



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 1201

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The Walk of Honor will be a lasting tribute to those who were inspired to serve their country, and whose heroic and impactful contributions contributed significantly to the nation. Most of the recognized individuals began their journey in Naval Aviation in Pensacola, FL. The 2-acre park will honor these extraordinary heroes with bronze plaques inlaid in a granite wall. In addition, the park will include restrooms that are ADA compliant and needed to serve overflow crowds on Blue Angel practice days, an elevated platform for special events/military ceremonies, and community eating spaces.

5. State Agency to receive requested funds

State Agency contacted?  No

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

Type of Funding	Amount
Operations	380,000
Fixed Capital Outlay	1,489,750
<b>Total State Funds Requested</b>	<b>1,869,750</b>

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)	1,869,750	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>1,869,750</b>	<b>100%</b>

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?

Yes



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

\$900,000 that was used for salaries to retain employees.

## 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)?

No

c. What is the estimated start date of construction?

10/2024

d. What is the estimated completion date of construction?

12/2026

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.

The Naval Aviation Museum Foundation will receive all funds to complete the Walk of Honor. The Walk of Honor is on the grounds of the National Naval Aviation Museum. The Naval Aviation Museum Foundation's mission is to support the National Naval Aviation Museum.

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

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	Operations Director	180,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Landscape Designer Architect	200,000
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Construction of the grounds for the Walk of Honor to include ADA compliant restrooms, removal and replacement of sculptures, landscaping, focal features, and picnic area for families.	1,489,750
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,869,750</b>

### 14. Program Performance

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



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The WoH will be a public display and focal point on the National Naval Aviation Museum's campus. It will serve to honor those extraordinary individuals, common citizens who were drawn to serve their country and made uncommon contributions to the nation. The WoH represents a tribute to those whose heroism and dedication defined service over self and exemplified a commitment to the values that keep this nation unified and strong.

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

There will be bronze plaques inlaid in granite to honor these brave individuals. The project will also include a raised stage for ceremonies and events, as well as ADA compliant restrooms and outdoor eating spaces for the public.

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

Upward of 1 million visitors annually will be inspired by the personal histories of individuals who helped shape the history of the nation, in many cases in periods of immense challenges and in the face of extreme adversity. There is enough room for expansion and inclusion of additional bronze plaques as more honorees are added. The ADA compliant restrooms are a much-needed addition to serve the needs of museum patrons.

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

Upward of 1 million individuals are targeted to be served annually. The target population is vast and includes, but is not limited to, school students, active-duty and retired military, and the general public.

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

Upward of 1 million individuals a year will be educated and inspired through exposure to stories of honor, courage, and commitment. The outcome and success are measured by the number of visitors each year.

**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?**

None.

**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



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Other (please specify)

**d. First Name**  **Last Name**

**e. E-mail Address**

**f. Phone Number**

#### 17. Lobbyist Contact Information

**a. Name**

**b. Firm Name**

**c. E-mail Address**

**d. Phone Number**