	c. E-mail Address	redwards					
	d. Phone Number	(386)294-4701 Ext.					
15.	15. Recipient Contact Information						
	a. Organization	Lafayette	Lafayette County District Schools				
	b. Municipality and County Lafayette						
	c. Organization Type						
	□For Profit Entity						
	□Non Profit 501(c	c)(3)					
	□Non Profit 501(c	c)(4)					
	☑Local Entity						
	□University or Co	□University or College					
	□Other (please specify)						
	d. First Name	Gerald		Last Name	Powers		
	e. E-mail Address	gpowers@lcsbmail.net					
	f. Phone Number	(386)294-2889					
16.	16. Lobbyist Contact Information						
	a. Name	None					
	b. Firm Name	None					
	c. E-mail Address						
	d. Phone Number						