



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2022-2023

LFIR # 1515

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This park serves as a cornerstone for community gatherings and events in the city. Funding will be used to construct a pavilion.

5. State Agency to receive requested funds

State Agency contacted?  No

6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

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

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	300,000	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 2022-2023</b>	<b>300,000</b>	<b>100%</b>

8. Has this project previously received state funding?  Yes

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2021-22	0	250,000	1693A	No

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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**11. 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		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Construction of the pavilion. Engineering plans, bid development and project management.	300,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>300,000</b>

**12. Program Performance**

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

Increased outdoor recreational opportunities for citizens and visitors; enhanced cultural programming and youth involved in recreational activities, stay occupied in competition/exercise, and associate with like-minded individuals who stay active and are goal driven.

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

Recreational, cultural, and educational activities and services.

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

To provide a safe and enhanced recreational facility to citizens and visitors.

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

Local residents, tourists, and seasonal residents - 10,000 plus.

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

For citizens and visitors to embrace the facility improvements at King Memorial Park. Thus providing increased educational, fitness, and recreational opportunities to the public. This would continue to benefit in the potential for increased community development and marketable eco-tourism. City will monitor activities at the Park.

**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?**

Failure to meet deliverables without notification of good reasoning will result in financial penalties as described in contract.

**13. 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.**



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The City of Pahokee is the entity and owners of the facility.



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#### 14. Requestor Contact Information

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

#### 15. 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

#### 16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number