Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

- 1. Title of Project: Camp Matecumbe Historic Chapel Restoration
- 2. Date of Submission: <u>02/07/2017</u>
- 3. House Member Sponsor: <u>Jeanette Nunez</u> Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? <u>No</u> 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?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed?
- 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:	А	В	С	D	E	F
Funds	Prior Year		Total Funds	Recurring Base	Additional	TOTAL Nonrecurring Request
Description:	Recurring	Prior Year	Appropriated	Budget	Nonrecurring	(Will equal the amount from the Recurring base in
	Funds	Nonrecurring		(Will equal non-	Request	Column D to be CONVERTED to Nonrecurring plus
		Funds	(Recurring plus	vetoed amounts		the Additional Nonrecurring Request in Column E.
			Nonrecurring:	provided in Column		These funds will be appropriated non-recurring if
			column A + column	A)		funded in the House Budget or the Final Conference
			B)			Report on the budget.)
Input					275,000	275,000
Amounts:						

5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2017-18? No5a. 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 State

- 6. Requester:
 - a. Name: George Navarrete
 - b. Organization: Miami-Dade County Parks, Recreation and Open Spaces Department
 - c. Email: <u>George.Navarette@miamidade.gov</u>
 - d. Phone #: (305)755-7877

7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):

- a. Name: George Navarrete
- b. Organization: Miami-Dade County Parks, Recreation and Open Spaces Department
- c. Email: George.Navarette@miamidade.gov
- d. Phone #: (305)755-7877
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: Jose Diaz
 - b. Firm: Robert M. Levy Associates
 - c. Email: jdiazj@aol.com
 - d. Phone #: (850)681-0254
- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
 - a. Name: Miami-Dade County Parks, Recreation and Open Spaces Departme
 - b. County (County where funds are to be expended): Miami-Dade
 - c. Service Area (Counties being served by the service(s) provided with funding): Miami-Dade

10. What type of organization is the entity that will receive the funds? (Select one)

O For Profit

O Non Profit 501(c) (3)

O Non Profit 501(c) (4)

⊙ Local Government

O University or College O Other (Please describe)

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

The funds will be used to renovate the historic chapel at Camp Matecumbe. The chapel will be used to house a permanent Pedro Pan exhibit. Operation Pedro Pan was a program that enabled Cuban parents to send their children to the United States unaccompanied between 1960 and 1962 to escape the communist regime that had taken control in Cuba and thus prevent their force indoctrination by means of educational and work and military training programs for minors.

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	These funds will be used for renovating a historic chapel at Camp	275,000

	Matecumbe	
TOTAL		275,000

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

ONon Profit 501(c) (3)

ONon Profit 501(c) (4)

⊙Local 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?

<u>No</u>

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?

<u>Yes</u>

15a. Please Describe:

Advertised community meeting held 4/10/07. Kendall Breeze Homeowners Association meeting held 1/24/07. Advertised public workshop held 5/17/06. Operation Pedro Pan Group, Inc., Board meeting interview held 9/22/06

- 16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? <u>No</u>
- 17. Will the requested funds be used directly for services to citizens? $\underline{\text{Yes}}$

17a. Describe the target population to be served. Select all that apply to the target population:

✓Elderly persons

□Persons with poor mental health

□Persons with poor physical health

□Jobless persons

Economically disadvantaged persons
At-risk youth
Homeless
Developmentally disabled
Physically disabled
Drug users (in health services)
Preschool students
Grade school students
High school students
University/college students
Currently or formerly incarcerated persons
Drug offenders (in criminal Justice)
Victims of crime
Other (Please describe)

17b. How many in the target population are expected to be served?

O< 25 O25-50 O51-100 O101-200 O201-400 O401-800 ⊙>800

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	Increased activity of residents living within 2/3 of a mile	Health Impact Assessment
☑Improve mental health	Improved satisfaction with quality of life	Health Impact Assessment
☑Enrich cultural experience	Events and curriculum regarding the Boystown pineland and Operation	Attendance and improved grades of students in impacted schools

	Pedro Pan history		
□Improve agricultural production/promotion/education			
Improve quality of education	Educational curriculum for impacted school	Improved grades of students at participating schools	
☑Enhance/preserve/improve environmental or fish and wildlife quality	Restored pinedlands	Transect studies with the Environmentally Endangered Lands (EEL) program	
□Protect the general public from harm (environmental, criminal, etc.)			
□Improve transportation conditions			
□Increase or improve economic activity			
☑Increase tourism	Visitors / tourists to trail and destination parks	Event registrations from tourists and data from PROS Eco Adventures program	
□Create specific immediate job opportunities			
□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?
1. Amount Requested from the State in this Appropriations Project Request:	275,000	5.8%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	4,500,000	94.2%	Yes
5. Other:	0	0.0%	No
TOTAL	4,775,000	100%	

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

<u>Yes</u>

20a. How much state funding would be requested after 2017-18 over the next 5 years?

- O<1M
- O1-3M
- O>3-10M
- ⊙>10M

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

- O1 year
- O2 years
- O3 years
- O4 years

 \odot >= 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

O>3-10M

⊙>10M