

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ANIMAL HAVEN, INC.
35-22 PRINCE STREET
FLUSHING, NY 11354
(718) 886-3683

Name of Project Director:

TIFFANY LACEY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR TWO FACILITIES, AS WELL AS TO RENOVATE TEN DOG ROOMS, WHICH WILL PROVIDE A SAFER ENVIRONMENT FOR THE ANIMALS WAITING TO BE ADOPTED.

Funded Amount:

\$125,000

Requested By:

KELLNER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

BETH ISRAEL MEDICAL CENTER-KINGS HIGHWAY DIVISION
3201 KINGS HIGHWAY
BROOKLYN, NY 11234
(718) 951-3000

Name of Project Director:

RHONA HETSRONY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BRONCHOSCOPY AND ECHOCARDIOGRAM MACHINES. THESE MACHINES WILL BE USED IN THE TREATMENT AND DIAGNOSIS OF RESPIRATORY AND HEART DISEASES.

Funded Amount:

\$250,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

BOYS & GIRLS CLUB OF BINGHAMTON, INC., THE
90 CLINTON STREET
BINGHAMTON, NY 13901
(607) 723-7404

Name of Project Director:

MARYBETH SMITH

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF AN OUTDOOR BASKETBALL COURT, HANDBALL COURT AND SOFTBALL FIELD, AS WELL AS ASSOCIATED LANDSCAPING COSTS.

Funded Amount:

\$125,000

Requested By:

LUPARDO

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

BRONX RESOURCE COMMUNITY CENTER, INC.
815 BURKE AVENUE
BRONX, NY 10467
(718) 655-6722

Name of Project Director:

DR. KEITH ELIJAH THOMPSON

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE CLASSROOMS, BATHROOMS, CONFERENCE ROOMS, AND THE STUDENT ACTIVITY CENTER, WHICH PROVIDE AFTER SCHOOL PROGRAMS, AS WELL AS SERVICES TO MEMBERS OF THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

HEASTIE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CATHOLIC CHARITIES OF THE ROMAN CATHOLIC DIOCESE OF
SYRACUSE, NY, (D/B/A CATHOLIC CHARITIES OF ONONDAGA
COUNTY)
1654 WEST ONONDAGA STREET
SYRACUSE, NY 13204
(315) 362-7652

Name of Project Director:

ANN W. MADSEN

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF THE SOUTHSIDE
NEIGHBORHOOD RESOURCE CENTER. THIS CENTER WILL PROVIDE
RESIDENTS OF THE SOUTH SIDE OF SYRACUSE ACCESS TO
INFORMATION AND OTHER SERVICES.

Funded Amount:

\$50,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CENTRAL NEW YORK SOCIETY FOR THE PREVENTION OF CRUELTY
TO ANIMALS
5878 EAST MOLLOY ROAD
SYRACUSE, NY 13211
(315) 454-3771

Name of Project Director:

PAUL MORGAN

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATION OF THE BUILDING INTO A
STERILE SURGICAL VETERINARY CLINIC. THESE RENOVATIONS WILL
ALLOW THE GRANTEE TO IMPROVE THE QUALITY OF ANIMAL CARE
WITHIN ONONDAGA COUNTY.

Funded Amount:

\$125,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF CORTLAND
25 COURT STREET
CORTLAND, NY 13045
(607) 753-3021

Name of Project Director:

JOHN MCNERNEY

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF THE BEAUDRY
PARK COMMUNITY RECREATION BUILDING.

Funded Amount:

\$150,000

Requested By:

LIFTON

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF SYRACUSE
1200 CANAL STREET
SYRACUSE, NY 13210
(315) 448-8592

Name of Project Director:

JEFF T. WRIGHT

Purpose of Project:

FUNDS WILL BE USED FOR STREETScape IMPROVEMENTS TO THE EAST GENESEE BUSINESS CORRIDOR. THESE IMPROVEMENTS WILL MAKE THE AREA MORE ATTRACTIVE AND ACCESSIBLE TO EMPLOYEES, EMPLOYERS, AND RESIDENTS OF THE COMMUNITY.

Funded Amount:

\$375,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CORRIGAN-KIERNAN MEMORIAL POST NO. 8160, INC.
1265 PROSPECT AVENUE
BROOKLYN, NY 11218
(718) 438-9474

Name of Project Director:

JOHN SANFORD

Purpose of Project:

FUNDS WILL BE USED FOR FACILITY RENOVATIONS, INCLUDING ROOF REPLACEMENT. THE ORGANIZATION IS AN INTEGRAL PART OF THE COMMUNITY AND PROVIDES VETERANS SUPPORT SERVICES AND SPONSORS SENIOR AND YOUTH PROGRAMS WITHIN THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

BRENNAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

DAUGHTERS OF SARAH HOUSING COMPANY, INC.
182 WASHINGTON AVENUE EXTENSION
ALBANY, NY 12203
(518) 724-3204

Name of Project Director:

MARK L. KOBLENZ

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT WALKWAYS ON THE PREMISES. THESE WALKWAYS WILL ENABLE SENIOR RESIDENTS TO MOVE AROUND THE GROUNDS ON A STURDY AND SAFE SURFACE.

Funded Amount:

\$50,000

Requested By:

MCENENY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

DOWNTOWN COMMUNITY TELEVISION CENTER, INC.
87 LAFAYETTE STREET
NEW YORK, NY 10013
(212) 966-4510

Name of Project Director:

CATHERINE MARTINEZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A DIGITAL CINEMA PROJECTOR, WHICH WILL BE USED TO PROVIDE HANDS-ON DIGITAL MEDIA ARTS INSTRUCTIONS IN HIGH SCHOOLS, AS WELL AS THROUGHOUT THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

GLICK

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ERIE COUNTY INDUSTRIAL DEVELOPMENT AGENCY
275 OAK STREET, SUITE 150
BUFFALO, NY 14203
(716) 856-6525

Name of Project Director:

JOHN CAPPELLINO

Purpose of Project:

FUNDS WILL BE USED FOR RAIL IMPROVEMENTS TO ERIE COUNTY RAIL LINE #1246, INCLUDING THE REHABILITATION OF RAIL SIDINGS, REPLACEMENT OF TIES AND REPAIR OF A SWITCH. THESE REPAIRS WILL ALLOW TRAINS TO MOVE THROUGH THE AREA MORE EFFICIENTLY AND SAFELY.

Funded Amount:

\$100,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ESF COLLEGE FOUNDATION, INC.
214 BRAY HALL, 1 FORESTRY DRIVE, SUNY ESF
SYRACUSE, NY 13210
(315) 470-6683

Name of Project Director:

BRENDA T. GREENFIELD

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION COSTS OF THE NEW MEETING AND BUNKROOM SPACE FOR STUDENTS AND RESEARCHERS AT THE THOUSAND ISLANDS BIOLOGICAL STATION STUDENT RESEARCHER COTTAGE.

Funded Amount:

\$100,000

Requested By:

AUBERTINE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

FAMILY & CHILDREN'S SERVICE OF NIAGARA, INC.
826 CHILTON AVENUE
NIAGARA FALLS, NY 14301
(716) 285-6984

Name of Project Director:

KENNETH A. SASS

Purpose of Project:

FUNDS WILL BE USED TO ACQUIRE AND REHABILITATE TWO EXISTING BUILDINGS, WHICH WILL BE USED FOR OFFICES. THESE ADDITIONAL OFFICES WILL PROVIDE AN INCREASE OF ON-SITE SERVICES TO THE COMMUNITY.

Funded Amount:

\$200,000

Requested By:

DELMONTE, SCHIMMINGER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

GREENHOPE SERVICES FOR WOMEN, INC.
23 WEST 123RD STREET, 5TH FLOOR, 5D
NEW YORK, NY 10027
(212) 996-8633

Name of Project Director:

ANNE R. ELLIOTT

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A FACILITY, WHICH WILL PROVIDE SUPPORTIVE SERVICES FOR WOMEN AND CHILDREN THROUGHOUT THE COMMUNITY. THIS RESIDENCE WILL PROVIDE THE STRUCTURE AND SUPERVISION NECESSARY FOR WOMEN TO SUCCEED IN CARING FOR AND NURTURING THEIR CHILDREN, AND STAYING DRUG-FREE AND OUT OF JAIL.

Funded Amount:

\$50,000

Requested By:

POWELL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

JAMAICA BENEVOLENT ARM & CULTURAL CENTER, INC.
4440 HILL AVENUE
BRONX, NY 10466
(718) 994-5496

Name of Project Director:

SADIE CAMPBELL

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE COMMUNITY SERVICE CENTER, WHICH PROVIDES SUPPORTIVE SERVICES, AS WELL AS EDUCATIONAL AND CULTURAL PROGRAMS FOR THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

HEASTIE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

JAMES PRENDERGAST LIBRARY ASSOCIATION
509 CHERRY STREET
JAMESTOWN, NY 14701
(716) 484-7135

Name of Project Director:

CATHERINE A. WAY

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE MAIN READING ROOM AND CHILDREN'S ROOM.

Funded Amount:

\$200,000

Requested By:

PARMENT

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

JOHN VENDETTI POST NO. 1 ITALIAN AMERICAN WAR VETERANS OF
THE UNITED STATES INCORPORATED
500 DANFORTH STREET
SYRACUSE, NY 13208
(315) 424-0161

Name of Project Director:

RUSS BROMFIELD

Purpose of Project:

FUNDS WILL BE USED FOR THE EXPANSION OF THE PARKING LOT, AS WELL AS RENOVATIONS OF THE FACILITY, INCLUDING THE INSTALLATION OF BENCHES, LIGHTING AND SIGNAGE. THIS POST SERVES NOT ONLY VETERANS, BUT ALSO MEMBERS OF THE NORTHSIDE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

LARCHMONT PUBLIC LIBRARY
121 LARCHMONT AVENUE
LARCHMONT, NY 10538
(914) 834-1977

Name of Project Director:

DIANE COURTNEY

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE CHILDREN'S ROOM.

Funded Amount:

\$125,000

Requested By:

LATIMER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

LIVERPOOL CENTRAL SCHOOL DISTRICT
195 BLACKBERRY ROAD
LIVERPOOL, NY 13090
(315) 622-7164

Name of Project Director:

TIMOTHY MANNING

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF TRANSPORTABLE BLEACHERS, WHICH WILL BE USED FOR SPORTING EVENTS, AS WELL AS COMMUNITY ASSEMBLIES IN THE LIVERPOOL CENTRAL SCHOOL DISTRICT.

Funded Amount:

\$126,125

Requested By:

STIRPE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

MAIMONIDES MEDICAL CENTER
4802 TENTH AVENUE
BROOKLYN, NY 11219
(718) 283-8376

Name of Project Director:

ROBERT WACHEWSKI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FURNITURE, LIGHTING, TELEVISION AND COMPUTER ELECTRONICS FOR THE FAMILY WAITING LOUNGES WITHIN THE SURGICAL AND MEDICAL INTENSIVE CARE UNIT.

Funded Amount:

\$50,000

Requested By:

LENTOL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

MAKE THE ROAD NEW YORK
301 GROVE STREET
BROOKLYN, NY 11237
(718) 418-7690

Name of Project Director:

ANDREW FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF TECHNOLOGY AND COMMUNICATIONS EQUIPMENT FOR A NEW OFFICE AND COMMUNITY FACILITY IN QUEENS, WHICH WILL PROVIDE ADULT LITERACY AND YOUTH DEVELOPMENT PROGRAMS TO FAMILIES IN BROOKLYN.

Funded Amount:

\$50,000

Requested By:

NOLAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

MOSHOLU-MONTEFIORE COMMUNITY CENTER, INC.
3450 DEKALB AVENUE
BRONX, NY 10467
(718) 882-4000

Name of Project Director:

DONALD BLUESTONE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF A FENCE AND PLAYGROUND EQUIPMENT FOR THE COMMUNITY CENTER, WHICH PROVIDES SUPPORTIVE SERVICES TO THE COMMUNITY.

Funded Amount:

\$250,000

Requested By:

DINOWITZ

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NATIONAL INSTITUTE FOR REPRODUCTIVE HEALTH, INC.
470 PARK AVENUE SOUTH, 7TH FLOOR
NEW YORK, NY 10016
(212) 343-0114

Name of Project Director:

ED LEIBMAN

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING RENOVATIONS, INCLUDING THE PURCHASE OF FURNITURE AND EQUIPMENT. THE PROJECT WILL ALLOW THE ORGANIZATION TO PROVIDE GREATER ACCESS TO SERVICES FOR MEMBERS OF THE COMMUNITY.

Funded Amount:

\$550,000

Requested By:

BRODSKY, GLICK, GOTTFRIED, SILVER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY HOUSING AUTHORITY
250 BROADWAY
NEW YORK, NY 10007
(212) 306-4372

Name of Project Director:

SHIRLEY BROWN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF CLOSED CIRCUIT TV SECURITY CAMERAS FOR THE BAY VIEW HOUSES COMPLEX. THIS COMPLEX CONSISTS OF TWENTY THREE BUILDINGS, AND THE CAMERAS WILL BE PLACED IN TARGETED AREAS TO DETER CRIME RELATED PROBLEMS.

Funded Amount:

\$250,000

Requested By:

MAISEL

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 ROOM 310
NEW YORK, NY 10021
(212) 360-3403

Name of Project Director:

JOSHUA LAIRD

Purpose of Project:

FUNDS WILL BE USED TO REPAIR SIDEWALKS AT APPROXIMATELY FORTY SITES THROUGHOUT BROOKLYN THAT HAVE BEEN DAMAGED BY TREE ROOTS. THIS WILL PROVIDE A SAFER AND MORE AESTHETICALLY PLEASING ENVIRONMENT FOR THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

ABBATE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NIAGARA ARTS & CULTURAL CENTER, INC.
1201 PINE AVENUE
NIAGARA FALLS, NY 14301
(716) 282-7530

Name of Project Director:

KATHIE KUDELA

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A CIRCULAR DRIVE AND RECONFIGURE THE FACILITY'S ENTRANCE. THESE RENOVATIONS WILL ALLOW THE PUBLIC EASIER AND GREATER ACCESS.

Funded Amount:

\$50,000

Requested By:

DELMONTE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NORMAN HOWARD SCHOOL, THE
275 PINNACLE ROAD
ROCHESTER, NY 14623
(585) 266-7277

Name of Project Director:

LISA RECORD

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF AN ASBESTOS SURVEY, ABATEMENT AND DEMOLITION OF TWO HOMES, AND GRADING OF LAND IN ORDER TO CREATE GREEN SPACE FOR A PLAY AREA. FUNDS WILL ALSO BE USED TO PURCHASE EQUIPMENT. THESE PROJECTS WILL ALLOW THE SCHOOL TO CONTINUE TO PROVIDE A QUALITY EDUCATION FOR STUDENTS WITH LEARNING DISABILITIES.

Funded Amount:

\$125,000

Requested By:

MORELLE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

PARKER JEWISH INSTITUTE FOR HEALTH CARE AND REHABILITATION
271-11 76TH AVENUE
NEW HYDE PARK, NY 11040
(718) 289-2251

Name of Project Director:

RON SHAFRAN

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF PATIENT ROOMS.
THESE RENOVATIONS WILL ALLOW THE FACILITY TO PROVIDE
IMPROVED CARE TO AREA RESIDENTS.

Funded Amount:

\$50,000

Requested By:

CARROZZA

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

PATRICK E. GORMAN HOUSING CO., INC.
1381A LINDEN BOULEVARD
BROOKLYN, NY 11212
(718) 498-5222

Name of Project Director:

TRACY PHILLIP

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SECURITY CAMERAS, WHICH WILL ENHANCE THE SAFETY OF RESIDENTS OF THE BUILDING AND MEMBERS OF THE COMMUNITY.

Funded Amount:

\$75,000

Requested By:

PERRY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

PHELPS MEMORIAL HOSPITAL ASSOCIATION (D/B/A PHELPS
MEMORIAL HOSPITAL CENTER)
701 NORTH BROADWAY
SLEEPY HOLLOW, NY 10591
(914) 366-1002

Name of Project Director:

BRUCE B. DAVIDOW

Purpose of Project:

FUNDS WILL BE USED TO INSTALL NEW WINDOWS IN THE FACILITY.
THESE WINDOWS WILL ALLOW THE FACILITY TO LOWER HEATING
AND COOLING COSTS, AS WELL AS TO PROVIDE A BETTER FACILITY
FOR PATIENT CARE.

Funded Amount:

\$50,000

Requested By:

GALEF

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

REACHING OUT COMMUNITY SERVICES, INC.
7708 NEW UTRECHT AVENUE
BROOKLYN, NY 11214
(718) 373-4565

Name of Project Director:

THOMAS NEVE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A BOX TRUCK AND MODIFY IT FOR USE AS A FOOD PANTRY. THIS WILL ALLOW THE ORGANIZATION TO DISTRIBUTE FOOD AND BASIC ITEMS TO NEEDY FAMILIES IN THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

COLTON

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ROCHESTER BROADWAY THEATRE LEAGUE, INC.
885 EAST MAIN STREET
ROCHESTER, NY 14605
(585) 325-7760

Name of Project Director:

DONALD JEFFRIES

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF AN
AIR HANDLING AND DISTRIBUTION UNIT.

Funded Amount:

\$50,000

Requested By:

GANTT

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

RODEPH CHESED VOLUNTEER AMBULETTE TRANSPORT, INC.
1520 39TH STREET
BROOKLYN, NY 11218
(718) 435-9229

Name of Project Director:

ELIEZER BIDERMAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OFFICE FURNITURE, A VAN, AND A RADIO SYSTEM. THE NEW EQUIPMENT AND VEHICLE WILL PROVIDE GREATER ACCESS TO SERVICES FOR WHEELCHAIR BOUND ADULTS IN THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

HIKIND

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ST. JOHN FRUIT BELT COMMUNITY DEVELOPMENT CORPORATION
184 GOODELL STREET
BUFFALO, NY 14204
(716) 852-4504

Name of Project Director:

MICHAEL CHAPMAN

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A HOSPICE HOUSE. THIS HOSPICE HOUSE WILL ALLOW THE GRANTEE TO BETTER CARRY OUT ITS MISSION AND SERVE THE NEEDS OF THE AREA.

Funded Amount:

\$100,000

Requested By:

PEOPLES

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF CLIFTON PARK
ONE TOWN HALL PLAZA
CLIFTON PARK, NY 12065
(518) 371-6651

Name of Project Director:

MICHAEL SHAHEN

Purpose of Project:

FUNDS WILL BE USED TO UPDATE AND INSTALL NEW ADA
COMPLIANT RESTROOMS, RAILINGS AND RAMPS AT THE HISTORIC
GROOMS TAVERN.

Funded Amount:

\$75,000

Requested By:

REILLY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF CLIFTON PARK
ONE TOWN HALL PLAZA
CLIFTON PARK, NY 12065
(518) 371-6651

Name of Project Director:

MICHAEL SHAHEN

Purpose of Project:

FUNDS WILL BE USED TO INSTALL A NEW SEWER SYSTEM AND PUMP STATION.

Funded Amount:

\$125,000

Requested By:

REILLY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF DERUYTER
735 UTICA STREET
DERUYTER, NY 13052
(315) 852-9650

Name of Project Director:

DANIEL S. DEGEAR

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE DERUYTER TOWN HALL,
WHICH WILL INCLUDE ELECTRICAL UPGRADES, PLUMBING
IMPROVEMENTS, AND HVAC REHABILITATION.

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 DEWITT
5400 BUTTERNUT DRIVE
EAST SYRACUSE, NY 13057
(315) 446-3910

Name of Project Director:

EDWARD MICHALENKO

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A NEW ROOF FOR THE TOWN HALL.

Funded Amount:

\$250,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF ISLIP
655 MAIN STREET
ISLIP, NY 11751
(631) 224-5450

Name of Project Director:

DANIEL D. DOLLMANN

Purpose of Project:

FUNDS WILL BE USED FOR THE RESTORATION OF A PARKING LOT,
INCLUDING THE INSTALLATION OF LIGHTS AND LANDSCAPING.

Funded Amount:

\$50,000

Requested By:

RAMOS

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF ORCHARD PARK
S. 4295 SOUTH BUFFALO STREET
ORCHARD PARK, NY 14127
(716) 662-6400

Name of Project Director:

MARY TRAVERS MURPHY

Purpose of Project:

FUNDS WILL BE USED TO REPAIR AND RENOVATE THE ORCHARD
PARK TOWN HALL.

Funded Amount:

\$125,000

Requested By:

SCHROEDER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF TONAWANDA
2919 DELAWARE AVENUE
KENMORE, NY 14217
(716) 877-8804

Name of Project Director:

ANTHONY CARUANA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL A WIRELESS COMMUNICATION SYSTEM, COMPUTER SERVERS, AN AUDIO SYSTEM, A NEW DIGITAL AUTOMATED TELEPHONE SYSTEM, AND A DATA CENTER FIRE SUPPRESSION SYSTEM.

Funded Amount:

\$500,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ULSTER COUNTY SOCIETY FOR THE PREVENTION OF CRUELTY TO
ANIMALS
20 WIEDY ROAD
KINGSTON, NY 12401
(845) 331-5377

Name of Project Director:

BRIAN SHAPIRO

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE FACILITY, AS WELL AS TO
PURCHASE TECHNOLOGICAL UPGRADES.

Funded Amount:

\$100,000

Requested By:

CAHILL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

UNITAS THERAPEUTIC COMMUNITY, INC.
940 GARRISON AVENUE
BRONX, NY 10474
(718) 589-0551

Name of Project Director:

ERIC BREDHOFF

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS AND EQUIPMENT,
AS WELL AS TO RENOVATE THE BUILDING, WHICH PROVIDES
SERVICES AND EDUCATIONAL/DEVELOPMENTAL RESOURCES TO
CHILDREN WITHIN THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

DIAZ-R

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

VALATIE COMMUNITY THEATRE, INC.
3031 MAIN STREET
VALATIE, NY 12184
(518) 758-6926

Name of Project Director:

REMI S. GAYLORD

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF ADA COMPLIANT RESTROOM FACILITIES. THE COMPLETION OF THIS PROJECT WILL ALLOW THE GRANTEE TO BETTER SERVE THE NEEDS OF THE PUBLIC.

Funded Amount:

\$125,000

Requested By:

GORDON-T

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

VILLAGE OF RICHFIELD SPRINGS
102 MAIN STREET
RICHFIELD SPRINGS, NY 13439
(315) 858-1710

Name of Project Director:

DONNA WELLS

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF THE VILLAGE
OFFICES AND LIBRARY BUILDING.

Funded Amount:

\$125,000

Requested By:

MAGEE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

YOUNG MEN'S CHRISTIAN ASSOCIATION OF CENTRAL AND
NORTHERN WESTCHESTER, NY, INC.
250 MAMARONECK AVENUE
WHITE PLAINS, NY 10605
(914) 668-4041

Name of Project Director:

KAREN WATTS

Purpose of Project:

FUNDS WILL BE USED FOR INTERIOR RENOVATIONS, WHICH INCLUDE
NEW BATHROOMS AND EXPANSION OF A ROOM.

Funded Amount:

\$50,000

Requested By:

PRETLOW

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF CORTLAND, NEW
YORK, INC.
14 CLAYTON AVENUE
CORTLAND, NY 13045
(607) 753-9651

Name of Project Director:

AMY SIMRELL

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION AND EXPANSION OF
THE MAIN YWCA BUILDING.

Funded Amount:

\$300,000

Requested By:

LIFTON

Name of Administering State Agency:

NYS DORMITORY AUTHORITY