

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

AMERICAN MUSEUM OF THE MOVING IMAGE, (D/B/A MUSEUM OF THE
MOVING IMAGE)
3601 35TH AVENUE
ASTORIA, NY 11106
(718) 784-4520

Name of Project Director:

ROCHELLE SLOVIN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FURNITURE, FIXTURES AND
EQUIPMENT AS PART OF A MULTI PHASE RENOVATION PROJECT
INTENDED TO MODERNIZE THE MUSEUM AND SHOWCASE ITS
COLLECTIONS.

Funded Amount:

\$125,000

Requested By:

GIANARIS

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

BETHANY II HOUSING DEVELOPMENT FUND CORP.
303 WEST 153RD STREET
NEW YORK, NY 10039
(212) 234-1215

Name of Project Director:

STEVEN A. ROBINSON

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION AND CONSTRUCTION OF A 22 UNIT AFFORDABLE HOUSING AND COMMERCIAL SPACE TO PROVIDE SERVICES TO THE COMMUNITY.

Funded Amount:

\$750,000

Requested By:

FARRELL, JR

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY
10 GRAND ARMY PLAZA
BROOKLYN, NY 11234
(718) 230-2792

Name of Project Director:

BRENDA BENTT-PETERS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS AND COMPUTER FURNITURE FOR THE RUGBY, PAERDEGAT, KINGS HIGHWAY, AND KINGS BAY LIBRARY BRANCHES.

Funded Amount:

\$50,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CAROUSEL SOCIETY OF THE NIAGARA FRONTIER
180 THOMPSON STREET
NORTH TONAWANDA, NY 14120
(716) 693-1885

Name of Project Director:

RAPHAELLE PROEFROCK

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE HISTORIC HERSCHELL
CAROUSEL FACTORY MUSEUM, INCLUDING THE REPLACEMENT OF
ELECTRICAL WIRING.

Funded Amount:

\$50,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CENTRAL ASTORIA LOCAL DEVELOPMENT COALITION
28-27 STEINWAY STREET
ASTORIA, NY 11103
(718) 728-7820

Name of Project Director:

MARIE TORNIALI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE PROPERTY, WHICH WILL BE USED AS THE ORGANIZATION'S COMMUNITY FACILITY. FROM THIS NEW CENTRALLY LOCATED SPACE, THE ORGANIZATION WILL OFFER PROGRAMS DESIGNED TO COMBAT NEIGHBORHOOD DETERIORATION.

Funded Amount:

\$50,000

Requested By:

NOLAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ELMSFORD LITTLE LEAGUE, INC.
2271 SAW MILL RIVER ROAD
ELMSFORD, NY 10591
(914) 469-0791

Name of Project Director:

STEVE COWLES

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT AN ELEVATED CLUBHOUSE,
FOR THE BENEFIT OF COMMUNITY SPORTS TEAMS.

Funded Amount:

\$175,000

Requested By:

BRODSKY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ERASMUS NEIGHBORHOOD FEDERATION, INC.
814 ROGERS AVENUE
BROOKLYN, NY 11226
(718) 462-7700

Name of Project Director:

YVES VILUS

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE A COMPUTER ROOM, INCLUDING THE PURCHASE AND INSTALLATION OF FURNITURE AND COMPUTER EQUIPMENT. THE EXPANDED PROGRAM WILL BENEFIT THE RESIDENTS AND SENIORS WHO RESIDE IN EAST FLATBUSH.

Funded Amount:

\$50,000

Requested By:

JACOBS

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

FAMILY SERVICE LEAGUE, INC.
790 PARK AVENUE
HUNTINGTON, NY 11743
(631) 427-3700

Name of Project Director:

KAREN BOORSHTEIN

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE SECOND FLOOR OF THE BAY SHORE FAMILY SERVICE CENTER.

Funded Amount:

\$200,000

Requested By:

RAMOS

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

GERRITTSEN BEACH FIRE VOLUNTEERS, INC.
52 SEBA AVENUE
BROOKLYN, NY 11229
(718) 332-5859

Name of Project Director:

JOHN H. CZAP

Purpose of Project:

FUNDS WILL BE USED TO REPAIR AND MODERNIZE THE ORGANIZATION'S BUILDING, INCLUDING THE INSTALLATION OF BOILERS AND REPLACEMENT OF FIRE DOORS.

Funded Amount:

\$50,000

Requested By:

MAISEL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

HERRICKS UNION FREE SCHOOL DISTRICT
999 HERRICKS ROAD
NEW HYDE PARK, NY 11040
(516) 305-8905

Name of Project Director:

JIM BROWN

Purpose of Project:

FUNDS WILL BE USED TO INSTALL SOLAR PANEL SYSTEMS FOR
THREE SCHOOLS.

Funded Amount:

\$125,000

Requested By:

SCHIMEL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

HUDSON RIVER MUSEUM OF WESTCHESTER, THE
511 WARBURTON AVENUE
YONKERS, NY 10701
(914) 963-4550

Name of Project Director:

RICHARD HALEVY

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE HISTORIC GLENVIEW
MANSION, INCLUDING REPOINTING THE STONEMASONRY AND MASONRY.

Funded Amount:

\$100,000

Requested By:

BRODSKY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

HUDSON VALLEY WRITERS' CENTER, INC.
300 RIVERSIDE DRIVE
SLEEPY HOLLOW, NY 10591
(914) 332-5953

Name of Project Director:

FRANK JULIANO

Purpose of Project:

FUNDS WILL BE USED TO WATERPROOF CONCRETE AND REINFORCE STEEL BEAMS, SO THAT THE FACILITY CAN CONTINUE TO PROVIDE A CREATIVE SPACE FOR THE COMMUNITY.

Funded Amount:

\$75,000

Requested By:

BRODSKY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

INCORPORATED VILLAGE OF SEA CLIFF
300 SEA CLIFF AVENUE, P.O. BOX 340
SEA CLIFF, NY 11579
(516) 671-0080

Name of Project Director:

DAN MADDOCK

Purpose of Project:

FUNDS WILL BE USED FOR THE DESIGN AND CONSTRUCTION OF A
SEWER LINE TO BETTER SERVE AREA RESIDENTS.

Funded Amount:

\$250,000

Requested By:

LAVINE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

KINGS BAY YM-YWHA, INC.
3495 NOSTRAND AVENUE
BROOKLYN, NY 11229
(718) 648-7703

Name of Project Director:

LEONARD PETLAKH

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE ELEVATOR AT THE
COMMUNITY CENTER, WHICH WILL ENSURE ACCESSIBILITY AND
SAFETY FOR MEMBERS OF THE COMMUNITY.

Funded Amount:

\$125,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

LAGUARDIA COMMUNITY COLLEGE OF THE CITY UNIVERSITY OF NEW
YORK
31-10 THOMSON AVENUE
LONG ISLAND CITY, NY 11101
(718) 482-5501

Name of Project Director:

RICHARD ELLIOTT

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE LIGHTING SYSTEM OF THE
MAIN STAGE THEATER, INSTALL AN ENVIRONMENTAL CONTROL
SYSTEM FOR THE ARCHIVES, AND TO CREATE A CURATORIAL WORK
AREA FOR THE ART DEPARTMENT.

Funded Amount:

\$250,000

Requested By:

NOLAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

LONG ISLAND CITY ROOTS, INC.
47-07 30TH PLACE
LONG ISLAND CITY, NY 11101
(718) 472-5671

Name of Project Director:

NOAH KAUFMAN

Purpose of Project:

FUNDS WILL BE USED TO MAKE IMPROVEMENTS TO THE COMMUNITY GARDEN/FIREFIGHTER MICHAEL BRENNAN MEMORIAL. SUCH IMPROVEMENTS INCLUDE THE INSTALLATION OF FENCING, A STORM WATER INFILTRATION SYSTEM, AS WELL AS THE PURCHASE OF EQUIPMENT. THESE IMPROVEMENTS WILL CREATE A SAFER AND MORE ACCESSIBLE COMMUNITY SPACE.

Funded Amount:

\$50,000

Requested By:

NOLAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

MANHASSET-LAKEVILLE FIRE DISTRICT
170 EAST SHORE ROAD
GREAT NECK, NY 11023
(516) 466-4423

Name of Project Director:

CHARLES G. STEPANEK

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF A TRAFFIC CONTROL AND PREEMPTION SIGNAL SYSTEM, SO THAT THE FIRE DISTRICT CAN ENTER AND EXIT THE ROAD MORE SAFELY WHILE RESPONDING TO EMERGENCIES AROUND THE AREA.

Funded Amount:

\$125,000

Requested By:

SCHIMEL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

METROPOLITAN NEW YORK COORDINATING COUNCIL ON JEWISH
POVERTY
80 MAIDEN LANE, 21ST FLOOR
NEW YORK, NY 10038
(212) 453-9500

Name of Project Director:

LARISA BOAS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TWO NEW TRUCKS FOR THE
FOOD PANTRY NETWORK. THE NETWORK PROVIDES FOOD PICKUPS
AND DELIVERIES TO OVER 13,000 FAMILIES AND INDIVIDUALS ON A
MONTHLY BASIS.

Funded Amount:

\$125,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

METROPOLITAN NEW YORK COORDINATING COUNCIL ON JEWISH
POVERTY
80 MAIDEN LANE, 21ST FLOOR
NEW YORK, NY 10038
(212) 453-9500

Name of Project Director:

LARISA BOAS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TWO NEW TRUCKS FOR THE
FOOD PANTRY NETWORK. THE NETWORK PROVIDES FOOD PICKUPS
AND DELIVERIES TO OVER 13,000 FAMILIES AND INDIVIDUALS ON A
MONTHLY BASIS.

Funded Amount:

\$50,000

Requested By:

NOLAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

METROPOLITAN NEW YORK COORDINATING COUNCIL ON JEWISH
POVERTY
80 MAIDEN LANE, 21ST FLOOR
NEW YORK, NY 10038
(212) 453-9500

Name of Project Director:

LARISA BOAS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TWO NEW TRUCKS FOR THE
FOOD PANTRY NETWORK. THE NETWORK PROVIDES FOOD PICKUPS
AND DELIVERIES TO OVER 13,000 FAMILIES AND INDIVIDUALS ON A
MONTHLY BASIS.

Funded Amount:

\$125,000

Requested By:

PHEFFER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

MOSHOLU PRESERVATION CORPORATION
3400 RESERVOIR OVAL EAST
BRONX, NY 10467
(718) 324-4461

Name of Project Director:

DART WESTPHAL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL TREE GUARDS TO HELP BEAUTIFY THE SHOPPING DISTRICT, EXPAND GATEWAYS AND PARKS BY CREATING ENTRANCE GARDENS AND PLANTINGS IN LOCAL PARKS, AS WELL AS INSTALLING A NEW ROOF ON THE LOCAL BID OFFICE BUILDING.

Funded Amount:

\$50,000

Requested By:

DINOWITZ

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY BOARD OF EDUCATION
52 CHAMBERS STREET
NEW YORK, NY 10007
(212) 374-4934

Name of Project Director:

GRAHAM GORDON

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A PLAYGROUND AT PUBLIC
SCHOOL 41, IN BAYSIDE, NEW YORK.

Funded Amount:

\$100,000

Requested By:

CARROZZA

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY BOARD OF EDUCATION
52 CHAMBERS STREET
NEW YORK, NY 10007
(212) 374-4934

Name of Project Director:

GRAHAM GORDON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SMARTBOARDS AND OTHER
COMPUTER EQUIPMENT FOR SEVENTEEN SCHOOLS IN THE
BOROUGH OF QUEENS.

Funded Amount:

\$100,000

Requested By:

PHEFFER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY PARKS AND RECREATION
830 FIFTH AVENUE, THE ARSENAL BUILDING, ROOM 309
NEW YORK, NY 10021
(212) 360-1360

Name of Project Director:

EDWARD J. LEWIS

Purpose of Project:

FUNDS WILL BE USED FOR THE RECONSTRUCTION OF BALL FIELDS
13 AND 14 IN FLUSHING MEADOWS-CORONA PARK.

Funded Amount:

\$250,000

Requested By:

HEVESI-A

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK FAMILIES FOR AUTISTIC CHILDREN, INC.
95-16 PITKIN AVENUE
OZONE PARK, NY 11417
(718) 641-3441

Name of Project Director:

ANDREW BAUMANN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL SOLAR PANELS,
AS WELL AS ENERGY EFFICIENT EQUIPMENT IN ORDER TO BETTER
PROVIDE SERVICES TO FAMILIES IN NEED.

Funded Amount:

\$200,000

Requested By:

PHEFFER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NIAGARA FALLS VETERANS MEMORIAL COMMISSION
496 COLLEGE AVENUE
NIAGARA FALLS, NY 14305
(716) 363-3234

Name of Project Director:

DAVE FABRIZIO

Purpose of Project:

FUNDS WILL BE USED TO HELP CONSTRUCT A VETERANS MEMORIAL
IN NIAGARA FALLS TO MEMORIALIZE SEVERAL HISTORIC CONFLICTS.

Funded Amount:

\$250,000

Requested By:

DELMONTE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NIAGARA TOURISM AND CONVENTION CORPORATION
345 THIRD STREET, #605
NIAGARA FALLS, NY 14303
(716) 282-8992

Name of Project Director:

JOHN PERCY

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE VISITOR CENTER, WHICH
WOULD PROMOTE TOURISM WITHIN THE NIAGARA REGION.

Funded Amount:

\$250,000

Requested By:

DELMONTE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NORTH SHORE CENTRAL SCHOOL DISTRICT
112 FRANKLIN AVENUE
SEA CLIFF, NY 11579
(516) 277-7801

Name of Project Director:

ED MELNICK

Purpose of Project:

FUNDS WILL BE USED FOR ARCHITECTURAL FEES ASSOCIATED WITH
THE RENOVATION OF THE HIGH SCHOOL TRACK AND FIELD.

Funded Amount:

\$50,000

Requested By:

LAVINE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

OYSTER BAY RAILROAD MUSEUM
100-102 AUDREY AVENUE
OYSTER BAY, NY 11771
(516) 558-7036

Name of Project Director:

BEN JANKOWSKI

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS TO THE OYSTER BAY
RAILROAD MUSEUM.

Funded Amount:

\$125,000

Requested By:

LAVINE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

PER SCHOLAS, INC.
1575 BRONX RIVER AVENUE
BRONX, NY 10460
(718) 991-8400

Name of Project Director:

STEVEN RODRIGUEZ

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A NEW ROOF, AS WELL AS FOR THE PURCHASE AND INSTALLATION OF WINDOWS FOR THE WORKFORCE DEVELOPMENT AND TECHNOLOGY TRAINING CENTER.

Funded Amount:

\$50,000

Requested By:

RIVERA-P

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

RIVERDALE SENIOR SERVICES, INC.
2600 NETHERLAND AVENUE
BRONX, NY 10463
(718) 884-5900

Name of Project Director:

JULIA SCHWARTZ-LEEPER

Purpose of Project:

FUNDS WILL BE USED TO BUILD A COMMUNITY TERRACE AND GARDEN AT THE FACILITY.

Funded Amount:

\$50,000

Requested By:

DINOWITZ

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

RIVERDALE SENIOR SERVICES, INC.
2600 NETHERLAND AVENUE
BRONX, NY 10463
(718) 884-5900

Name of Project Director:

JULIA SCHWARTZ-LEEPER

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE FACILITY, INCLUDING THE INSTALLATION OF HANDICAP ACCESSIBLE DOORS AND A RAMP. FUNDS WILL ALSO BE USED TO PURCHASE AN AWNING AND FURNITURE APPROPRIATE FOR THE SENIOR COMMUNITY.

Funded Amount:

\$125,000

Requested By:

DINOWITZ

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ROCKAWAY WATERFRONT ALLIANCE, INC.
152 BEACH 25TH STREET
FAR ROCKAWAY, NY 11690
(718) 327-5919

Name of Project Director:

JEANNE DUPONT

Purpose of Project:

FUNDS WILL BE USED FOR ARCHITECT AND ENGINEERING FEES ASSOCIATED WITH THE REDEVELOPMENT OF THE ROCKAWAY FIREHOUSE INTO THE ROCKAWAY INSTITUTE FOR A SUSTAINABLE ENVIRONMENT (RISE).

Funded Amount:

\$200,000

Requested By:

PHEFFER, TITUS

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ROSENDALE THEATRE COLLECTIVE, INC.
408 MAIN STREET
ROSENDALE, NY 12472
(845) 658-8533

Name of Project Director:

F-STOP FITZGERALD

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE AND REFURBISH THE
ROSENDALE THEATRE.

Funded Amount:

\$175,000

Requested By:

CAHILL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

SAMARITAN VILLAGE, INC.
138-02 QUEENS BOULEVARD
BRIARWOOD, NY 11435
(718) 206-2000

Name of Project Director:

ROBERT CASALASPRO

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE AND CONVERT SPACE
ADJACENT TO THE WOODSIDE SENIOR CENTER INTO A CONVENIENT
AND ACCESSIBLE EXERCISE ROOM/GYM.

Funded Amount:

\$65,000

Requested By:

MARKEY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

SAMUEL FIELD YM & YWHA, INC.
58-20 LITTLE NECK PARKWAY
LITTLE NECK, NY 11362
(718) 225-6750

Name of Project Director:

DR. STEVEN GOODMAN

Purpose of Project:

FUNDS WILL BE USED TO RECONSTRUCT SIDEWALKS, ACCESS PATHS IN FRONT OF THE MAIN BUILDING AND THE PARKING LOT AND ALSO TO REPAIR FENCING. THE REPAIRS WILL PROVIDE A SAFE AND SECURE ACCESS TO THE BUILDING FOR COMMUNITY MEMBERS WHO RELY ON THE PROGRAMS AND SERVICES.

Funded Amount:

\$100,000

Requested By:

CARROZZA

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

SAMUEL FIELD YM & YWHA, INC.
58-20 LITTLE NECK PARKWAY
LITTLE NECK, NY 11362
(718) 225-6750

Name of Project Director:

DR. STEVEN GOODMAN

Purpose of Project:

FUNDS WILL BE USED TO INSTALL A NEW ROOF AND UPGRADE THE
PARKING LOT AT THE CAPE GERIATRIC MENTAL HEALTH CLINIC.

Funded Amount:

\$125,000

Requested By:

WEPRIN-M

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

SNUG HARBOR CULTURAL CENTER AND BOTANICAL GARDEN
1000 RICHMOND TERRACE
STATEN ISLAND, NY 10301
(718) 425-3505

Name of Project Director:

CYNTHIA TAYLOR

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT AND EQUIP THE STATEN ISLAND SUSTAINABLE FARM, A TWO ACRE PLOT OF LAND DIVIDED TO SERVE AS A WORKING FARM, NURSERY AND COMPOST DEMONSTRATION SITE DESIGNED TO STRENGTHEN, EDUCATE AND FEED THE COMMUNITIES OF STATEN ISLAND.

Funded Amount:

\$125,000

Requested By:

TITONE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ST. JOHN'S RIVERSIDE HOSPITAL
967 NORTH BROADWAY
YONKERS, NY 10701
(914) 964-4769

Name of Project Director:

CHERAY BURNETT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A NEW MRI UNIT WITH A
SPECIAL BREAST COIL TABLE.

Funded Amount:

\$50,000

Requested By:

BRODSKY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

THEATER ET AL, INC. (D/B/A THE CHOCOLATE FACTORY THEATER)
5-49 49TH AVENUE
LONG ISLAND CITY, NY 11101
(718) 482-7069

Name of Project Director:

SHEILA LEWANDOWSKI

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE PUBLIC ENTRANCE AND LOBBY AREA THEREBY PROVIDING ACCESS FOR PERSONS WITH DISABILITIES AND INCREASING SAFETY FOR THE GENERAL PUBLIC.

Funded Amount:

\$50,000

Requested By:

NOLAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF BOSTON
8500 BOSTON STATE ROAD
BOSTON, NY 14025
(716) 632-2397

Name of Project Director:

CONNIE MINER

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT THE TOWN'S WATER SERVICE SYSTEM, WHICH WILL PROVIDE BETTER QUALITY WATER TO TOWN RESIDENTS.

Funded Amount:

\$100,000

Requested By:

HIGGINS, SMITH

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF EASTCHESTER
40 MILL ROAD
EASTCHESTER, NY 10709
(914) 771-3304

Name of Project Director:

MICHELLE LISCIO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL A GENERATOR, AS WELL AS FOR THE CONSTRUCTION OF A CONGRESSIONAL MEDAL OF HONOR MONUMENT.

Funded Amount:

\$125,000

Requested By:

PAULIN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF NELSON
4085 NELSON ROAD
CAZENOVIA, NY 13035
(315) 655-8582

Name of Project Director:

ROGER D. BRADSTREET

Purpose of Project:

FUNDS WILL BE USED TO RECONSTRUCT THE ERIEVILLE WATER DISTRICT SUPPLY AND DISTRIBUTION SYSTEM, SO THAT IT CAN CONTINUE TO SAFELY OPERATE FOR THE COMMUNITY.

Funded Amount:

\$125,000

Requested By:

MAGEE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF POTSDAM
35 MARKET STREET
POTSDAM, NY 13676
(315) 265-3430

Name of Project Director:

MARIE REGAN

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE TOWN HALL INCLUDING
THE PURCHASE AND INSTALLATION OF AN ELEVATOR.

Funded Amount:

\$100,000

Requested By:

AUBERTINE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF WESTERLO
671 CR 401
WESTERLO, NY 12193
(518) 797-3111

Name of Project Director:

RICHARD H. RAPP

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND RENOVATE A BUILDING TO
BE USED AS A TOWN HALL.

Funded Amount:

\$125,000

Requested By:

MCENENY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

URBAN HEALTH PLAN, INC.
1065 SOUTHERN BOULEVARD
BRONX, NY 10459
(718) 991-4833

Name of Project Director:

PALOMA HERNANDEZ

Purpose of Project:

FUNDS WILL BE USED FOR ARCHITECTURAL AND DESIGN FEES
ASSOCIATED WITH THE EXPANSION OF THE COMMUNITY HEALTH
CENTER.

Funded Amount:

\$100,000

Requested By:

DIAZ-R

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

VILLAGE OF MAMARONECK
VILLAGE HALL AT THE REGATTA, 123 MAMARONECK AVENUE
MAMARONECK, NY 10543
(914) 777-7703

Name of Project Director:

RICHARD SLINGERLAND

Purpose of Project:

FUNDS WILL BE USED TO INSTALL NEW LIGHTING ALONG THE
CENTRAL BUSINESS DISTRICT IN MAMARONECK TO INCREASE
PEDESTRIAN AND TRAFFIC SAFETY.

Funded Amount:

\$50,000

Requested By:

LATIMER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

VILLAGE OF SOLVAY
1100 WOODS ROAD
SOLVAY, NY 13209
(315) 468-1670

Name of Project Director:

MICHAEL FECCO

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A GARAGE AT THE
DEPARTMENT OF PUBLIC WORKS FACILITY.

Funded Amount:

\$190,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

WARD MELVILLE HERITAGE ORGANIZATION, LTD.
111 MAIN STREET, P.O. BOX 572
STONY BROOK, NY 11790
(631) 751-2244

Name of Project Director:

GLORIA ROCCHIO

Purpose of Project:

FUNDS WILL BE USED TO INSTALL A SPRINKLER SYSTEM AND NEW ROOF AT THE HISTORIC BREWSTER HOUSE, SO THAT IT CAN BE BETTER PRESERVED FOR VISITORS AND THE COMMUNITY.

Funded Amount:

\$125,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

WESTSIDE HEALTH SERVICES, INC.
480 GENESEE STREET
ROCHESTER, NY 14611
(585) 436-3040

Name of Project Director:

PATRICIA L. BONINO

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE WOMAN'S CENTER, AS WELL AS TO PURCHASE AND INSTALL EQUIPMENT.

Funded Amount:

\$100,000

Requested By:

GANTT

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

WOMAN'S CLUB OF ALBANY, INC.
725 MADISON AVENUE
ALBANY, NY 12208
(518) 465-3626

Name of Project Director:

MARILYN KAPLAN

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE AND REFURBISH A HISTORICALLY SIGNIFICANT SECTION OF THE BUILDING THAT WAS CONSTRUCTED IN 1895.

Funded Amount:

\$50,000

Requested By:

MCENENY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

YOUNG MEN'S CHRISTIAN ASSOCIATION OF LONG ISLAND
200 WEST MAIN STREET
BAY SHORE, NY 11706
(631) 665-4255

Name of Project Director:

BOB PETERSEN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL A MARQUEE, AS WELL AS FOR THE PURCHASE OF EQUIPMENT FOR THE BOULTON CENTER, A PERFORMING ARTS FACILITY.

Funded Amount:

\$100,000

Requested By:

RAMOS

Name of Administering State Agency:

NYS DORMITORY AUTHORITY