

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

AMERICAN MUSEUM OF THE MOVING IMAGE (D/B/A MUSEUM OF THE
MOVING IMAGE)
35TH AVENUE AT 37TH STREET
ASTORIA, NY 11106
(718) 784-4520

Name of Project Director:

JILL ENGEL

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF THE MUSEUM'S
MAIN ENTRANCE, STOREFRONT, AND CANOPY TO BE COMPLETED
ALONG WITH THE MUSEUM'S PLANNED EXPANSION AND
RENOVATION PROJECT.

Funded Amount:

\$50,000

Requested By:

NOLAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

BALDWINSVILLE CENTRAL SCHOOL DISTRICT
29 EAST ONEIDA STREET
BALDWINVILLE, NY 13027
(315) 638-6043

Name of Project Director:

JEANNE N. DANGLE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SCIENCE AND
TECHNOLOGY EQUIPMENT IN ORDER TO SUPPORT THE
CURRICULUM.

Funded Amount:

\$50,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

BEC NEW COMMUNITIES HOUSING DEVELOPMENT FUND COMPANY,
INC.
67 HANSON PLACE
BROOKLYN, NY 11217
(718) 858-8803

Name of Project Director:

DAN MATTHEW

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE AFFORDABLE HOUSING UNITS
LOCATED AT 12 KINGSTON AVENUE.

Funded Amount:

\$100,000

Requested By:

ROBINSON

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

BISSEL GARDENS, INC.
4378 WICKHAM AVENUE
BRONX, NY 10466
(718) 325-6111

Name of Project Director:

TERESA LECOUNT

Purpose of Project:

FUNDS WILL BE USED TO CREATE A CHILDREN'S GARDEN AND PLAY AREA.

Funded Amount:

\$50,000

Requested By:

DINOWITZ

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

BROOKLYN CHINESE-AMERICAN ASSOCIATION
5000 8TH AVENUE
BROOKLYN, NY 11220
(718) 438-0008

Name of Project Director:

PAUL MAK

Purpose of Project:

FUNDS WILL BE USED FOR FACILITY RENOVATIONS INCLUDING ROOF REPLACEMENT, ELECTRICAL UPGRADES AND BATHROOM RENOVATIONS. THE IMPROVED FACILITY WILL BETTER SERVE THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

BUCHANAN ENGINE CO. NO. 1, INCORPORATED
3159 ALBANY POST ROAD
BUCHANAN, NY 10511
(914) 760-2331

Name of Project Director:

ROBERT OUTHOUSE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A RESCUE VEHICLE
AND EQUIPMENT FOR THE FIRE DEPARTMENT.

Funded Amount:

\$50,000

Requested By:

GALEF

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CAMP VENTURE, INC.
25 SMITH STREET, SUITE 510
NANUET, NY 10954
(845) 624-3860

Name of Project Director:

GEORGE HOEHMANN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF SOLAR PANELS AND ENERGY EFFICIENT SYSTEMS SO THAT THE CAMP CAN RUN MORE EFFICIENTLY AND CONTINUE TO BE A BENEFIT TO DEVELOPMENTALLY DISABLED PERSONS.

Funded Amount:

\$125,000

Requested By:

ZEBROWSKI-K

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CASITA MARIA, INC.
830 SOUTHERN BOULEVARD, FOURTH FLOOR
BRONX, NY 10459
(718) 589-2230

Name of Project Director:

SARAH CALDERON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FURNITURE, AS WELL AS EQUIPMENT FOR A MULTIMEDIA OFFICE AND ARTS GALLERY IN AN EFFORT TO PROVIDE ARTS EDUCATION FOR THE COMMUNITY.

Funded Amount:

\$125,000

Requested By:

DIAZ-R

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CHILDRENS HOME OF KINGSTON, NEW YORK, THE
26 GROVE STREET
KINGSTON, NY 12401
(845) 331-1448

Name of Project Director:

GWEN MCCANN

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS OF THE FACILITY,
INCLUDING THE REPLACEMENT OF EMERGENCY EXIT DOORS AND
FLOORING TO INCREASE SAFETY FOR STUDENTS AND RESIDENTS.

Funded Amount:

\$50,000

Requested By:

CAHILL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CHINESE-AMERICAN PLANNING COUNCIL, INC.
150 ELIZABETH STREET
NEW YORK, NY 10012
(212) 941-0920

Name of Project Director:

DAVID CHEN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FURNITURE AND EQUIPMENT
FOR THE COMMUNITY AND SENIOR CENTER

Funded Amount:

\$250,000

Requested By:

YOUNG-E

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF COHOES
169 MOHAWK STREET
COHOES, NY 12047
(518) 233-2122

Name of Project Director:

EMILY SHOVER

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF A
HVAC SYSTEM FOR THE LIBRARY.

Funded Amount:

\$120,000

Requested By:

CANESTRARI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF LACKAWANNA
714 RIDGE ROAD
LACKAWANNA, NY 14218
(716) 827-6464

Name of Project Director:

NORMAN POLANSKI

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A PICNIC
PAVILION AT THE LACKAWANNA SENIOR CENTER.

Funded Amount:

\$125,000

Requested By:

SCHROEDER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF NIAGARA FALLS
745 MAIN STREET, ROOM 69
NIAGARA FALLS, NY 14302
(716) 286-4533

Name of Project Director:

NICHOLAS LIGAMMARI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A POLICE VEHICLE AND THE
INSTALLATION OF VIDEO SURVEILLANCE CAMERAS.

Funded Amount:

\$100,000

Requested By:

DELMONTE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF NIAGARA FALLS
745 MAIN STREET, P.O. BOX 69
NIAGARA FALLS, NY 14302
(716) 286-4372

Name of Project Director:

SHERRY SHEPHERD-CORULLI

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE LASALLE PUBLIC LIBRARY.

Funded Amount:

\$125,000

Requested By:

DELMONTE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF NIAGARA FALLS
745 MAIN STREET, P.O. BOX 69
NIAGARA FALLS, NY 14302
(716) 286-4372

Name of Project Director:

SHERRY SHEPHERD-CORULLI

Purpose of Project:

FUNDS WILL BE USED FOR THE REPLACEMENT OF THE ROOF ON THE
ROYAL AVENUE FIRE HALL AND TENTH STREET FIRE HALL.

Funded Amount:

\$125,000

Requested By:

DELMONTE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF ROCHESTER
30 CHURCH STREET, ROOM 300-B
ROCHESTER, NY 14614
(585) 428-6601

Name of Project Director:

JOANN BECK

Purpose of Project:

FUNDS WILL BE USED TO RECONSTRUCT A BASKETBALL COURT, INSTALLATION OF A PAVILION, AS WELL AS FOR THE PURCHASE AND INSTALLATION OF EQUIPMENT IN SEBASTIAN PARK. A NEW PERIMETER TRAIL AND EXERCISE PATH WILL ALSO BE BUILT.

Funded Amount:

\$300,000

Requested By:

JOHN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF ROME
198 NORTH WASHINGTON STREET
ROME, NY
(315) 339-7656

Name of Project Director:

RICHARD MILLER

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT AND RENOVATE SECTIONS OF THE JOHN F. KENNEDY CIVIC ARENA SO THAT IT CAN CONTINUE TO PROVIDE PROGRAMMING TO AREA RESIDENTS.

Funded Amount:

\$125,000

Requested By:

DESTITO

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF SYRACUSE
233 EAST WASHINGTON STREET
SYRACUSE, NY 13202
(315) 473-4330

Name of Project Director:

GLEN LEWIS

Purpose of Project:

FUNDS WILL BE USED FOR THE RECONSTRUCTION OF THE
NORWOOD PARK FOOTBALL FIELD.

Funded Amount:

\$125,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF YONKERS
5-7 NEW SCHOOL STREET
YONKERS, NY 10701
(914) 377-7505

Name of Project Director:

WILLIAM FITZPATRICK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A CBRNE RESPONSE VESSEL
AND EQUIPMENT SO INCREASE PUBLIC SAFETY ON THE WATERWAYS
THROUGHOUT THE AREA.

Funded Amount:

\$50,000

Requested By:

BRADLEY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

COLORED MUSICIANS CLUB OF BUFFALO NEW YORK, INC.
145 BROADWAY
BUFFALO, NY 14203
(716) 895-9383

Name of Project Director:

DANNY WILLIAMS

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF THE JAZZ MUSEUM
SO THAT IT CAN BETTER SERVE THE COMMUNITY AND EDUCATE
PATRONS.

Funded Amount:

\$50,000

Requested By:

PEOPLES-STOKES

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

COMMUNITY OUTREACH CENTER, INC.
50 MELNICK DRIVE
MONSEY, NY 10952
(845) 356-9600

Name of Project Director:

JACOB HOROWITZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A PARCEL OF LAND FOR THE CONSTRUCTION OF A COMMUNITY CENTER. FUNDS WILL ALSO BE USED TO OFFSET ARCHITECTURAL AND ENGINEERING FEES OF THE CONSTRUCTION PROJECT.

Funded Amount:

\$275,000

Requested By:

COLMAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CROUSE HEALTH HOSPITAL, INC. (D/B/A CROUSE HOSPITAL)
736 IRVING AVENUE
SYRACUSE, NY 13210
(315) 470-7015

Name of Project Director:

KRIS WAELDER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A COMPUTERIZED CLINICAL ASSESSMENT SYSTEM TO IMPROVE PATIENT OUTCOMES AND SAFETY.

Funded Amount:

\$125,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

EASTER SEALS NEW YORK, INC.
103 WHITE SPRUCE BOULEVARD
ROCHESTER, NY 14623
(917) 882-6460

Name of Project Director:

BRIAN ANGLIN

Purpose of Project:

FUNDS WILL BE USED FOR THE DEMOLITION, CONSTRUCTION AND RENOVATION OF BUILDING INCLUDING PURCHASE AND INSTALLATION OF EQUIPMENT AND FIXTURES FOR CHILD DEVELOPMENT CENTER AND COMMUNITY OUTREACH CENTER.

Funded Amount:

\$125,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

FAILTE CARE CORPORATION (D/B/A NEW YORK IRISH CENTER)
1040 JACKSON AVENUE
LONG ISLAND CITY, NY 11101
(718) 482-0909

Name of Project Director:

LIZ KENNY

Purpose of Project:

FUNDS WILL BE USED TO FOR CONSTRUCTION AND INSTALLATION
OF AN ELEVATOR.

Funded Amount:

\$50,000

Requested By:

MARKEY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

FAILTE CARE CORPORATION (D/B/A NEW YORK IRISH CENTER)
10-40 JACKSON AVENUE
LONG ISLAND CITY, NY 11101
(718) 482-0909

Name of Project Director:

REVERAND COLM CAMPBELL

Purpose of Project:

FUNDS WILL BE USED TO INSTALL AN ELEVATOR.

Funded Amount:

\$50,000

Requested By:

NOLAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

FIFTH AVENUE COMMITTEE, INC.
621 DEGRAW STREET
BROOKLYN, NY 11217
(718) 237-2017

Name of Project Director:

RON ZAK

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE FACILITY, INCLUDING THE PURCHASE AND INSTALLATION OF FLOORING.

Funded Amount:

\$50,000

Requested By:

ORTIZ

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

FINGER LAKES WINE CENTER, INC.
171 EAST STATE STREET, PMB 136
ITHACA, NY 14850
(607) 319-0619

Name of Project Director:

FRED BONN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE
CONSTRUCTION OF THE NEW FINGER LAKES WINE CENTER.

Funded Amount:

\$125,000

Requested By:

LIFTON

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

FLATBUSH VOLUNTEERS OF HATZOLOH, INC.
1880 OCEAN AVENUE
BROOKLYN, NY 11230
(718) 998-9000

Name of Project Director:

DAVID COHEN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A STATE OF THE ART
EMERGENCY RADIO COMMUNICATIONS SYSTEM.

Funded Amount:

\$445,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

GREAT NECK CENTER FOR THE VISUAL AND PERFORMING ARTS,
INC., THE
113 MIDDLE NECK ROAD
GREAT NECK, NY 11021
(516) 829-2570

Name of Project Director:

CAROLINE SOROKOFF

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF THE FACILITY, AS
WELL AS FOR THE PURCHASE AND INSTALLATION OF EQUIPMENT.

Funded Amount:

\$125,000

Requested By:

SCHIMEL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

GREAT NECK PARK DISTRICT
FIVE BEACH ROAD
GREAT NECK, NY 11023
(516) 487-7665

Name of Project Director:

NEIL D. MARRIN

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF AN "ALL ABILITIES" CHILDREN'S PLAYGROUND AT THE VILLAGE GREEN.

Funded Amount:

\$50,000

Requested By:

DINAPOLI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

GREATER RIDGEWOOD YOUTH COUNCIL, INC., THE
62-04 MYRTLE AVENUE
GLENDALE, NY 11385
(718) 366-1395

Name of Project Director:

ROBERT MONAHAN

Purpose of Project:

FUNDS WILL BE USED TO MAKE RENOVATIONS TO THE GARITY
CENTER FOR CHILDREN AND FAMILIES.

Funded Amount:

\$125,000

Requested By:

NOLAN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

HALFMOON-WATERFORD FIRE DISTRICT #1
315 MIDDLETOWN ROAD
WATERFORD, NY 12188
(518) 482-4433

Name of Project Director:

PETER D. SEMENZA

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SCBA EQUIPMENT TO INCREASE SAFETY FOR FIREFIGHTERS.

Funded Amount:

\$125,000

Requested By:

REILLY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

HISPANIC INFORMATION & TELECOMMUNICATIONS NETWORK, INC.
(D/B/A HITN)
63 FLUSHING AVENUE, UNIT 281, SUITE 211, BUILDING 292
BROOKLYN, NY 11205
(646) 731-3806

Name of Project Director:

AWILDA ORTIZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL COMPUTER EQUIPMENT TO PROVIDE COMMUNITY-BASED ORGANIZATIONS, SERVING HISPANIC COMMUNITIES, WITH AN ADVANCED TELECOMMUNICATIONS INFRASTRUCTURE THAT WILL ALLOW THE EXCHANGE OF IMPORTANT INFORMATION, DISTANCE EDUCATION AND VIRTUAL NETWORKING.

Funded Amount:

\$165,000

Requested By:

RIVERA-J

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

HISPANIC INFORMATION & TELECOMMUNICATIONS NETWORK, INC.
(D/B/A HITN)
63 FLUSHING AVENUE, UNIT 281, SUITE 211, BUILDING 292
BROOKLYN, NY 11205
(646) 731-3806

Name of Project Director:

AWILDA ORTIZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL COMPUTER EQUIPMENT TO PROVIDE COMMUNITY-BASED ORGANIZATIONS, SERVING HISPANIC COMMUNITIES, WITH AN ADVANCED TELECOMMUNICATIONS INFRASTRUCTURE THAT WILL ALLOW THE EXCHANGE OF IMPORTANT INFORMATION, DISTANCE EDUCATION AND VIRTUAL NETWORKING.

Funded Amount:

\$55,000

Requested By:

POWELL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

HISPANIC INFORMATION AND TELECOMMUNICATIONS NETWORK, INC.
(D/B/A HITN)
63 FLUSHING AVENUE, UNIT 281, SUITE 211, BUILDING 292
BROOKLYN, NY 11205
(646) 731-3602

Name of Project Director:

MIRANDA KNOWLES

Purpose of Project:

FUNDS WILL BE USED TO RETROFIT THE EDUCATION, CULTURAL
PRODUCTION AND TELECOMMUNICATION CENTER.

Funded Amount:

\$150,000

Requested By:

DIAZ-L, LENTOL, ORTIZ

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

INTERFAITH NUTRITION NETWORK, INC.
211 FULTON AVENUE
HEMPSTEAD, NY 11550
(516) 486-8506

Name of Project Director:

JEAN KELLY

Purpose of Project:

FUNDS WILL BE USED TO REHABILITATE INTERFAITH NUTRITION NETWORK BUILDINGS, WHICH PROVIDE SOUP KITCHENS, EMERGENCY SHELTERS, AND HOUSING PROGRAMS FOR THOSE IN NEED.

Funded Amount:

\$50,000

Requested By:

DINAPOLI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

INTREPID MUSEUM FOUNDATION, INC.
ONE INTREPID SQUARE, WEST 46TH STREET & 12TH AVENUE
NEW YORK, NY 10036
(646) 381-5253

Name of Project Director:

IRENE TSITKO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET DESIGN AND CONSTRUCTION COSTS OF A SHADE STRUCTURE LOCATED AT THE ENTRANCE OF THE INTREPID MUSEUM.

Funded Amount:

\$125,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

INWOOD HOUSE
320 EAST 82ND STREET
NEW YORK, NY 10028
(212) 861-4325

Name of Project Director:

KATHLEEN COONEY CLARKE

Purpose of Project:

FUNDS WILL BE USED TO INSTALL A SECURITY SYSTEM IN THE INWOOD HOUSE FAMILY LEARNING CENTER FOR PREGNANT AND PARENTING TEENS. THE SECURITY SYSTEM IS PART OF A LARGER RENOVATION AND EXPANSION PROJECT, WHICH WILL ENHANCE PROGRAMS, SERVE A GREATER NUMBER OF CLIENTS AND STRENGTHEN SAFETY.

Funded Amount:

\$125,000

Requested By:

KELLNER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

JAMAICA CHAMBER OF COMMERCE, INC.
90-25 161 STREET, SUITE 505
JAMAICA, NY 11432
(718) 657-4800

Name of Project Director:

ROBERT M. RICHARDS

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A PARKING LOT AND INSTALL
A SECURITY SURVEILLANCE SYSTEM AND LIGHTING.

Funded Amount:

\$125,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

LAWRENCE F. KEANE POST 1498 AMERICAN LEGION
2879 BUHRE AVENUE
NEW YORK, NY 10461
(718) 822-9326

Name of Project Director:

LOUIS DURANTE

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE BUILDING WHICH
PROVIDES A SAFE, COMFORTABLE ENVIRONMENT FOR VETERANS
AND THE COMMUNITY.

Funded Amount:

\$125,000

Requested By:

BENEDETTO

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

LIFESTYLES FOR THE DISABLED, INC.
930 WILLOWBROOK ROAD
STATEN ISLAND, NY 10314
(718) 983-5351

Name of Project Director:

RICHARD SALINDARDI

Purpose of Project:

FUNDS WILL BE USED FOR THE RESTORATION AND RENOVATION OF GREENHOUSES WHICH WILL BE USED AS JOB TRAINING FOR PROGRAM PARTICIPANTS.

Funded Amount:

\$50,000

Requested By:

LAVELLE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

LONG ISLAND COLLEGE HOSPITAL, THE
339 HICKS STREET
BROOKLYN, NY 11201
(718) 780-4651

Name of Project Director:

DOMINICK STANZIONE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A PORTABLE ULTRASOUND SYSTEM FOR ECHOCARDIOGRAPHY. THESE UNITS HAVE BEEN DEVELOPED FOR POINT-OF-CARE CARDIAC ASSESSMENT AT THE PATIENT'S BEDSIDE TO EXTEND THE ACCURACY OF THE BEDSIDE PHYSICAL EXAMINATION.

Funded Amount:

\$100,000

Requested By:

MILLMAN

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) 283-8537

Name of Project Director:

ROBERT WACHEWSKI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MAMMOGRAPHY EQUIPMENT
TO CREATE AN ADDITIONAL WORKSTATION FOR THE CANCER
DIAGNOSTIC AND TREATMENT CENTER.

Funded Amount:

\$125,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

MARTIN LUTHER KING MULTI-PURPOSE CENTER, INC.
110 BETHUNE BOULEVARD
SPRING VALLEY, NY 10977
(845) 425-8910

Name of Project Director:

NATHAN MUNGIN III

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF THE FACILITY AND PURCHASE OF EQUIPMENT SO THAT THE CENTER CAN CONTINUE TO PROVIDE PROGRAMMING AND SERVICES TO THE COMMUNITY.

Funded Amount:

\$125,000

Requested By:

JAFFEE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

MOUNT VERNON CITY SCHOOL DISTRICT
165 NORTH COLUMBUS AVENUE
MOUNT VERNON, NY 10553
(914) 665-5201

Name of Project Director:

BRENDA L. SMITH

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATION OF THE HIGH SCHOOL
AUDITORIUM.

Funded Amount:

\$50,000

Requested By:

PRETLOW

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

MOUNT VERNON CITY SCHOOL DISTRICT
165 NORTH COLUMBUS AVENUE
MOUNT VERNON, NY 10553
(914) 665-7569

Name of Project Director:

JOSEPH MCGRATH

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF
SMARTBOARDS.

Funded Amount:

\$200,000

Requested By:

PRETLOW

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

MOUNT VERNON PUBLIC LIBRARY
28 SOUTH FIRST AVENUE
MOUNT VERNON, NY 10550
(914) 668-1840

Name of Project Director:

OPAL BROWN LINDSAY

Purpose of Project:

FUNDS WILL BE USED TO REPAIR AND RENOVATE THE FACILITY TO ENSURE THE STRUCTURE'S HISTORIC PRESENCE.

Funded Amount:

\$50,000

Requested By:

PRETLOW

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

MUSEUM OF ARTS AND DESIGN
2 COLUMBUS CIRCLE
NEW YORK, NY 10019
(212) 299-7718

Name of Project Director:

JUDITH KAMIEN

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE FACILITY TO CREATE
IMPROVED EXHIBIT SPACE AND ALLOW BETTER ACCESS TO THE
COMMUNITY.

Funded Amount:

\$125,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NANUET UNION FREE SCHOOL DISTRICT
101 CHURCH STREET
NANUET, NY 10954
(845) 627-9882

Name of Project Director:

PHILIP M. SIONS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE
RENOVATION OF THE GIRLS LOCKER ROOM IN THE HIGH SCHOOL.

Funded Amount:

\$125,000

Requested By:

ZEBROWSKI-K

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

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

Name of Project Director:

GRAHAM GORDON

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A SCIENCE LAB AT PS 208.

Funded Amount:

\$250,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

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

Name of Project Director:

GRAHAM GORDON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL AC UNITS AND
SOUND SYSTEM AT PS 15Q.

Funded Amount:

\$250,000

Requested By:

SCARBOROUGH

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) 306-6518

Name of Project Director:

KRISTIE MADURO

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE ELECTRICAL SYSTEMS AND EXTERIOR LIGHTING AT THE CAREY GARDENS HOUSING DEVELOPMENT. THE RENOVATIONS WILL PROVIDE A SAFER ENVIRONMENT FOR THE RESIDENTS.

Funded Amount:

\$50,000

Requested By:

COHEN-A

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY OUTWARD BOUND CENTER, INC.
29-46 NORTHERN BOULEVARD
LONG ISLAND CITY, NY 11101
(718) 706-9900

Name of Project Director:

PAOLA VITA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS AND EQUIPMENT WHICH WILL INCREASE THE NUMBER OF STUDENTS SERVED IN PUBLIC SCHOOLS.

Funded Amount:

\$125,000

Requested By:

CUSICK

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY PARKS AND RECREATION
THE ARSENAL, 830 FIFTH AVENUE-ROOM 310
NEW YORK, NY 10065
(212) 360-1360

Name of Project Director:

EDWARD J. LEWIS

Purpose of Project:

FUNDS WILL BE USED TO MAKE VARIOUS IMPROVEMENTS TO THE
FREEDOM SQUARE PARK.

Funded Amount:

\$50,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY POLICE DEPARTMENT
1 POLICE PLAZA, ROOM 1207
NEW YORK, NY 10038
(646) 610-6501

Name of Project Director:

TANIA HEDLUND

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TWO EIGHT PASSENGER VEHICLES FOR THE 63RD AND 67TH PRECINCT AUXILIARY UNIT AND TWO BICYCLES FOR THE 70TH PRECINCT AUXILIARY UNIT. THE VEHICLES AND BICYCLES WILL ENHANCE THE EFFECTIVENESS AND EFFICIENCY OF THE POLICE IN MOBILIZING AND RESPONDING TO COMMUNITY EVENTS.

Funded Amount:

\$53,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY POLICE DEPARTMENT
1 POLICE PLAZA, ROOM 1207
NEW YORK, NY 10038
(646) 610-6501

Name of Project Director:

TANIA HEDLUND

Purpose of Project:

PURCHASE OF TWO-TWELVE PASSENGER VEHICLES

Funded Amount:

\$50,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK WEB CENTER, INC.
126 ALBANY AVENUE
BROOKLYN, NY 11213
(917) 887-4816

Name of Project Director:

WILLIAM GRANT

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE A DIGITAL TECHNOLOGY STUDIO AND TO PURCHASE EQUIPMENT INCLUDING LAPTOPS AND A VIDEO CAMERA. THE STUDIO PROVIDES CAREER AND TECHNICAL EDUCATION TO AT-RISK STUDENT DURING AND AFTER SCHOOL.

Funded Amount:

\$125,000

Requested By:

CAMARA

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK WEB CENTER, INC.
126 ALBANY AVENUE
BROOKLYN, NY 11213
(917) 887-4816

Name of Project Director:

WILLIAM GRANT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTER AND AUDIO EQUIPMENT TO INCREASE PROGRAMS AND INCREASE THE NUMBER OF YOUNG PEOPLE PARTICIPATING IN THE PROGRAM.

Funded Amount:

\$125,000

Requested By:

JEFFRIES

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NORTH SHORE-LONG ISLAND JEWISH HEALTH SYSTEM, INC.
145 COMMUNITY DRIVE
GREAT NECK, NY 11201
(516) 465-3153

Name of Project Director:

ANDREA ROTUN-SPARACIO

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A COMPUTERIZED
PATIENT MONITORING DEVICE.

Funded Amount:

\$200,000

Requested By:

CARROZZA

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ONONDAGA HISTORICAL ASSOCIATION
321 MONTGOMERY STREET
SYRACUSE, NY 13202
(315) 428-1864

Name of Project Director:

GREG TRIPOLI

Purpose of Project:

FUNDS WILL BE USED FOR THE REHABILITATION OF THE FACADE OF
A HISTORIC BUILDING.

Funded Amount:

\$125,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ORANGE COUNTY COMMUNITY COLLEGE
115 SOUTH STREET
MIDDLETOWN, NY 10940
(845) 341-4759

Name of Project Director:

JUDY OSBURN

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF THE GREENHOUSE
SO THAT IT CAN CONTINUE TO BE USED AS AN EDUCATIONAL
FACILITY BY THE COLLEGE.

Funded Amount:

\$125,000

Requested By:

GUNTHER-A

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) 289-2354

Name of Project Director:

ROBERT WERNER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE HEMODIALYSIS EQUIPMENT.

Funded Amount:

\$100,000

Requested By:

CARROZZA

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

PARSONS CHILD AND FAMILY CENTER
60 ACADEMY ROAD
ALBANY, NY 12208
(518) 426-2600

Name of Project Director:

ROBERT ALBANESE

Purpose of Project:

FUNDS WILL BE USED TO RECONSTRUCT THE CAMPUS FACILITIES
SO THAT IT CAN CONTINUE TO SERVE THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

MCENENY

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:

GARY RINDNER

Purpose of Project:

FUNDS WILL BE USED TO DESIGN AND CONSTRUCT A WORKFORCE
DEVELOPMENT AND TECHNOLOGY TRAINING CENTER.

Funded Amount:

\$125,000

Requested By:

DIAZ-R

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

POSITIVE WORKFORCE COALITION, INC.
1814 THIRD AVENUE
NEW YORK, NY 10029
(212) 410-5615

Name of Project Director:

VINCENT TORRES

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL A FIRE ALARM SYSTEM.

Funded Amount:

\$50,000

Requested By:

WRIGHT

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

PUTNAM VALLEY VOLUNTEER AMBULANCE CORPS, INC.
218 OSCAWANA LAKE ROAD
PUTNAM VALLEY, NY 10579
(845) 526-3119

Name of Project Director:

LOU LUONGO

Purpose of Project:

FUNDS WILL BE USED FOR ROOF AND GUTTER RENOVATIONS, AS WELL AS THE COMPLETION OF PARKING LOT/DRIVEWAY IMPROVEMENTS AND THE PURCHASE OF EQUIPMENT.

Funded Amount:

\$50,000

Requested By:

GALEF

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

QUEENS BOROUGH PUBLIC LIBRARY
89-11 MERRICK BOULEVARD
JAMAICA, NY 11432
(718) 481-4250

Name of Project Director:

PETER MAGNANI

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION AND PURCHASE OF FURNITURE, AS WELL AS EQUIPMENT FOR THE BROADWAY BRANCH.

Funded Amount:

\$80,000

Requested By:

MARKEY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

QUEENS BOROUGH PUBLIC LIBRARY
89-11 MERRICK BOULEVARD
NEW YORK, NY 11432
(718) 480-4250

Name of Project Director:

PETER MAGNANI

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE OFFICE SPACE AND PURCHASE EQUIPMENT FOR THE JACKSON HEIGHTS BRANCH.

Funded Amount:

\$100,000

Requested By:

PERALTA

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

QUEENS BOROUGH PUBLIC LIBRARY, THE
89-11 MERRICK BOULEVARD
JAMAICA, NY 11432
(718) 480-4250

Name of Project Director:

PETER MAGNANI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FURNITURE AND EQUIPMENT FOR THE BROAD CHANNEL, HOWARD BEACH, OZONE PARK, PENINSULA AND SEASIDE BRANCHES IN ORDER TO MEET INCREASED DEMAND BY THE GENERAL PUBLIC.

Funded Amount:

\$54,500

Requested By:

PHEFFER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

QUEENS COLLEGE OF THE CITY UNIVERSITY OF NEW YORK
65-30 KISSENA BOULEVARD
FLUSHING, NY 11367
(718) 997-3050

Name of Project Director:

DR. MADJULIKA KHANDELWAL

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE A RESOURCE ROOM FACILITY,
INCLUDING THE PURCHASE OF COMPUTERS AND EQUIPMENT.

Funded Amount:

\$50,000

Requested By:

WEPRIN-M

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

QUEENSBOROUGH COMMUNITY COLLEGE OF THE CITY UNIVERSITY
OF NEW YORK
222-05 56TH AVENUE
BAYSIDE, NY 11364
(718) 281-5385

Name of Project Director:

CHRISTINA JOHNSON

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A "SMART
CLASSROOM" AND PURCHASE OF EQUIPMENT

Funded Amount:

\$50,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

RED HOOK INITIATIVE, INC.
201 RICHARDS STREET, SUITE 108
BROOKLYN, NY 11231
(718) 858-6782

Name of Project Director:

JILL K. EISENHARD

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE FACILITY AND PURCHASE EQUIPMENT.

Funded Amount:

\$50,000

Requested By:

ORTIZ

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

RONALD MCDONALD HOUSE OF LONG ISLAND, INC.
267-07 76TH AVENUE
NEW HYDE PARK, NY 11040
(718) 343-5683

Name of Project Director:

MATTHEW CAMPO

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE BUILDING FACADE AND
REPLACE WINDOWS.

Funded Amount:

\$50,000

Requested By:

WEPRIN-M

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

SCARSDALE VOLUNTEER AMBULANCE CORPS, INC.
5 WEAVER STREET
SCARSDALE, NY 10583
(914) 723-3003

Name of Project Director:

DAVID RAIZON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE
PURCHASE OF A NEW AMBULANCE.

Funded Amount:

\$100,000

Requested By:

PAULIN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ST. CAMILLUS RESIDENTIAL HEALTH CARE FACILITY
813 FAY ROAD
SYRACUSE, NY 13219
(315) 488-2951

Name of Project Director:

MARGARET FRIGON

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF AN OXYGEN TANK STORAGE SYSTEM SO THAT OXYGEN CAN BE MORE SAFELY STORED FOR USE BY THE FACILITY.

Funded Amount:

\$125,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

SUB-BOARD I, INC.
SUITE 341, STUDENT UNION
AMHERST, NY 14221
(716) 645-2954

Name of Project Director:

WILLIAM HOOLEY

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PURCHASE OF A VAN AND EQUIPMENT SO THAT THEY CAN CONTINUE TO PROVIDE SERVICES AND PROGRAMMING TO THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

HOYT

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TEATOWN LAKE RESERVATION, INC.
1600 SPRING VALLEY ROAD
OSSINING, NY 10562
(914) 762-2912

Name of Project Director:

DR. MICHAEL RUBBO

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF FENCING, ENTRANCE GATES, SIGNAGE, AND BENCHES FOR AN OUTDOOR EDUCATION CLASSROOM.

Funded Amount:

\$50,000

Requested By:

GALEF

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TONAWANDAS GATEWAY HARBOR, INC.
15 WEBSTER STREET
TONAWANDA, NY 14150
(716) 505-1024

Name of Project Director:

LINDA FOELS

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PURCHASE OF A PORTABLE STAGE SO THAT THE AREA COMMUNITY CAN ENJOY PERFORMANCES IN A VARIETY OF LOCATIONS.

Funded Amount:

\$100,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF BETHLEHEM
445 DELAWARE AVENUE
DELMAR, NY 12054
(518) 439-4955

Name of Project Director:

JOHN H. CUNNINGHAM

Purpose of Project:

FUNDS WILL BE USED TOWARD THE ACQUISITION AND DEVELOPMENT OF LAND ADJACENT TO HENRY HUDSON PARK IN ORDER TO INCREASE THE SIZE, AS WELL AS THE ACCESS OF THE CITY PARK.

Funded Amount:

\$125,000

Requested By:

GORDON-T

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF BROOKHAVEN
ONE INDEPENDENCE HILL
FARMINGVILLE, NY 11738
(631) 451-2367

Name of Project Director:

ERICA DEWER

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A RESTROOM FACILITY AND A
GUARD SHELTER.

Funded Amount:

\$125,000

Requested By:

ALESSI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF CALLICOON
19 LEGION STREET, P.O. BOX 698
JEFFERSONVILLE, NY 12748
(845) 482-5390

Name of Project Director:

LINDA BABICZ

Purpose of Project:

FUNDS WILL BE USED FOR THE INSTALLATION OF STEEL PILINGS
FOR A STREAM BANK STABILIZATION PROJECT TO REDUCE THE RISK
OF FLOODING.

Funded Amount:

\$100,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF CLARKSTOWN
10 MAPLE AVENUE
NEW CITY, NY 10956
(845) 639-2050

Name of Project Director:

ALEXANDER J. GROMACK

Purpose of Project:

FUNDS WILL BE USED FOR THE INSTALLATION OF SYNTHETIC ICE
FOR THE SKATING RINK AT CONGERS MEMORIAL PARK.

Funded Amount:

\$125,000

Requested By:

ZEBROWSKI-K

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:

PHILIP C. BARRETT

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION AND REPAIRS TO THE
HISTORIC GROOMS TAVERN FACILITY.

Funded Amount:

\$50,000

Requested By:

REILLY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF DELAWARE
104 MAIN STREET, P.O. BOX 129
HORTONVILLE, NY 12765
(845) 887-5250

Name of Project Director:

JAMES H. SCHEUTZOW

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A SALT SHED.

Funded Amount:

\$50,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF HAVERSTRAW
ONE ROSMAN ROAD
GARNERVILLE, NY 10923
(845) 429-2200

Name of Project Director:

MICHAEL J. GAMBOLI

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF
PLAYGROUND EQUIPMENT FOR THE BOWLINE POINT PARK.

Funded Amount:

\$50,000

Requested By:

GROMACK

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF NASSAU
29 CHURCH STREET, P.O. BOX 587
NASSAU, NY 12123
(518) 766-2343

Name of Project Director:

DAVID FLEMING

Purpose of Project:

FUNDS WILL BE USED TO OFFSET ENGINEERING COSTS FOR THE
SEWER PROJECT IN BURDEN LAKE.

Funded Amount:

\$70,000

Requested By:

GORDON-T

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TRUSTEES OF UNION COLLEGE IN THE TOWN OF SCHENECTADY IN
THE STATE OF NEW YORK, THE
807 UNION AVENUE
SCHENECTADY, NY 12308
(518) 388-6011

Name of Project Director:

BLAIR H. RAYMOND

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF EQUIPMENT AND THE
ESTABLISHMENT OF AN ARTS CONSERVATION MOBILE LABORATORY.

Funded Amount:

\$125,000

Requested By:

MCENENY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

VILLAGE OF BRONXVILLE
200 PONDFIELD ROAD
BRONXVILLE, NY 10708
(914) 337-7338

Name of Project Director:

ROCCO CIRCOSTA

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE AND REFURBISH SAGAMORE PARK SO THAT IT CAN CONTINUE TO SERVE THE RECREATIONAL NEEDS OF THE COMMUNITY.

Funded Amount:

\$175,000

Requested By:

PAULIN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

VILLAGE OF RYE BROOK
938 KING STREET
RYE BROOK, NY 10573
(914) 939-1121

Name of Project Director:

CHRISTOPHER BRADBURY

Purpose of Project:

FUNDS WILL BE USED FOR ROAD RESURFACING.

Funded Amount:

\$125,000

Requested By:

LATIMER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

WEST SHORE LITTLE LEAGUE, INC.
340 WALKER STREET
STATEN ISLAND, NY 10303
(917) 763-3193

Name of Project Director:

CHUCK TANTILLO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL NEW LIGHTING WHICH WILL INCREASE THE NUMBER OF ACTIVITIES OFFERED TO THE YOUNG PEOPLE IN THE COMMUNITY.

Funded Amount:

\$125,000

Requested By:

CUSICK

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

WESTCHESTER ARTS COUNCIL, INC. (D/B/A ARTS WESTCHESTER)
31 MAMARONECK AVENUE, THIRD FLOOR
WHITE PLAINS, NY 10601
(914) 428-4220

Name of Project Director:

JOANNE MONGELLI

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF TWO ADA COMPLIANT RESTROOMS, AS WELL AS RENOVATIONS TO THE FACILITY AND PURCHASE OF EQUIPMENT.

Funded Amount:

\$125,000

Requested By:

BRADLEY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

WESTCHESTER COMMUNITY OPPORTUNITY PROGRAM, INC. (D/B/A
WESTCOP)
2269 SAW MILL RIVER ROAD
ELMSFORD, NY 10523
(914) 592-5600

Name of Project Director:

CHARLENE LAMBRECHT

Purpose of Project:

FUNDS WILL BE USED FOR THE RESTORATION AND RENOVATION OF
A BUILDING IN ORDER TO PROVIDE MORE EFFICIENT SOCIAL
SERVICES.

Funded Amount:

\$50,000

Requested By:

PAULIN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

WESTCHESTER COUNTY
1 SAW MILL RIVER PARKWAY
HAWTHORNE, NY 10532
(914) 864-7907

Name of Project Director:

JAMES LUCIANO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A POLICE SAFEBOAT TO
INCREASE PUBLIC SAFETY.

Funded Amount:

\$75,000

Requested By:

SPANO-M

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, N.Y., INC.
250 MAMARONECK AVENUE
WHITE PLAINS, NY 10605
(914) 940-8030

Name of Project Director:

HELENE G. MOGRIDGE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL A HOT WATER
TANK IN ORDER TO SERVE THE COMMUNITY BETTER.

Funded Amount:

\$85,000

Requested By:

BRADLEY

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, N.Y., INC.
250 MAMARONECK AVENUE
WHITE PLAINS, NY 10605
(914) 949-8030

Name of Project Director:

HELENE G. MOGRIDGE

Purpose of Project:

FUNDS WILL BE USED FOR THE REPLACEMENT OF THE ROOF AND
WINDOWS IN THE GYM SO THE COMMUNITY CAN CONTINUE TO USE
THIS SPACE.

Funded Amount:

\$125,000

Requested By:

BRADLEY

Name of Administering State Agency:

NYS DORMITORY AUTHORITY