

**The Florida House of Representatives**  
**Appropriations Project Request - Fiscal Year 2022-23**  
For projects meeting the definition of House Rule 5.14

1. Title of Project: Pinellas County - Conservation of West Klosterman Preserve
2. Date of Submission: 11/15/2021
3. House Member Sponsor: Chris Latvala

**4. Details of Amount Requested:**

- a. Has funding been provided in a previous state budget for this activity? No
- 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 2021-22 <i>(If appropriated in 2021-22 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2022-23 <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	Recurring Base Budget	<b>Additional Nonrecurring Request</b>	<b>TOTAL Nonrecurring plus Recurring Base Funds</b>
Input Amounts:					3,000,000	3,000,000

e. Provide the total cost of the project for FY 2022-23 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	3,000,000	100.0%	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	0	0.0%	No

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5. Other	0	0.0%	No
<b>TOTAL</b>	<b>3,000,000</b>	<b>100%</b>	

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

No

6. Which is the most appropriate state agency to place an appropriation for the issue requested? Department of Environmental Protection

a. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? No

b. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

Funding will be returned to the state of Florida.

7. Requester:

a. Name: Paul Cozzie

b. Organization: Pinellas County

c. Email: pcozzie@co.pinellas.fl.us

d. Phone #: (727)582-2502

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

a. Name: Paul Cozzie

b. Organization: Pinellas County

c. Email: pcozzie@co.pinellas.fl.us

d. Phone #: (727)464-3485

9. Registered lobbyist working to secure funding for this project.

a. Name: Megan Fay

b. Firm: Capital City Consulting LLC

c. Email: megan@cccfla.com

d. Phone #: (850)222-9075

10. Organization or Name of entity receiving funds:

a. Name: Pinellas County

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- b. County (County where funds are to be expended): Pinellas  
 c. Service Area (Counties being served by the service(s) provided with funding): Pinellas

11. What type of organization is the entity that will receive the funds?

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

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

There is strong community sentiment to preserve school district owned land along West Klosterman Road. Per Florida statute, the district school board has adopted a resolution to sell the Klosterman Preserve property for conservation purposes. The county will use the funding to purchase the preserve property from the school district for conservation.

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

Spending Category	Description	Amount Requested (Should equal 4d, Col. E) Enter "0" if request is zero for the category
Administrative Costs:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		

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<input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	The county will purchase the property from the school district for preservation.	3,000,000
<b>TOTAL</b>		<b>3,000,000</b>

14. For Fixed Capital Costs requested in Question 13, what type of ownership will the facility be under when complete?

- 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)

15. Is the project request an information technology project?

No

16. 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

a. Please Describe:

The community has shown its support for preserving the tract of land through formation of the West Klosterman Preserve Inc., and through fundraising and media campaigns over TV, internet, and community groups such as the Pinellas Community Foundation.

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

Yes

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a. Please Describe:

The property has been determined by the county to have preservation value and is on the county's list of potential properties to acquire for conservation.

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

No

19. 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 or outcome
<input type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input type="checkbox"/> Improve quality of education		
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	Preserve the parcel of land located along West Klosterman Road from future development.	Pinellas County will protect the Klosterman property from future development.
<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		

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<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 type="checkbox"/> Other (Please describe):		