

- 1. Title of Project: Clay County Historical Courthouse Restoration
- 2. Senate Sponsor: Wilton Simpson
- **3.** Date of Submission: <u>01/29/2018</u>
- 4. Project/Program Description:

The Clay County Commission is seeking \$300,000 in state funding for restoration and repairs to the historical old county courthouse. It opened in 1889, and is listed on the National Historic Register. It is among only four Florida courthouses built before 1900. It currently houses the Clay County Historical Museum, is used for the county's Teen Court Program, and serves special events. The historic courthouse needs restoration work including repairs to its roof, windows, and stucco work.

5. State Agency Contacted? Yes

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

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
	300,000	300,000

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	75,000	20.0%
Other	0	0.0%
TOTAL	75,000	20.0 %

8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): <u>375,000</u>

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.

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:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:			

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

<u>No</u>

11. Program Performance:

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

Restoration work on the historic courthouse, including repairs to its roof, windows, and stucco work.

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

Restoration work on the historic courthouse, including repairs to its roof, windows, and stucco work.

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	Restoration work including repairs to its roof, windows and stucco work	300,000
TOTAL		300,000

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

<u>Citizens of Clay County and tourists to the area will have increased enjoyment and use of the historic courthouse.</u>

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

Citizens of Clay County and visiting tourists.

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

Increased citizen/tourist enjoyment of the courthouse, measured by tourism data. Increased use of the courthouse, measured by special events and other activities after the repairs as compared to the past.

- 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? <u>The standard penalties are sufficient.</u>
- 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. <u>Clay County Commission</u>

13. Requestor Contact Information:

- a. Name: Stephanie Kopelousos
- b. Organization: Clay County Commission
- c. Email: stephanie.kopelousos@claycountygov.com
- d. Phone Number: (904)657-1736
- 14. Recipient Contact Information:
 - a. Organization: Clay County Commission
 - b. County: Clay
 - c. Organization Type:
 - O For Profit
 - O Non Profit 501(c) (3)



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- O Non Profit 501(c) (4)
- Local Entity
- O University or College
- O Other (Please specify)
- d. Contact Name: Stephanie Kopelousos
- e. E-mail Address: stephanie.kopelousos@claycountygov.com
- f. Phone Number: (904)657-1736

15. If there is a registered lobbyist, fill out the lobbyist information below.

- a. Name: None
- **b. Firm:** None
- c. Email:
- d. Phone Number: