Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Arcadia Rodeo's Equestrian Facility

2. Date of Submission: 02/07/2017

3. House Member Sponsor: Charlie Stone

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes

 If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d
- b. What is the most recent fiscal year the project was funded? 2014-15
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request (Note that column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in column G):

FY:	Input Prior Year Appropriation for this project for FY 2016-17 (If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2017-18 (Requests for additional RECURRING funds are prohibited. Any additional Nonrecurring funding requested to supplement recurring funds in the base will result in the base recurring amount being converted to Nonrecurring.)		
Column:	Α	В	С	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: column A + column B)	Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)	Additional Nonrecurring Request	TOTAL Nonrecurring Request (Will equal the amount from the Recurring base in Column D to be CONVERTED to Nonrecurring plus the Additional Nonrecurring Request in Column E. These funds will be appropriated non-recurring if funded in the House Budget or the Final Conference Report on the budget.)
Input Amounts:					1,000,000	1,000,000

5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2017-18? No 5a. If yes, which state agency?

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? For example, if the requested issue pertains to services provided to inmates at correctional facilities, the Department of Corrections would be the most appropriate state agency. Department of Agriculture and Consumer Services

- 6. Requester:
 - a. Name: Katherine Marks
 - b. Organization: Arcadia All-Florida Championship Rodeo, INC.
 - c. Email: admin@arcadiarodeo.com
 - d. Phone #: (863)494-2014
- 7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):
 - a. Name: Katherine Marks
 - b. Organization: Arcadia All-Florida Championship Rodeo, INC.
 - c. Email: admin@arcadiarodeo.com
 - d. Phone #: (863)494-2014
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: None
 - b. Firm: None
 - c. Email:
 - d. Phone #:
- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
 - a. Name: Arcadia All-Florida Championship Rodeo, INC.
 - b. County (County where funds are to be expended): DeSoto
 - c. Service Area (Counties being served by the service(s) provided with funding): <u>DeSoto</u>
- 10. What type of organization is the entity that will receive the funds? (Select one)
 - O For Profit

 - O Non Profit 501(c) (4)
 - O Local Government

0	University or College
0	Other (Please describe

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

The funding requested will be used towards the construction of a new multi-function equestrian facility. The facility will enable the Arcadia Rodeo to expand its' already established events (including 89th Annual March Rodeo) as well as attract new events to the area thus improving the economic landscape of Desoto and surrounding counties. It will be one of only two facility able to host large events in Desoto County.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. F) Enter ?0? if request is zero for the category
Administrative Costs:		
□a. Executive Director/Project Head Salary and Benefits		
□b. Other Salary and Benefits		
□c. Expense/Equipment/Travel/Supplies/Other		
□d. Consultants/Contracted Services/Study		
Operational Costs:		
□e. Salaries and Benefits		
☐f. Expenses/Equipment/Travel/Supplies/Other		
□g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
☑h. Construction/Renovation/Land/Planning Engineering	The Arcadia Rodeo has raised \$5.168 million in donation to build the facility. The construction budget is \$8.7 million. The requested funding	1,000,000

	will be used to pay for the construction of the facility.	
TOTAL		1,000,000

13. For the Fixed Capital Costs requested with this issue, what type of ownership will the facility be under when complete? (In Question 12, if ?h. Fixed Capital Outlay? was not selected, question 13 is not applicable)

OFor Profit

⊙Non Profit 501(c) (3)

ONon Profit 501(c) (4)

OLocal Government (e.g., police, fire or local government buildings, local roads, etc.)

OState agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)

OOther (Please describe)

14. Is the project request an information technology project?

No

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

The Arcadia Rodeo has had outstanding support locally and from state representatives such as Representative Ben Albritton and Senator Denise Grimsley. The support from our community is reflected in the success of our capital campaign. Please see letters of support from the DeSoto County Commissioners, Representative Albritton and Senator Grimsley attached.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? Yes

16a. Please Describe:

The PoliCom Corporation conducted an Economic Impact Report of the Arcadia Rodeo's impact at the current arena and when it expand into the new facility.

17. Will the requested funds be used directly for services to citizens?

<u>No</u>

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select all that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
□Improve physical health		
□Improve mental health		
□Enrich cultural experience		
□Improve agricultural production/promotion/education		
□Improve quality of education		
□Enhance/preserve/improve environmental or fish and wildlife quality		
□Protect the general public from harm (environmental, criminal, etc.)		
□Improve transportation conditions		
☑Increase or improve economic activity	Currently, the Arcadia Rodeo's signature event in March ads a little over a 1 million dollars into Desoto Counties' economy during the four day show. The new facility will allow us to expand this event and others to increase the economic impact to a little over \$4 million.	PoliCom Economic Impact Report Desoto Economic Development Council Basic business practices (Event P and L, Ticket Sales Report)
☑Increase tourism	Currently, 80% of the spectators that attend the Arcadia Rodeo's events are from outside of Desoto County. The new facility will enable Arcadia to become a destination for equestrian contestants and spectators	Survey Reporting from our ticketing software

☑Create specific immediate job opportunities	The construction of the facility will create approximately 70 new jobs. The Arcadia Rodeo has pledged to hire as many local subcontractors as possible and thus far has done so.	PoliCom Economic Impact Report
□Enhance specific individual?s economic self sufficiency		
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		
□Improve wastewater management		
□Improve stormwater management		
□Improve groundwater quality		
□Improve drinking water quality		
□Improve surface water quality		
□Other (Please describe):		

19. Provide the total cost of the project for FY 2017-18 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total (Automatically Calculates)	Are the other sources of funds guaranteed in writing?
Amount Requested from the State in this Appropriations Project Request:	1,000,000	16.2%	N/A
2. Federal:	0	0.0%	Yes
State: (Excluding the requested Total Amount in #4d, Column F)	500,000	8.1%	Yes

4. Local:	4,568,648	74.1%	Yes
5. Other:	100,000	1.6%	Yes
TOTAL	6,168,648	100%	

20. Is this a multi-year project requiring funding from the state for more than one year?

Yes

20a. How much s	state funding would	be requested after	2017-18 over the next 5 v	years?
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⊙<1M

O1-3M

O>3-10M

O>10M

20b. How many additional years of state support do you expect to need for this project?

O1 year

⊙2 years

O3 years

O4 years

O>= 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?.

Oongoing activity? no total cost

O<1M

O1-2M

O>2-3M

⊙>3-10M

O>10M