

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: The Family Blessing Community Project
2. Date of Submission: 11/15/2019
3. House Member Sponsor: Wengay Newton
Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? No
If answer to 4a is "No" skip 4b and 4c and proceed to 4d, Col. E
- 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:

FY:	Input Prior Year Appropriation for this project for FY 2019-20 <i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2020-21 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
Column:	A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget <i>(Will equal non-vetoed amounts provided in Column A)</i>	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:					322,050	322,050

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? 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? Department of State
 - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? No
 - 5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.
Agency will return funding if deliverables are not met.

6. Requester:

- a. Name: Jai Hinson
- b. Organization: Artz 4 Life Academy
- c. Email: jaihinson@artz4life.org
- d. Phone #: (727)481-8091

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Lahteefah Parramore
- b. Organization: Artz 4 Life Academy
- c. Email: lahteefahparramorecpa@gmail.com
- d. Phone #: (727)457-2625

8. Is there a registered lobbyist working to secure funding for this project?

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

9. Organization or Name of entity receiving funds:

- a. Name: Artz 4 Life Academy
- b. County (County where funds are to be expended): Pinellas
- c. Service Area (Counties being served by the service(s) provided with funding): Hillsborough, Manatee, Pinellas

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

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government
- University or College
- Other (Please describe)

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

Yearly, Artz 4 Life organizes and produces a community performing arts production that helps enhance education, promote global learning and develop life skills for youth, adults and families. This production will provide educational, performing arts and entrepreneurial skills and activities for 250 youth and adults throughout Pinellas, Hillsborough and Manatee counties. Professional artists provide outreach workshops and intensives within school systems and throughout community organizations.

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

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter "0" if request is zero for the category
Administrative Costs:		
<input checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits	Partial salary for Executive Director/Project Head, Bookkeeper, Rehearsal Director, Rehearsal Assistant, Costume Staff and Business Manager	30,500
<input type="checkbox"/> b. Other Salary and Benefits		
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	Travel expenses and hotel accommodations for professional choreographers, musicians and guest artists throughout workshops, intensives, classes and performances.	22,500
<input checked="" type="checkbox"/> d. Consultants/Contracted Services/Study	Artist Fees and per diems will be for professional local artists such as choreographers, musicians, guest artists and teachers that will be providing classes, workshops and intensives throughout the year. Professional photographers and	29,050

	videographers to capture and notate progress of all participants.	
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	Stage Manager, Security, Maintenance for facility rehearsals and intensives.	17,925
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Production Cost for Theater, Rehearsal Facilities, Lighting, Costumes, Backdrops, Props, Stage Production, Productions Fees	144,125
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Artists Fee and per diems will be for professional national artists such as choreographers, musicians, guest artists and teachers that will be providing classes, workshops and intensives throughout the year.	77,950
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		322,050

13. For the Fixed Capital Costs requested with this issue (In Question 12, category “h. Fixed Capital Outlay” was selected), what type of ownership will the facility be under when complete? (Select one correct option)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government (e.g., police, fire or local government buildings, local roads, etc.)
- State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)
- Other (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:

We have letters of support from community members, political representatives, organizations and funders. We have proclamations from the Mayor and City officials

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

No

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

Yes

17a. What are the activities and services that will be provided to meet the purpose of the funds?

There will be intergenerational classes and activities conducted in the community, performing arts classes for youth throughout community in local organizations and intensives in elementary, middle, high school and universities.

17b. Describe the direct services to be provided to the citizens by the funding requested.

Community participants will have opportunity to receive training from professional guest artists in several genres of dance, music and performing arts in preparation for participation in an annual community production that brings, youth, adults, families, businesses, organizations and communities together.

17c. Describe the target population to be served (i.e., "the majority of the funds requested will serve these target populations or groups.").

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
- General (The majority of the funds will benefit no specific group)
- Other (Please describe)

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

- < 25
- 25-50
- 51-100
- 101-200
- 201-400
- 401-800
- >800

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

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input checked="" type="checkbox"/> Improve physical health	70% of the participants will experience an improvement in their overall physical health	Participants will participate in a pre/post survey regarding their health and overall experience.
<input type="checkbox"/> Improve mental health		
<input checked="" type="checkbox"/> Enrich cultural experience	70% of youth will improve cultural knowledge	Participants will participate in a pre/post survey regarding cultural experiences.

<input type="checkbox"/> Improve agricultural production/promotion/education		
<input type="checkbox"/> Improve quality of education		
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<input type="checkbox"/> Improve transportation conditions		
<input type="checkbox"/> Increase or improve economic activity		
<input checked="" type="checkbox"/> Increase tourism	Promote interest in tourism to the St. Petersburg area.	Obtain results from theater, partnering hotels and restaurants and participant logs.
<input checked="" type="checkbox"/> Create specific immediate job opportunities	Community youth, program alumni and professional artists will receive compensation and additional opportunities for services provided	Review records from production, intensives, workshops and classes.
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	Keep youth actively involved in productive activities for 14 - 20 weeks and provide them with skills for resiliency.	Track progress of youth involved to review lack of criminal activity.
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		

<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2020-21 from all sources of funding (Enter "0" if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	322,050	84.5%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	14,000	3.7%	Yes
4. Local:	25,000	6.6%	Yes
5. Other:	20,000	5.2%	Yes
TOTAL	381,050	100%	

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

Yes

20a. How much state funding would be requested after 2020-21 over the next 5 years?

- <1M
- 1-3M
- >3-10M
- >10M

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

- 1 year
- 2 years
- 3 years
- 4 years
- ≥ 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”.

- Ongoing activity – no total cost
- <1M
- 1-3M
- >3-10M
- >10M