

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Find Your Beat! Performing Arts Series
2. Date of Submission: 11/15/2019
3. House Member Sponsor: Barbara Watson
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:					134,624	134,624

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.
Funds shall be returned to the State if the deliverables or performance measure are not met.

6. Requester:

- a. Name: Jo Ann Harris
- b. Organization: Alliance for Musical Arts Productions, Inc.
- c. Email: alliance4musicalarts@gmail.com
- d. Phone #: (786)439-8929

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

- a. Name: Jo Ann Harris
- b. Organization: Alliance for Musical Arts Productions, Inc.
- c. Email: alliance4musicalarts@gmail.com
- d. Phone #: (786)439-8929

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: Alliance for Musical Arts Productions, Inc.
- 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)

- 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?

The long-term goal is to collaborate with local art curators and performing arts youth groups to provide an on-going performing arts series to this free and open to the public. The venue is the Betty T. Ferguson Recreational Complex, in Miami Gardens because of its' close proximity to the Hard Rock Stadium and the Miami Dolphins football. The series will help to build an audience base of locals and tourist. FIND YOUR BEAT! Performing Arts Series will provide cultural enrichment to this area.

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	Project Head - Salaries will be used for Project Head @\$35 per hr. x 20 hrs. per week = \$700 per week x 6 weeks per event = \$4200 x 7 events = \$29,400 + (9.5% tax) \$2193 = \$32,193	32,193
<input checked="" type="checkbox"/> b. Other Salary and Benefits	Salaries used for Support Clerical Staff (1) @\$15 per hour x 20 hrs per week = \$300 per week x 6 weeks per event = \$1,800 x 7 events = \$12,600 + (9.5% tax) \$1197 = \$13191	13,191
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	Office supplies and travel as needed	1,474
<input checked="" type="checkbox"/> d. Consultants/Contracted Services/Study	Funds will be used to pay for Bookkeeper and payroll Agency throughout the grant cycle. Bookkeeper \$470 per month x 12 months = \$5640. Payroll processing agency @\$108 per pay period x 2 pay periods per month \$216 per	8,232

	month x months = \$2592. Total \$8232	
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	Project Coordinator - @\$35 per hour x 15 hrs. per week = \$525 per week x 6 weeks (lead time and event) = \$3150 x 7 events = \$22,050 + (9.5% tax) \$2037 = \$24,087. Assistant Coordinator @\$18 per hour x 20 hours per week = \$360 per week x 6 weeks = \$ 2160 + (9.5% tax) \$205 = \$2365 x 7 events = \$16,555. TOTAL \$40642	40,652
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Marketing AD space @\$1000. AD space in local publications x 6 events = \$6,000. Social Media/Digital @ \$1,000. x 6 events = \$6,000 Playbill design & printing and others promotional material \$2,266	15,266
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Funds will be used for Contracted Services - Bookkeeping @\$470 per month x 6 months \$ 2820 and Payroll processing @\$108 per pay period x 2 pay periods per month = \$216 x 6 months = \$1296. TOTAL =\$ 4116. Publicist @1,000 per event x 6 events = \$6000.. Art Exhibition \$4500 x 3 exhibitions	23,616
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		

TOTAL		134,624
-------	--	---------

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:

Support Letters from Senator Oscar Braynon, State Representative Shervin Jones and Miami-Dade Commissioner Barbara Jordan, District 1

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?

Monthly performing arts series in the City of Miami Gardens. All presentations are free and open to the public of all abilities.

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

Free admission to all presentations.

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 type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input checked="" type="checkbox"/> Enrich cultural experience	Outcome 80% improvement: Develop an audience base consisting of residents, tourist and out-of-towners. To Provide access to attend public arts and music offerings to the residents of Miami-Gardens and surrounding areas. To increase the number of youth (ages 10 - 18) who attend culturally enriching activities closer to home	Method of measurement includes: # of persons who RSVP to each free event. # of schools attending the series. Random surveys to gage satisfaction climate of attendees. Social media response to events.
<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 type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		

<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<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 checked="" type="checkbox"/> Other (Please describe): Build Audience Base	85% increase in of the FIND YOUR BEAT! Performing Arts Series	Method of measure: tracking the number of persons attending, RSVPs and social media followings

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:	134,624	77.3%	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:	22,011	12.6%	Yes
5. Other:	17,500	10.0%	Yes
TOTAL	174,135	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