



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 3232

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

5. State Agency to receive requested funds

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	300,000
Total State Funds Requested	300,000

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	300,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2023-2024	300,000	100%

8. Has this project previously received state funding? No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested? No

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?

No

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



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Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction

b. Is the project "shovel ready" (i.e permitted)?

Yes

c. What is the estimated start date of construction?

6/01/2023

d. What is the estimated completion date of construction?

6/30/2023

12. List 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.

Madison County

13. 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	Repair or Replace unserviceable train trestle for the Veteran's Memorial Railroad.	300,000
Total State Funds Requested (must equal total from question #6)		300,000

14. Program Performance

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

Repair or Replace unserviceable train trestle for the Veteran's Memorial Railroad. The Veteran's Memorial Railroad is a county owned asset within the county owned Veteran's Memorial Park that is maintained and operated by a 100% volunteer 501c3 organization for the benefit of the community.

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

The removal and replacement of unserviceable train trestle along the 1 mile Veteran's Memorial Railway in the Veteran's Memorial Park.

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



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Funds will allow for critical infrastructure required to continue operation of the Veteran's Memorial Railroad in the Veteran's Memorial Park.

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

The citizens of Liberty County and ALL surrounding counties. Most visitors come from Bay, Calhoun, Leon, Franklin, Jackson, and Gulf counties. Visitors also range across the state and from Georgia and Alabama.

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

The Veteran's Memorial Railroad is the largest tourist attraction in Liberty County with an annual visitation over 8,000 riders.

Annual ticket sales are tracked electronically using an online reservation system.

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?

Denial of future funding.

15. Requester Contact Information

a. **First Name** **Last Name**

b. **Organization**

c. **E-mail Address**

d. **Phone Number** **Ext.**

16. 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**

17. Lobbyist Contact Information

a. **Name**



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b. Firm Name

c. E-mail Address

d. Phone Number