

cut 4249



NEW GRANT SET-UP FORM

Departments that have received a grant award must complete this form and submit it to the Grants Coordinator, along with a copy of the fully executed grant agreement, PRIOR to incurring any grant related expenses. Funds will become available for spending after revenue and expenditure codes are established by Office of Budget and Finance and a budget resolution has been adopted by the City Council.

1. DEPARTMENT (Grant Applicant/Contact Person) Name: <u>Emily Parkman</u> Title: <u>Cultural Arts Manager</u> Phone: <u>352-624-8383</u> Fax No.: _____	2. GRANT DATA Grant Title: <u>Florida Wildlife Corridor Foundation Grant</u> Funding Agency: <u>Florida Wildlife Corridor Foundation</u> Grant Award Date: <u>September 3, 2024</u> Period of Performance: <u>9/3/2024 - 11/29/2024</u>
3. FINANCIAL DATA Amount of Grant Award: <u>\$15,000</u> Amount of Matching Funds: <u>N/A</u> Amount of in-kind (specify source): <u>N/A</u> Total project amount: <u>\$100,000</u> Amount of Future Financial Obligations/Commitments: <u>No matching funds required</u>	5. STAFFING REQUIREMENTS Anticipated Salary Costs: <u>\$3,000</u> Anticipated Overtime Costs: <u>N/A</u> Anticipated Benefit Costs: <u>\$250</u> Will fund existing or new employees? <u>No</u>
6. BRIEF DESCRIPTION OF PURPOSE OF THE GRANT: <u>Ocala Cultural Arts in partnership with the Florida Wildlife Corridor Foundation, Fine Arts For Ocala, and Ocala Main Street are replacing the mural on the downtown market ground storage water tank with a new mural focusing on native Marion County wildlife. A jury comprised of our partners will evaluate design submissions and select one artist/collective to complete the mural project.</u>	
7. COUNCIL APPROVAL Has the budget resolution and contract been approved by City Council? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, please provide the meeting date(s) of approval. _____ If no, please provide the anticipated meeting date items will be presented to City Council. <u>October 15, 2024</u>	

REQUIRED SIGNATURES

<u>Emily Parkman</u> Grant Project Manager	<u>9-19-2024</u> Date
<u>[Signature]</u> Department Director	<u>9-19-24</u> Date
<u>C. Dawson</u> Grants Coordinator	<u>10-2-24</u> Date

OFFICE OF BUDGET & FINANCE USE ONLY	
Assigned Expenditure Code: <u>001-051-163*</u>	Munis: 240986 Division 163
Assigned Revenue Code: <u>001-337-000-000-07-33790</u>	
Date Department Notified of Appropriate Account Code: <u>10-2-24</u>	