



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2022-2023

LFIR # 1684

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

To construct a museum education center that will serve as a State of Florida cultural tourism destination. This center will preserve, tell, and interpret the Seminole Wars (1816-1858), Native American culture, and 10th century American way of life in today's context and beyond. The center will not only engage and teach regional, national, and international visitors of the story that unfolded at and around the military installment, but will also positively contribute to the state's economic growth.

5. State Agency to receive requested funds

State Agency contacted?  Yes

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	700,000
<b>Total State Funds Requested</b>	<b>700,000</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)	700,000	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>700,000</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?  Yes

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



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

#### 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	This will include archaeology and related reporting, as well as architectural and engineering design services.	700,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>700,000</b>

#### 12. Program Performance

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

To construct a museum education center that will serve as a State of Florida cultural tourism destination. This center will preserve, tell, and interpret the Seminole Wars (1816-1858), Native American culture, and 10th century American way of life in today's context and beyond. The center will not only engage and teach regional, national, and international visitors of the story that unfolded at and around the military installment, but will also positively contribute to the state's economic growth.

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

Construction of an interpretive education center and museum that will provide static and video instructional panels, displays, exhibits, and artifacts needed to enhance interpretation of the Fort King exhibits in the field, particularly as relates to the Seminole Wars, the settlement of the Florida Territory, Native American Culture, and 19th century American heritage.

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

Educational videos, living history programs, public lectures, field trip experiences and programs for K-12 students and youth summer camps, and internship and research opportunities for university students related to history, cultural, and archaeological studies. Heritage programming focusing on cultural aspects for fort life and frontier settlements. Self guided and docent-led tours.

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

The project will serve all age groups and socio-economic levels. History has no boundaries.

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



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Anticipated benefits include: 1. Enriched cultural experience through increased knowledge of the Seminole Wars and American History, particularly as it relates to cultural practices and political influences that shaped Seminole, Black Seminole, settlers, and the American Soldier's way of life. 2. Quality of education will be improved through explorative and interpretative educational experiences, particularly where social studies and history are scarce. Students will see increased opportunities to engage in active learning in areas where education is currently lacking. 3. Increase in tourism and economic activity as number of visitors increase. Studies by the state (FDOS and FDEP) indicate that heritage tourism has a substantial economic impact. 4. Construction activities enhance opportunities by providing jobs for professionals, tradesmen, and support staff. The methodology used to measure these outcomes include visitor surveys, records of admission, and visitor demographic tracking

**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?**

Funds would cease to be distributed for this project until noncompliance of the deliverables is remedied.

**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.**

City of Ocala



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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