



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 2943

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The purpose of this project is to improve old minority church site, established over 100 years ago, nearly destroyed by Hurricane Michael and turn it into an outdoor venue for local and regional visitors to participate in the history of the community and region.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

| Type of Funding | Amount |
|------------------------------------|------------------|
| Operations | 0 |
| Fixed Capital Outlay | 1,260,000 |
| Total State Funds Requested | 1,260,000 |

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

| Type of Funding | Amount | Percentage |
|--|------------------|-------------|
| Total State Funds Requested (from question #6) | 1,260,000 | 69% |
| Matching Funds | | |
| Federal | 0 | 0% |
| State (excluding the amount of this request) | 555,000 | 30% |
| Local | 10,000 | 1% |
| Other | 0 | 0% |
| Total Project Costs for Fiscal Year 2024-2025 | 1,825,000 | 100% |

8. Has this project previously received state funding?

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

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.

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

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



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Yes, \$3 Million funds have and are being used for water, waste water, natural gas infrastructure

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
 N/A

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

c. What is the estimated start date of construction? June 2024

d. What is the estimated completion date of construction? June 2025

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.

City of Marianna

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 | Construction, Construction Engineering Inspection Services | 1,260,000 |
| Total State Funds Requested (must equal total from question #6) | | 1,260,000 |

14. Program Performance

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

The purpose/goal of this of project is to improve old minority church site, established over 100 years ago, nearly destroyed by Hurricane Michael and turn it into an outdoor venue for local and regional visitors to participate in the history of the community and region. The venue will provide education, historical significance, recreational access and improve the City of Marianna Community Redevelopment Area as well as the community.

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

Construction and Construction Engineering Inspection Services during construction for the project. The construction will improve the site for it to become a destination in Marianna and Jackson County.



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

Direct services will be educational aspects about minority churches within the State and Region. It will provide an education venue for local schools to provide hands on education about about the minority community and region, as well as an outdoor venue for social events.

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

The entire population of Jackson County (48,599), will be served, in that the City's downtown area serves both in town and out of town citizens with multiple services and goods. The City has the only shopping district within the County with services described. It should also be noted Jackson County, the City of Marianna has been designated by the Governor as a Rural Area of Opportunity, (RAO) formally Rural Area of Critical Economic Concern (RACEC).

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

The benefit of the project will be to create a destination within the region for educators and tourist to visit and learn about the history of minority churches in the South. This can be measured by number of individuals and families that visit the site, as well as the number of reservations taken by the City to use the site for educational, historical and family 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?

The contracting agency, City of Marianna will establish a Critical Path with date specific targets for pre-development. Once bids are received and awarded for the project, the contract will have specific contract completion dates, if not met contractor will be subject to Liquidated Damages, assessed on a daily basis.

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**



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e. E-mail Address

f. Phone Number

17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number