Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Camp Blanding Museum Expansion

2. Senate Sponsor: Keith Perry

3. Date of Submission: <u>01/16/2018</u>

4. Project/Program Description:

To expand the Camp Blanding Museum to improve artifact preservation and provide additional exhibit space to Florida National Guard history.

5. State Agency Contacted? No

- a. If yes, which state agency?
- b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of State

6. Amount of Non-recurring Requested for fiscal year 2018-19:

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	4,737,860	4,737,860

7. Type, amount and percent of matching funds available for this project for fiscal year 2018-19:

Туре	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 4,737,860

9. Previous Year Funding Details:

- a. Has funding been provided in a previous state budget for this activity? No
- b. In the previous 5 fiscal years, how many years was funding provided? (Optional)
- c. What is the most recent fiscal year the project was funded?
- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
- e. Complete the following Worksheet.



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FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	Α	В	С
Funds Description: Input Amounts:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)

10. Is future-year funding likely to be requested?

No

11. Program Performance:

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

To provide for artifact storage, preservation and security as well as additional exhibit area to display Florida

National Guard history from its beginning in 1565 to current operations as well as FLNG support to the state of Florida during state emergency.

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

Develop the construction plans and construct facilities for expansion of Camp Blanding Museum.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
☐Executive Director/Project Head Salary and Benefits		
□Other Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		
☐Consultants/Contracted Services/Study		
Operational Costs		
☐Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		



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□Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
☑Construction/Renovation/Land/Planning Engineering	Completetion of phases 1 to 4 in the expansion plan for Camp Blanidng Museum	4,700,000
TOTAL		4,700,000

d. What are the direct services to be provided to citizens by the appropriations project?

Provide the citizens of Florida with a better understanding of what the soldiers and airmen of the Florida National Guard have done for the United States and the state of Florida from its beginning in 1565 through today.

- e. Who is the target population served by this project? How many individuals are expected to be served?
 - Citizens of Florida and visitors from out of state and from overseas.
- f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
 - <u>Provide a facility for the storage, preservation, and security of historical artifacts as well as provide additional</u> space for new exhibits to tell the story of the history of the Florida National Guard from 1565 through today.
- g. 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 in the contract?

 Standard penalties.
- 12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

The owner to the facility is the Florida Department of Military Affairs.

- 13. Requestor Contact Information:
 - a. Name: Greg Parsons
 - b. Organization: Florida Department of Military Affairs
 - **c. Email:** Gregory.w.parsons4.nfg@mail.mil
 - d. Phone Number: (904)682-3196
- 14. Recipient Contact Information:
 - a. Organization: Florida Department of Military Affairs
 - b. County: Clay
 - c. Organization Type:
 - O For Profit



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- O Non Profit 501(c) (3)
- O Non Profit 501(c) (4)
- O Local Entity
- O University or College
- ⊙ Other (Please specify) FDMA
- d. Contact Name: Greg Parsons
- e. E-mail Address: Gregory.w.parsons4.nfg@mail.mil
- f. Phone Number: (904)682-3196
- 15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: Noneb. Firm: Nonec. Email:

d. Phone Number: