Legal Name, Address, and Telephone Number:

CITY UNIVERSITY OF NEW YORK - HUNTER COLLEGE
695 PARK AVENUE
NEW YORK, NY  10021
(212) 772-4242

Name of Project Director:

TERRI ROSEN DEUTSCH

Purpose of Project:

FUNDS WILL BE USED TO COVER TECHNOLOGY ENHANCEMENTS AT THE CAMPUS SCHOOLS.

Funded Amount:

$5,000

Requested By:

BING

Name of Administering State Agency:

CITY UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

CUNY SCHOOL OF LAW
65 – 21 MAIN STREET
FLUSHING, NY  11367
(718) 340 – 4451

Name of Project Director:

FRED ROONEY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LEGAL SERVICES TO LOCAL RESIDENTS IN ORDER TO PROTECT THEM AGAINST LOSING THEIR HOMES.

Funded Amount:

$100,000

Requested By:


Name of Administering State Agency:

CITY UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

MEDGAR EVERS COLLEGE
1650 BEDFORD AVENUE
BROOKLYN, NY  11225
(718) 270 – 4853

Name of Project Director:

EDISON JACKSON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE HAITIAN BICENTENNIAL PROGRAM.

Funded Amount:

$75,000

Requested By:

PERRY

Name of Administering State Agency:

CITY UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

MEDGAR EVERS COLLEGE OF CUNY – MEDGAR EVERS CENTERS
1650 BEDFORD AVENUE
BROOKLYN, NY  11225
(718) 270 – 6978

Name of Project Director:

EDISON O. JACKSON

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS THAT PROMOTE YOUTH AND WOMEN DEVELOPMENT, POSITIVE SOCIAL CHANGE AND RESEARCH RELATED TO CARIBBEAN CULTURE.

Funded Amount:

$200,000

Requested By:


Name of Administering State Agency:

CITY UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

QUEENS BRIDGE TO MEDICINE
94-50 159TH STREET
JAMAICA, NY 11451
(718) 262-2637

Name of Project Director:

MORTON STATEN, PH.D

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE STUDENT’S STUDY SKILLS TO SUPPORT THE TRANSITION TO CHALLENGING COLLEGE PROGRAMS.

Funded Amount:

$1,500

Requested By:

LANCMAN

Name of Administering State Agency:

CITY UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

QUEENS COLLEGE CENTER FOR JEWISH STUDIES
QUEENS COLLEGE, 65-30 KISSENA BOULEVARD
FLUSHING, NY 11367-2597
(718) 997-5730

Name of Project Director:

WILLIAM HELMREICH

Purpose of Project:

FUNDS WILL BE USED FOR A FILM DIALOGUE SERIES AND COMMUNITY SPEAKERS SERIES.

Funded Amount:

$3,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

CITY UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

QUEENSBORO COMMUNITY COLLEGE FUND, INC.
222-05 56TH AVENUE
BAYSIDE, NY 11364
(718) 631-6392

Name of Project Director:

DR. ARTHUR FLUG

Purpose of Project:

FUNDS WILL BE USED TO EXPAND EDUCATIONAL RESOURCES AND PROGRAMS ON THE HOLOCAUST.

Funded Amount:

$5,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

CITY UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

QUEENSboro COMMUNITY COLLEge FUND, INC.
222-05 56TH AVENUE
BAYSIDE, NY  11364
(718) 631-6392

Name of Project Director:

DR. WILLIam SCHULMAN

Purpose of Project:

FUNDS WILL BE USED TO EXPAND EDUCATIONAL RESOURCES AND PROGRAMS ON THE HOLOCAUST.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

CITY UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

QUEENSBOROUGH COMMUNITY COLLEGE FUND, INC.
222-05 56TH AVENUE
BAYSIDE, NY 11364
(718) 631-6392

Name of Project Director:

DR. WILLIAM SCHULMAN

Purpose of Project:

FUNDS WILL BE USED TO EXPAND EDUCATIONAL RESOURCES AND PROGRAMS ON THE HOLOCAUST.

Funded Amount:

$2,000

Requested By:

PHEFFER

Name of Administering State Agency:

CITY UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

QUEENSBOROUGH COMMUNITY COLLEGE FUND, INC.
222-05 56TH AVENUE
BAYSIDE, NY  11346
(718) 631-6392

Name of Project Director:

DR. EDUARDO MARTI

Purpose of Project:

FUNDS WILL BE USED TO EXPAND EDUCATIONAL RESOURCES, SERVICES AND PROGRAMS ON THE HOLOCAUST.

Funded Amount:

$3,000

Requested By:

CARROZZA

Name of Administering State Agency:

CITY UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

AGRICULTURAL STEWARDSHIP ASSOCIATION
28R MAIN STREET
GREENWICH, NY 12834
(518) 692-7285

Name of Project Director:

TERI PTACEK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF DEVELOPMENTAL RIGHTS PROGRAM

Funded Amount:

$10,000

Requested By:

MCDONALD

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BOBBI AND THE STRAYS, INC.
107-57 100TH STREET
OZONE PARK, NY  11417
(718) 845-0779

Name of Project Director:

BOBBI GIORDANO

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE OPERATIONAL EXPENSES THAT HELP DEFRAY COSTS ASSOCIATED WITH CAT/DOG CARE PROGRAM. FUNDS WILL ALSO BE USED TO FIND HOMES FOR STRAYS AND ABUSED DOGS AND CATS, TREATMENT AND RESCUE.

Funded Amount:

$5,000

Requested By:

SEMINERIO

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

CENTRAL NEW YORK SPCA
5878 EAST MOLLOY ROAD
SYRACUSE, NY 13211
(315) 454-4479

Name of Project Director:

PAUL C. MORGAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT IMPROVEMENTS, INCLUDING UP TO DATE ANIMAL HOUSING, STORAGE, AND A SURGERY CENTER WHERE ANIMALS COULD BE SPAYED OR NEUTERED IN A SAFE STERILE ENVIRONMENT PRIOR TO BEING ADOPTED.

Funded Amount:

$10,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

CITIZENS FOR NYC, INC.
305 7TH AVENUE
NEW YORK, NY 10001
(212) 989-0909

Name of Project Director:

SCOTT CODEY

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE FARM STAND PROGRAM AND MAKE FRESH, AFFORDABLE AND NUTRITIOUS FOOD AVAILABLE FOR COMMUNITY RESIDENTS.

Funded Amount:

$2,000

Requested By:

ORTIZ

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

CITIZENS FOR NYC, INC.
305 7TH AVENUE
NEW YORK, NY  10001
(212) 989-0909

Name of Project Director:

PETER KOSTMAYER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LOCALLY GROWN FRESH FRUITS AND VEGETABLES TO LOW-INCOME FAMILIES.

Funded Amount:

$5,000

Requested By:

RIVERA-J

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COLUMBIA COUNTY AGRICULTURE SOCIETY, INC.
P.O. BOX 257
CHATHAM, NY 12037
(518) 392-2121

Name of Project Director:

ANGELO NERO

Purpose of Project:

FUNDS WILL BE USED TO REPLACE CAGES USED TO HOUSE ANIMALS AND BIRDS IN THE 4H DISPLAY AT ANNUAL FAIR.

Funded Amount:

$3,500

Requested By:

MOLINARO

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

CORNELL CO-OPERATIVE EXTENSION
1 ASHLEY AVENUE
MIDDLETOWN, NY 10940
(845) 344-1234

Name of Project Director:

PATRICIA CLAYBORNE

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH DEVELOPMENT.

Funded Amount:

$2,500

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

CORNELL COOPERATIVE EXTENSION - BROOME COUNTY
840 UPPER FRONT STREET
BINGHAMTON, NY 13905
(607) 772-8953

Name of Project Director:

DAVID BRADSTREET

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE PORTABLE TENT STRUCTURES AND DISPLAY MATERIALS FOR USE AS EDUCATIONAL PROGRAMMING AT FARMERS' MARKETS, HEALTH FAIRS AND OTHER PUBLIC EVENTS.

Funded Amount:

$7,500

Requested By:

LUPARDO

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CORNELL COOPERATIVE EXTENSION - CORTLAND COUNTY
60 CENTRAL AVENUE
CORTLAND, NY 13045
(607) 753-5077

Name of Project Director:

SYDNEY MCEVOY

Purpose of Project:

FUNDS WILL BE USED TO HELP REBUILD THE BUILDING'S ROOF.

Funded Amount:

$10,000

Requested By:

LIFTON

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

CORNELL COOPERATIVE EXTENSION OF MONROE COUNTY
249 HIGHLAND AVENUE
ROCHESTER, NY 14629
(585) 461-1000

Name of Project Director:

MARGARET O'NEILL

Purpose of Project:

FUNDS WILL BE USED FOR EMERGENCY FUNDING FOR 4-H, NUTRITION AND CONSUMER HORTICULTURE PROGRAMS.

Funded Amount:

$10,000

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CORNELL COOPERATIVE EXTENSION OF ONTARIO COUNTY
480 NORTH MAIN STREET
CANANDAIGUA, NY 14424
(585) 394-3977

Name of Project Director:

PATRICIA PAVELSKY

Purpose of Project:

FUNDS WILL BE USED TO BE USED TOWARD THE PURCHASE OF 3 COMPUTERS, 12 GPS UNITS, LCD PROJECTOR AND TOPOGRAPHICAL MAPS.

Funded Amount:

$3,350

Requested By:

ERRIGO

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

CORNELL UNIVERSITY COOPERATIVE EXTENSION ONTARIO COUNTY
480 NORTH MAIN STREET
CANANDAIGUA, NY 14424
(585) 394-3977

Name of Project Director:

PATRICIA PAVELSKY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT TO SUPPORT A PROGRAM FOR KIDS SCIENCE AND TECHNOLOGY CALLED GPS EXPLORERS.

Funded Amount:

$3,500

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

DOUBLE D BAR RANCH, INC.
344 WADING RIVER ROAD
MANORVILLE, NY 11949
(631) 758-7827

Name of Project Director:

YVONNE PRATT

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A TRUSS ARCH FOR REHABILITATION PURPOSES.

Funded Amount:

$10,000

Requested By:

ALESSI

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

ERIE COUNTY SPCA
205 ENSMINGER ROAD
TONAWANDA, NY  14150
(716) 875-7360

Name of Project Director:

BECKY POWELL

Purpose of Project:

FUNDS WILL BE USED FOR A LOW-INCOME SPAY/NEUTER PROGRAM SERVING PETS OF WNY CITIZENS.

Funded Amount:

$10,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

GENESEE COUNTY CORNELL COOPERATIVE EXTENSION
430 EAST MAIN STREET
BATAVIA, NY 14020
(585) 343-3040

Name of Project Director:

BEV MANCUSO

Purpose of Project:

FUNDS WILL BE USED FOR A BANNER FOR MARKETING PROGRAMS.

Funded Amount:

$2,000

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

HERKIMER COUNTY FAIR ASSOCIATION
P.O. BOX 47
FRANKFORT, NY 13340
(315) 895-7464

Name of Project Director:

RICHARD ELTHORP

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PURCHASE OF AED DEVICES

Funded Amount:

$5,000

Requested By:

BUTLER-M

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

HUMANE SOCIETY OF ROCHESTER AND MONROE COUNTY PCA, INC.
99 VICTOR ROAD
FAIRPORT, NY 14450
(585) 223-1330 x232

Name of Project Director:

ALICE CALABRESE SMITH

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MUCH NEEDED SUPPLIES FOR THE IN- 
HOUSE CLINIC WHICH TREATS ABUSED AND/OR HOMELESS ANIMALS 
BEFORE THEY ARE ADOPTED BY LOCAL RESIDENTS.

Funded Amount:

$7,500

Requested By:

KOON

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

JUST FOOD, INC.
208 EAST 51ST STREET
NEW YORK, NY  10022
(212) 645-9880

Name of Project Director:

OWEN TAYLOR

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE VARIOUS URBAN AGRICULTURAL PRACTICES IN COORDINATION WITH THE NEW YORK CITY PARKS DEPARTMENT, INCLUDING THE DISSEMINATION OF RELEVANT CITY REGULATIONS AND CODES.

Funded Amount:

$5,000

Requested By:

RIVERA-J

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

LEWIS COUNTY MAPLE PRODUCERS  
P.O. BOX 72  
LOWVILLE, NY 13367  
(315) 376-5270

Name of Project Director:

MICHELE LEDOUX

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE NORTH COUNTY MAPLE PRODUCTS AND EDUCATING LEWIS COUNTY MAPLE PRODUCERS (LEWIS, JEFFERSON, OSWEGO AND ONEIDA COUNTIES)

Funded Amount:

$5,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

MORRISVILLE AUXILIARY CORPORATION
3261 ROUTE 20
CAZENOVIA, NY 13035
(315) 655 – 8831

Name of Project Director:

DAVE EVANS

Purpose of Project:

FUNDING WILL BE USED TO COMPLETE THE INTEGRATION OF THE NELSON FARMS AND DAIRY INCUBATOR OPERATIONS TO A DATA MANAGEMENT SYSTEM.

Funded Amount:

$50,000

Requested By:

MAGEE

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

ORLEANS COUNTY CORNELL COOPERATIVE EXTENSION
12690 NYS ROUTE 31
ALBION, NY 14411
(585) 798-4265

Name of Project Director:

DEB ROBERTS

Purpose of Project:

FUNDS WILL BE USED FOR IMPROVEMENTS TO TROLLEY BUILDING AT ORLEANS COUNTY FAIRGROUNDS

Funded Amount:

$4,000

Requested By:

HAWELEY

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

REGIONAL COME FARM WITH US  
P.O. BOX 72  
LOWVILLE, NY 13367  
(315) 376-5270

Name of Project Director:

MICHELE LEDOUX

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE "COME FARM WITH US" PROGRAM INCLUDING ADMINISTRATION OF THE PROGRAM

Funded Amount:

$10,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

RENSSELAER COUNTY AGRICULTURAL & HORTICULTURAL SOCIETY
451 MASTER STREET
VALLEY FALLS, NY 12185
(518) 753-4411

Name of Project Director:

DAVID MOORE

Purpose of Project:

FUNDS WILL BE USED FOR THE SCHAGHTICOKE FAIR

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

RONDOUT VALLEY GROWERS ASSOCIATION, INC.
P.O. BOX 867
STONE RIDGE, NY 12484
(845) 687-2587

Name of Project Director:

MICHAEL BILTONEN

Purpose of Project:

FUNDS WILL BE USED TO AID IN COSTS OF ONGOING COOPERATIVE MARKETING OF AREA FARMERS.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

SOUTHTOWNS WALLEYE ASSOCIATION OF WNY
4932 CLARK STREET
HAMBURG, NY 14075
(716) 649-8202

Name of Project Director:

WOODY WOODWORTH

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PLANNING OF THE SOUTHTOWNS WALLEYE'S 23RD ANNUAL WALLEYE TOURNAMENT

Funded Amount:

$1,000

Requested By:

QUINN

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

ST. LAWRENCE COUNTY MAPLE PRODUCERS ASSOCIATION
1894 STATE HIGHWAY 68
CANTON, NY 13617
(315) 379-9192

Name of Project Director:

STEVE VAN DER MARK

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN PROMOTING NORTH COUNTRY MAPLE PRODUCTS AND EDUCATING ST. LAWRENCE COUNTY MAPLE PRODUCERS

Funded Amount:

$5,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

STATEN ISLAND COUNCIL FOR ANIMAL WELFARE, INC.
P.O. BOX 120125
STATEN ISLAND, NY 10312-0125
(718) 948-5623

Name of Project Director:

ELLEN DONNELLY

Purpose of Project:

FUNDS WILL BE USED FOR LOW COST SPAY AND NEUTER SURGERY TO PROACTIVELY COMBAT THE GROWING PROBLEM OF STRAY/FERAL CAT AND DOG OVER POPULATION ON STATEN ISLAND.

Funded Amount:

$5,000

Requested By:

CUSICK

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

SUFFERN FARMERS MARKET
P.O. BOX 471
SUFFERN, NY  10901
(845) 647-6911

Name of Project Director:

NADIA MACZAJ

Purpose of Project:

FUNDS WILL BE USED TO PUBLICIZE AND PROMOTE A LOCAL MARKET THAT ENCOURAGES THE CONSUMPTION OF LOCAL PRODUCTS AND INCREASES PEDESTRIAN TRAFFIC IN TOWN.

Funded Amount:

$2,000

Requested By:

JAFEE

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

SULLIVAN COUNTY FARMER'S MARKET ASSOCIATION, INC.
C/O CORNELL CO-OP EXT. - 65 VERNADELOOOMIS DR.
LIBERTY, NY 12754
(845) 292-6180 115

Name of Project Director:

JAN VAN NOSTRAND

Purpose of Project:

FUNDS WILL BE USED FOR PROMOTION AND ADVERTISING OF 2007 SULLIVAN COUNTY SUMMER FARMER’S MARKETS IN VARIOUS COMMUNITIES OF SULLIVAN COUNTY.

Funded Amount:

$2,500

Requested By:

GUNTHER-A

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

WADDINGTON CHAMBER OF COMMERCE, INC.  
P.O. BOX 291  
WADDINGTON, NY  13694  
(315) 528-4535

Name of Project Director:

ALICIA MURPHY

Purpose of Project:

FUNDS WILL BE USED FOR ADVERTISING AND EQUIPMENT ASSOCIATED WITH THE OPERATION OF THE WADDINGTON FARMERS' MARKET.

Funded Amount:

$5,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

WASHINGTON COUNTY FAIRGROUNDS BOARD OF DIRECTORS
392 OLD SCHUYLERVILLE ROAD
GREENWICH, NY 12834
(518) 692-2464

Name of Project Director:

MARK ST. JACQUES

Purpose of Project:

FUNDS WILL BE USED FOR THE WASHINGTON COUNTY FARM MUSEUM

Funded Amount:

$10,000

Requested By:

MCDONALD

Name of Administering State Agency:

DEPARTMENT OF AGRICULTURE AND MARKETS
Legal Name, Address, and Telephone Number:

161ST STREET MERCHANTS ASSOCIATION, INC.
891 SHERIDAN AVENUE
BRONX, NY 10451
(718) 601-7959

Name of Project Director:

ANNE A. LINDSEY

Purpose of Project:

FUNDS WILL BE USED FOR A RESOURCE GUIDE/NEWSLETTER THAT WILL INFORM AND PROMOTE BUSINESS GROWTH AND LOCAL DEVELOPMENT ON 161ST STREET AND SURROUNDING AREAS.

Funded Amount:

$4,000

Requested By:

BENJAMIN

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

ASSOCIATION OF INFORMED VOICES, INC.
P.O. BOX 360485
BROOKLYN, NY  11236
(718) 763-6300

Name of Project Director:

WANDA IHRIG

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT A COMMUNITY EFFORT TO RECOGNIZE MERCHANTS AND RESIDENTS ON THE ROCKAWAY PARKWAY MERCHANTS STRIP, INCLUDING ACTIVITIES TO START A MERCHANT ASSOCIATION.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

ATLANTIC AVENUE BETTERMENT ASSOCIATION  
321 ATLANTIC AVENUE  
BROOKLYN, NY  11201  
(718) 852-7418

Name of Project Director:

SANDY BALBOZA

Purpose of Project:

Funds will be used to produce updated shopping guides for the 132 small businesses on Atlantic Avenue, which is AABA’s main marketing tool to reach out to tourists, surrounding neighborhoods and other areas of New York City.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

BAINBRIDGE CHAMBER OF COMMERCE
P.O. BOX 2
BAINBRIDGE, NY 13733
(607) 967-3800

Name of Project Director:

HELEN HERNANDEZ

Purpose of Project:

FUNDS WILL BE USED FOR MARKETING AND PROMOTION

Funded Amount:

$1,600

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

BED STUY ALIVE! COLLECTIVE
COMMUNITY BOARD #3-1360 FULTON STREET, 2ND FLOOR PLAZA
BROOKLYN, NY 11216
(718) 622-6601

Name of Project Director:

THOMA FAULKNER

Purpose of Project:

FUNDS WILL BE USED TO ASSIST THE MARKETING EFFORTS OF NEW BUSINESSES IN BEDFORD STUYVESANT.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BEST OF BROOKLYN, INC.
209 JORALEMON STREET, SUITE 330
BROOKLYN, NY  11201
(718) 852-3900

Name of Project Director:

CAROLYN GREER

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE THE TOURISM INDUSTRY IN BROOKLYN.

Funded Amount:

$4,000

Requested By:

MAISEL

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

BLACK ROCK-RIVERSIDE NEIGHBORHOOD HOUSING SERVICES, INC.
203 MILITARY ROAD
BUFFALO, NY  14209
(716) 877-3910

Name of Project Director:

PAUL BRUMMER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS ASSOCIATED WITH THE NEIGHBORHOOD REVITALIZATION PROGRAM.

Funded Amount:

$5,000

Requested By:

HOYT

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

BRONX BUSINESS ALLIANCE, LDC, INC.
4309B WHITE PLAINS ROAD
BRONX, NY 10466
(718) 231-2847

Name of Project Director:

MARGARET ARRIGHI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MERCHANT ORGANIZATION AND MARKETING SERVICES TO BUSINESSES IN THE NORTHEAST BRONX. FUNDS WILL ALSO BE USED TO PURCHASE MATERIALS AND SUPPLIES FOR ORGANIZATIONAL EVENTS, SEMINARS, AND MARKETING EVENTS.

Funded Amount:

$11,700

Requested By:

HEASTIE

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

BRONX BUSINESS ALLIANCE, LDC, INC.
4309B WHITE PLAINS ROAD
BRONX, NY 10466
(718) 231-2847

Name of Project Director:

MARGARET ARRIGHI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MERCHANT ORGANIZATION AND MARKETING SERVICES TO BUSINESSES IN THE NORTHEAST BRONX. FUNDS WILL ALSO BE USED TO PURCHASE MATERIALS AND SUPPLIES FOR ORGANIZATIONAL EVENTS, SEMINARS, AND MARKETING EVENTS.

Funded Amount:

$31,500

Requested By:

HEASTIE

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

BRONX COUNCIL FOR ECONOMIC DEVELOPMENT LOCAL DEVELOPMENT CORP.
2530 GRAND CONCOURSE, SUITE 803
BRONX, NY 10458
(718) 562-2104

Name of Project Director:

VINCENT PINELA

Purpose of Project:

FUNDS WILL BE USED FOR THE DEVELOPMENT OF A BOROUGHWIDE PROMOTIONAL PROGRAM.

Funded Amount:

$15,000

Requested By:

RIVERA-J

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

BRONX COUNCIL FOR ECONOMIC DEVELOPMENT LOCAL DEVELOPMENT CORP.
2530 GRAND CONCOURSE, SUITE 803
BRONX, NY 10458
(718) 562-2104

Name of Project Director:

VINCENT PINELA

Purpose of Project:

FUNDS WILL BE USED TO CONTRACT WITH NEIGHBORHOOD ORGANIZATIONS AND/OR PROGRAMS TO SUPPORT BUSINESS DEVELOPMENT AND/OR COMMUNITY SERVICES TO CHILDREN, FAMILIES, AND/OR SENIORS.

Funded Amount:

$57,000

Requested By:

RIVERA-N

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

BROOKLYN CHAMBER OF COMMERCE, INC.
25 ELM PLACE, SUITE 200
BROOKLYN, NY 11201
(718) 875-1000

Name of Project Director:

RICK RUSSO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE NEIGHBORHOOD BUSINESS COMMUNITIES WITH A TOOL BOX OF INDIVIDUALLY TAILORED SUPPORT SERVICES NECESSARY TO GROW EXISTING BUSINESSES AND TO HELP ATTRACT NEW INVESTMENTS.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

CARIBBEAN AMERICAN CHAMBER OF COMMERCE & INDUSTRY EDUCATIONAL FOUNDATION
63 FLUSHING AVENUE
BROOKLYN, NY  11205
(718) 834-4544

Name of Project Director:

DR. ROY HASTICK

Purpose of Project:

Funds will be used to provide free small business counseling. Funds will also support a development programs, and an annual holiday community project.

Funded Amount:

$4,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

CHAMBER OF COMMERCE OF GREATER BAY SHORE
77 EAST MAIN STREET, P.O. BOX 5110
BAY SHORE, NY 11706
(631) 665-7003

Name of Project Director:

DONNA PERICONE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMMEMORATIVE BOOKS FOR THE TRICENTENNIAL OF THE HAMLET OF BAY SHORE

Funded Amount:

$10,000

Requested By:

BOYLE

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

CHAMBER OF COMMERCE OF THE BELLMORES
P.O. BOX 861
BELLMORE, NY 11710
(516) 679-1875

Name of Project Director:

TOM VALENTI

Purpose of Project:

FUNDS WILL BE USED FOR THEIR ANNUAL FALL FESTIVAL

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

COMMISSION ON ECONOMIC OPPORTUNITY
2331 FIFTH AVENUE
TROY, NY 12180
(518) 272-6012

Name of Project Director:

KAREN GORDON

Purpose of Project:

FUNDS WILL BE USED FOR HOOSICK BRANCH PROGRAMS

Funded Amount:

$10,000

Requested By:

MCDONALD

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

COMMUNITY CONCERNS NETWORK, INC.
846 UTICA AVENUE, 2ND FLOOR
BROOKLYN, NY  11203
(718) 940-2264

Name of Project Director:

REV. TERRY LEE

Purpose of Project:

FUNDS WILL BE USED TO BRING TOGETHER BUSINESS LEADERS AND MERCHANTS TO IMPROVE THE BUSINESS COMMUNITY OF UTICA AVENUE (LINDEN-AVENUE D), AS WELL AS TO PROVIDE ACCESS TO INFORMATION AND RESOURCES FOR THE RESIDENTS IN THE COMMUNITY.

Funded Amount:

$10,000

Requested By:

PERRY

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

GREATER BALDWINSVILLE ECONOMIC DEVELOPMENT AGENCY
39 TAPPAN STREET
BALDWINSVILLE, NY 13027
(315) 635-3275

Name of Project Director:

ELIZABETH BOWERS

Purpose of Project:

FUNDS WILL BE USED FOR THE AMERICAN CARP SOCIETY

Funded Amount:

$10,000

Requested By:

BARCLAY

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

GREATER OSWEGO-FULTON COUNTY CHAMBER
44 EAST BRIDGE STREET
OSWEGO, NY 13126
(315) 343-7681

Name of Project Director:

JENNIFER HILL

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY EVENTS INCLUDING PUBLIC CONCERTS

Funded Amount:

$15,000

Requested By:

BARCLAY

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

HICKSVILLE CHAMBER OF COMMERCE
10 WEST MARIE STREET
HICKSVILLE, NY 11801
(516) 931-7170

Name of Project Director:

JAMES PAVONE

Purpose of Project:

FUNDS WILL BE USED FOR COMPLETION OF JOHN BULL TRAIN REPLICA IN DOWNTOWN HICKSVILLE

Funded Amount:

$4,000

Requested By:

WALKER

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

HUDSON VALLEY AGRIBUSINESS DEVELOPMENT CORPORATION
610 STATE STREET
HUDSON, NY 12534
(518) 828-4718

Name of Project Director:

TODD ERLING

Purpose of Project:

FUNDS WILL BE USED FOR ASSISTANCE WITH ANALYSIS OF NON-MARKETED FACTORS OF A PROJECT TO DEVELOP A BIODIESEL PLANT TO SERVICE ITS CURRENT DIESEL VEHICLES

Funded Amount:

$7,500

Requested By:

MOLINARO

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

INTERNATIONAL DREAM TEAM CHRISTIAN ASSOCIATION, INC.
P.O. BOX 1446
CENTRAL ISLIP, NY 11722
(631) 761-6057

Name of Project Director:

KIMBERLY GRANT

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING AND PROMOTING COSTS ASSOCIATED WITH COMMUNITY BUSINESS AND DEVELOPMENT PROGRAM, SUCH AS POSTAGE, OFFICE STATIONARY, AND GENERAL OFFICE EXPENSES. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

RAMOS

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

LOCAL DEVELOPMENT CORP. OF LAURELTON, ROSEDALE & SPRINGFIELD GARDENS
232-18 MERRICK BOULEVARD
LAURELTON, NY 11413
(718) 928-5310

Name of Project Director:

TONY BERKEL

Purpose of Project:

FUNDS WILL BE USED TO CONTRIBUTE TO THE ECONOMIC DEVELOPMENT OF THE COMMUNITIES OF LAURELTON, ROSEDALE AND SPRINGFIELD GARDENS, NY.

Funded Amount:

$45,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
MASSAPEQUA CHAMBER OF COMMERCE
674 BROADWAY
MASSAPEQUA, NY 11758
(516) 541-1443

JOSEPH BASILE

FUNDS WILL BE USED FOR THE SUPPORT OF PROGRAMS

$1,000

SALADINO

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

MEET ME IN MARLBOROUGH
118 MAHONEY ROAD
MILTON, NY 12547
(845) 464-2789

Name of Project Director:

SHEILA MANNESE

Purpose of Project:

FUNDS WILL BE USED FOR SIGNS

Funded Amount:

$5,000

Requested By:

KIRWAN

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

MERRICK CHAMBER OF COMMERCE
P.O. BOX 53
Merrick, NY 11566
(516) 410-3113

Name of Project Director:

MARIAN FRAKER-GUTIN

Purpose of Project:

FUNDS WILL BE USED FOR THEIR ANNUAL FALL FESTIVAL

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

MIDDLE COUNTRY COALITION FOR SMART GROWTH, INC.
101 EAST WOOD BOULEVARD
CENTEREACH, NY  11720
(631) 697-7220

Name of Project Director:

KEVIN MCCORMACK

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE COSTS ASSOCIATED WITH IMPLEMENTING THE SMART GROWTH PROGRAM.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

    MYRTLE AVENUE COMMERCIAL REVITALIZATION & DEVELOPMENT PROJECT, LDC
    472 MYRTLE AVENUE, 2ND FLOOR
    BROOKLYN, NY 11205
    (718) 230-3674

Name of Project Director:

    MICHAEL BLAISE BACKER

Purpose of Project:

    FUNDS WILL BE USED TO HELP RESTORE MYRTLE AVENUE IN FORT GREENE TO AN ECONOMICALLY VITAL NEIGHBORHOOD COMMERCIAL CORRIDOR BENEFITTING THE SURROUNDING COMMUNITY.

Funded Amount:

    $5,000

Requested By:

    LENTOL

Name of Administering State Agency:

    DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

NORTHERN MANHATTAN COALITION FOR ECONOMIC DEVELOPMENT
600 WEST 185TH STREET, 2ND FLOOR
NEW YORK, NY 10033
(212) 543-0010

Name of Project Director:

NURYS DEOLEO

Purpose of Project:

FUNDS WILL BE USED FOR COSTS ASSOCIATED WITH PROVIDING THE LEADERSHIP DEVELOPMENT CONFERENCE WITHIN NYS.

Funded Amount:

$5,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

PICTUREFEST INTERNATIONAL, INC.
50 WEST MAIN ST, SUITE 8100
ROCHESTER, NEW YORK 14614
(585) 428 – 2970

Name of Project Director:

JUDY SEIL

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE HIGH FALLS FILM FESTIVAL.

Funded Amount:

$75,000

Requested By:

GANTT, JOHN, KOON, MORELLE

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

PINE ISLAND CHAMBER OF COMMERCE
P.O. BOX 354
PINE ISLAND, NY 10969
(845) 321-3522

Name of Project Director:

CHEETAH HAYSOM

Purpose of Project:

FUNDS WILL BE USED FOR PLANTING TREES AT ENTRANCE OF PINE ISLAND

Funded Amount:

$2,260

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

RIDGECOOD LOCAL DEVELOPMENT CORP.
59-09 MYRTLE AVENUE
RIDGEWOOD, NY 11385
(718) 366-3806

Name of Project Director:

THEODORE RENZ

Purpose of Project:

Funds will be used to further the attraction, retention, stabilization and expansion of business opportunities. This program will also encourage the active participation of local community groups in the revitalization process, in addition to, assisting merchants in improving their business techniques.

Funded Amount:

$9,200

Requested By:

SEMINERIO

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

RIDGECOOD LOCAL DEVELOPMENT CORP.
60-82 MYRTLE AVENUE, 2ND FLOOR
RIDGEWOOD, NY 11385
(718) 366-3806

Name of Project Director:

THEODORE M. RENZ

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES INCLUDING BUT NOT LIMITED TO, RENT, TELEPHONE, ELECTRIC, OFFICE COPIER SUPPLIES AND AUDIT EXPENSES. THE ORGANIZATION OPERATES ECONOMIC AND COMMUNITY IMPROVEMENT PROGRAMS.

Funded Amount:

$7,250

Requested By:

NOLAN

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
ROCKAWAY DEVELOPMENT AND REHABILITATION CORPORATION
1920 MOTT AVENUE
FAR ROCKAWAY, NY  11691
(718) 327-5300

KEVIN ALEXANDER

FUNDS WILL BE USED FOR REVITALIZATION WHICH INCLUDES FAÇADE
IMPROVEMENTS, LIGHTING UPGRADES, KIOSKS, BANNERS, UNIFORM
SIGNAGE, ROLL-DOWN GATES, TRASH RECEPTACLES AND IMPROVED
MAINTENANCE SERVICES.

$3,000

PHEFFER

DEPARTMENT OF ECONOMIC DEVELOPMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROCKAWAY DEVELOPMENT AND REVITALIZATION CORP.
1920 MOTT AVENUE
FAR ROCKAWAY, NY 11691
(718) 471-6040

Name of Project Director:

KEVIN ALEXANDER

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE CAPACITY TO ATTRACT BUSINESSES AND JOBS TO THE ROCKAWAYS, AS WELL AS, PROVIDE TRAINING TO RESIDENTS TO BE JOB READY.

Funded Amount:

$20,000

Requested By:

TITUS

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SARATOGA P.L.A.N.
112 SPRING STREET
SARATOGA SPRINGS, NY 12866
(518) 587-5554

Name of Project Director:

ALANE CHINIAN

Purpose of Project:

FUNDS WILL BE USED TO DEMOLISH DANGEROUS STRUCTURES AND PREPARE SITE FOR PUBLIC ACCESS

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

SCHENECTADY COUNTY CHAMBER FOUNDATION  
306 STATE STREET  
SCHENECTADY, NY 12305  
(518) 372-5856

Name of Project Director:

CHUCK STEINER

Purpose of Project:

FUNDS WILL BE USED FOR RESTORATION AND REDEVELOPMENT OF ABANDONED PROPERTIES IN THE HISTORIC STOCKADE DISTRICT TO HOUSE A NEWLY CONSTRUCTED VISITORS CENTER FOR SCHENECTADY COUNTY

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SCHENECTADY COUNTY CHAMBER OF COMMERCE, INC.
306 STATE STREET
SCHENECTADY, NY 12305
(518) 372-5656

Name of Project Director:

GAIL KEHN

Purpose of Project:

FUNDS WILL BE USED TO INCREASE TOURISM AND HEIGHTEN PUBLIC AWARENESS OF THE ERIE CANAL IN A 2-DAY FAMILY FESTIVAL

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

SCORE ROCHESTER
88 HILLHURST LANE
ROCHESTER, NY 14617
(585) 544-1565

Name of Project Director:

LARRY FELDMAN

Purpose of Project:

FUNDS WILL BE USED FOR EXPANSION AND IMPROVEMENTS TO WORKSHOP, SEMINAR, AND EDUCATION INITIATIVES, WEBSITE DEVELOPMENT/UPDATES, AND NEWSLETTER PUBLICATION. COMMUNITIES

Funded Amount:

$2,500

Requested By:

REILICH

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

SERVICE CORPORATION OF RETIRED EXECUTIVES, ASSOCIATION
200 WASHINGTON STREET, SUITE 409
WATERTOWN, NY 13601
(315) 788-1200

Name of Project Director:

T. URLING WALKER

Purpose of Project:


Funded Amount:

$2,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

SIDNEY CHAMBER OF COMMERCE
24 RIVER STREET
SIDNEY, NY 13838
(607) 343-3613

Name of Project Director:

GREG HITCHCOCK

Purpose of Project:

FUNDS WILL BE USED FOR MARKETING AND PROMOTION

Funded Amount:

$2,500

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SOUTHWEST BROOKLYN INDUSTRIAL DEVELOPMENT CORPORATION
241 41ST STREET, 2ND FLOOR
BROOKLYN, NY 11232
(718) 965-3100

Name of Project Director:

PHAEDRA THOMAS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT POLICY AND PLANNING WORK THAT ENSURES A PLACE FOR SMALL BUSINESSES IN SOUTHWEST BROOKLYN.

Funded Amount:

$4,000

Requested By:

ORTIZ

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

ST. LAWRENCE COUNTY
48 COURT STREET
CANTON, NY  13617
(315) 379-2234

Name of Project Director:

KEITH ZIMMERMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ENERGY CONSERVATION EDUCATION AND ENERGY AUDITS FOR HEAP - ELIGIBLE HOUSEHOLDS IN ST. LAWRENCE COUNTY.

Funded Amount:

$15,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

SYRACUSE CONVENTION AND VISITORS BUREAU
572 SOUTH SALINA STREET
SYRACUSE, NY 13202
(315) 470−1910

Name of Project Director:

DAVID HOLDER

Purpose of Project:

FUNDS WILL BE USED FOR SALES AND MARKETING EFFORTS TO STRENGTHEN THE POSITIVE AWARENESS OF SYRACUSE AND ONONDAGA COUNTY AS A CONVENTION AND VISITOR DESTINATION.

Funded Amount:

$40,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

THE COMMUNITY FOUNDATION FOR THE CAPITAL REGION  
P.O. BOX 9711  
NISKAYUNA, NY 12309  
(518) 782-0644

Name of Project Director:

J. BRIGGS MCANDREWS

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP AND DISTRIBUTE A SERVICE DIRECTORY  
TO ALL CITIZENS IN THE NISKAYUNA COMMUNITY

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TYROL CLUB OF SOLVAY, INC.
213 LAMONT AVENUE
SOLVAY, NY 13209-1617
(315) 487-9921

Name of Project Director:

PETER ALBRIGO

Purpose of Project:

FUNDS WILL BE USED FOR THE PLANNING AND IMPLEMENTATION OF THE INTERNATIONAL TYROLEAN TORENTINO ORGANIZATIONS CONVENTION.

Funded Amount:

$20,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
Legal Name, Address, and Telephone Number:

UNADILLA CHAMBER OF COMMERCE
35 RAILROAD STREET
UNADILLA, NY 13849
(607) 369-3295

Name of Project Director:

JERRY PALMER

Purpose of Project:

FUNDS WILL BE USED FOR REPLACEMENT STORAGE FACILITIES AND MATERIALS

Funded Amount:

$1,600

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF ECONOMIC DEVELOPMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ALLEY POND ENVIRONMENTAL CENTER, INC.
228-06 NORTHERN BOULEVARD
DOUGLASTON, NY 11363
(718) 229-4000

Name of Project Director:

ALINE EULER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT ENVIRONMENTAL/NATURE EDUCATIONAL PROGRAMS TO INDIVIDUALS OF ALL AGES.

Funded Amount:

$5,000

Requested By:

WEPRIN

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

ALLEY POND ENVIRONMENTAL CENTER, INC.
228-06 NORTHERN BOULEVARD
DOUGLASTON, NY  11363
(718) 229-4000

Name of Project Director:

IRENE SCHEID

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET THE COSTS INVOLVED WITH PROVIDING ENVIRONMENTAL PROGRAMS FOR SCHOOL AGE CHILDREN.

Funded Amount:

$2,000

Requested By:

CARROZZA

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

AMERICAN INSTITUTE OF ARCHITECTS 150
P.O. BOX 939
EAST HAMPTON, NY 11937
(631) 907-1077

Name of Project Director:

EVA GROWNEY

Purpose of Project:

FUNDS WILL BE USED FOR A FEASIBILITY STUDY TO EXPLORE
CONSERVATION AND PRESERVATION MODALITIES INCORPORATING
RENEWABLE ENERGY

Funded Amount:

$5,000

Requested By:

THIELE

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

Baldwin Oaks Civic Association
P.O. Box 1704
Baldwin, NY 11510
(516) 263-3730

Name of Project Director:

Jacqueline Bell

Purpose of Project:

Funds will be used to conduct a study with young people in the community on frogs in the wetlands.

Funded Amount:

$5,000

Requested By:

Hooper

Name of Administering State Agency:

Department of Environmental Conservation
Legal Name, Address, and Telephone Number:

BRONX COUNCIL FOR ENVIRONMENTAL QUALITY, INC.
P.O. BOX 265, CITY ISLAND STATION
BRONX, NY  10464
(718) 796-1648

Name of Project Director:

ELLEN POLLAN

Purpose of Project:

FUNDS WILL BE USED TO WRITE, LAYOUT, PRINT, AND MAIL ENVIRONMENTAL NEWSLETTERS TO BRONX RESIDENTS.

Funded Amount:

$2,500

Requested By:

DINOWITZ

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

BRONX RIVER-SOUND SHORE AUDUBON SOCIETY, INC.
P.O. BOX 1108
SCARSDALE, NY 10583
(914) 834-5203

Name of Project Director:

SANDRA C. MORRISSEY

Purpose of Project:

FUNDS WILL BE USED TO INCREASE THE EASTERN BLUEBIRD (NYS BIRD) POPULATION, WHICH HAS DECLINED BY 90%, BY PLACING NESTING BOXES IN GOOD BLUEBIRD HABITATS. THE PUBLIC WILL BE INVOLVED IN THIS PROCESS AND BE TAUGHT IMPORTANT ECOLOGICAL LESSONS AND ENVIRONMENTAL STEWARDSHIP.

Funded Amount:

$2,700

Requested By:

LATIMER

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN BOTANIC GARDEN CORP.
1000 WASHINGTON AVENUE
BROOKLYN, NY 11225
(718) 941-4044

Name of Project Director:

SCOTT MEDBURY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS IN HORTICULTURE AND ECOLOGY.

Funded Amount:

$1,458

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKind, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN BOTANIC GARDEN CORP.
1000 WASHINGTON AVENUE
BROOKLYN, NY 11225
(718) 941-4044

Name of Project Director:

SCOTT MEDBURY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS IN HORTICULTURE AND ECOLOGY.

Funded Amount:

$1,458

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN BOTANIC GARDEN CORP.
1000 WASHINGTON AVENUE
BROOKLYN, NY  11225
(718) 941-4044

Name of Project Director:

SCOTT MEDBURY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS IN HORTICULTURE AND ECOLOGY.

Funded Amount:

$1,458

Requested By:

ABBATE, BOYLAN, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN BOTANIC GARDEN CORP.
1000 WASHINGTON AVENUE
BROOKLYN, NY 11225
(718) 623-7373

Name of Project Director:

AARON BOUSKA

Purpose of Project:

FUNDS WILL BE USED FOR AN EDUCATIONAL PROGRAM THAT GIVES CHILDREN IN BROOKLYN AN OPPORTUNITY TO LEARN ABOUT SCIENCE, ECOLOGY, AND THE ENVIRONMENT IN THEIR CLASSROOMS AND IN THEIR NEIGHBORHOODS.

Funded Amount:

$3,500

Requested By:

JEFFRIES

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN BOTANIC GARDEN CORP.
1000 WASHINGTON AVENUE
BROOKLYN, NY  11225
(718) 941-4044

Name of Project Director:

SCOTT MEDBURY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS IN HORTICULTURE AND ECOLOGY.

Funded Amount:

$1,000

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN BOTANIC GARDEN CORP.
1000 WASHINGTON AVENUE
BROOKLYN, NY 11225
(718) 941-4044

Name of Project Director:

SCOTT MEDBURY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS IN HORTICULTURE AND ECOLOGY.

Funded Amount:

$1,458

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIJKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN BOTANIC GARDEN CORP.
1000 WASHINGTON AVENUE
BROOKLYN, NY 11225
(718) 941-4044

Name of Project Director:

SCOTT MEDBURY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS IN HORTICULTURE AND ECOLOGY.

Funded Amount:

$1,458

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN BOTANIC GARDEN CORP.
1000 WASHINGTON AVENUE
BROOKLYN, NY 11225
(718) 941-4044

Name of Project Director:

SCOTT MEDBURY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS IN HORTICULTURE AND ECOLOGY.

Funded Amount:

$1,458

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

C.H.O.K.E. - COALITION HELPING ORGANIZE A KLEANER ENVIRONMENT, INC.
33-60 21ST STREET
LONG ISLAND CITY, NY 11106
(718) 779-2848

Name of Project Director:

TONY GIGANTELLO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OUTREACH ON ENVIRONMENTAL ISSUES RELATED TO HEALTH PROBLEMS, ADDRESSING THE HIGH LOCAL INCIDENCE OF ASTHMA; FOR EDUCATIONAL PROGRAMS IN ELEMENTARY SCHOOLS; EARTH DAY PROGRAMS AT LONG ISLAND CITY HIGH SCHOOL; AND FOR OFFICE SUPPLIES.

Funded Amount:

$3,000

Requested By:

GIANARIS

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

CANANDAIGUA LAKE WATERSHED COUNCIL
205 SALTONSTALL STREET
CANANDAIGUA, NY 14424
(585) 396-3630

Name of Project Director:

KEVIN OLVANEY

Purpose of Project:

FUNDS WILL BE USED FOR SUCKER BROOK IMPROVEMENTS

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

CARPENTER'S BROOK FISH HATCHERY
P.O. BOX 321
ELBRIDGE, NY 13060
(315) 506-2117

Name of Project Director:

STEVE WOWELKO

Purpose of Project:

FUNDS WILL BE USED FOR TRAIL IMPROVEMENTS

Funded Amount:

$4,000

Requested By:

BARCLAY

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

CAYUGA COUNTY SOIL & WATER CONSERVATION DISTRICT  
7413 COUNTY HOUSE ROAD  
AUBURN, NY 13021  
(315) 252-4171

Name of Project Director:

SANDY HUEY

Purpose of Project:

FUNDS WILL BE USED FOR THE 2007 CANON ENVIROTHON

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
CENTER FOR ENVIRONMENTAL INFORMATION  
55 ST. PAUL STREET  
ROCHESTER, NY 14604  
(585) 262-2870

KEVIN FLYNN

FUNDS WILL BE USED FOR TECHNICAL AND EDUCATIONAL ASSISTANCE FOR LOCAL GOVERNMENTS, SCHOOLS, BUSINESS AND ORGANIZATIONS FOR REMEDIATION, RESTORATION, PROTECTION AND SUSTAINABILITY OF THE LAKE ONTARIO COASTAL REGION

$5,000

OAKS

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

CENTER FOR ENVIRONMENTAL INFORMATION, INC.
55 ST. PAUL STREET
ROCHESTER, NY 14604
(585) 262-2870

Name of Project Director:

LEE LOOMIS

Purpose of Project:

FUNDS WILL BE USED TO HELP FUND THE LAKE ONTARIO COASTAL INITIATIVE, WHICH IS A PARTNERSHIP TO RESTORE, PROTECT AND SUSTAIN THE COASTAL REGION OF LAKE ONTARIO.

Funded Amount:

$10,000

Requested By:

MORELLE

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTER FOR ENVIRONMENTAL INFORMATION, INC.
55 ST. PAUL STREET
ROCHESTER, NY 14604
(585) 262-2870

Name of Project Director:

KEVIN FLYNN

Purpose of Project:

FUNDS WILL BE USED FOR REMEDIATION, RESEARCH, OUTREACH PROGRAMS FOR LAKE ONTARIO COASTAL INITIATIVE

Funded Amount:

$2,700

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

COALITION AGAINST LINCOLN WEST, INC.
P.O. BOX 230078
NEW YORK, NY 10023
(212) 580-9319

Name of Project Director:

BATYA LEWTON

Purpose of Project:

FUNDS WILL BE USED TO EVALUATE THE FLOW AT NORTH RIVER SEWAGE TREATMENT PLANT.

Funded Amount:

$7,500

Requested By:

ROSENTHAL

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COUNTY OF SCHENECTADY
107 NOTT TERRACE, SCHAFFER HEIGHTS, SUITE 303
SCHENECTADY, NY 12308
(518) 386-2225

Name of Project Director:

MARK STORTI

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF APPROXIMATELY 600 RAINBOW TROUT TO BE RELEASED INTO THE INDIAN KILL PRESERVE TO PROMOTE FISHING AND FISHERIES EDUCATION

Funded Amount:

$1,600

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

DEPOSIT WATERSHED ASSOCIATION
3016 OLD ROUTE 17
DEPOSIT, NY 13754
(607) 467-2630

Name of Project Director:

GUY STRUBLE

Purpose of Project:

FUNDS WILL BE USED FOR GLOBAL POSITIONING UNITS

Funded Amount:

$1,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

DUTCHESS LAND CONSERVANCY
2908 ROUTE 44
MILLBROOK, NY 12545
(845) 677-3002

Name of Project Director:

REBECCA THORNTON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A HIGH CAPACITY COMPUTER AND LARGE FORMAT SCREEN

Funded Amount:

$3,267

Requested By:

MOLINARO

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

EASTERN QUEENS ALLIANCE, INC.
P.O. BOX 300818
JAMAICA, NY  11430
(866) 372-4255

Name of Project Director:

BARBARA BROWN

Purpose of Project:

FUNDS WILL BE USED FOR THE SUMMER YOUTH ENVIRONMENTAL EDUCATION PROGRAM. STUDENTS ARE EXPOSED TO THE NATURAL ENVIRONMENT SURROUNDING JAMAICA BAY.

Funded Amount:

$20,000

Requested By:

TITUS

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ECSS-SWEETBRIAR NATURE CENTER
62 ECKENKAMP DRIVE
SMITHTOWN, NY 11787
(631) 979-9233

Name of Project Director:

MARIE J. SMITH

Purpose of Project:

FUNDS WILL BE USED TOWARD ENVIRONMENTAL EDUCATION PROGRAMS

Funded Amount:

$6,000

Requested By:

FITZPATRICK

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
LEGAL NAME, ADDRESS, AND TELEPHONE NUMBER:

ESOPUS CREEK CONSERVANCY
P.O. BOX 589
SAUGERTIES, NY 12477
(845) 247-0664

NAME OF PROJECT DIRECTOR:

SUSAN BOLITZER

PURPOSE OF PROJECT:

FUNDS WILL BE USED FOR A WORK SHED AND FOR HEDGE/GRASS TRIMMER FOR TRAIL MAINTENANCE

FUNDED AMOUNT:

$2,500

REQUESTED BY:

LOPEZ-P

NAME OF ADMINISTERING STATE AGENCY:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF FLAX POND, INC.
59 CRANE NECK ROAD
SETAUKET, NY  11733
(631) 941-9404

Name of Project Director:

WENDY FIDAO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE STEWARDSHIP WORK OF THE FRIENDS OF FLAX POND. EXPENSES WILL INCLUDE BUT NOT BE LIMITED TO PRINTING, ADVERTISING, MAILING, SUPPLIES FOR LECTURE SERIES, AND FIELD STUDY EQUIPMENT.

Funded Amount:

$3,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF THE BAY, INC.
P.O. BOX 564
OYSTER BAY, NY  11771
(516) 922-6666

Name of Project Director:

KYLE RABIN

Purpose of Project:

FUNDS WILL BE USED TO PREPARE A MULTI-YEAR TRENDS ANALYSIS THAT EVALUATES THE COLLECTIVE WATER QUALITY MONITORING DATA THAT HAS BEEN GENERATED SINCE 1999-2005 MONITORING SEASONS.

Funded Amount:

$1,000

Requested By:

LAVINE

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
GENESEE COUNTY SOIL AND WATER CONSERVATION DISTRICT
29 LIBERTY STREET, SUITE 3
BATAVIA, NY 14020
(585) 343-2362

DIANA LAPP

FUNDS WILL BE USED FOR THE 2007 CANON NATIONAL ENVIROTHON

$3,000

BURLING

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

LONG ISLAND BEACH BUGGY ASSOCIATION
P.O. BOX 816
PATCHOGUE, NY 11772
(631) 924-4515

Name of Project Director:

CHUCK HOLLINS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND SUPPLIES FOR A DUNE AND BEACH GRASS PLANTING.

Funded Amount:

$14,000

Requested By:

SWEENEY

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

   LONG ISLAND CITIZENS CAMPAIGN INC. DBA CITIZENS CAMPAIGN FUND
   225A MAIN STREET
   FARMINGDALE, NY  11735
   (516) 390-7150

Name of Project Director:

   ADRIANNE ESPOSITO

Purpose of Project:

   FUNDS WILL BE USED TO ASSIST WITH OPERATING COSTS, INCLUDING BUT
   NOT LIMITED TO, PROVIDING EDUCATIONAL INFORMATION TO THE
   COMMUNITY ABOUT VARIOUS ENVIRONMENTAL ISSUES.

Funded Amount:

   $3,000

Requested By:

   EDDINGTON

Name of Administering State Agency:

   DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

LONG ISLAND PINE BARRENS SOCIETY  
547 EAST MAIN STREET  
RIVERHEAD, NY 11901  
(631) 369-3300

Name of Project Director:

RICHARD AMPER

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH OPERATING EXPENSES, INCLUDING BUT NOT LIMITED TO, PROVIDING ENVIRONMENTAL EDUCATION PROGRAMS FOR THE COMMUNITY.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

MARINE RESEARCH PRESERVATION
467 EAST MAIN STREET
RIVERHEAD, NY  11901
(631) 369-9840

Name of Project Director:

ROBERT DIGIOVANNI

Purpose of Project:

FUNDS WILL BE USED TO RESEARCH MARINE LIFE IN THE NEW YORK MID-ATLANTIC REGION FOR CONSERVATION EFFORTS.

Funded Amount:

$5,000

Requested By:

ALESSI

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

MASSAPEQUA WATER DISTRICT
84 GRAND AVENUE
MASSAPEQUA, NY 11758
(516) 798-5266

Name of Project Director:

RICHARD TOBIN

Purpose of Project:

FUNDS WILL BE USED FOR PUBLIC EDUCATION AND CONSERVATION PROGRAM

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

NATURE CONSERVANCY - EASTERN NEW YORK CHAPTER
265 CHESTNUT RIDGE ROAD
MOUNT KISCO, NY  10549
(914) 244-3271

Name of Project Director:

SHARON PICKETT

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY OUTREACH AND REGIONAL PARTNERSHIPS TO FIGHT THE THREAT OF INVASIVE SPECIES.

Funded Amount:

$7,500

Requested By:

BRADLEY

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

NEW CASSEL ENVIRONMENTAL JUSTICE PROJECT, INC.
847 PROSPECT AVENUE
WESTBURY, NY  11590
(516) 876-9526

Name of Project Director:

MILDRED LITTLE

Purpose of Project:

FUNDS WILL BE USED TO MONITOR ENVIRONMENTAL CLEAN-UP OF NEW CASSEL INDUSTRIAL AREA AND FOR EDUCATION OF THE COMMUNITY ON ENVIRONMENTAL HAZARDS.

Funded Amount:

$2,000

Requested By:

LAVINE

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NIAGARA RIVER ANGLERS ASSOCIATION, INC.
3322 UPPER MOUNTAIN ROAD
SANBORN, NY  14132
(716) 731-9588

Name of Project Director:

BERNIE ROTELLA

Purpose of Project:

FUNDS WILL BE USED TO DRUDGE THE MAIN REARING POOL.

Funded Amount:

$4,500

Requested By:

DELMONTE

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NORTH RIVER COMMUNITY ENVIRONMENTAL REVIEW BOARD
P.O. BOX 605
NEW YORK, NY  10031
(212) 491-3590

Name of Project Director:

L. ANN ROCKER

Purpose of Project:

FUNDS WILL BE USED FOR PUBLIC FORUMS, WHERE THE TREATMENT OF WASTEWATER DISCHARGED INTO THE HUDSON RIVER, PARKS, CLEANING AND PAINTING OF BRIDGES AND FLOW AND AIR EMISSIONS CONTROL ORDER IS MONITORED.

Funded Amount:

$2,500

Requested By:

O'DONNELL

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

NORTH RIVER COMMUNITY ENVIRONMENTAL REVIEW BOARD
626 RIVERSIDE DRIVE
NEW YORK, NY  10031
(212) 864-6200

Name of Project Director:

L. ANN ROCKER

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE THE GENERAL COMMUNITY REGARDING ENVIRONMENTAL ISSUES AND TO HOLD MONTHLY PUBLIC MEETINGS.

Funded Amount:

$7,500

Requested By:

WRIGHT

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:
OPEN SPACE ALLIANCE FOR NORTH BROOKLYN, INC.
79 NORTH 11TH STREET
BROOKLYN, NY 11211
(718) 486–7422

Name of Project Director:
STEVE HINDY, FOUNDING MEMBER

Purpose of Project:
FUNDS WILL BE USED FOR ADMINISTRATIVE AND WORKPLACE COSTS RELATED TO THE IMPLEMENTATION OF THE NEW PARKS PROGRAM THAT WILL ENHANCE GREENPOINT AND WILLIAMSBURG PARKS AND OPEN SPACE.

Funded Amount:
$50,000

Requested By:
LENTOL

Name of Administering State Agency:
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

PECONIC RIVER SPORTSMAN'S CLUB, INC.
389 RIVER ROAD
MANORVILLE, NY 11949-1405
(631) 275-5787

Name of Project Director:

DARIUS PERRY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PROGRAMS TO TEACH YOUTHS ABOUT CONSERVATION AND SAFE SPORTSMEN'S PRACTICES.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

PFEIFFER NATURE CENTER
P.O. BOX 802
PORTVILLE, NY 14770
(716) 933-0187

Name of Project Director:

MARGARET A. CHERRE

Purpose of Project:

FUNDS WILL BE USED TO EXTEND HANDICAPPED ACCESSIBLE TRAIL

Funded Amount:

$5,000

Requested By:

GIGLIO

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

PUTNAM COUNTY LAND TRUST
P.O. BOX 36
BREWSTER, NY 10509
(845) 228-4520

Name of Project Director:

JUDY TERLIZZI

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION OF NATURE TRAIL FOR THE DISABLED

Funded Amount:

$2,500

Requested By:

BALL

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

PUTNAM COUNTY LAND TRUST
P.O. BOX 36
BREWSTER, NY 10509
(845) 228-4520

Name of Project Director:

JUDY TERLIZZI

Purpose of Project:

FUNDS WILL BE USED FOR A NEW FLOOR FOR THE SECOND STORY OF LAND TRUST HOUSE

Funded Amount:

$2,500

Requested By:

BALL

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUOGUE WILDLIFE REFUGE
P.O. BOX 492
QUOGUE, NY 11959
(631) 653-4771

Name of Project Director:

MARGARET CARAHER

Purpose of Project:

FUNDS WILL BE USED FOR WILDLIFE PROGRAMS

Funded Amount:

$3,000

Requested By:

THIELE

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

RENEWABLE ENERGY LONG ISLAND
P.O. BOX 789
BRIDGEHAMPTON, NY 11932
(631) 537-8282

Name of Project Director:

GORDAN RAACKE

Purpose of Project:

FUNDS WILL BE USED FOR ENERGY CONSERVATION PROGRAMS

Funded Amount:

$2,000

Requested By:

THIELE

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

SAVE THE FORGE RIVER, INC.
556 MASTIC ROAD
MASTIC BEACH, NY 11951
(631) 281-0370

Name of Project Director:

DONNA CANGE

Purpose of Project:

FUNDS WILL BE USED FOR PUBLIC EDUCATION WITH REGARD TO PROMOTING WATER QUALITY IN THE FORGE RIVER WATERSHED

Funded Amount:

$2,000

Requested By:

THIELE

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

ST. LAWRENCE COUNTY
48 COURT STREET
CANTON, NY 13617
(315) 379-2234

Name of Project Director:

ROBERT MCNEIL

Purpose of Project:

FUNDS WILL BE USED FOR THE ENVIRONMENTAL CLEANUP OF WILLOW ISLAND/GRASSE RIVER HERITAGE PROJECT.

Funded Amount:

$13,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

STARFLOWER EXPERIENCES
79 MARIN COURT
JERICHO, NY 11753
(516) 938-6152

Name of Project Director:

LAURIE FARBER

Purpose of Project:

FUNDS WILL BE USED FOR EARTHKEEPERS SUMMER PROGRAM

Funded Amount:

$2,000

Requested By:

RAIA

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

THE ENVIRONMENTAL CLEARINGHOUSE, INC.
P.O. BOX 9118
NISKAYUNA, NY 12309
(518) 690-7853

Name of Project Director:

DONALD SNELL

Purpose of Project:

FUNDS WILL BE USED TO RESTORE AND PUT INTO PRODUCTIVE USE A ONE
ROOM SCHOOL HOUSE TO BE USED AS A HISTORIC ASSET AND BE USED
BY THE ENVIRONMENTAL CLEARINGHOUSE

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

URBAN DIVERS MARINE CONSERVATION AND SCIENTIFIC DIVING, INC.
89 PIONEER STREET
BROOKLYN, NY  11231
(718) 802-9874

Name of Project Director:

LUDGAR BALAN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROVIDING YOUTH AND ADULTS WITH THE OPPORTUNITY TO PARTICIPATE IN ENVIRONMENTAL PROJECTS AND EXPERIENCES AND PROVIDING ENVIRONMENTAL EDUCATION.

Funded Amount:

$5,000

Requested By:

COLTON

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

WAYNE COUNTY SOIL & WATER CONSERVATION DISTRICT
10 LEACH ROAD
LYONS, NY 14489
(315) 946-4136

Name of Project Director:

ROB WILLIAMS

Purpose of Project:

FUNDS WILL BE USED FOR MITIGATION OF WATER QUALITY CONCERNS, I.E. FAILING SEPTIC SYSTEMS

Funded Amount:

$15,000

Requested By:

OAKS

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

WESTCHESTER LAND TRUST, INC.
11 BABBITT ROAD
BEDFORD HILLS, NY 10507
(914) 241-6346

Name of Project Director:

PAUL GALLAY

Purpose of Project:

FUNDS WILL BE USED TO CREATE A LAND MANAGEMENT PROGRAM FOR PUBLIC ACCESS AND IMPROVED HABITAT ON WLT’S LANDS.

Funded Amount:

$10,000

Requested By:

BRADLEY

Name of Administering State Agency:

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Legal Name, Address, and Telephone Number:

A TORAH INFERTILITY MEDIUM OF EXCHANGE  
1310 48TH STREET  
BROOKLYN, NY  11219  
(718) 686-8912

Name of Project Director:

BRANY ROSEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE INFORMATIVE ARTICLES INCLUDING: CUTTING EDGE MEDICAL INFORMATION, DOCTOR INTERVIEWS, SUPPORT AND UPDATES ON UPCOMING EVENTS AND LECTURES, ALL OF WHICH ARE AVAILABLE TO THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$23,000

Requested By:

HIKIND

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AFRICAN-AMERICAN HEALTH EDUCATION & DEVELOPMENT FOUNDATION
175 FULTON AVENUE, #301-A
HEMPSTEAD, NY  11550
(516) 538-0656

Name of Project Director:

MARION TERRY

Purpose of Project:

FUNDS WILL BE USED FOR HEALTH EDUCATION FOR MEDICALLY UNDERSERVED POPULATIONS AND TO ADDRESS THE ISSUE OF CHILDHOOD OBESITY THROUGHOUT ELEMENTARY SCHOOLS.

Funded Amount:

$8,500

Requested By:

HOOPER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AIDS COUNCIL OF NORTHEASTERN NEW YORK
927 BROADWAY
ALBANY, NY 12207
(518) 434-4686

Name of Project Director:

MICHELE MCCLAVE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MENTAL HEALTH COUNSELING, FOOD AND TRANSPORTATION FOR PERSONS LIVING WITH THE HIV DISEASE

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AIDS SERVICE CENTER OF LOWER MANHATTAN, INC.
41 E. 11TH STREET, 5TH FL.
NEW YORK, NY 10003
(212) 645-0875 304

Name of Project Director:

SHARON I. DUKE

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AN HIV & PEER EDUCATOR, TESTING AND REFERRAL SERVICES, ON-SITE MEALS, FOOD PANTRY, CLOTHING ROOM AND HYGIENE KITS, ESCORTS AND REFERRALS TO MEDICAL CARE, AND ACCESS TO A BROAD ARRAY OF HIV PREVENTION AND SUPPORT PROGRAMS.

Funded Amount:

$4,000

Requested By:

GLICK

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALBANY JEWISH FAMILY SERVICES
877 MADISON AVENUE
ALBANY, NY  12208
(518) 482-8856

Name of Project Director:

RITA SCHACONE

Purpose of Project:

FUNDS WILL BE USED TO HELP FAMILIES COPE WITH THE IMPACT OF SERIOUS ILLNESS. THIS IS AN INTERVENTION PROGRAM THAT OFFERS SUPPORT, COUNSELING AND/OR ADVOCACY SERVICES TO PATIENTS AND THEIR FAMILIES FACING CHALLENGES OF COPING WITH SERIOUS ILLNESS AND HEALTH ISSUES.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALLEGANY COUNTY CHAPTER OF THE AMERICAN RED CROSS
112 NORTH MAIN STREET
WELLSVILLE, NY 14895
(585) 593-1531

Name of Project Director:

MADELINE M. GASDIK

Purpose of Project:

FUNDS WILL BE USED FOR HEALTH AND SAFETY TRAINING

Funded Amount:

$2,500

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALLEGANY COUNTY CHAPTER OF THE RED CROSS
112 NORTH MAIN STREET
WELLSVILLE, NY 14895
(585) 593-1531

Name of Project Director:

MADELINE M. GASDIK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF TRAINING DVD’S AND OTHER MATERIAL

Funded Amount:

$2,500

Requested By:

GIGLIO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALMA TOOROCK MEMORIAL FOR CANCER RESEARCH, INC.
370 OCEAN PARKWAY, SUITE 11D
BROOKLYN, NY 11218
(718) 703-3733

Name of Project Director:

FLORENCE SILVER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING EXPENSES, INCLUDING BUT NOT LIMITED TO PRINTING, PHONE, POSTAGE, DSL AND OFFICE SUPPLIES.

Funded Amount:

$1,500

Requested By:

COLTON

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALZHEIMER'S AND AGING RESOURCE CENTER OF BROOKLYN
2351 BRIGHAM STREET
BROOKLYN, NY  11229
(718) 646-7001

Name of Project Director:

HENNI FISHER

Purpose of Project:

FUNDS WILL BE USED TO TRAIN AND SUPERVISE HOME ATTENDANTS IN CARING FOR ALZHEIMER’S PATIENTS.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALZHEIMER'S ASSOCIATION
3281 VETERANS MEMORIAL HIGHWAY, SUITE E13
RONKONKOMA, NY 11779
(631) 580-5100

Name of Project Director:

MARY ANN MALACK-RAGONA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TRAINING PROGRAMS FOR HEALTHCARE PROFESSIONALS.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
ALZHEIMER’S DISEASE AND RELATED DISORDERS ASSOCIATION
435 EAST HENRIETTA ROAD
ROCHESTER, NY  14620
(585) 760-5400

SHARON S. BOYD

FUNDS WILL BE USED TO PROVIDE CAREGIVER SUPPORT SERVICES, A
COMPREHENSIVE ARRAY OF SUPPORT FOR FAMILY CAREGIVERS WHO CARE
FOR THEIR LOVED ONES AT HOME WITH ALZHEIMERS.

$9,500

KOON

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION
435 EAST HENRIETTA ROAD
ROCHESTER, NY 14620
(585) 760-5400

Name of Project Director:

SHARON BOYD

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT UNPAID CAREGIVERS TO HELP THEM KEEP THEIR LOVED ONES AT HOME.

Funded Amount:

$5,000

Requested By:

MORELLE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALZHEIMER’S DISEASE AND RELATED DISORDERS ASSOCIATION
3281 VETERANS MEMORIAL HIGHWAY, SUITE E-13
RONKONKOMA, NY 11779
(631) 580-5100

Name of Project Director:

MARY ANN MAKACK-RAGONA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT COMMUNITY PROGRAMS AND SERVICES FOR THOSE WITH ALZHEIMER’S DISEASE AND THEIR FAMILY.

Funded Amount:

$5,000

Requested By:

SWEENEY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION  
3281 VETERANS MEMORIAL HIGHWAY  
RONKONKOMA, NY 11779  
(631) 580-5100

Name of Project Director:

MARY ANN MALACK-RAGONA

Purpose of Project:

FUNDS WILL BE USED TO FURTHER THE EDUCATION AND SUPPORT PROGRAMS FOR ALZHEIMER'S PATIENTS AND THEIR FAMILIES.

Funded Amount:

$3,000

Requested By:

ENGBRIGHT

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION
85 WATERVLIET AVENUE
ALBANY, NY 12206-2083
(518) 438-2217

Name of Project Director:

MARC KAPLAN

Purpose of Project:

FUNDS WILL BE USED FOR THE "MAINTAIN YOUR BRAIN" WORKSHOP, EDUCATING PUBLIC ON WAYS TO ENHANCE BRAIN HEALTH.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN CANCER SOCIETY, INC.
2 LYON PLACE
WHITE PLAINS, NY  10601
(914) 397-8828

Name of Project Director:

ADRIANNE D'IMPERIO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS ASSOCIATED WITH RELAY FOR LIFE.

Funded Amount:

$5,000

Requested By:

PRETLOW

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AMERICAN CANCER SOCIETY, INC.
97-77 QUEENS BOULEVARD, SUITE 1110
REGO PARK, NY  11374
(718) 261-0758

Name of Project Director:

DR. MING Chang

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SMOKING CESSATION INTERVENTION FOR THE ASIAN COMMUNITY.

Funded Amount:

$5,000

Requested By:

YOUNG

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS
142 RICHMOND AVENUE
STATEN ISLAND, NY 10314
(718) 983-1600

Name of Project Director:

SUSAN M. LUTZ

Purpose of Project:

FUNDS WILL BE USED TO ALLOW THE STATEN ISLAND OFFICE TO CONTINUE TO ENHANCE THE IMPORTANT SERVICES RED CROSS PROVIDES FOR EMERGENCY PREPAREDNESS PROGRAMS.

Funded Amount:

$4,500

Requested By:

HYER-SPENCER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS - NIAGARA FALLS CHAPTER
2079 SAWYER DRIVE
NIAGARA FALLS, NY 14304
(716) 731-4030

Name of Project Director:

JAMES SNELL

Purpose of Project:

FUNDS WILL BE USED FOR HEALTH/SAFETY TRAINING MATERIALS AND SUPPLIES.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK  
100 PINEAPPLE WALK  
BROOKLYN, NY 11201  
(718) 330-0381

Name of Project Director:

JONATHAN GABRIEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPLIES TO RED CROSS PERSONNEL RESPONDING TO DISASTERS OR ATTENDING COMMUNITY EVENTS.

Funded Amount:

$2,500

Requested By:

JEFFRIES

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
520 WEST 49TH STREET
NEW YORK, NY 10019
(212) 875-2021

Name of Project Director:

SONIA MARTINEZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OVER 100 ONE PERSON GO BAGS, AN EMERGENCY BACK PACK FILLED WITH ITEMS TO AID AN ADULT FOR THREE DAYS DURING AN EMERGENCY.

Funded Amount:

$4,000

Requested By:

O’DONNELL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
AMERICAN RED CROSS IN GREATER NEW YORK
2082 WHITE PLAINS ROAD
BRONX, NY 10462
(718) 823-1418

ENRIQUE VEGA

FUNDS WILL BE USED TO RECRUIT, TRAIN, TRANSPORT AND SUPPORT YOUTH VOLUNTEERS IN EMERGENCY PREPAREDNESS, SAFETY AND DISASTER SERVICES, AND COMMUNITY OUTREACH IN THE BRONX COMMUNITY.

$5,000

BENJAMIN

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
150 AMSTERDAM AVENUE
NEW YORK, NY  10023
(212) 875-2106

Name of Project Director:

JOAN FOLEY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE "SCRUBBY BEAR" PROGRAM THAT TEACHES CHILDREN ABOUT GOOD HYGIENE IN THE FOLLOWING SCHOOLS: BLESSED SACRAMENT AND ST. JOAN OF ARC (BOTH IN JACKSON HEIGHTS) AND ST. SEBASTIANS IN WOODSIDE. THE PROGRAM IS OPEN TO ALL SCHOOL AGE CHILDREN, ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
AMERICAN RED CROSS IN GREATER NEW YORK
2082 WHITE PLAINS ROAD
BRONX, NY  10462
(718) 823-1418

ENRIQUE VEGA

FUNDS WILL BE USED FOR A YOUTH GROUP AND WOULD PROVIDE TRAINING, IN-STATE TRANSPORTATION AND MEALS FOR YOUTH VOLUNTEERS AS THEY ASSIST THE OFFICE AND THE BRONX COMMUNITY.

$1,000

DIAZ-L

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
520 WEST 49TH STREET
NEW YORK, NY 10019
(212) 875-2021

Name of Project Director:

SONIA MARTINEZ

Purpose of Project:

FUNDS WILL BE USED FOR EMERGENCY SUPPLY BAGS CALLED GO BAGS.

Funded Amount:

$2,500

Requested By:

BING

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
520 WEST 49TH STREET
NEW YORK, NY  10019
(718) 558-0053

Name of Project Director:

JOAN A. FOLEY

Purpose of Project:

FUNDS WILL BE USED TO PRINT EMERGENCY PREPAREDNESS BROCHURES FOR DISTRIBUTION IN QUEENS.

Funded Amount:

$2,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
520 WEST 49TH STREET
NEW YORK, NY 10019
(718) 558-0053

Name of Project Director:

JOAN FOLEY

Purpose of Project:

FUNDS WILL BE USED TO ORCHESTRATE AND PROVIDE MATERIALS FOR VOLUNTEER ACTIVITIES.

Funded Amount:

$2,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
2082 WHITE PLAINS ROAD
BRONX, NY  10462
(718) 823-1418

Name of Project Director:

ENRIQUE VEGA

Purpose of Project:

FUNDS WILL BE USED TO HELP PURCHASE SUPPLIES FOR DISASTER AWARENESS CLASSES.

Funded Amount:

$3,000

Requested By:

BENEDETTO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
100 PINEAPPLE WALK
BROOKLYN, NY  11201
(718) 330-9200

Name of Project Director:

JONATHAN GABRIEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE DISASTER TRAINING AND READINESS TO BROOKLYN'S MOST VULNERABLE POPULATION.

Funded Amount:

$3,000

Requested By:

LENTOL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
520 WEST 49TH STREET
NEW YORK, NY  10019
(212) 787-1000

Name of Project Director:

JOAN FOLEY

Purpose of Project:

FUNDS WILL BE USED BY THE QUEENS AREA OFFICE OF THE AMERICAN RED CROSS TO IMPROVE TECHNOLOGY FOR DISASTER SERVICE RESPONDERS AND ENHANCE CLIENT ASSISTANCE SERVICES AND FOR VOLUNTEER SUPPLIES.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
520 WEST 49TH STREET
NEW YORK, NY 10019
(212) 875-2021

Name of Project Director:

SONIA MARTINEZ

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE SERVICES AND ASSISTANCE PROVIDED DAILY BY THE EMERGENCY AND PREPAREDNESS OFFICE OF THE AMERICAN RED CROSS IN GREATER NEW YORK AT 520 W. 49TH STREET.

Funded Amount:

$4,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
100 PINEAPPLE WALK
BROOKLYN, NY  11201
(718) 330-9200

Name of Project Director:

JONATHAN GABRIEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BASIC AID TRAINING TO CHILDREN AND TO PROVIDE EMERGENCY PREPAREDNESS FOR SENIORS.

Funded Amount:

$4,000

Requested By:

CAMARA

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
100 PINEAPPLE WALK
BROOKLYN, NY 11201
(718) 330-9200

Name of Project Director:

JONATHAN GABRIEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMMUNITY DISASTER EDUCATION AND TRAINING TO ADULTS, CHILDREN AND SENIORS IN THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
520 W. 49TH STREET
NEW YORK, NY 10019
(212) 787-1000

Name of Project Director:

JOAN FOLEY

Purpose of Project:

FUNDS WILL BE USED FOR VOLUNTEER SUPPLIES INCLUDING SHIRTS, HATS, AND VESTS THAT AID IN IDENTIFYING RED CROSS PERSONNEL RESPONDING TO DISASTERS OR ATTENDING COMMUNITY EVENTS. FUNDS WILL ALSO BE USED TO PRINT EMERGENCY PREPAREDNESS BROCHURES FOR DISTRIBUTION.

Funded Amount:

$2,500

Requested By:

GIANARIS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
138-02 QUEENS BOULEVARD
BRIARWOOD, NY 11435
(718) 558-0053

Name of Project Director:

JOAN A. FOLEY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE KOREAN AND CHINESE TRANSLATION OF 5,000 EMERGENCY PREPAREDNESS BROCHURES FOR DISTRIBUTION IN FLUSHING.

Funded Amount:

$3,000

Requested By:

YOUNG

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS IN GREATER NEW YORK
100 PINEAPPLE WALK
BROOKLYN, NY  11201
(718) 330-9200

Name of Project Director:

JONATHAN GABRIEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EMERGENCY PREPAREDNESS, WATER SAFETY AND BASIC AID TRAINING PROGRAMS TO CHILDREN AND SENIORS, AND TO PURCHASE MATERIALS AND SUPPLIES FOR THESE PROGRAMS.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS -MOHAWK VALLEY CHAPTER
235 NORTH PROSPECT STREET
HERKIMER, NY 13350
(315) 866-2890

Name of Project Director:

ANDRIA DELISLE-HEATH

Purpose of Project:

FUNDS WILL BE USED TOWARDS COSTS ASSOCIATED WITH DISASTER PREPAREDNESS TRAINING FOR APPROXIMATELY 30 RED CROSS VOLUNTEERS FOR HERKIMER COUNTY

Funded Amount:

$9,000

Requested By:

BUTLER-M

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS OF GREATER NEW YORK
BUILDING 2104, WEST POINT HIGHWAY
WEST POINT, NY 10996
(845) 938-4100

Name of Project Director:

MICHELLE STROM

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW COMPUTERS AND TECHNOLOGICAL UPGRADES

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS WYOMING COUNTY CHAPTER
34 NORTH MAIN STREET
WARSAW, NY 14469
(585) 786-0540

Name of Project Director:

ERNEST MORRIS

Purpose of Project:

FUNDS WILL BE USED FOR NEW COMPUTER EQUIPMENT

Funded Amount:

$4,000

Requested By:

ERRIGO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN RED CROSS, ROME AREA CHAPTER
303 WEST LIBERTY STREET
ROME, NY  13440
(315) 336-0030

Name of Project Director:

CAROLE B. GLINSKI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A TRAILER DESIGNED TO RESPOND TO DISASTERS AND EMERGENCIES, AND TO PROVIDE SUPPLIES AND NEEDED EQUIPMENT, INCLUDING FOOD, MEDICINE, CLOTHING, AND SHELTER FOR THE VICTIMS OF THESE SITUATIONS.

Funded Amount:

$5,000

Requested By:

DESTITO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN-ITALIAN CANCER FOUNDATION  
112 E. 71ST STREET, 2B  
NEW YORK, NY  10021  
(212) 628-9090

Name of Project Director:

MINDY CHRISTIENSEN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A FREE MOBIL MAMMOGRAPHY PROGRAM.

Funded Amount:

$2,500

Requested By:

JACOBS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMERICAN-ITALIAN CANCER FOUNDATION
112 EAST 71ST STREET
NEW YORK, NY 10021
(212) 628-9090

Name of Project Director:

JILL SANDLER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE MAMMOGRAPHIES TO UNINSURED AND UNDERINSURED WOMEN.

Funded Amount:

$1,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMETHYST WOMENS PROJECT, INC.
1907 MERMAID AVENUE
BROOKLYN, NY  11224
(718) 333-2067

Name of Project Director:

AIDA LEON

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE PEER EDUCATIONAL PROGRAM.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AMHERST TASK FORCE FOR HEALTHY COMMUNITY/HEALTHY YOUTH
4255 HARLEM ROAD
AMHERST, NY 14226
(716) 631-7215

Name of Project Director:

ANNE ROHRER

Purpose of Project:

FUNDS WILL BE USED FOR A UNDERAGE DRINKING CAMPAIGN

Funded Amount:

$2,500

Requested By:

HAYES

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ASSOCIATED MEDICAL SCHOOLS OF NEW YORK
10 ROCKEFELLER PLAZA – SUITE 1120
NEW YORK, NY  10020
(212) 218 – 4160

Name of Project Director:

JO WIEDERHORN

Purpose of Project:

FUNDS WILL BE USED BY A STATEWIDE CONSORTIUM OF MEDICAL SCHOOLS FOR A MENTORING PROGRAM ADMINISTERED BY THE UNIVERSITY AT BUFFALO AND DIRECTED AT MINORITY MEDICAL SCHOOL CANDIDATES.

Funded Amount:

$375,000

Requested By:


Name of Administering State Agency:

DEPARTMENT OF HEALTH
ASSOCIATION FOR METROAREA AUTISTIC CHILDREN, INC.
25 WEST 17 STREET
NEW YORK, NY  10011
(212) 645-5005

FREDERICA BLAUSTON

FUNDS WILL BE USED TO UPGRADE AND INSTALL EQUIPMENT FOR THE ADULT DAY SERVICES PROGRAM WHICH ENABLES AUTISTIC ADULTS TO BE INDEPENDENT.

$10,000

WRIGHT

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:
ASSOCIATION OF COMMUNITY ORGANIZATIONS FOR REFORM NOW
88 THIRD AVENUE, THIRD FLOOR
BROOKLYN, NY 11217
(718) 246–7900

Name of Project Director:
BERTHA LEWIS

Purpose of Project:
FUNDS WILL BE USED TO PROVIDE FREE TAX PREPARATION AND EITC APPLICATION ASSISTANCE TO UNDERSERVED COMMUNITIES.

Funded Amount:
$75,000

Requested By:

Name of Administering State Agency:
DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ASTORIA QUEENS SHARING AND CARING, INC.
30-60 CRESCENT STREET
ASTORIA, NY 11106
(718) 777-5766

Name of Project Director:

ANNA KRIL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SERVICES INCLUDING A TELEPHONE HELPLINE, EDUCATIONAL FORUMS, WELLNESS FORUMS, ADVOCACY EFFORTS, GROUP MEETINGS, SUBSIDIZED MAMMOGRAPHY SCREENING AND BENEFIT COUNSELING FOR WOMEN WITH BREAST CANCER.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ASTORIA QUEENS SHARING AND CARING, INC.
30-60 CRESCENT STREET
ASTORIA, NY 11102
(718) 777-5766

Name of Project Director:

ANNA KRILL

Purpose of Project:

FUNDS WILL BE USED FOR SUPPORT SERVICES INCLUDING A TELEPHONE HELP LINE, EDUCATIONAL FORUMS, WELLNESS FORUMS, ADVOCACY EFFORTS, SUPPORT GROUP MEETINGS, SUBSIDIZED MAMMOGRAPHY SCREENING, AND BENEFIT COUNSELING FOR WOMEN WITH BREAST CANCER.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

AUBURN MEMORIAL HOSPITAL
17 LANSING STREET
AUBURN, NY 13021
(315) 255-7239

Name of Project Director:

C. MARK GREGSON

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF AN OPERATING TABLE

Funded Amount:

$10,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BABYLON BREAST CANCER COALITION, INC.
15 SOUTH CARLL AVENUE
BABYLON, NY 11702
(631) 893-4110

Name of Project Director:

DONNA JURASITS

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE LEND A HELPING HAND PROGRAM, WHICH PROVIDES SERVICES TO WOMEN WITH BREAST CANCER AND THEIR FAMILIES.

Funded Amount:

$10,000

Requested By:

SWEENEY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BATEY RELIEF ALLIANCE, INC. (BRA)
1220 OCEAN AVENUE, APT. 1C, P.O. BOX 300565
BROOKLYN, NY 11230
(917) 627-5026

Name of Project Director:

ULRICK GAILLARD

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AIDS AWARENESS AND EDUCATIONAL PROGRAMS IN THE HAITIAN COMMUNITY IN BROOKLYN.

Funded Amount:

$10,000

Requested By:

JACOBS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BAY COMMUNITY VOLUNTEER AMBULANCE CORPS, INC.
P.O. BOX 610314
BAYSIDE, NY 11361
(718) 352-2080

Name of Project Director:

LOUIS DEUTSH

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET EXPENSES OF AMBULANCE CORPS.

Funded Amount:

$2,000

Requested By:

CARROZZA

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BAYSIDE COMMUNITY AMBULANCE CORPS, INC.
214-23 42 AVENUE
BAYSIDE, NY 11361
(718) 631-3333

Name of Project Director:

DAVID BLECKER

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF NEW GENERAL EMERGENCY EQUIPMENT.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BEDFORD STUYVESANT FAMILY HEALTH CENTER, INC.
1413 FULTON STREET
BROOKLYN, NY 11216
(718) 636-4500

Name of Project Director:

ULYSSES KILGORE, III

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS WHICH FOCUS ON PREVENTION AND NUTRITION, AS WELL AS, EXERCISE FOR ADOLESCENTS.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BREAST CANCER COALITION OF ROCHESTER
840 UNIVERSITY AVENUE
ROCHESTER, NY 14607
(585) 473-8177

Name of Project Director:

HOLLY ANDERSON

Purpose of Project:

FUNDS WILL BE USED TO CREATE A SAFE, WARM AND COMFORTING SPACE FOR WOMEN AND FAMILIES IMPACTED BY BREAST CANCER

Funded Amount:

$5,000

Requested By:

ERRIGO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BREAST CANCER HELP, INC.
400 MONTAUK HIGHWAY
WEST ISLIP, NY 11795
(631) 661-7223

Name of Project Director:

LORRAINE PACE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A DIGITAL MAMMOGRAPHY TO THE COMMUNITY THAT WILL BE BASED INSIDE NSLIJ HOSPITAL (SOUTHSIDE).

Funded Amount:

$5,000

Requested By:

RAMOS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BREAST CANCER OPTIONS, INC.
101 HURLEY AVENUE, SUITE 10
KINGSTON, NY 12401
(845) 339-4673

Name of Project Director:

HOPE NEMIROFF

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES TO COMMUNITIES THAT INCLUDE COMPANION/ADVOCATE PROGRAM (SUPPLYING A TRAINED SURVIVOR TO GO ON MEDICAL VISITS WITH NEWLY DIAGNOSED PATIENTS), BREAST CANCER EDUCATIONAL FORUMS, HEALTHY LIFESTYLE SERIES, PEER FACILITATED SUPPORT GROUPS, WEEKLY E-MAIL NEWS UPDATES, EDUCATIONAL WEBSITE.

Funded Amount:

$2,500

Requested By:

GORDON-T

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BRENTWOOD LEGION AMBULANCE SERVICE, INC.
P.O. BOX 506, 29 THIRD AVENUE
BRENTWOOD, NY 11717
(631) 273-8787

Name of Project Director:

GEORGE HOUCK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE ADVANCED LIFE SUPPORT EQUIPMENT. THIS EQUIPMENT WILL BE USED TO PROVIDE THE COMMUNITY WITH QUALITY AND NEEDED LIFE SAVING EQUIPMENT.

Funded Amount:

$5,000

Requested By:

RAMOS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BRIGHTON VOLUNTEER AMBULANCE, INC.
1551 SOUTH WINTON ROAD
ROCHESTER, NY  14618
(585) 271-2718

Name of Project Director:

MICHAEL POLLACK

Purpose of Project:

FUNDS WILL BE USED TO HELP DESIGN THE EXPANSION OF THE BASE HEADQUARTERS.

Funded Amount:

$10,000

Requested By:

MORELLE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKHAVEN MEMORIAL HOSPITAL MEDICAL CENTER
101 HOSPITAL ROAD
PATCHOGUE, NY  11772
(631) 654-7177

Name of Project Director:

PATRICK BAREY

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH BROOKHAVEN WOMENS IMAGING SERVICES.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BROOKHAVEN WHEELCHAIR ATHLETES
130 FOUNTAIN AVENUE
SELDEN, NY 11784
(631) 767-8116

Name of Project Director:

JOHN CORTEZ

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT, UNIFORMS, AND PROMOTIONAL EQUIPMENT.

Funded Amount:

$1,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BROOKLYN RED CROSS
100 PINAPPLE WALK
BROOKLYN, NY  11201
(718) 330-9200

Name of Project Director:

JONATHAN GABRIEL

Purpose of Project:

FUNDS WILL BE USED FOR VOLUNTEER SUPPLIES THAT AID IN IDENTIFYING RED CROSS PERSONNEL RESPONDING TO DISASTERS FOR COMMUNITY EVENTS.

Funded Amount:

$3,000

Requested By:

TOWNS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

BROOKLYN STUYVESANT VOLUNTEER AMBULANCE CORP.
727 GREENE AVENUE
BROOKLYN, NY 11221
(718) 453-4617

Name of Project Director:

TASMIN WOLF

Purpose of Project:

FUNDS WILL BE USED TO TRAIN INDIVIDUALS ON HOW TO SAVE A LIFE THROUGH CPR AND BASIC FIRST AID. FUNDS WILL ALSO ASSIST WITH TEXTBOOKS, EQUIPMENT AND UNIFORMS.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CALLEN–LORDE COMMUNITY HEALTH CENTER
356 WEST 18TH STREET
NEW YORK, NY 10011
(212) 271 – 7276

Name of Project Director:

JAY LAUDATO

Purpose of Project:

FUNDING WILL BE USED TO SUPPORT THE DELIVERY OF HEALTH CARE SERVICES BY CALLEN–LORDE COMMUNITY HEALTH CENTERS, INCLUDING MENTAL HEALTH SERVICES.

Funded Amount:

$85,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CANCER ACTION, INC.
255 ALEXANDER STREET
ROCHESTER, NY  14607
(585) 423-9700

Name of Project Director:

VERONICA LEE

Purpose of Project:

FUNDS WILL BE USED TO CREATE A SUPPORT NETWORK FOR WOMEN OF COLOR WHO ARE SUFFERING FROM CANCER.

Funded Amount:

$5,000

Requested By:

GANTT

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CANTON - POTSDAM HOSPITAL
50 LEROY STREET
POTSDAM, NY 13676
(315) 261-5935

Name of Project Director:

JACKIE DOW

Purpose of Project:

FUNDS WILL BE USED TO MAKE PROVISIONS FOR SCREENING AND BREAST HEALTH EDUCATION IN THE NORTH COUNTRY.

Funded Amount:

$10,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CAPITAL REGION ACTION AGAINST BREAST CANCER
43 OAKWOOD DRIVE WEST
ALBANY, NY 12205
(518) 459-5086

Name of Project Director:

JOAN SHEEHAN

Purpose of Project:

FUNDS WILL BE USED TO UPDATE POWERPOINT PROGRAMS AND EXPAND THEM INTO SCHENECTADY AND SARATOGA COUNTIES. MAKE AVAILABLE A USER-FRIENDLY WORKBOOK THAT HELPS PATIENTS ORGANIZE THEIR MEDICAL HISTORY AND REPORTS

Funded Amount:

$6,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CAPITAL REGION ACTION AGAINST BREAST CANCER
125 WOLF ROAD
ALBANY, NY 12205
(518) 435-1055

Name of Project Director:

JOAN SHEEHAN

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATION AND COUNSELING SERVICES FOR CLIENTS OF THE CAPITAL REGION ACTION AGAINST BREAST CANCER PROGRAM.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CARIBBEAN WOMEN’S HEALTH ASSOCIATION, INC.
100 PARKSIDE AVENUE
BROOKLYN, NY  11226
(718) 826-2942  15

Name of Project Director:

DR. MARILYN JOHN

Purpose of Project:

FUNDS WILL BE USED FOR A HIV OUTREACH PROGRAM.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CATHOLIC CHARITIES OF DIOCESE OF ALBANY
P.O. BOX 444
TROY, NY  12181
(518) 271-1418

Name of Project Director:

SISTER MARIA COKELY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE-OF-CHARGE IN-STATE TRANSPORT SERVICE FOR PERSONS RECEIVING CANCER TREATMENT, DIALYSIS, AMBULATORY SURGERY AND HIV/AIDS TREATMENT. THE FUNDING WILL BE USED FOR OPERATIONAL EXPENSES.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CATHOLIC CHARITIES OF DIOCESE OF ALBANY
100 SLINGERLAND STREET
ALBANY, NY  12202
(518) 449-3581

Name of Project Director:

ANGELA KELLER

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE OPERATIONS OF PROGRAMS TO ASSIST THOSE AFFECTED WITH AIDS IN ALBANY COUNTY. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CATSKILL AREA HOSPICE
1 BIRCHWOOD DRIVE
ONEONTA, NY 13820
(607) 432-6773

Name of Project Director:

HUÉMAC GARCIA

Purpose of Project:

FUNDS WILL BE USED TOWARDS COSTS TO REPLACE LAPTOPS FOR HOSPICE NURSES

Funded Amount:

$10,000

Requested By:

BUTLER-M

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CENTER FOR DISABILITY SERVICES, INC.
314 SOUTH MANNING BLVD.
ALBANY, NY 12208
(518) 437 – 5700

Name of Project Director:

KRISTIN M. PROUD

Purpose of Project:

FUNDS WILL BE USED FOR THE SUPPORT OF THE WOMEN’S SPECIAL HEALTH NETWORK OF THE CENTER HEALTH CARE CLINIC, INCLUDING BUT NOT LIMITED TO OPERATIONAL EXPENSES AND EQUIPMENT.

Funded Amount:

$150,000

Requested By:

CANESTRARI, MCENENY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
CLARA BARTON CHAPTER NO. 1 OF THE AMERICAN RED CROSS
57 ELIZABETH STREET
DANSVILLE, NY 14437
(585) 335-3500

SANDY SHAW

FUNDS WILL BE USED FOR ROOM RENOVATIONS

$4,000

BURLING

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

CLUBHOUSE OF SUFFOLK, INC.
P.O. BOX 373 - 939 JOHNSON AVENUE
RONKONKOMA, NY 11779
(631) 471-7242 1304

Name of Project Director:

MICHAEL STOLTZ

Purpose of Project:

FUNDS WILL BE USED TO REDUCE NON-PRODUCTIVE SERVICE-TIME AND PROVIDE MORE EXTENSIVE HEALTH CARE.

Funded Amount:

$10,000

Requested By:

ALESSI

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

COMMUNITY AMBULANCE COMPANY, INC.
P.O. BOX 450
SAYVILLE, NY 11782
(631) 567-7734

Name of Project Director:

SHAWN O'SULLIVAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE POSITIVE AIRWAY PRESSURE (CPAP) UNITS.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

COMMUNITY HEALTH PROJECT, INC.
356 WEST 18TH STREET
NEW YORK, NY 10011
(212) 271-7276

Name of Project Director:

JAY LAUDATO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE AND RAPID HIV TESTING, AS WELL AS, COUNSELING SERVICES TO UNINSURED PATIENTS.

Funded Amount:

$7,500

Requested By:

GLICK

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

COMMUNITY HEALTHCARE NETWORK, INC.
79 MADISON AVENUE, 6TH FL.
NEW YORK, NY 10016
(212) 545-2403

Name of Project Director:

CAROLYN ARNOLD

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE HIV TESTING SUPPLIES FOR USE IN MOBILE TESTING UNITS AND CLINICS. FUNDS WILL ALSO BE USED TO FUND OUTREACH MATERIALS AND EDUCATIONAL ACTIVITIES ON THE LOWER EAST SIDE AND OTHER TARGETED NEIGHBORHOODS.

Funded Amount:

$9,000

Requested By:

GLICK

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

COMMUNITY HEALTHCARE NETWORK, INC.
79 MADISON AVENUE
NEW YORK, NY 10016
(212) 366-4500

Name of Project Director:

CATHERINE ABATE

Purpose of Project:

FUNDS WILL BE USED FOR HIV/AIDS RESEARCH.

Funded Amount:

$5,000

Requested By:

GORDON-D

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

DELAWARE VALLEY HOSPITAL
1 TITUS PLACE
WALTON, NY 13856
(607) 865-2100

Name of Project Director:

DAVID POLGE

Purpose of Project:

FUNDS WILL BE USED FOR A BOILER FOR AMBULATORY SURGERY/SERVICES DEPARTMENT

Funded Amount:

$10,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

DOR YESHORIM, INC.
429 WYTIE AVENUE
BROOKLYN, NY 11211
(718) 384 – 2332

Name of Project Director:

RABBI JOSEPH EKSTEIN, EXECUTIVE DIRECTOR

Purpose of Project:

FUNDS WILL BE USED FOR THE SUPPORT OF DOR YESHORIM’S GENETIC SCREENING PROGRAM FOR TAY – SACHS AND CYSTIC FIBROSIS.

Funded Amount:

$25,000

Requested By:

BRENNAN, COLTON, GLICK, GOTTFRIED, LENTOL, MAYERSON, PHEFFER, WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

DOWN SYNDROME RESOURCE CENTER, INC.
1 MARCUS BOULEVARD, SUITE 105
ALBANY, NY 12205
(518) 391-2581

Name of Project Director:

DR. HARM VELVIS

Purpose of Project:

FUNDS WILL BE USED FOR A BICYCLE TRAINING CAMP FOR CHILDREN WITH DOWN SYNDROME.

Funded Amount:

$4,300

Requested By:

REILLY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

EAST NEW YORK DIAGNOSTIC & TREATMENT CENTER
2094 PITKIN AVENUE
BROOKLYN, NY  11207
(718) 240-0553

Name of Project Director:

CLEOPATRA BROWN

Purpose of Project:

FUNDS WILL BE USED FOR IN-STATE TRANSPORTATION FOR PATIENTS TO FAMILY DAY CELEBRATION.

Funded Amount:

$2,000

Requested By:

GORDON-D

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

EL REGRESSO FOUNDATION, INC.
141 SOUTH THIRD STREET
BROOKLYN, NY 11211
(718) 384-6400

Name of Project Director:

TOM NAPOLITANO

Purpose of Project:

FUNDS WILL BE USED FOR OFFICE FURNISHINGS AND EQUIPMENT AT THE NEW AMBULATORY PROGRAM LOCATED AT 728 DRIGGS AVENUE IN BROOKLYN.

Funded Amount:

$9,000

Requested By:

LOPEZ-V

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

EMPIRE JUSTICE CENTER
119 WASHINGTON AVENUE
ALBANY, NY 12210
(518) 462−6831

Name of Project Director:

ANNE ERICKSON, PRESIDENT/CEO

Purpose of Project:

FUNDS WILL BE USED FOR THE PROVISION OF LEGAL REPRESENTATION TO PERSONS WITH HIV ON ISSUES OF HIGH IMPORTANCE TO THE COMMUNITY OF PERSONS WITH HIV INCLUDING, BUT NOT LIMITED TO, CLASS ACTION LITIGATION, LEGISLATIVE ADVOCACY, LAW TRAINING, AND DIRECT LEGAL ASSISTANCE.

Funded Amount:

$89,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

FAMILY RESIDENCES AND ESSENTIAL ENTERPRISES, INC.
191 SWEET HOLLOW ROAD
OLD BETHPAGE, NY 11804
(516) 870-1600

Name of Project Director:

PATRICE RADOWITZ

Purpose of Project:

FUNDS WILL BE USED FOR A HEALTH CLINIC DESIGNED TO MEET THE NEEDS OF SUFFOLK COUNTY’S HARD TO SERVE AND UNINSURED POPULATION.

Funded Amount:

$2,500

Requested By:

RAMOS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

FEEL BETTER KIDS, INC.
P.O. BOX 456
ISLAND PARK, NY 11558
(866) 257-5437

Name of Project Director:

CHRIS GIGANTE

Purpose of Project:

FUNDS WILL BE USED FOR OPERATING EXPENSES TO ASSIST TERMINALLY ILL AND DISABLED CHILDREN COVER MEDICAL AND LIVING EXPENSES.

Funded Amount:

$1,500

Requested By:

SWEENEY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

FLATLANDS VOLUNTEER AMBULANCE AND FIRST AID CORPS, INC.
4623 AVENUE N
BROOKLYN, NY  11234
(718) 338-0434

Name of Project Director:

SCOTT GOODMAN

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE OUTDATED COMMUNICATIONS EQUIPMENT, REPLACE DAMAGED AND WORN OUT RADIO COMPONENTS.

Funded Amount:

$3,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FLATLANDS VOLUNTEER AMBULANCE AND FIRST AID CORPS, INC.
4623 AVENUE N
BROOKLYN, NY  11234
(718) 338-0434

Name of Project Director:

JOE MARCELLINO

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF MEDICAL SUPPLIES.

Funded Amount:

$5,000

Requested By:

MAISEL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

FORT HAMILTON CLINIC
8710 5TH AVENUE
BROOKLYN, NY 11209
(718) 667-2300

Name of Project Director:

ANN MARIE BOVE

Purpose of Project:

FUNDS WILL BE USED FOR THE LCD TV/DVD PROJECT, THE CONSUMER WAITING ROOM, AND THE HEALTH AND WELLNESS VIDEO REVIEWS.

Funded Amount:

$1,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

FOUNDERS PAVILLION SKILLED NURSING FACILITY
205 EAST FIRST STREET
CORNING, NY 14830
(607) 654-2400

Name of Project Director:

GAIL MURRAY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A HANDICAPPED VAN TO AUGMENT ITS FLEET IN ORDER TO SERVE MORE CLIENTS NEEDING TRANSPORTATION TO DOCTOR’S APPOINTMENT, MEDICAL TREATMENTS, RECREATIONAL ACTIVITIES AND OUTINGS

Funded Amount:

$33,108

Requested By:

BACALLES

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

FRIENDS OF KAREN, INC.
21 PERRY STREET
PORT JEFFERSON, NY  11777
(631) 473-1768

Name of Project Director:

NANCY MARIANO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMPREHENSIVE FAMILY MANAGEMENT TO CHILDREN WITH TERMINAL AND LIFE-THREATENING ILLNESSES AND THEIR FAMILIES INCLUDING TRANSPORTATION TO MEDICAL TREATMENT, SPECIAL FOOD AND HOME CARE NEEDS, CHILD CARE FOR SIBLINGS AND MEDICAL CARE.

Funded Amount:

$3,500

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

FRIENDS OF KAREN, INC.
21 PERRY STREET
PORT JEFFERSON, NY 11777
(631) 473-1768

Name of Project Director:

NANCY MARIANO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FINANCIAL, EMOTIONAL, AND ADVOCACY SUPPORT TO FAMILIES AND THEIR CHILDREN WITH LIFE THREATENING ILLNESSES.

Funded Amount:

$1,000

Requested By:

RAMOS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

FRIENDS OF KAREN, INC.
21 PERRY STREET
PORT JEFFERSON, NY 11777
(631) 473-1768

Name of Project Director:

NANCY MARIANO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMPREHENSIVE FAMILY CASE MANAGEMENT TO CHILDREN WITH TERMINAL AND LIFE-THREATENING ILLNESSES AND THEIR FAMILIES, INCLUDING TRANSPORTATION TO MEDICAL TREATMENT, SPECIAL FOOD AND HOME CARE NEEDS, CHILD CARE FOR SIBLINGS AND MEDICAL CARE.

Funded Amount:

$5,000

Requested By:

ALESSI

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

FRIENDS QUARTERS HOUSING DEVELOPMENT FUND CORPORATION
130 EAST 25TH STREET
NEW YORK, NY  10010
(212) 995-5000

Name of Project Director:

MICHELLE PORTLOCK

Purpose of Project:

FUNDS WILL BE USED TO TRAIN RESIDENTES TO LEAD HIV/AIDS EDUCATION AND PREVENTION WORKSHOPS IN LOCAL HIGH SCHOOLS. LAST YEAR OVER 6,500 STUDENTS PARTICIPATED IN THE PROGRAM.

Funded Amount:

$3,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GAY MEN'S HEALTH CRISIS, INC.
119 WEST 24TH STREET
NEW YORK, NY  10011
(212) 367-1227

Name of Project Director:

ROBERT BANK

Purpose of Project:

GMHC CHILD LIFE PROGRAM PROVIDES SUPPORTIVE SERVICES TO CHILDREN AND FAMILIES, INCLUDING CHILDSITTING, SUPPORT GROUPS AND MENTAL HEALTH SERVICES, FIELD TRIPS, SPECIAL EVENTS, PARENT SUPPORT SERVICES AND A TEEN PROGRAM. THESE SERVICES AIM TO REDUCE STRESS ASSOCIATED WITH THE MEDICAL, FINANCIAL, EMOTIONAL AND SOCIAL CHALLENGES ASSOCIATED WITH HIV AND AIDS AND PROVIDE OPPORTUNITIES FOR SOCIALIZING.

Funded Amount:

$44,000

Requested By:

GLICK, GOTTFRIED, SILVER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GAY MEN'S HEALTH CRISIS, INC.
119 WEST 24TH STREET
NEW YORK, NY  10011
(212) 367-1242

Name of Project Director:

ROBERT BANK

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN AND STRENGTHEN GMHC'S WOMEN AND FAMILY SERVICES INCLUDING COUNSELING, CRISIS INTERVENTION AND REFERRALS.

Funded Amount:

$6,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GAY MEN’S HEALTH CRISIS
119 WEST 24TH STREET
NEW YORK, NEW YORK 10011
(212) 367 – 1134

Name of Project Director:

EVELYN TOSSAS TUCKER, ESQ.

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE IMMIGRANTS WITH HIV PROJECT, PROVIDE A WIDE ARRAY OF SERVICES TO IMMIGRANTS LIVING WITH HIV IN NYC, PROVIDE A SAFE HAVEN FOR UNDOCUMENTED IMMIGRANTS AND EDUCATE THEM ABOUT LEGALIZATION & HIV AND LEGAL SUPPORT SERVICES.

Funded Amount:

$89,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GERWIN JEWISH GERIATRIC FOUNDATION
68 HAUPPAUGE ROAD
COMMACK, NY 11725
(631) 715-2565

Name of Project Director:

MARC SUNTUP

Purpose of Project:

FUNDS WILL BE USED FOR RESIDENT ENHANCEMENT PROGRAM

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GLEN COVE BOYS AND GIRLS CLUB AT LINCOLN HOUSE, INC.
113 GLEN COVE AVENUE
GLEN COVE, NY  11542
(516) 671-8030

Name of Project Director:

LOUIS SANFORD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AMERICAN RED CROSS LIFEGUARD TRAINING FOR HIGH SCHOOL STUDENTS IN NASSAU COUNTY.

Funded Amount:

$2,000

Requested By:

LAVINE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GLEN COVE EMS
GLEN COVE CITY HALL, P.O. BOX 391
GLEN COVE, NY 11542
(516) 676-0331

Name of Project Director:

ROBERT GOBBO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND MAINTAIN ADVANCED RADIO COMMUNICATIONS.

Funded Amount:

$5,000

Requested By:

LAVINE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GLEN OAKS VOLUNTEER AMBULANCE CORPS.
79-03 257TH STREET
FLORAL PARK, NY 11004
(718) 347-1637

Name of Project Director:

TED RABINOWITZ

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN REBUILDING AND MAINTAINING THE AMBULANCE CORPS FACILITY AND EQUIPMENT.

Funded Amount:

$2,000

Requested By:

WEPRIN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GLEN OAKS VOLUNTEER AMBULANCE CORPS.
79-03 257 STREET
FLORAL PARK, NY  11004
(516) 354-4013

Name of Project Director:

TED RABINOWITZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CPR TRAINING TO MEMBERS OF THE AMBULANCE CORPS.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GLENDALE VOLUNTEER AMBULANCE CORPS.
P.O. BOX 863991
RIDGEWOOD, NY 11386
(718) 386-9651

Name of Project Director:

RYAN GUNNING

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CONTINUED OPERATING COSTS TO PURCHASE SAFETY EQUIPMENT AND MAINTAIN THEIR AMBULANCES.

Funded Amount:

$6,000

Requested By:

SEMINERIO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GLOBAL HEALTHY LIVING FOUNDATION, INC.
515 NORTH MIDLAND AVENUE
UPPER NYACK, NY 10960
(845) 348-0400

Name of Project Director:

SETH GINSBERG

Purpose of Project:

FUNDS WILL BE USED FOR THE DEVELOPMENT, RECRUITMENT OF PATIENTS AND PROGRAM CONTENT CREATION FOR A SEMINAR ON "GROWING OLDER AND STAYING HEALTHY."

Funded Amount:

$7,500

Requested By:

BING

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GOOD SAMARITAN HOSPITAL
1000 MONTAUK HIGHWAY
WEST ISLIP, NY 11795
(631) 376-4007

Name of Project Director:

RICHARD MURPHY

Purpose of Project:

FUNDS WILL BE USED FOR UPDATES TO THE HOSPITAL’S SPECIAL CARE UNIT (sc)

Funded Amount:

$10,000

Requested By:

BOYLE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GOUVERNEUR NURSING FACILITY/DIAGNOSTIC & TREATMENT CENTER
227 MADISON STREET
NEW YORK, NY 10002
(212) 238-7011

Name of Project Director:

EUGENE YEE

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE AND MARKET THE HEALTH SERVICES AVAILABLE AT GOUVERNEUR THROUGH INFORMATIONAL FORUMS, STREET FAIRS, ETC., WITH THE GOAL OF PROVIDING THE COMMUNITY WITH A BETTER UNDERSTANDING OF HEALTH SERVICES AVAILABLE TO THEM.

Funded Amount:

$86,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

GREATER LONG ISLAND RUNNING CLUB, INC.
101-24 DUPONT STREET
PLAINVIEW, NY 11803
(516) 349-7646

Name of Project Director:

MIKE POLANSKY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TRANSPORTATION AND HOUSING FOR WHEELCHAIR ATHLETES.

Funded Amount:

$3,500

Requested By:

LAVINE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HAAZINU FOR HEARING IMPAIRED CHILDREN
1747 EAST 24TH STREET
BROOKLYN, NY 11229
(718) 339-4139

Name of Project Director:

MOSHE YAROSLAWITZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPORT FOR FAMILIES WITH HEARING IMPAIRED CHILDREN, INCLUDING OUTREACH, REFERRAL AND SERVICES SUCH AS TRANSPORTATION.

Funded Amount:

$46,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HANDICAPPED ADULTS ASSOCIATION, INC.
177 DREISER LOOP, ROOM 13
BRONX, NY 10475
(718) 320-2069

Name of Project Director:

JACK AMARO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PEOPLE WITH DISABILITIES WITH ARTS AND CRAFT SESSIONS, SOCIAL EVENTS AND HANDICAPPED ACCESSIBLE TRANSPORTATION WITHIN NEW YORK STATE.

Funded Amount:

$2,000

Requested By:

BENEDETTO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HEALTH AND SOCIAL SERVICES SEXUALITY RELATED PROGRAMS
CORNING TOWER
ALBANY, NY 12237
(518) 474-2011

Name of Project Director:

EARL SEGUINE

Purpose of Project:

FUNDS ARE FOR SERVICES AND EXPENSES OF PROGRAMS PROVIDING
SEXUALITY RELATED SERVICES.

Funded Amount:

$1,373,300

Requested By:

CLARK, DIAZ -L, DINOWITZ, FIELDS, GLICK, GOTTFRID, HEVESI, HOYT,
JAFFEE, JOHN, LAFAYETTE, LAVINE, LOPEZ -V, MAGNARELLI, MAISEL, MCENEMY,
MILLMAN, O’DONNELL, PAULIN, PEOPLES, PERALTA, PERRY, PHEFFER,
SWEENEY, SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HEALTH AND SOCIAL SERVICES SEXUALITY RELATED PROGRAMS/ DOMESTIC VIOLENCE NETWORK
CORNING TOWER, EMPIRE STATE PLAZA
ALBANY, NY  12237
(518) 474-2011

Name of Project Director:

EARL SEGUINE

Purpose of Project:

FUNDS WILL BE USED TO ESTABLISH HEALTH AND SOCIAL SERVICES SEXUALITY RELATED/DOMESTIC VIOLENCE PROGRAMS STATEWIDE AND PROVIDE TECHNICAL ASSISTANCE FOR PROGRAM STAFF.

Funded Amount:

$375,000

Requested By:

BRADLEY, BRENNAN, BRODSKY, CANESTRARI, CHRISTENSEN, GALEF, GLICK, HOYT, JOHN, LIFTON, MAGNARELLI, MCENENY, MILLMAN, MORELLE, O'DONNELL, PEOPLES, PRETLOW, ZEBROWSKI

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HEALTHFRIENDS, INC.
126 EAGLE STREET
UTICA, NY 13501
(315) 724-0988

Name of Project Director:

ROBERT J. KLOSTER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A WELLNESS CENTER FOR THE NEEDY
AND OFTEN UNDERSERVED POPULATION OF THE MOHAWK VALLEY,
INCLUDING THE PURCHASE OF MEDICATIONS TO ADDRESS THE CLIENTS'
HEALTH CARE NEEDS.

Funded Amount:

$2,500

Requested By:

DESTITO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HELEN HAYES HOSPITAL FOUNDATION, INC.
ROUTE 9W
W. HAVERSTRAW, NY 10993
(845) 786-4365

Name of Project Director:

EILEEN ANDREASSI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A VAN FOR THERAPY DEPARTMENTS.

Funded Amount:

$10,000

Requested By:

ZEBROWSKI

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HELEN KELLER SERVICES FOR THE BLIND
57 WILLOUGHBY STREET
BROOKLYN, NY  11201
(718) 522-2122

Name of Project Director:

JOHN P. LYNCH

Purpose of Project:

FUNDS WILL BE USED FOR PRESCHOOL, HEAD START, KINDERGARTEN SCREENINGS FOR DISORDERS SUCH AS AMBLYOPIA AND STRABISMUS IN SCHOOL DISTRICT 14 AND COMMUNITY BOARD ONE. REFERRALS TO OPHTHALMOLOGISTS IF PROBLEMS ARE DETECTED.

Funded Amount:

$6,000

Requested By:

LENTOL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HICKOK CENTER FOR BRAIN INJURY, INC.
114-118 SOUTH UNION STREET
ROCHESTER, NY 14607
(585) 271-8640

Name of Project Director:

GAYLE D. SAMOLIS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE THE NUSTEP CROSS TRAINER WHICH PROVIDES INDIVIDUALS WITH BRAIN INJURIES WITH A SAFE AND COMFORTABLE WORKOUT. FUNDS WILL ALSO BE USED TO PURCHASE THE VERSATRAINER, BY BOWFLEX, WHICH ALLOWS THEM TO TARGET SPECIFIC MUSCLE GROUPS IN A SAFE AND SYSTEMATIC WAY.

Funded Amount:

$5,000

Requested By:

KOON

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HOME CARE & HOSPICE
204 NORTH MAIN STREET
PERRY, NY 14530
(585) 237-0070

Name of Project Director:

CAROL L. MAHONEY

Purpose of Project:

FUNDS WILL BE USED FOR COMPUTER EQUIPMENT

Funded Amount:

$3,000

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HOME HEALTH CARE AND HOSPICE COMMUNITY CARE OF WESTERN NEW YORK
1225 WEST STATE STREET
OLEAN, NY 14760
(716) 372-2106

Name of Project Director:

CAROL L. MAHONEY

Purpose of Project:

FUNDS WILL BE USED TO ESTABLISH ELECTRONIC MEDICAL RECORD SYSTEM

Funded Amount:

$10,350

Requested By:

GIGLIO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HOMECARE & HOSPICE
1225 WEST STATE STREET
OLEAN, NY 14760
(716) 372-2106

Name of Project Director:

CAROL MAHONEY

Purpose of Project:

FUNDS WILL BE USED FOR THE IMPLEMENTATION OF ELECTRONIC MEDICAL RECORD SYSTEM

Funded Amount:

$2,500

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HOPE MINISTRY
1450 RIDGE ROAD
WEBSTER, NY 14580
(585) 265-6694

Name of Project Director:

JACKIE HARRISON

Purpose of Project:

FUNDS WILL BE USED TO ENSURE PEOPLE WOULD NOT HAVE TO GO WITHOUT PROPER MEDICAL CARE FOR THEMSELVES OR CHILDREN. FUNDS WILL ALSO BE USED FOR OPERATIONAL AND ADMINISTRATIVE EXPENSES. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$9,000

Requested By:

KOON

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HOSPICE FOUNDATION OF JEFFERSON COUNTY, INC.
425 WASHINGTON STREET
WATERTOWN, NY 13601
(315) 788-7323

Name of Project Director:

LINDA BARNIAK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMPUTER HARDWARE TO SUPPORT TECHNOLOGY UPGRADES AND OFFICE EQUIPMENT TO INCLUDE A COLOR PRINTER/COPIER.

Funded Amount:

$10,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HOSPICE OF ORANGE COUNTY
800 STONY BROOK COURT
NEWBURGH, NY 12550
(845) 561-5362

Name of Project Director:

KATHY WEBBER

Purpose of Project:

FUNDS WILL BE USED FOR STRUCTURAL REPAIRS TO OFFICE AND ROOF

Funded Amount:

$10,000

Requested By:

KIRWAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HP HOMEOWNERS ASSOCIATION, INC.
1820 HARDING PARK
BRONX, NY 10473
(718) 893-2974

Name of Project Director:

NELLY MEDINA

Purpose of Project:

FUNDS WILL BE USED FOR THE ANNUAL HARDING PARK DAY/HEALTH FAIR.

Funded Amount:

$6,000

Requested By:

DIAZ-R

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HUNTINGTON BREAST CANCER ACTION COALITION
746 NEW YORK AVENUE
HUNTINGTON, NY 11743
(631) 547-1518

Name of Project Director:

KAREN JOY MILLER

Purpose of Project:

FUNDS WILL BE USED FOR LEND A HELPING HAND PROJECT

Funded Amount:

$2,500

Requested By:

CONTE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

HUNTINGTON BREAST CANCER COALITION
746 NEW YORK AVENUE
HUNTINGTON, NY 11743
(631) 547-1518

Name of Project Director:

KAREN MILLER

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM DEVELOPMENT

Funded Amount:

$5,000

Requested By:

RAIA

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

KELLI CONLIN

Purpose of Project:

FUNDS WILL BE USED FOR THE PRINTING AND PRODUCTION OF EDUCATIONAL BROCHURES AND MAILINGS FOR THE YOUNG ADULT LEADERSHIP PROJECT TO ENGAGE YOUNG ADULTS IN REPRODUCTIVE HEALTH EDUCATION.

Funded Amount:

$7,500

Requested By:

BRODSKY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

INSTITUTE FOR REPRODUCTIVE HEALTH ACCESS, INC.
462 BROADWAY, SUITE 540
NEW YORK, NY   10013
(212) 343-0114

Name of Project Director:

PAULINE DEMAIRO

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE TORCH (TEEN OUTREACH REPRODUCTIVE CHALLENGE) PROGRAM, WHICH PROVIDES A PEER EDUCATION PROJECT TO PREVENT TEEN PREGNANCY.

Funded Amount:

$5,000

Requested By:

FARRELL, WRIGHT

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

INSTITUTE FOR REPRODUCTIVE HEALTH ACCESS, INC.
470 PARK AVENUE SOUTH, 7TH FL.
NEW YORK, NY 10016
(212) 343-0114 3509

Name of Project Director:

KRISTINA EXLINE

Purpose of Project:

FUNDS WILL BE USED TO RECRUIT, TRAIN, AND SUPERVISE YOUNG ADULTS AND HELP THEM RESEARCH, AS WELL AS UNDERSTAND, THE BARRIERS THAT CONTRIBUTE TO WIDE-SPREAD DISPARITIES IN REPRODUCTIVE HEALTH OUTCOMES.

Funded Amount:

$7,500

Requested By:

GLICK

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

KELLI CONLIN

Purpose of Project:

FUNDS WILL BE USED FOR THE YOUTH ADULT LEADERSHIP PROJECT TO IMPROVE ACCESS TO REPRODUCTIVE HEALTH SERVICES.

Funded Amount:

$3,000

Requested By:

O'DONNELL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

KELLI CONLIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE YOUNG ADULT LEADERSHIP
PROJECT.

Funded Amount:

$10,000

Requested By:

BING

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

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

Name of Project Director:

KELLI CONLIN

Purpose of Project:

FUNDS WILL BE USED TO ENGAGE YOUNG ADULTS TO WORK TOWARD IMPROVING ACCESS TO REPRODUCTIVE HEALTH SERVICES.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

INSTITUTE FOR REPRODUCTIVE HEALTH ACCESS, INC.
470 PARK AVENUE SOUTH, 7TH FLOOR
NEW YORK, NY 10016
(212) 343-0114 3521

Name of Project Director:

ROBERT JAFFE

Purpose of Project:

FUNDS WILL BE USED TO RECRUIT, TRAIN AND SUPERVISE YOUNG ADULTS AND HELP THEM RESEARCH AND UNDERSTAND THE BARRIERS THAT CONTRIBUTE TO WIDESPREAD DISPARITIES IN REPRODUCTIVE HEALTH OUTCOMES.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

INSTITUTE FOR REPRODUCTIVE HEALTH ACCESS, INC.
462 BROADWAY, SUITE 540
NEW YORK, NY  10013
(212) 343-0114

Name of Project Director:

PAULINE DEMARIO

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE TORCH (TEEN OUTREACH REPRODUCTIVE CHALLENGE) PROGRAM, WHICH PROVIDES A PEER EDUCATION PROJECT TO PREVENT TEEN PREGNANCY.

Funded Amount:

$2,500

Requested By:

FARRELL, WRIGHT

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

IT HAPPENED TO ALEXA FOUNDATION, INC.  
125 SOUTH FIRST STREET  
LEWISTON, NY  14092  
(716) 754-9105

Name of Project Director:

ELLEN AUGELLO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPORT TO VICTIMS OF RAPE AND SEXUAL ASSAULT DURING THE CRIMINAL PROCEEDINGS.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JAMAICA ESTATES-HOLLISWOOD SOUTH BAYSIDE VOLUNTEER AMBULANCE CORPS.
207-07 UNION TURNPIKE
BAYSIDE, NY 00364
(718) 464-0592

Name of Project Director:

CARLOS VARON

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN EQUIPMENT TO AID THE COMMUNITY.

Funded Amount:

$2,000

Requested By:

WEPRIN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

JASON F. GRUEN RESEARCH FOUNDATION, INC.
3145 CAMDEN LANE
MERRICK, NY 11566
(516) 378-9756

Name of Project Director:

SUSAN GRUEN HELSINGER

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING PROGRAMMATIC OPERATIONS

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

KIDNEY & UROLOGY FOUNDATION OF AMERICA, INC.
1260 BROADWAY, SUITE 2001
NEW YORK, NY 10001
(212) 629-9770

Name of Project Director:

SHIRLEY BAER

Purpose of Project:

FUNDS WILL BE USED TO UPDATE AND RESTRUCTURE THE ORGANIZATION'S WEBSITE TO BETTER SERVE PATIENTS, CAREGIVERS AND THEIR FAMILIES.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

KINGSTON HOSPITAL
396 BROADWAY
KINGSTON, NY 12401
(845) 334-4249

Name of Project Director:

CYNTHIA ROZENBERG

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT A JUVENILE DIABETES EDUCATION/OUTREACH/SUPPORT GROUP WITHIN THE EXISTING DIABETES EDUCATION PROGRAM AT THE KINGSTON HOSPITAL.

Funded Amount:

$10,000

Requested By:

CAHILL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

LAKESIDE MEMORIAL HOSPITAL
156 WEST AVENUE
BROCKPORT, NY 14420
(585) 637-3131

Name of Project Director:

KEVIN NACY

Purpose of Project:

FUNDS WILL BE USED FOR A PORTABLE X-RAY MACHINE

Funded Amount:

$6,000

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

LEAGUE FOR THE HARD OF HEARING
50 BROADWAY 6TH FLOOR
NEW YORK, NY  10004
(917) 305 – 7700

Name of Project Director:

LAURIE HANIN, EXECUTIVE DIRECTOR

Purpose of Project:

FUNDS WILL BE USED FOR SERVICES AND EXPENSES RELATED TO IMPROVING ACCESS TO HEALTH CARE IN NEW YORK STATE FOR INDIVIDUALS WHO ARE DEAF OR HARD OF HEARING.

Funded Amount:

$135,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

LEGAL SERVICES FOR NEW YORK CITY
350 BROADWAY, 6TH FLOOR
NEW YORK, NY 10013
(212) 431 – 7200

Name of Project Director:

ANDREW SCHERER, EXECUTIVE DIRECTOR

Purpose of Project:

THESE FUNDS WILL BE USED TO PROVIDE COMPREHENSIVE LEGAL TRAINING AND LITIGATION AND SUPPORT SERVICES FOR ADVOCATES WHO ASSIST POOR PEOPLE AND PERSONS WITH HIV/AIDS.

Funded Amount:

$134,000

Requested By:

GOTTFRIED, O’DONNELL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

LENOX HILL HOSPITAL
100 EAST 77TH STREET
NEW YORK, NY 10021
(212) 434-2410

Name of Project Director:

VICTORIA LOWREY

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT THE "ADVOCATES FOR CHILDREN OF NEW YORK" INITIATIVE AT THE CENTERS FOR ATTENTION AND LEARNING DISORDERS.

Funded Amount:

$7,500

Requested By:

BING

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LEWISBORO VOLUNTEER AMBULANCE CORPS, INC.
P.O. BOX 41
SOUTH SALEM, NY  10590
(914) 763-9633

Name of Project Director:

KATHY PETERSON

Purpose of Project:

FUNDS WILL BE USED TO ENLARGE THE TRAINING AND MEETING SPACE TO ENABLE RIDING MEMBERS TO TRAIN AND PRACTICE MEDICAL SKILLS YEAR ROUND.

Funded Amount:

$4,000

Requested By:

BRADLEY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
LI TRIO (TRANSPLANT RECIPIENTS INTERNATIONAL ORGANIZATION)
P.O. BOX 81
GARDEN CITY, NY 11530
(516) 942-4940

ED BURKI

FUNDS WILL BE USED FOR OUTREACH AND EDUCATIONAL PROJECT TO INCREASE DONOR AWARENESS

$5,000

CONTE

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

LIGHTHOUSE INTERNATIONAL
111 EAST 59TH STREET
NEW YORK, NY 10022
(212) 821-9220

Name of Project Director:

DR. CYNTHIA STUEN

Purpose of Project:

FUNDS WILL BE USED FOR THE YOUTH PROGRAM AND UPGRADING RECORDING SERVICES.

Funded Amount:

$5,000

Requested By:

BING

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

LINDENWOOD COMMUNITY VOLUNTEER AMBULANCE CORPS, INC.
P.O. BOX 170191
OZONE PARK, NY  11417
(718) 738-3029

Name of Project Director:

GEORGE BUONINCONTRI

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE GENERAL OPERATING EXPENSES OF THIS VOLUNTEER CORP.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

LITTLE NECK-DOUGLASTON COMMUNITY AMBULANCE CORPS, INC.
48-18 250TH STREET
LITTLE NECK, NY 11363
(718) 340-4248

Name of Project Director:

PATRICIA MCDONNELL

Purpose of Project:

FUNDS WILL BE USED FOR THE REPAIR AND MAINTENANCE OF AN AMBULANCE. FUNDS WILL ALSO BE USED FOR REPAINTING INTERIORS OF THE BUILDING AND FOR THE PURCHASE OF OXYGEN SUPPLIES.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

LONG ISLAND ALZHEIMER'S ASSOCIATION
3281 VETERANS MEMORIAL HIGHWAY, SUITE E-13
RONKONKOMA, NY  11779
(631) 580-5100

Name of Project Director:

MARY ANN RAGORA

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH COSTS ASSOCIATED WITH THE ALZCAP PROGRAM, WHICH PROVIDES CARE, CONSULTATION, EDUCATION, REFERRAL SERVICES TO FAMILIES AND VICTIMS OF ALZHEIMERS DISEASE.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

LONG ISLAND COLLEGE HOSPITAL - THE HEALING CENTER
339 HICKS STREET/LONG ISLAND COLLEGE HOSPITAL
BROOKLYN, NY 11201
(718) 780-1899

Name of Project Director:

ROBERT LUDWIG

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BEREAVEMENT SUPPORT TO CHILDREN WHO HAVE EXPERIENCED THE DEATH OF A FAMILY MEMBER/SIGNIFICANT OTHER.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

LONG ISLAND GAY AND LESBIAN YOUTH, INC.
34 PARK AVENUE
BAYSHORE, NY 11706
(631) 665-2300

Name of Project Director:

DAVID KELMNICK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT OUTREACH AND PROMOTION ASSOCIATED WITH THE ANTI-VIOLENCE PROJECT.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MAIMONIDES MEDICAL CENTER
9201 4TH AVENUE, 2ND FLOOR
BROOKLYN, NY  11209
(718) 232-1351

Name of Project Director:

JODI HEYWOOD

Purpose of Project:

FUNDS WILL BE USED FOR SERVICES AND EXPENSES RELATED TO COMMUNITY AND EDUCATIONAL OUTREACH PROGRAMS.

Funded Amount:

$25,000

Requested By:

ABBATE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MAKE-A-WISH FOUNDATION OF NORTHEAST NEW YORK
950 NEW LOUDONVILLE ROAD, SUITE 280
LATHAM, NY  12110
(518) 782-0618

Name of Project Director:

WILLIAM C. TRIGG, III

Purpose of Project:

FUNDS WILL BE USED TO OVERHAUL THE COMPUTER SYSTEM.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MARCH OF DIMES NEW YORK STATE CHAPTER, GENESEE/FINGER LAKES DIVISION
3445 WINTON PLACE, SUITE 121
ROCHESTER, NY 14623
(585) 424-3250

Name of Project Director:

LYNN DOESCHER

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL MATERIALS, BROCHURES, SIGNS
AND EQUIPMENT NEEDED FOR THE EVENTS

Funded Amount:

$2,500

Requested By:

OAKS

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MAURER FOUNDATION FOR BREAST HEALTH EDUCATION, INC.
800 PORT WASHINGTON BOULEVARD
PORT WASHINGTON, NY 11050
(800) 853-5327

Name of Project Director:

KIM ROZZI

Purpose of Project:

FUNDS WILL BE USED FOR A SCHOOL-BASED, BREAST HEALTH EDUCATIONAL CURRICULUM EMPHASIZING HEALTH PROMOTION AND DISEASE PREVENTION.

Funded Amount:

$2,500

Requested By:

O'DONNELL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MEDICARE RIGHTS CENTER, INC.
520 8TH AVENUE, NORTH WING, 3RD FLOOR
NEW YORK, NY   10018
(212) 869-3850  6289

Name of Project Director:

LOIS STEINBERG

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE WESTCHESTER RESIDENTS ABOUT CHANGES IN MEDICARE INCLUDING MEDICARE PART D - SOUND SHORE SEMINARS.

Funded Amount:

$5,000

Requested By:

LATIMER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MEDICARE RIGHTS CENTER, INC.
520 EIGHTH AVENUE, NORTH WING
NEW YORK, NY  10036
(914) 912-0526

Name of Project Director:

VINCE MARRONE

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE OLDER AND DISABLED NEW YORKERS ON 2007-08 MEDICARE HEALTH PLAN OPTIONS AND TO PROVIDE HELP IN CHANGING PLANS AT THE OPENING OF THE ANNUAL COORDINATED ELECTION PERIOD ON NOVEMBER 15, 2007.

Funded Amount:

$5,000

Requested By:

PAULIN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MEDICARE RIGHTS CENTER, INC.
1460 BROADWAY
NEW YORK, NY 10036
(212) 869-3850

Name of Project Director:

JOE BAKER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF A HOTLINE, AS WELL AS FOR CONSUMER GUIDES REGARDING MEDICARE INSURANCE OPTIONS.

Funded Amount:

$10,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MEDICARE RIGHTS CENTER, INC.
520 EIGHTH AVENUE, NORTH WING, 3RD FLOOR
NEW YORK, NY 10018
(212) 204-6245

Name of Project Director:

BETTY DUGGAN

Purpose of Project:

FUNDS WILL BE USED FOR A PUBLIC INFORMATION EVENT ON MEDICARE.

Funded Amount:

$2,500

Requested By:

ROSENTHAL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MEDINA MEMORIAL HEALTH CARE SYSTEM
200 OHIO STREET
MEDINA, NY 14103
(585) 798-2000

Name of Project Director:

JAMES SINNER

Purpose of Project:

FUNDS WILL BE USED FOR DIGITAL MAMMOGRAPHY SCREENING

Funded Amount:

$4,000

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MERCY FLIGHT CENTRAL
2420 BRICKYARD ROAD
CANANDAIGUA, NY 14424
(585) 396-0584

Name of Project Director:

PAUL HYLAND

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH MERCY FLIGHTS OPERATIONAL COSTS

Funded Amount:

$5,000

Requested By:

ERRIGO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MERCY FLIGHT CENTRAL, INC.
2420 BRICKYARD ROAD
CANANDAIGUA, NY 14424
(585) 396-0584

Name of Project Director:

PAUL HYLAND

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF EQUIPMENT

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MOMENTUM PROJECT, INC.
155 WEST 23RD STREET
NEW YORK, NY 10011
(212) 691-8100

Name of Project Director:

DAWN BRYAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A VAST ARRAY OF SERVICES IN EIGHT HIGH-RISE NEIGHBORHOOD LOCATIONS TO PEOPLE LIVING WITH HIV/AIDS.

Funded Amount:

$4,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

MOUNT VERNON NEIGHBORHOOD HEALTH CENTER, INC.
107 WEST FOURTH STREET
MOUNT VERNON, NY 10550
(914) 699-7200

Name of Project Director:

CAROL MORRIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CRITICAL MEDICATIONS FOR UNINSURED PATIENTS.

Funded Amount:

$10,000

Requested By:

PRETLOW

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NACHAS HEALTH AND FAMILY NETWORK, INC.  
1310 48TH STREET  
BROOKLYN, NY 11219  
(718) 436-7373

Name of Project Director:

RABBI PINCHUS HOROWITZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE PAP SMEARS TO WOMEN WHO WOULD NOT OTHERWISE BE ABLE TO RECEIVE PREVENTIVE CARE.

Funded Amount:

$1,640

Requested By:

BRENNAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NACHAS HEALTH AND FAMILY NETWORK, INC.
1310 48TH STREET
BROOKLYN, NY 11219
(718) 436-7373

Name of Project Director:

RABBI PINCHOS D. HOROWITZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE IMMUNIZATIONS (I.E., HEPATITUS), FREE OR AT LOW COST TO NEEDY PEOPLE IN THE COMMUNITY AS WELL AS EDUCATION AND REFERRALS TO HELP MEET THE HEALTH CARE NEEDS OF COMMUNITY RESIDENTS.

Funded Amount:

$43,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NACHAS HEALTH AND FAMILY NETWORK, INC.
1310 48TH STREET
BROOKLYN, NY  11219
(718) 436-7373  18

Name of Project Director:

RIZY HOROWITZ

Purpose of Project:

FUNDS WILL BE USED TO PERFORM OUTREACH IN THE COMMUNITY TO PROMOTE HEALTH AWARENESS, EDUCATION AND SCREENINGS. NACHAS WILL CONDUCT ANNUAL HEALTH FAIRS FOR SENIORS AND CHILDREN.

Funded Amount:

$30,000

Requested By:

HIKIND

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NEW ISLAND HOSPITAL
4295 HEMPSTEAD TURNPIKE
BETHPAGE, NY 11714
(516) 579-6000

Name of Project Director:

AARON E. GLATT

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT UPGRADE

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NEW YORK AIDS COALITION, INC.
231 WEST 29TH STREET, SUITE 1002
NEW YORK, NY  10001
(212) 629-3075

Name of Project Director:

AMY HERMAN, EXECUTIVE DIRECTOR

Purpose of Project:

FUNDS WILL BE USED TO ASSIST COMMUNITY-BASED ORGANIZATIONS IN THE TRANSITION TO MANAGED CARE.

Funded Amount:

$2,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NEW YORK CITY HEALTH AND HOSPITALS CORP.
2601 OCEAN PARKWAY
BROOKLYN, NY 11235
(718) 616-4100

Name of Project Director:

PETER WOLF

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW FURNITURE AT THE IDA G. ISRAEL CONEY ISLAND COMMUNITY HEALTH CENTER WAITING ROOM.

Funded Amount:

$4,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NEW YORK ORGAN DONOR NETWORK
132 WEST 31 STREET, 11TH FLOOR
NEW YORK, NY 10001
(646) 291-4456

Name of Project Director:

JULIA RIVERA

Purpose of Project:

FUNDS WILL BE USED FOR A WORKPLACE OUTREACH PROGRAM TO INCREASE NEW YORK STATE DONOR REGISTRATION THROUGH THE PRODUCTION, PRINTING AND DISTRIBUTION OF MAILINGS.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NEW YORK UNIVERSITY COLLEGE OF DENTISTRY
345 EAST 24TH STREET, 10W
NEW YORK, NY 10010 – 4086
(212) 998 – 9930

Name of Project Director:

STEVE DONOFRIO, EXEC. ASSOCIATE DEAN

Purpose of Project:

FUNDS WILL BE USED FOR SERVICES AND EXPENSES RELATED TO THE OPERATION OF THE MOBILE DENTAL VAN FOR THE PEDIATRIC OUTREACH PROGRAM.

Funded Amount:

$250,000

Requested By:

CANESTRARI

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NORTH COUNTRY CHAPTER OF THE AMERICAN RED CROSS
13 GUY WAY
PLATTSBURGH, NY 12901
(518) 561-7280

Name of Project Director:

JEANIE ROBERTS

Purpose of Project:

FUNDS WILL BE USED FOR TRAINING VOLUNTEERS TO OPEN AND STAFF EMERGENCY SHELTERS

Funded Amount:

$10,000

Requested By:

DUPREY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NORTH SHORE LONG ISLAND JEWISH HEALTH SYSTEM
DIV. OF ADOLESCENT MEDICINE - 410 LAKEVILLE ROAD - SUITE 108
NEW HYDE PARK, NY  11040
(516) 465-3270

Name of Project Director:

MARTIN FISHER, M.D.

Purpose of Project:

FUNDS WILL BE USED TO SERVE ADOLESCENTS AND YOUTH IN THE FIVE TOWNS AND SURROUNDING COMMUNITIES ON LONG ISLAND. NURSE COORDINATORS VISIT SCHOOLS, PATIENTS RECEIVE COMPREHENSIVE MEDICAL AND PSYCHOLOGICAL EVALUATION AND APPROPRIATE TREATMENT.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NORTHERN LIVINGSTON COUNTY CHAPTER OF THE AMERICAN RED CROSS
6 COURT STREET, ROOM 108
GENESEO, NY 14454
(585) 243-7029

Name of Project Director:

BRAD LOWELL

Purpose of Project:

FUNDS WILL BE USED FOR HEALTH AND SAFETY EQUIPMENT

Funded Amount:

$2,500

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

NUTRITION & FITNESS FOR A HEALTHY NEW YORK, INC.
99 TROY ROAD, SUITE 200
EAST GREENBUSH, NY 12061
(518) 533-7807

Name of Project Director:

HARRY DUNSKER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AND ADMINISTER THE COMMUNITY/CHILD FITNESS CHALLENGE PROGRAM, AS WELL AS, TO PROMOTE PHYSICAL ACTIVITIES AND BETTER NUTRITION AMONG YOUNG NEW YORKERS.

Funded Amount:

$3,000

Requested By:

WEPRIN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

OUTREACH FOR BREAST HEALTH FOUNDATION CORPORATION
54 LINCOLN AVENUE
ISLIP TERRACE, NY  11752
(631) 581-4171

Name of Project Director:

MARY SOLOMON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE MOBILE MAMMOGRAPHY PROGRAM.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PARK SLOPE VOLUNTEER AMBULANCE CORPS, INC.
478 BERGEN STREET
BROOKLYN, NY  11217
(718) 398-4500

Name of Project Director:

MATTHEW PINTCHIK

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF NEEDED SUPPLIES, SUCH AS MEDICAL SUPPLIES, FUEL FOR VEHICLES AND OFFICE SUPPLIES.

Funded Amount:

$4,000

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

PLANNED PARENTHOOD HUDSON PECONIC, INC.
4 SKYLINE DRIVE
HAWTHORNE, NY 10532
(914) 467-7300

Name of Project Director:

REINA SCHIFFRIN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF AUTOCLAVE USED TO STERILIZE MEDICAL INSTRUMENTS AT THE WHITE PLAINS PLANNED PARENTHOOD CENTER AND FOR REPLACEMENT OF CABINETS AND COUNTER TOPS IN EXAM ROOM.

Funded Amount:

$8,000

Requested By:

BRODSKY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PLANNED PARENTHOOD HUDSON PECONIC, INC.
4 SKYLINE DRIVE
HAWTHORNE, NY  10532
(914) 467-7300

Name of Project Director:

LISA B. WINJUM

Purpose of Project:

FUNDS WILL BE USED TO OFFSET RELOCATION EXPENSES WHICH WOULD DOUBLE THE CAPACITY OF PROVIDING SERVICES TO WOMEN, MEN AND TEENS IN THE COMMUNITY.

Funded Amount:

$10,000

Requested By:

PRETLOW

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

PLANNED PARENTHOOD MOHAWK HUDSON, INC.
414 UNION STREET
SCHENECTADY, NY  12305
(518) 374-5353

Name of Project Director:

PAUL DRISGULA

Purpose of Project:

FUNDS WILL BE USED TO HELP CREATE A CLIENT-FOCUSED ENVIRONMENT AT THE CLIFTON PARK CENTER THAT WILL BEGIN IN ITS WAITING AREA, INCLUDING THE PURCHASE OF FURNITURE, LIGHTS, SUPPLIES, ETC.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

PLANNED PARENTHOOD OF NASSAU COUNTY, INC.
540 FULTON AVENUE
HEMPSTEAD, NY 11550
(516) 750-2600

Name of Project Director:

JOANN D. SMITH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MEDICALLY ACCURATE, AGE APPROPRIATE SEXUALITY EDUCATION WORKSHOPS FOR TEENS AND THEIR FAMILIES TO PROMOTE PARENT/CHILD COMMUNICATION AND HEALTHY DECISION MAKING.

Funded Amount:

$7,500

Requested By:

LAVINE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
PORT JEFFERSON VOLUNTEER AMBULANCE, INC.
P.O. BOX 264
PORT JEFFERSON, NY 11777
(631) 473-2519

JIM CHRISTINO

FUNDS WILL BE USED TO PURCHASE TWO CPAP (CONTINUOUS POSITIVE AIRWAY PRESSURE) UNITS TO BE USED BY EMS PERSONNEL WORKING IN THE FIELD.

$3,200

ENGLEBRIGHT

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PRASAD CHILDREN’S DENTAL HEALTH PROGRAM, INC.  
465 BRICKMAN ROAD  
HURLEYVILLE, NY  12747  
(845) 434-0376  110

Name of Project Director:

DR. M. CECILIA ESCARRA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE DENTAL SERVICES TO MORE CHILDREN IN NEED.

Funded Amount:

$5,000

Requested By:

GUNThER-A

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

PROGRESSIVE COMMUNITY CENTER FOR CHILDREN AND FAMILIES, INC.
100 PARKSIDE AVENUE, BUILDING A, 4TH FLOOR
BROOKLYN, NY  11226
(718) 940-5656

Name of Project Director:

LORNA S. MCBARNETTE

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE OPTIMAL HEALTH STATUS AMONGST HIGH-RISK AND LOW-INCOME FAMILIES THROUGH COMMUNITY TRAINING.

Funded Amount:

$3,000

Requested By:

CAMARA

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

QUEENS HEALTH CENTER  
97-04 SUTPHIN BOULEVARD  
JAMAICA, NY  11435  
(718) 657-7088

Name of Project Director:

MONIQUE HYMAN

Purpose of Project:

FUNDS WILL BE USED TO HELP QUEENS HEALTH CENTER PROVIDE SERVICES FOR THE GROWING NUMBER OF UNINSURED QUEENS RESIDENTS.

Funded Amount:

$5,000

Requested By:

COOK

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS LESBIAN AND GAY COMMUNITY CENTER, INC.
76-11 37TH AVENUE
JACKSON HEIGHTS, NY  11372
(718) 429-5309

Name of Project Director:

CHARLES OBER

Purpose of Project:

FUNDS WILL BE USED FOR HEALTH AWARENESS PROGRAMS.

Funded Amount:

$3,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

QUEENS LESBIAN AND GAY COMMUNITY CENTER, INC.
76-11 37TH AVENUE
JACKSON HEIGHTS, NY  11372
(718) 429-5309

Name of Project Director:

CHARLES OBER

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE HEALTH AND SENSITIVITY EDUCATION.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

QUEENS SICKLE CELL ADVOCACY NETWORK, INC.
205-14 LINDEN BLVD., SUITE 206
ST. ALBANS, NY  11412
(718) 712-0873

Name of Project Director:

GLORIA ROCHESTER

Purpose of Project:

FUNDS WILL BE USED TO SERVE AND SUPPORT VICTIMS OF SICKLE CELL DISEASE AND OTHER CHRONIC CONDITIONS, AND THEIR FAMILIES.

Funded Amount:

$6,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

RED HOOK INITIATIVE, INC.
595 CLINTON STREET
BROOKLYN, NY  11231
(718) 858-6782

Name of Project Director:

JILL EISENHARD

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE RED HOOK INITIATIVE’S PREVENTION OF TYPE 2 DIABETES IN YOUTH PROJECT.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

REFUAH HELPLINE, INC.
5904 13TH AVENUE
BROOKLYN, NY  11219
(718) 437-7474  2

Name of Project Director:

SHUKY BERMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MEDICAL REFERRALS, EDUCATION, SUPPORT NETWORKS AND MORE, TO PEOPLE SUFFERING FROM ILLNESS. FUNDS WILL ALSO PROVIDE ACCESS TO THE MEDICAL RESOURCES AVAILABLE AND MATCHES PATIENTS WITH AN APPROPRIATE MEDICAL PROFESSIONAL.

Funded Amount:

$27,000

Requested By:

HIKIND

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

RIDGEWOOD VOLUNTEER AMBULANCE CORPS., INC.
656 WOODWARD AVENUE
RIDGEWOOD, NY 11385
(718) 386-7230

Name of Project Director:

FRANCIS DAMAINO

Purpose of Project:

FUNDS WILL BE USED FOR THE MAINTENANCE AND REPAIR OF THE AMBULANCE.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ROCKAWAY POINT VOLUNNEER EMERGENCY SERVICES, INC.
P.O. BOX 333
FT. TILDEN, NY 11695
(718) 474-2593

Name of Project Director:

MATTHEW PICCONE

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE QUALITY OF EMERGENCY SERVICES PROVIDED, AND GIVE PERSONS WHO HAVE MEDICAL PROBLEMS AND ARE SHUT-INS THE ABILITY TO SUMMON FOR MEDICAL HELP.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROTACARE, INC.
1220 FRONT STREET
UNIONDALE, NY 11553
(516) 539-9834

Name of Project Director:

DR. ROMAN URBANCZYK

Purpose of Project:

FUNDS WILL BE USED FOR HEALTH CARE SUPPORT SERVICES

Funded Amount:

$5,000

Requested By:

MCKEVITT

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RYAN MCELROY CHILDREN'S CANCER FOUNDATION
198 ROUTE 22
PAWLING, NY 12564
(845) 855-9710

Name of Project Director:

CHIP MCELROY

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF PROGRAMS THAT THE RYAN MCELROY CHILDREN'S CANCER FOUNDATION PROVIDES

Funded Amount:

$2,500

Requested By:

BALL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

SAMARITAN HOSPITAL
2215 BURDETT AVENUE
TROY, NY  12180
(518) 271-3639

Name of Project Director:

LISA R. SMITH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A PREVENTION EDUCATION PROGRAM TO CHILDREN, ADULTS AND SENIORS IN ORDER TO SHARE IDEAS, LEARN STRATEGIES, AND BUILD VALUES SO THAT VIOLENCE MAY BE REDUCED WITHIN SCHOOLS, HOMES, AND THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

SAMARITAN HOSPITAL
2215 BURDETT AVENUE
TROY, NY 12180
(518) 271-3639

Name of Project Director:

LISA R. SMITH

Purpose of Project:

FUNDS WILL BE USED FOR THE SEXUAL ASSAULT AND CRIME VICTIMS ASSISTANCE PROGRAM TO PURCHASE FORENSIC PHOTOGRAPHY EQUIPMENT AND SUPPLIES.

Funded Amount:

$4,500

Requested By:

GORDON-T

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SAMARITAN VILLAGE, INC.
138-02 QUEENS BOULEVARD
BRIARWOOD, NY 11435
(718) 206-2000 205

Name of Project Director:

RON SOLARZ

Purpose of Project:

FUNDS WILL BE USED TO OFFSET HEPATITIS C (HCV) TESTING AND MEDICATIONS FOR TREATMENT OF PTDS NOT COVERED BY MEDICAID.

Funded Amount:

$7,500

Requested By:

SEMINERIO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SARAH GRACE FOUNDATION-CHILDREN WITH CANCER
217 PLAINVIEW ROAD
HICKSVILLE, NY 11801
(516) 433-9745

Name of Project Director:

MATTHEW WEIPPERT

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT CHILDHOOD CANCER PROGRAMS AND CHILDREN WITH CANCER

Funded Amount:

$2,500

Requested By:

WALKER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

SARATOGA THERAPEUTIC EQUESTRIAN PROGRAM, INC.
P.O. BOX 2918
GLENVILLE, NY 12305
(518) 374-5116

Name of Project Director:

KAY STANLEY-WHITE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALLATION OF NEW FENCING AROUND THE STEP PROGRAM AREA FOR USE BY DISABLED RIDERS DURING THERAPY

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SCHENECTADY COMMUNITY HOME, INC.
22 GLENVIEW DRIVE, P.O. BOX 2122
SCOTIA, NY 12302
(518) 346-5471

Name of Project Director:

SUE TOMLINSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COST-EFFECTIVE CARE OPTIONS THAT REDUCES THE BURDEN ON TAX PAYERS WHILE ENHANCING THE QUALITY OF LIFE FOR PATIENTS

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SEARCH AND CARE, INC.
1844 SECOND AVENUE
NEW YORK, NY 10128
(212) 289-5300

Name of Project Director:

BRIAN KRAVITZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CARE MANAGEMENT AND ASSISTANCE WITH ACCESS TO HEALTH SERVICES.

Funded Amount:

$2,500

Requested By:

BING

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

SEPHARDIC COMMUNITY YOUTH CENTER
1901 OCEAN PARKWAY
BROOKLYN, NY 11223
(718) 627-4300

Name of Project Director:

LINDA EBER

Purpose of Project:

FUNDS WILL BE USED FOR ALZHEIMER GROUP SUPPORT FOR FAMILIES.
THIS PROGRAM IS OPEN TO ALL MEMBERS OF THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

SESAME FLYERS INTERNATIONAL, INC.
3510 CHURCH AVENUE
BROOKLYN, NY  11203
(718) 693-0500

Name of Project Director:

CURTIS NELSON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSE OF THE HEALTH FITNESS PROGRAM.

Funded Amount:

$10,750

Requested By:

PERRY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

SHARE SELF-HELP FOR WOMEN WITH BREAST OR OVARIAN CANCER, INC.
1501 BROADWAY, SUITE 704A
NEW YORK, NY 10036
(212) 719-0364

Name of Project Director:

ALICE YAKER

Purpose of Project:

FUNDS WILL BE USED FOR FREE SUPPORT GROUPS, HOTLINE AND FREE
EDUCATION, AS WELL AS WELLNESS PROGRAMS FOR WOMEN WITH BREAST
OR OVARIAN CANCER.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

SHARE SELF-HELP FOR WOMEN WITH BREAST OR OVARIAN CANCER, INC.
1501 BROADWAY, SUITE 704A
NEW YORK, NY  10036
(212) 719-0364

Name of Project Director:

ALICE YAKER

Purpose of Project:

FUNDS WILL BE USED FOR SERVICES THAT IMPROVE THE PHYSICAL,
MENTAL AND EMOTIONAL WELL-BEING OF WOMEN DIAGNOSED WITH
BREAST OR OVARIAN CANCER.

Funded Amount:

$4,500

Requested By:

O'DONNELL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

SOUTH BROOKLYN LOCAL DEVELOPMENT CORPORATION
268 SMITH STREET
BROOKLYN, NY  11231
(718) 852-0328

Name of Project Director:

JERRY ARMER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A COMMUNITY OUTREACH PROGRAM WHICH DELIVERS GIFTS TO PEDIATRIC PATIENTS AT A LOCAL HOSPITAL DURING THE HOLIDAY SEASON.

Funded Amount:

$2,500

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

SOUTH NASSAU COMMUNITIES HOSPITAL
ONE HEALTHY WAY
OCEANSIDE, NY  11572
(516) 632-3000

Name of Project Director:

DR. SAMUEL SANDOWSKI

Purpose of Project:

FUNDS WILL BE USED TO ASSIST THE HOSPITAL IN CONTINUING SERVICES TO PREGNANT WOMEN AND THEIR FAMILIES.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ST. CLARES HOSPITAL OF SCHENECTADY NY FOUNDATION, INC.
DEVELOPMENT OFFICE - ATTN: DAN LANG, 600 MCCLELLAN STREET
SCHENECTADY, NY 12304
(518) 347-5548

Name of Project Director:

DR. KIRK PANNETON

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS, EQUIPMENT AND FURNISHINGS TO CREATE THE GERIATRIC WING.

Funded Amount:

$15,000

Requested By:

TONKO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ST. CLARE'S HOSPITAL OF SCHENECTADY NY FOUNDATION, INC.
660 McCLELLAN STREET
SCHENECTADY, NY 12304
(518) 382-2000

Name of Project Director:

DR. KIRK PANNETON

Purpose of Project:

FUNDS WILL BE USED TO CREATE A GERIATRIC WING AT ST. CLARE’S HOSPITAL

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

STATEN ISLAND CENTER FOR INDEPENDENT LIVING, INC.
470 CASTLETON AVENUE
STATEN ISLAND, NY 10301
(718) 720-9016

Name of Project Director:

DOROTHY DORAN, E.D.

Purpose of Project:

FUNDS WILL BE USED TO INFORM INDIVIDUALS WITH DISABILITIES ABOUT CURRENT LEGISLATION, PROGRAMS AND ENTITLEMENTS.

Funded Amount:

$7,000

Requested By:

CUSICK

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

STEPHANIE JOYCE KAHN FOUNDATION, INC.
2–12 WEST PARK AVE. – SUITE 210
LONG BEACH, NY 11561
(516) 889 – 5105

Name of Project Director:

STEPHANIE JOYCE KAHN

Purpose of Project:

FUNDS WILL BE USED FOR THE NASSAU COUNTY TALKING BOOK PROGRAM.

Funded Amount:

$25,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

THE INSTITUTE FOR REPRODUCTIVE HEALTH ACCESS
427 BROADWAY, 3RD FLOOR
NEW YORK, NY  10013
(212) 343 – 0114

Name of Project Director:

KELLI CONLIN, EXECUTIVE DIRECTOR

Purpose of Project:

FUNDS WILL BE USED FOR SERVICES AND EXPENSES RELATED TO GENERAL OPERATING COSTS.

Funded Amount:

$90,000

Requested By:

BING, BRODSKY, FARRELL, GLICK, GOTTFRIED, MILLMAN, O’DONNELL, SILVER, WEINSTEIN, WRIGHT

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

THE LEGAL AID SOCIETY
199 WATER STREET
NEW YORK, NY 10038
(212) 577 – 3300

Name of Project Director:

STEVEN BANKS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CITY – WIDE CIVIL LEGAL SERVICES TO PERSONS IN NEW YORK CITY.

Funded Amount:

$134,000

Requested By:

GOTTFRIED, O’DONNELL

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

TERESIAN HOUSE NURSING HOME COMPANY, INC.
200 WASHINGTON AVENUE EXTENSION
ALBANY, NY 12203
(518) 456-2000

Name of Project Director:

ERIC BAUMES

Purpose of Project:

FUNDS WILL BE USED TO ADVANCE THE QUALITY OF LIFE FOR TERESIAN HOUSE RESIDENTS BY THE IMPLEMENTATION OF ADVANCED "THTV" TERESIAN HOUSE INTERNAL TV NETWORK, WIRED ROOMS/WIRELESS INTERNET ACCESS FOR RESIDENT AREAS, EXPANDING CYBER CAFÉ BY ADDING ADDITIONAL COMPUTERS, INSTALLING A MINI-MOVIE THEATER, AND PURCHASE OF A MEDIA STATION.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

THROGGS NECK VOLUNTEER AMBULANCE CORPS, INC.
3955 EAST TREMONT AVENUE, P.O. BOX 302
BRONX, NY  10465
(718) 430-9501

Name of Project Director:

JACK MCCARGL

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COST OF INSURANCE LIABILITY.

Funded Amount:

$5,000

Requested By:

BENEDETTO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

THURSDAYS CHILD
80 TERRY STREET
PATCHOGUE, NY 11772
(631) 447-5044

Name of Project Director:

GREGORY L. NOONE

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH OPERATING EXPENSES, INCLUDING BUT NOT LIMITED TO, PROVIDING PROGRAMMATIC SUPPORT TO THOSE AFFECTED AND INFECTED WITH HIV/AIDS.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

TO LIFE! GREATER ACCESS THROUGH EDUCATION (G.A.T.E) PROGRAM  
410 KENWOOD AVENUE  
DELMAR, NY  12054  
(518) 439 – 5975

Name of Project Director:

MARA GINSBERG

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE COMPREHENSIVE EDUCATION  
AND SUPPORT SERVICES SPECIFICALLY TAILORED TO BREAST CANCER  
PATIENTS AND THEIR FAMILIES.

Funded Amount:

$50,000

Requested By:

CANESTRARI

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

TO LIFE!, INC.
410 KENWOOD AVENUE
DELMAR, NY 12054
(518) 439-5975

Name of Project Director:

THEA HOETH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BREAST CANCER EDUCATION AND SUPPORT SERVICES INCLUDING EDUCATION SEMINARS, WELLNESS PROGRAMS, NEWSLETTERS, SUPPORT GROUPS, LIBRARY, AND BOUTIQUE, INCLUDING FREE WIGS FOR UNINSURED OR UNDERINSURED WOMEN.

Funded Amount:

$10,000

Requested By:

GORDON-T

Name of Administering State Agency:

DEPARTMENT OF HEALTH
**Legal Name, Address, and Telephone Number:**

UNITED JEWISH ORGANIZATIONS OF WILLIAMSBURG, INC.
32 PENN STREET
BROOKLYN, NY 11211
(718) 643 – 9700

**Name of Project Director:**

RABBI DAVID NIEDERMAN

**Purpose of Project:**

FUNDS WILL BE USED TO ADDRESS THE NEEDS OF CHILDREN & YOUNG ADULTS, WITH A FOCUS ON SOCIAL SERVICES AND HEALTH NEEDS.

**Funded Amount:**

$30,000

**Requested By:**

LENTOL

**Name of Administering State Agency:**

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

UPSTATE CEREBRAL PALSY AND HANDICAPPED ASSOCIATION OF THE GREATER UTICA AREA, INC.
1020 MARY STREET
UTICA, NY 13501
(315) 724 – 6907

Name of Project Director:

LOUIS B. TEHAN

Purpose of Project:

FUNDS WILL BE USED TO ESTABLISH A SCHOOL-BASED HEALTH CENTER AT JAMES H. DONOVAN MIDDLE SCHOOL IN UTICA.

Funded Amount:

$50,000

Requested By:

DESTITO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

U.S. CATHOLIC CONFERENCE MERCY HOME FOR CHILDREN
243 PROSPECT PARK WEST
BROOKLYN, NY  11215
(718) 832-1075

Name of Project Director:

SISTER CAROLINE TWEEDY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPORT TO FAMILIES THROUGH THE RESPITE PROGRAM, INCLUDING TRANSPORTATION TO PROGRAMS AND SEVEN HOURS OF ACTIVITIES EVERY SATURDAY. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,500

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

UCP ASSOCIATION OF NASSAU COUNTY, INC.
380 WASHINGTON AVENUE
ROOSEVELT, NY 11575
(516) 378-2000 210

Name of Project Director:

ROBERT MCGUIRE

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING PROGRAMMATIC OPERATIONS OF THE UNITED CEREBRAL PALSY ASSOCIATION OF NASSAU COUNTY, INC.

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

UNITED CEREBRAL PALSY AND HANDICAPPED PERSONS ASSOCIATION OF
THE UTICA AREA, INC.
1020 MARY STREET
UTICA, NY 13501
(315) 724-6907 2270

Name of Project Director:

LOUIS B. TEHAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A CLINIC FOR COMPREHENSIVE
PRIMARY AND PREVENTIVE HEALTH CARE SERVICES AT JAMES H. DONOVAN
MIDDLE SCHOOL IN UTICA, WHICH SERVES A HIGH-RISK STUDENT
POPULATION.

Funded Amount:

$25,000

Requested By:

DESTITO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNITED MEMORIAL MEDICAL CENTER FOUNDATION
127 NORTH STREET, NICHOLS BUILDING
BATAVIA, NY 14020
(585) 344-5300

Name of Project Director:

CHRIS FIX

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT FOR RENOVATED BANK STREET CAMPUS

Funded Amount:

$5,000

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

VISION BEYOND SIGHT FOUNDATION, INC.
82 CEDER RIDGE DRIVE
WEST SENECA, NY 14224
(716) 432-7241

Name of Project Director:

TIM WROBLEWSKI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE GLAUCOMA EXAMS, BRAIL DOCUMENTS, ETCETERA, FOR THE BLIND AND DISABLED.

Funded Amount:

$5,000

Requested By:

SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

VISIONS SERVICES FOR THE BLIND AND VISUALLY IMPAIRED
500 GREENWICH STREET, 3RD FLOOR
NEW YORK, NY 10013
(718) 625-1616

Name of Project Director:

NANCY A. MILLER

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH ABOUT EYE CARE INFORMATION AND EDUCATION ABOUT STRATEGIES TO PREVENT BLINDNESS AND OBTAIN VISION REHABILITATION SERVICES.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

VISIONS SERVICES FOR THE BLIND AND VISUALLY IMPAIRED
500 GREENWICH STREET, 3RD FLOOR
NEW YORK, NY  10013
(212) 625-1616  117

Name of Project Director:

NANCY D. MILLER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE ASSISTED LISTENING DEVICES AND OTHER SUPPLIES FOR SELIS MANOR, A COMMUNITY CENTER PROGRAM SERVING BLIND RESIDENTS AND COMMUNITY USERS OF THE FACILITY, OFFERING SOCIAL SERVICES, EDUCATION PROGRAM, CULTURAL PROGRAMS, HEALTH AND FITNESS, SUPPORT GROUPS, AND VISION REHABILITATION SKILLS (BRAILLE, ADAPTIVE LIVING).

Funded Amount:

$3,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VOLUNTEER HEART RESUSITATION UNIT AND AMBULANCE CORPS. OF
STATEN ISLAND
P.O. BOX 060252
STATEN ISLAND, NY 10306
(718) 979-5850

Name of Project Director:

PAUL CANNAVO

Purpose of Project:

FUNDS WILL BE USED TOWARD THE INSURANCE COSTS OF THE
EMERGENCY VEHICLES (AMBULANCES) WHICH RESPOND TO MEDICAL
CALLS ON STATEN ISLAND, AS WELL AS, TO PROVIDE MEDICAL COVERAGE
AT VARIOUS COMMUNITY EVENTS.

Funded Amount:

$5,000

Requested By:

CUSICK

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

WESTCHESTER COALITION FOR LEGAL ABORTION - CHOICE MATTERS, INC.
235 MAMARONECK AVENUE
WHITE PLAINS, NY  10605
(914) 946-5363

Name of Project Director:

CATHERINE LEDERER-PLASKETT

Purpose of Project:

FUNDS WILL BE USED TO INCREASE EMERGENCY CONTRACEPTION AWARENESS AND ACCESS IN NEW ROCHELLE AND WHITE PLAINS, HIGH RISK AREAS FOR TEEN PREGNANCIES.

Funded Amount:

$5,300

Requested By:

PAULIN

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

WESTCHESTER COALITION FOR LEGAL ABORTION - CHOICE MATTERS, INC.
235 MAMARONECK AVENUE
WHITE PLAINS, NY  10605
(914) 946-5363

Name of Project Director:

CATHERINE LEDERER-PLASKETT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE LAPTOPS, EDUCATIONAL SUPPLIES, SOFTWARE, AND AN IPOD WITH MICROPHONE FOR THE EC AWARENESS INITIATIVE.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

WESTCHESTER COALITION FOR LEGAL ABORTION-CHOICE MATTERS, INC.
235 MAMARONECK AVENUE
WHITE PLAINS, NY 10605
(914) 946-5363

Name of Project Director:

CATHERINE LEDERER-PLASKETT

Purpose of Project:

FUNDS WILL BE USED FOR CONTRACEPTION AWARENESS, EDUCATION AND OUTREACH INITIATIVE

Funded Amount:

$2,500

Requested By:

SPANO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

WHISTESTONE COMMUNITY AMBULANCE SERVICE
12-15 150 STREET
WHITESTONE, NY  11357
(718) 767-1000

Name of Project Director:

RALPH CEFALO

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF GENERAL MEDICAL EQUIPMENT.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

DEPARTMENT OF HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WOMEN’S OUTREACH NETWORK, INC.
54 LINCOLN AVENUE
ISLIP TERRACE, NY  11752
(631) 581-4171

Name of Project Director:

MARY SOLOMON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PART OF THE COSTS ASSOCIATED WITH THE UPKEEP OF THE MAMMOGRAPHY VAN.

Funded Amount:

$5,000

Requested By:

BENEDETTO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

WOODHAVEN-RICHMOND VOLUNTEER AMBULANCE CORPS., INC.
78-15 JAMAICA AVENUE
WOODHAVEN, NY 11421
(718) 296-9000

Name of Project Director:

THOMAS MEEHAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EMERGENCY AND TRANSFER AMBULANCE SERVICE AT COMMUNITY EVENTS; ASSISTS LOCAL GOVERNMENT AGENCIES DURING DISASTERS; PROVIDES EDUCATIONAL OPPORTUNITIES IN PRO-HOSPITAL CARE TO CORP. MEMBERS; PROVIDES GENERAL COMMUNITY EDUCATION IN FIRST AID AND CPR. FUNDS ARE NEEDED TO PAY FOR INSURANCE OF TWO AMBULANCES AND COSTS ASSOCIATED WITH MAINTAINING HEADQUARTERS.

Funded Amount:

$3,000

Requested By:

SEMINERIO

Name of Administering State Agency:

DEPARTMENT OF HEALTH
Legal Name, Address, and Telephone Number:

ALBANY COUNTY OPPORTUNITY, INCORPORATED
333 SHERIDAN AVENUE
ALBANY, NY 12206
(518) 463-3175 101

Name of Project Director:

THERESA GRAFFLIN

Purpose of Project:

FUNDS WILL BE USED FOR A PROGRAM THAT PROVIDES WORK EXPERIENCE TO INDIVIDUALS WHO ARE DONATING MANDATORY "VOLUNTEER" HOURS WITH RESOURCES TO ELIMINATE/DIMINISH LANGUAGE BARRIERS IN ORDER TO MAINTAIN PRODUCTIVE EMPLOYMENT.

Funded Amount:

$5,000

Requested By:

CANESTRARI, MCENENY

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

ACTORS FUND OF AMERICA
729 SEVENTH AVE – 10TH FLOOR
NEW YORK, NY 10019
(212) 221 – 7300

Name of Project Director:

MICHELLE BARBEAU

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL OPERATING EXPENSES OF THE ACTOR’S WORK PROGRAM.

Funded Amount:

$50,000

Requested By:

JOHN

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

ALBANY COUNTY OPPORTUNITY, INCORPORATED
333 SHERIDAN AVENUE
ALBANY, NY 12210
(518) 463-3175

Name of Project Director:

KATHLEEN CLOUTIER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT "THE ENGLISH FOR SPEAKERS OF OTHER LANGUAGES" PROGRAM WHICH IS A COMPONENT OF THE ORGANIZATION’S VOLUNTEER TO WORK PROGRAM.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

BADEN STREET SETTLEMENT OF ROCHESTER, INC.
152 BADEN STREET
ROCHESTER, NY  14605
(585) 325-4910

Name of Project Director:

RON THOMAS

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE AND DEVELOP YOUTH PROGRAMS INCLUDING SKILLS, LIFE SKILLS, AND A YOUTH ENRICHMENT PROGRAM.

Funded Amount:

$110,000

Requested By:

GANTT

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

BUSINESS OUTREACH CENTER NETWORK, INC.
85 SOUTH OXFORD STREET
BROOKLYN, NY 11217
(718) 624-9115

Name of Project Director:

NANCY CARIN

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY OUTREACH, INTENSIVE CARE BUSINESS TRAINING, ONE-ON-ONE BUSINESS COUNSELING.

Funded Amount:

$5,000

Requested By:

JEFFRIES

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

CENTER FOR THE WOMEN OF NEW YORK
120-55 QUEENS BOULEVARD, ROOM 209
KEW GARDENS, NY 11424
(718) 793-0672

Name of Project Director:

ANN JAWIN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING EXPENSES AND THE DIVERSIFIED NEEDS OF THE UNEMPLOYED.

Funded Amount:

$12,500

Requested By:

CARROZZA

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

CENTRAL NEW YORK LABOR COUNCIL
270 GENESSEE STREET
UTICA, NEW YORK 13502
(315) 735 – 6101

Name of Project Director:

PATRICK COSTELLO, PRESIDENT

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE OPERATIONS AND SERVICES PROVIDED TO THE LABOR FORCE OF ONEIDA AND HERKIMER COUNTIES.

Funded Amount:

$56,250

Requested By:

DESTITO

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

DAVID CHEN, DIRECTOR

Purpose of Project:

FUNDS WILL BE USED FOR THE WORKFORCE DEVELOPMENT PROGRAM, INCLUDING ESL INSTRUCTION, COUNSELING, JOB DEVELOPMENT AND JOB PLACEMENT, AND JOB READINESS SKILLS.

Funded Amount:

$250,000

Requested By:

SILVER, YOUNG

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

FEDERATION EMPLOYMENT AND GUIDANCE SERVICE, INC.
315 HUDSON STREET
NEW YORK, NY 10013
(212) 366-8400

Name of Project Director:

AMI DORIN

Purpose of Project:

FUNDS WILL BE USED TO IDENTIFY PEOPLE IN NEED OF REFERRALS TO PROGRAMS AND SERVICES AT FEG'S LOCATIONS.

Funded Amount:

$3,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF LABOR
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FORT GREENE STRATEGIC NEIGHBORHOOD ACTION PARTNERSHIP
322 MYRTLE AVENUE
BROOKLYN, NY  11205
(718) 694-6957

Name of Project Director:

GEORGIANNA GLOSE

Purpose of Project:

FUNDS WILL BE USED TO ASSIST PARTICIPANTS DEVELOPING SMALL BUSINESSES, FINDING WORK, RESUME WRITING, AND LEARNING HOW TO USE THE INTERNET.

Funded Amount:

$2,500

Requested By:

JEFFRIES

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

GRAND STREET SETTLEMENT, INC.
80 PIT STREET
NEW YORK, NY 10002
(212) 674-1740

Name of Project Director:

WILLIAM RIVERA

Purpose of Project:

FUNDS WILL BE USED TO OPERATE THE YOUTH OPPORTUNITIES PROGRAM AND TO UPDATE THE COMPUTER CENTER.

Funded Amount:

$86,000

Requested By:

GLICK, SILVER

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

LA ASOCIACION BENEFICA CULTURAL FATHER BILLINI
25-28 89TH STREET
JACKSON HEIGHTS, NY  11369
(718) 651-8427

Name of Project Director:

ANA LOPEZ

Purpose of Project:

FUNDS WILL BE USED TO TEACH SCHOOL-TO-WORK SKILLS IN ORDER TO PREPARE PARTICIPANTS FOR THE WORKFORCE.

Funded Amount:

$5,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

LONG ISLAND WORKS COALITION, INC.
P.O. BOX 544
WHEATLEY HEIGHTS, NY  11798
(631) 843-4010

Name of Project Director:

CHERYL DAVIDSON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AND EXPAND WORKFORCE READINESS EFFORTS IN SCHOOL DISTRICTS ACROSS LONG ISLAND.

Funded Amount:

$2,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

DEPARTMENT OF LABOR
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MOUNT VERNON YOUTH BUREAU
1 ROOSEVELT SQUARE
MT. VERNON, NY  10550
(914) 665-2344

Name of Project Director:

DIANE SOTINO

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH EMPLOYMENT.

Funded Amount:

$15,000

Requested By:

PRETLOW

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

NEW YORK STATE ASSOCIATION OF BLACK WOMEN OWNED ENTERPRISES, INC.
730 FULTON AVENUE
HEMPSTEAD, NY 11550
(516) 485-5900

Name of Project Director:

GINA SLATER PARKER

Purpose of Project:

FUNDS WILL BE USED TO ADVOCATE, NETWORK, IDENTIFY, AND PROVIDE
BUSINESS/TECHNICAL RESOURCES, EQUAL ACCESS TO FINANCIAL
ASSISTANCE AND ACCESS TO GOVERNMENT AND PRIVATE SECTOR
PROCUREMENT FOR MEMBERS.

Funded Amount:

$9,500

Requested By:

HOOPER

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

NEW YORK STATE LABOR-RELIGION COALITION, INC.
800 TROY-SCHENECTADY ROAD
LATHAM, NY 12110
(518) 213-6000  6294

Name of Project Director:

BRIAN O'SHAUGHNESSY

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT NYS ANTI-SWEATSHOP LAWS FOR APPAREL AND SPORTS EQUIPMENT, THROUGH AN INFORMATIONAL CAMPAIGN IN SCHOOL DISTRICTS AND COLLEGES IN THE CAPITAL DISTRICT.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

NEW YORK STATE LABOR-RELIGION COALITION, INC.
800 TROY-SCHENECTADY ROAD
LATHAM, NY 12110
(518) 213-6000 6294

Name of Project Director:

BRIAN O'SHAUGHNESSY

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH AND EDUCATION TO BRING ABOUT THE PURCHASE OF SWEATSHOP-FREE SPORTS EQUIPMENT BY SCHOOL BOARDS AND PUBLIC COLLEGES, AND FOR OUTREACH TO INCREASE AWARENESS, AND PURCHASE FAIR TRADE (NO CHILD LABOR) PRODUCTS.

Funded Amount:

$5,000

Requested By:

CANESTRARI, REILLY

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

OPPORTUNITIES FOR A BETTER TOMORROW, INC.
783 FOURTH AVENUE
BROOKLYN, NY  11232
(718) 369-0303

Name of Project Director:

RANDY PEERS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE GENERAL OPERATING EXPENSES TO MAINTAIN THE QUALITY OF THE JOB-TRAINING PROGRAM.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

SKILLED TRADES DIVERSITY COUNCIL
622 WEST STATE STREET
ITHACA, NY 14850
(607) 272-3122

Name of Project Director:

DAVE MARSH

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH TO BOTH LABOR AND MANAGEMENT TO INCLUDE UNDERREPRESENTED POPULATIONS TO EXPAND EMPLOYMENT OPPORTUNITIES FOR WOMEN AND PEOPLE OF COLOR.

Funded Amount:

$10,000

Requested By:

LIFTON

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

TOMPKINS COUNTY LIVING WAGE COALITION
115 THE COMMONS
ITHACA, NY 14850
(607) 269-0409

Name of Project Director:

PETE MYERS

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE WORK WITH NON-UNION AND MIGRANT WORKERS NEEDING ADVOCACY AND SUPPORTIVE REFERRAL TO AND WITH A NUMBER OF STATE AGENCIES.

Funded Amount:

$20,000

Requested By:

LIFTON

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

UNITED JEWISH COUNCIL OF THE EAST SIDE, INC.
500-A GRAND STREET
NEW YORK, NY 10002
(212) 460-5730

Name of Project Director:

JOEL KAPLAN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN CAREER GUIDANCE AND COUNSELING, RESUME DEVELOPMENT, AND TO PROVIDE INFORMATION AND OUTREACH REGARDING EMPLOYMENT OPPORTUNITIES. FUNDS MAY ALSO BE USED FOR TRANSPORTATION FOR SENIORS, YOUTH ACTIVITIES AND TRANSITIONAL BENEFITS COUNSELING.

Funded Amount:

$196,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

UNIVERSITY SETTLEMENT SOCIETY OF NEW YORK
184 ELDRIDGE STREET
NEW YORK, NY  10002
(212) 674-9120

Name of Project Director:

MICHAEL ZISSE

Purpose of Project:

FUNDS WILL BE USED FOR THE TALENT SEARCH BRIDGE PROGRAM TO HELP MAINTAIN ONGOING SUMMER COMPONENTS INCLUDING EDUCATIONAL ENHANCEMENT CLASSES AND WORK EXPERIENCE. IN ADDITION, FUNDS WILL BE USED TO STRENGTHEN YEAR-ROUND SERVICES TO JHS STUDENTS, INCLUDING YOUTH LEADERSHIP AND WORK EXPERIENCES.

Funded Amount:

$102,000

Requested By:

GLICK, SILVER

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

VILLAGE OF SPRING VALLEY
200 NORTH MAIN STREET
SPRING VALLEY, NY  10977
(845) 573-5825

Name of Project Director:

RITA GRAYSON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT TRAINING CLASSES FOR THE VILLAGE'S 150 PERSON WORKFORCE.

Funded Amount:

$7,500

Requested By:

JAFFEE

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

WESTCHESTER PUTNAM CONSORTION FOR WORKER EDUCATION
AND TRAINING
20 SOUTH BROADWAY, SUITE 1201
YONKERS, NY 10701
(914) 709-1373

Name of Project Director:

LUCY REDZEPSOKI

Purpose of Project:

FUNDS WILL BE USED FOR UPGRADING SKILLS FOR EXISTING WORKERS

Funded Amount:

$5,000

Requested By:

SPANO

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

WESTERN NEW YORK WORKFORCE DEVELOPMENT CENTER
3871 HARLEM ROAD
BUFFALO, NY 14215
(716) 833-9540

Name of Project Director:

CONSTANCE KRUEGER

Purpose of Project:

FUNDS WILL BE USED TO FUND COMPUTER TRAINING CLASSES FOR ALL MEMBERS OF THE COMMUNITY IN LOCATIONS THROUGHOUT ERIE COUNTY

Funded Amount:

$5,000

Requested By:

QUINN

Name of Administering State Agency:

DEPARTMENT OF LABOR
Legal Name, Address, and Telephone Number:

112TH PRECINCT COMMUNITY COUNCIL, CORP.
C/O 112TH PRECINCT, 68-40 AUSTIN STREET
FOREST HILLS, NY 11375
(718) 520-9311

Name of Project Director:

HEIDI CHAIN

Purpose of Project:

FUNDS WILL BE USED TO PRODUCE AND DISTRIBUTE A COMMUNITY NEWSLETTER.

Funded Amount:

$3,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

163RD STREET IMPROVEMENT COUNCIL, INC.
1180 REV. JAMES A. POLITE AVENUE
BRONX, NY  10459
(718) 589-5080

Name of Project Director:

BIARNI BURKE

Purpose of Project:

FUND WILL BE USED FOR PROJECTS RELATED TO INFORMATION TECHNOLOGY UPGRADES, TRAINING AND OTHER ACTIVITIES WHICH FURTHER THE COUNCIL'S MISSION.

Funded Amount:

$12,000

Requested By:

BENJAMIN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

47TH STREET BUSINESS IMPROVEMENT DISTRICT
580 FIFTH AVENUE, ROOM 323
NEW YORK, NY  10036
(212) 302-5739

Name of Project Director:

DOREEN GREENRIDGE

Purpose of Project:

FUNDS WILL BE USED FOR THE BEAUTIFICATION OF BID AREA, INCLUDING PLANTING FLOWERS, AND FLOWERS MAINTENANCE, UPGRADES TO WEBSITE TO EDUCATE PUBLIC ABOUT DISTRICT AND TO PROVIDE THE BUYERS BILL OF RIGHTS.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ADVERTISING COUNCIL OF ROCHESTER, INC.
70 LINDEN OAKS, 3RD FLOOR
ROCHESTER, NY  14625
(585) 383-5454

Name of Project Director:

TODD BUTLER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE NOT-FOR-PROFIT CAPACITY BUILDING PROJECT AND FOR VARIOUS OFFICE IMPROVEMENTS. THIS WILL ENSURE THE CONTINUATION OF PROFESSIONAL MARKETING COMMUNICATIONS SUPPORT TO NON-PROFIT AGENCIES ADDRESSING COMMUNITY NEEDS.

Funded Amount:

$15,000

Requested By:

MORELLE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

AETNA FIRE ENGINE COMPANY NO. 1
P.O. BOX 312
FULTONVILLE, NY 12072
(518) 365-4521

Name of Project Director:

GREGORY SMITH

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF EXTRICATION EQUIPMENT, INCLUDING THE JAWS OF LIFE.

Funded Amount:

$5,000

Requested By:

TONKO

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AFRICAN AMERICAN CHAMBER OF COMMERCE OF WESTCHESTER AND ROCKLAND COUNTIES
100 STEVENS AVENUE, SUITE 202
MOUNT VERNON, NY 10550
(914) 699-9050

Name of Project Director:

ROBIN DOUGLAS

Purpose of Project:

FUNDS WILL BE USED FOR THE SMALL/MINORITY BUSINESS INCUBATOR PROGRAM.

Funded Amount:

$10,000

Requested By:

PRETLOW

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

AKRON VOLUNTEER FIRE COMPANY, INC.
1 MAIN STREET
AKRON, NY 14001
(716) 542-9091

Name of Project Director:

KEITH HAWES

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF NEW COMPUTERS

Funded Amount:

$4,000

Requested By:

COLE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ALLEGANY CEMETERY ASSOCIATION
MAPLE AVENUE
ALLEGANY, NY 14706
(716) 372-0894

Name of Project Director:

JACK R. SUTLEY

Purpose of Project:

FUNDS WILL BE USED FOR REMOVAL OF DANGEROUS TREES

Funded Amount:

$3,000

Requested By:

GIGLIO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ALLEGANY COUNTY CLERK
7 COURT STREET, ROOM 18
BELMONT, NY 14813
(585) 268-9270 280

Name of Project Director:

ROBERT L. CHRISTMAN

Purpose of Project:

FUNDS WILL BE USED FOR RECORDS PRESERVATION

Funded Amount:

$5,000

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ALLEGANY COUNTY CLERK
7 COURT STREET, ROOM 18
BELMONT, NY 14813
(585) 268-9270 280

Name of Project Director:

ROBERT L. CHRISTMAN

Purpose of Project:

FUNDS WILL BE USED FOR THE PRESERVATION OF HISTORIC COUNTY LAND RECORDS

Funded Amount:

$5,000

Requested By:

GIGLIO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ALLIANCE FOR DOWNTOWN NEW YORK
120 BROADWAY SUITE 3340
NEW YORK, NY 10271
(212) 835 – 2777

Name of Project Director:

BILL BERNSTEIN, VP OF FINANCE AND ADMIN.

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT DOWNTOWN TOURISM.

Funded Amount:

$100,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ALLIANCE FOR DOWNTOWN NY
120 BROADWAY, SUITE 3340
NEW YORK, NY 10271
(212) 835 – 2777

Name of Project Director:

BILL BERNSTEIN, VP OF FINANCE AND ADMIN.

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT FREE CONCERTS IN CITY HALL PARK IN LOWER MANHATTAN DURING THE MONTH OF AUGUST 2007.

Funded Amount:

$100,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ALTMAR VOLUNTEER FIRE DEPARTMENT
15 BRIDGE STREET, P.O. BOX 283
ALTMAR, NY 13302
(315) 298-4064

Name of Project Director:

THOMAS REFF

Purpose of Project:

FUNDS WILL BE USED FOR A NEW GENERATOR

Funded Amount:

$15,000

Requested By:

BARCLAY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

AMENIA FIRE DEPARTMENT
P.O. BOX 166
AMENIA, NY 12501
(845) 373-8467

Name of Project Director:

BILL DUTTON

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SEVEN NEW SCOTT'S AV-2000 AMPLIFIER COMMUNICATION DEVICES

Funded Amount:

$2,400

Requested By:

MOLINARO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

APALACHIN FIRE DEPARTMENT
1389 PENNSYLVANIA AVENUE
APALACHIN, NY 13732
(607) 625-2216

Name of Project Director:

TONY QUARANTA

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ASIAN AMERICANS FOR EQUALITY, INC.
111 DIVISION STREET
NEW YORK, NY  10002
(212) 979-1108

Name of Project Director:

CHRISTOPER KUI

Purpose of Project:

FUNDS WILL BE USED TO CREATE A STOREFRONT TECHNOLOGY CENTER TO GIVE LOCAL RESIDENTS IN CHINATOWN/LOWER EAST SIDE ACCESS TO INFORMATION AND OPPORTUNITIES AVAILABLE THROUGH COMPUTER TECHNOLOGY.

Funded Amount:

$117,500

Requested By:

SILVER, YOUNG

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ASSOCIATION OF COMMUNITY ORGANIZATIONS FOR REFORM NOW (ACORN)
2-4 NEVINS STREET, 2ND FLOOR
BROOKLYN, NY 11217
(718) 246-7900

Name of Project Director:

BERTHA LEWIS

Purpose of Project:

FUNDS WILL BE USED TO ENSURE THAT LOW-INCOME FAMILIES IN NEW YORK CITY TAKE ADVANTAGE AND ARE AWARE OF THE EARNED INCOME TAX CREDIT AND PUBLIC HEALTH INSURANCE PROGRAMS.

Funded Amount:

$10,000

Requested By:

JEFFRIES

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ASSOCIATION OF COMMUNITY ORGANIZATIONS FOR REFORM NOW (ACORN)
88 THIRD AVENUE, 3RD FLOOR
BROOKLYN, NY  11217
(718) 246-7900

Name of Project Director:

BERTHA LEWIS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE INCOME TAX PREPARATION AND
HEALTH CARE ENROLLMENT OUTREACH CAMPAIGN AND FOR THE
HOMEBUYERS SEMINARS AND COUNSELING SERVICES THAT WILL BE
AVAILABLE TO THE RESIDENTS OF QUEENS COUNTY.

Funded Amount:

$7,000

Requested By:

COOK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ASSOCIATION OF COMMUNITY ORGANIZATIONS FOR REFORM NOW (ACORN)
88 THIRD AVENUE, 3RD FLOOR
BROOKLYN, N Y 11217
(718) 246-7900  202

Name of Project Director:

BERTHA LEWIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE TAX PREPARATION AND OUTREACH WITH EITC APPLICATION ASSISTANCE TO UNDERSERVED COMMUNITIES IN MANHATTAN COUNTY.

Funded Amount:

$10,000

Requested By:

POWELL

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ASSOCIATION OF COMMUNITY ORGANIZATIONS FOR REFORM NOW (ACORN)
2-4 NEVINS STREET, 2ND FLOOR
BROOKLYN, NY 11217
(718) 246-7900

Name of Project Director:

BERTHA LEWIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FOUR SEMINARS PER YEAR ABOUT HOME OWNERSHIP.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ASSOCIATION OF COMMUNITY ORGANIZATIONS FOR REFORM NOW (ACORN)
88 THIRD AVENUE, 3RD FLOOR
BROOKLYN, NY  11217
(718) 246-7900

Name of Project Director:

BERTHA LEWIS

Purpose of Project:

FUNDS WILL BE USED FOR FREE TAX PREPARATION, ASSISTANCE WITH EITC
APPLICATION AND OUTREACH TO UNDERSERVED COMMUNITIES.

Funded Amount:

$2,500

Requested By:

PERRY

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ASSOCIATION OF COMMUNITY ORGANIZATIONS FOR REFORM NOW (ACORN)
2-4 NEVINS STREET, 2ND FLOOR
BROOKLYN, NY 11217
(718) 246-7900

Name of Project Director:

BERTHA LEWIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE TAX PREPARATION AND EITC
APPLICATION ASSISTANCE TO UNDERSERVED COMMUNITIES.

Funded Amount:

$7,752

Requested By:

CAMARA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ASSOCIATION OF COMMUNITY ORGANIZATIONS FOR REFORM NOW (ACORN)
88 THIRD AVENUE, 3RD FLOOR
BROOKLYN, NY  11217
(718) 246-7900  202

Name of Project Director:

BERTHA LEWIS

Purpose of Project:

FUNDS WILL BE USED FOR FREE TAX PREPARATION AND OUTREACH WITH EITC APPLICATION ASSISTANCE TO THE UNDERSERVED COMMUNITIES IN MANHATTAN COUNTY.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ATLANTIC BEACH FIRE DISTRICT
ONE RESCUE ROAD - P.O. BOX 95
ATLANTIC BEACH, NY  11509
(516) 371-2348

Name of Project Director:

JONATHAN B. KOHAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMMUNICATION EQUIPMENT FOR THE RESCUE UNIT.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AURORA FIRE DEPARTMENT
456 MAIN STREET, BOX 192
AURORA, NY 13026
(315) 364-8590

Name of Project Director:

MARK BAILEY

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BADEN STREET SETTLEMENT OF ROCHESTER, INC.
152 BADEN STREET
ROCHESTER, NY 14605
(585) 325-4910

Name of Project Director:

RON THOMAS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CHILDREN WITH THE OPPORTUNITY TO LEARN AND PARTICIPATE IN THE DRUM AND BUGLE CORP ASSOCIATION, AS WELL AS TO PURCHASE BAND EQUIPMENT.

Funded Amount:

$10,000

Requested By:

GANTT

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BALDWINSVILLE VOLUNTEER FIRE CO., INC.
P.O. BOX 257
BALDWINSVILLE, NY 13027
(315) 638-0300

Name of Project Director:

PAUL JOHNSON

Purpose of Project:

FUNDS WILL BE USED TO EQUIP THE COMPANY’S VEHICLES WITH AUTOMATED EXTERNAL DEFIBRILLATORS (AED’S). THESE UNITS WILL ASSIST WORKERS TO REVIVE HEART PATIENTS.

Funded Amount:

$10,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BARNARD FIRE DISTRICT  
3084 DEWEY AVENUE  
ROCHESTER, NY 14616  
(585) 663-1133

Name of Project Director:

JAMES GALLAGHER

Purpose of Project:

FUNDS WILL BE USED FOR A LAPTOP COMPUTER-ELECTRONIC PATIENT TRACKING

Funded Amount:

$7,500

Requested By:

REILICH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BAYPORT BLUEPOINT CHAMBER OF COMMERCE  
P.O. BOX 201  
BAYPORT, NY 11705  
(631) 472-5478

Name of Project Director:

SETH NEDDLEMAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND MAINTAIN FLOWER BASKETS THROUGHOUT HAMLET AND DOWNTOWN OF BAYPORT AND BLUEPOINT.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BAYPORT CIVIC ASSOCIATION, INC.
P.O. BOX 95
BAYPORT, NY 11705
(631) 472-0999

Name of Project Director:

BOB DRAFFIN

Purpose of Project:

FUNDS WILL BE USED FOR A NEWSLETTER.

Funded Amount:

$2,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BAYPORT FIRE DEPARTMENT
251 SNEDECOR AVENUE
BAYPORT, NY 11705
(631) 472-0641

Name of Project Director:

RAYMOND F. REILLY

Purpose of Project:

FUNDS WILL BE USED FOR A COMPUTER-AIDED DISPATCH SYSTEM.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BAYSIDE BUSINESS ASSOCIATION, INC.
214-01 NORTHERN BOULEVARD
BAYSIDE, NY  11361
(718) 229-4700

Name of Project Director:

JUDY LIMPERT

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET OPERATIONAL COSTS--COMMUNITY REVITALIZATION AND BEAUTIFICATION PROJECTS WILL BE CONDUCTED.

Funded Amount:

$13,500

Requested By:

CARROZZA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BELLEVUE FIRE DISTRICT #9
511 COMO PARK BOULEVARD
CHEEKTOWAGA, NY 14227
(716) 685-1680

Name of Project Director:

GREG GACZEWSKI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TURNOUT GEAR.

Funded Amount:

$6,500

Requested By:

GABRYSZAK

Name of Administering State Agency:

DEPARTMENT OF STATE
LEGAL NAME, ADDRESS, AND TELEPHONE NUMBER:

BELMORE FIRE DEPARTMENT
230 PETTIT AVENUE
BELMORE, NY 11710
(516) 221-4418

NAME OF PROJECT DIRECTOR:

JOHN CURLEY

PURPOSE OF PROJECT:

FUNDS WILL BE USED FOR ONGOING PROGRAMMATIC EXPENSES

FUNDED AMOUNT:

$3,000

REQUESTED BY:

MCDONOUGH

NAME OF ADMINISTERING STATE AGENCY:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BENSONHURST NEIGHBORHOOD ASSOCIATION
P.O. BOX 90411
ROCHESTER, NY  14609
(585) 802-5779

Name of Project Director:

BRIE HARRISON

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY BEAUTIFICATION EFFORTS
AND/OR NEWSLETTER PRODUCTION.

Funded Amount:

$5,000

Requested By:

MORELLE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BERKSHIRE FIRE DEPARTMENT
12450 STATE ROUTE 38
BERKSHIRE, NY 13736
(607) 657-2727

Name of Project Director:

MICHAEL SIMMONS

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BLUEPOINT FIRE DISTRICT
205 BLUEPOINT AVENUE
BLUEPOINT, NY 11715
(631) 363-2005

Name of Project Director:

WALTER DUNN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SAFETY EQUIPMENT FOR THE FIRE DEPARTMENT.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BOERUM HILL ASSOCIATION, INC.
448 ATLANTIC AVENUE
BROOKLYN, NY  11217
(718) 858-3822  100

Name of Project Director:

SUE WOLF

Purpose of Project:

FUNDS WILL BE USED TO INCREASE OUTREACH EFFORTS TO MAKE THE BOERUM HILL ASSOCIATION MORE ACCESSIBLE TO THE COMMUNITY.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BOGHT COMMUNITY FIRE DISTRICT
1095 LOUDON ROAD
COHOES, NY 12047
(518) 785-0339

Name of Project Director:

JAN TURCOTTE

Purpose of Project:

FUNDS WILL BE USED TOWARD A NEW STATION TO HOUSE RESIDENTS IN TIME OF DISASTER.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

DEPARTMENT OF STATE
BOHEMIA CIVIC ASSOCIATION, INC.
P.O. BOX 63
BOHEMIA, NY 11716
(631) 563-9673

GERALD O'CONNOR

FUNDS WILL BE USED TO PROVIDE A NEWSLETTER.

$2,000

FIELDS

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BREWERTON FIRE DISTRICT
P.O. BOX 708
BREWERTON, NY  13029
(315) 668-2412

Name of Project Director:

MARSHALL SHUPE

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE SAFETY ALERTING AND COMMUNICATIONS EQUIPMENT.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BRIDGEPORT VOLUNTEER FIRE COMPANY, INC.
P.O. BOX 600, 427 MAIN STREET
BRIDGEPORT, NY  13030
(315) 633-0510

Name of Project Director:

PAUL SMITH

Purpose of Project:

FUNDS WILL BE USED TO REPLACE EQUIPMENT INCLUDING DEFIBRILATORS AND UPGRADE RESCUE TOOLS ON FIRE ENGINES.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BRIDGEWATER FIRE COMPANY, INC.
P.O. BOX 365
BRIDGEWATER, NY  13313
(315) 822-3161

Name of Project Director:

WILLIAM DEKING

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BUNKER GEAR FOR BRIDGEWATER FIRE COMPANY.

Funded Amount:

$10,000

Requested By:

MAGEE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BROAD CHANNEL VOLUNTEERS, INC.
15 NOEL ROAD
BROAD CHANNEL, NY  11693
(718) 474-6888

Name of Project Director:

ED O'HARE

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE GENERAL OPERATING EXPENSES OF THE CORPS, AND ALSO TO ASSIST IN THE PURCHASE OF VITAL EQUIPMENT FOR LIFE-SAVING EFFORTS OF THE VOLUNTEER ORGANIZATION.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BROCKPORT VOLUNTEER FIRE DEPARTMENT
38 MARKET STREET, P.O. BOX 254
BROCKPORT, NY 14420
(585) 637-1030

Name of Project Director:

CHRIS MARTIN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF BLITZFIRE MOBILE MONITOR
HIGH POWERED NOZZLES

Funded Amount:

$6,780

Requested By:

REILICH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

    BROOKLYN  13 CERT
    1201 SURF AVENUE
    BROOKLYN, NY   11224
    (718) 266-3001

Name of Project Director:

    CHARLES REICHENTHAL

Purpose of Project:

    FUNDS WILL BE USED FOR THE PURCHASE OF EMERGENCY RESPONSE
    EQUIPMENT.

Funded Amount:

    $2,500

Requested By:

    BROOK-KRASNY

Name of Administering State Agency:

    DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BROOKLYN BAR ASSOCIATION VOLUNTEER LAWYERS PROJECT, INC.
123 REMSEN STREET
BROOKLYN, NY  11201
(718) 624-5446

Name of Project Director:

JEANNIE COSTELLO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LEGAL REPRESENTATION TO UNDERSERVED RESIDENTS OF BROOKLYN.

Funded Amount:

$6,000

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BROOKLYN LEGAL SERVICES CORP A  
206 BROADWAY  
BROOKLYN, NY  11211  
(718) 782-6124

Name of Project Director:

MARTIN S. NEEDLEMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LEGAL SERVICES TO INDIGENT MEMBERS OF THE COMMUNITY.

Funded Amount:

$2,500

Requested By:

PERRY

Name of Administering State Agency:

DEPARTMENT OF STATE
BROOME COUNTY GOVERNMENT-OFFICE FOR AGING
BROOME COUNTY OFFICE BLDG.-GOV'T PLAZA
44 HAWLEY ST., P.O. BOX 1766
BINGHAMTON, NY 13902
(607) 778-2411

DONNA BATES

FUNDS WILL BE USED TO PURCHASE AUTOMATIC DOORS FOR BROOME WEST CENTER AND TO PURCHASE A COMPUTER WITH SUPPLIES AND SOFTWARE FOR VESTAL SENIOR CENTER.

$10,000

LUPARDO

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

BUSINESS AND PROFESSIONAL WOMEN - ISLIP
6 FERN PLACE
OAKDALE, NY 11769
(631) 335-7376

Name of Project Director:

ELIZABETH KENNEDY

Purpose of Project:

FUNDS WILL BE USED FOR THE CREATION AND MAINTENANCE OF AN INFORMATIONAL WEBSITE FOR BPW-ISLIP, AND FOR THE COMPILATION OF A MONTHLY NEWSLETTER.

Funded Amount:

$1,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BYRON RESCUE SQUAD
EAST MAIN STREET
BYRON, NY 14422
(585) 356-2139

Name of Project Director:

WENDY HILBERT

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF NEW AMBULANCE

Funded Amount:

$10,000

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CALEDONIA FIRE DEPARTMENT
P.O. BOX 1
CALEDONIA, NY 14423
(585) 538-4455

Name of Project Director:

TOM SIMS

Purpose of Project:

FUNDS WILL BE USED FOR EMERGENCY AND COMMUNICATIONS EQUIPMENT

Funded Amount:

$6,000

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CAMBRIDGE FIRE DEPARTMENT
11 ST. LUKES PLACE
CAMBRIDGE, NY 12816
(518) 677-5437

Name of Project Director:

NASHUA ALEXANDER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF COMMUNICATIONS RADIO

Funded Amount:

$2,000

Requested By:

MCDONALD

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CAMPBELL HALL FIRE DEPARTMENT
13 MAYBROOK ROAD
CAMPBELL HALL, NY 10916
(845) 427-2888

Name of Project Director:

ROBERT CULLEN

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT FOR FIRE TRUCK

Funded Amount:

$2,260

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CAMPVILLE FIRE DEPARTMENT
7012 STATE ROUTE 17C
ENDICOTT, NY 13760
(607) 748-9315

Name of Project Director:

MIKE PETERS

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CANDOR FIRE DEPARTMENT
287 HONEYPOT ROAD
CANDOR, NY 13743
(607) 659-5859

Name of Project Director:

RANDY BLINN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CARIBBEAN WOMEN'S HEALTH ASSOCIATION, INC.
100 PARKSIDE AVENUE, 4TH FLOOR
BROOKLYN, NY  11226
(718) 826-2942  

Name of Project Director:

DR. MARILYN JOHN

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT A CITIZENSHIP INITIATIVE TO ASSIST IMMIGRANTS TO ATTAIN U.S. CITIZENSHIP STATUS AND TO REGISTER TO VOTE.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CARIBBEAN WOMEN'S HEALTH ASSOCIATION, INC.
100 PARKSIDE AVENUE
BROOKLYN, NY 11226
(718) 826-2942

Name of Project Director:

DR. MARCO A. MASON

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT A CITIZENSHIP INITIATIVE TO ASSIST IMMIGRANTS WITH ATTAINING CITIZENSHIP STATUS.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CEMETERY OF THE EVERGREENS, INC.
P.O. BOX 773
NEW LEBANON, NY 12125
(518) 794-8888

Name of Project Director:

KRISTIN GIBBONS

Purpose of Project:

FUNDS WILL BE USED FOR THE GENERAL MAINTENANCE OF PUBLIC CEMETERY.

Funded Amount:

$5,000

Requested By:

GORDON-T

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTER FOR TECHNOLOGY & INNOVATION, INC.
P.O. BOX 314
ENDICOTT, NY 13760
(607) 773-0092

Name of Project Director:

SUSAN SHERWOOD

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND RESTORE A LINK AVIATION TRAINER FOR THE PROTOTYPE EXHIBIT LAB AT THE CENTER FOR TECHNOLOGY & INNOVATION.

Funded Amount:

$7,500

Requested By:

LUPARDO

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTEREACH CIVIC ASSOCIATION, INC.
P.O. BOX 35
CENTEREACH, NY 11720
(631) 471-2031

Name of Project Director:

DIANE CAUDULLA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A PRINTER, INK, PAPER AND OTHER SUPPLIES FOR THE ORGANIZATION.

Funded Amount:

$2,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CENTRAL ASTORIA LOCAL DEVELOPMENT COALITION, INC.
28-27 STEINWAY STREET
ASTORIA, NY 11103
(718) 721-8252

Name of Project Director:

MARIE TORNIALI

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE CLEANLINESS OF BUSINESS DISTRICTS IN ASTORIA.

Funded Amount:

$10,000

Requested By:

GIANARIS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CENTRAL QUEENS YM&YWHA
67-09 108TH STREET
FOREST HILLS, NY 11375
(718) 268-5011

Name of Project Director:

DAVID POSNER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE LIBRARY, INCLUDING BUT NOT LIMITED TO PROVIDING EDUCATIONAL PROGRAMS, AND PURCHASING BOOKS/MATERIALS, ETC.

Funded Amount:

$50,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF STATE
LEGAL NAME, ADDRESS, AND TELEPHONE NUMBER:

CHAMBER OF COMMERCE OF WASHINGTON HEIGHTS, INC.
751 W. 183RD STREET
NEW YORK, NY 10033
(212) 928-6595

NAME OF PROJECT DIRECTOR:

RITA KATERMAN

PURPOSE OF PROJECT:

FUNDS WILL BE USED FOR PRINTING OF GUIDE BOOK FOR WASHINGTON HEIGHTS AND INWOOD.

FUNDED AMOUNT:

$4,000

REQUESTED BY:

ESPAILLAT

NAME OF ADMINISTERING STATE AGENCY:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CHERRY GROVE FIRE DEPARTMENT, INC.
P.O. BOX 4144
CHERRY GROVE, NY 11782
(631) 597-6574

Name of Project Director:

JILL NAVARO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TURN-OUT GEAR FOR FIRE FIGHTERS.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CHILSON VOLUNTEER FIRE DEPARTMENT, INC.
60 PUTTS POND ROAD
TICONDEROGA, NY 12020
(518) 585-7672

Name of Project Director:

FRED HUDSON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF GENERATOR

Funded Amount:

$10,000

Requested By:

SAYWARD

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CHINATOWN TRADE COUNCIL
225 WEST 34TH STREET
NEW YORK, NY  10122-0008
(212) 563-5052

Name of Project Director:

CHARLES PEI WANG

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE AND MARKET NEW YORK-MANUFACTURED APPAREL IN THE ASIAN-MARKET.

Funded Amount:

$35,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CHINESE IMMIGRANTS SERVICES, INC.
P.O. BOX 1656
FLUSHING, NY  11354
(718) 353-0195

Name of Project Director:

SUSAN RATHBONE

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS ASSISTING NEW IMMIGRANTS IN FLUSHING.

Funded Amount:

$1,000

Requested By:

YOUNG

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CHRIST LUTHERAN CHURCH  
P.O. BOX 2246  
NEWBURGH, NY 12550  
(845) 562-0824

Name of Project Director:

ALFRED SCHORNO

Purpose of Project:

FUNDS WILL BE USED FOR REPAIRS TO SAFE HOUSE FOR BATTERED WOMEN

Funded Amount:

$7,500

Requested By:

KIRWAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CICERO VOLUNTEER FIRE DEPARTMENT
P.O. BOX 1111
CICERO, NY 13039
(315) 699-7721

Name of Project Director:

TERRY SOUTHERDEN

Purpose of Project:

FUNDS WILL BE USED TO REPLACE COMMUNICATIONS EQUIPMENT.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

DEPARTMENT OF STATE
CINNINNATUS FIRE DEPARTMENT
5722 TELEPHONE ROAD EXTENSION
CINNINNATUS, NY 13040
(607) 863-4445

JEFFREY PECK

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

$1,000

FINCH

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CISNEVISION, INC.
49 WEST 225TH STREET
BRONX, NY  10463
(718) 562-3865

Name of Project Director:

CHARITO D. CISNEROS

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP NEWS AND INFORMATION CONTENT FOR SPANISH LANGUAGE MEDIA PROJECT.

Funded Amount:

$6,000

Requested By:

RIVERA-J

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CITY OF ALBANY
CITY HALL
ALBANY, NY  12207
(518) 434-5023

Name of Project Director:

THOMAS NITIDO

Purpose of Project:

FUNDS WILL BE USED FOR PRODUCTIONS AND/OR IMPROVEMENTS AT THE CITY-OWNED PALACE THEATER.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CITY OF AUBURN
24 SOUTH STREET
AUBURN, NY 13021
(315) 255-4146

Name of Project Director:

MICHAEL H. LONG

Purpose of Project:

FUNDS WILL BE USED FOR FENCING AT NORTH STREET CEMETERY NY
STATE ROUTE 34

Funded Amount:

$5,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CITY OF BINGHAMTON - OFFICE OF PARKS & RECREATION
CITY HALL, GOVERNMENT PLAZA, 44 HAWLEY STREET
BINGHAMTON, NY 13901
(607) 797-2307

Name of Project Director:

CAROL QUINLIVAN-SCHAUM

Purpose of Project:

FUNDS WILL BE USED TO REPLACE CARPETING, PURCHASE NEW SEWING MACHINES FOR TWO CENTERS, RECOVER FOUR POOL TABLES, CONSTRUCT A SOUND BARRIER WALL, PURCHASE COFFEE URN.

Funded Amount:

$5,000

Requested By:

LUPARDO

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CITY OF BINGHAMTON (BUREAU OF FIRE)
38 HAWLEY STREET
BINGHAMTON, NY 13901
(607) 772-7016

Name of Project Director:

MIKE WASHINGTON

Purpose of Project:

FUNDS WILL BE USED TO TRAIN LOCAL FIREFIGHTERS IN THE USE OF THERMAL IMAGING CAMERAS.

Funded Amount:

$17,500

Requested By:

LUPARDO

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CITY OF GENEVA
47 CASTLE STREET
GENEVA, NY 14456
(315) 789-2603

Name of Project Director:

RICH RISING

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF EQUIPMENT FOR A WI-FI SERVICES TO ENHANCE THE LIVES OF THE RESIDENTS OF THE CITY OF GENEVA

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CITY OF GENEVA
47 CASTLE STREET
GENEVA, NY 14456
(315) 789-2603

Name of Project Director:

RICH RISING

Purpose of Project:

FUNDS WILL BE USED FOR THE EXPANSION OF EMPLOYEE RECRUITING AND HIRING PROGRAM TO ACHIEVE GREATER WORKFORCE DIVERSITY

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CITY OF OLEAN CODE ENFORCEMENT DIVISION
101 EAST STATE STREET
OLEAN, NY 14760
(716) 376-5683

Name of Project Director:

GREGG BLAKESLEE

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT FOR IDENTIFICATION AND LICENSING SYSTEM

Funded Amount:

$3,000

Requested By:

GIGLIO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CITY OF ONEIDA FIRE DEPARTMENT
109 NORTH MAIN STREET
ONEIDA, NY 13421
(315) 363-1910

Name of Project Director:

DONALD HUDSON

Purpose of Project:

FUNDS WILL BE USED TO REPLACE OLD WOODEN LOCKERS FOR FIREFIGHTERS TO STORE THEIR FIREFIGHTING GEAR.

Funded Amount:

$15,000

Requested By:

MAGEE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CITY OF PORT JERVIS
14-20 HAMMOND STREET, BOX 1002
PORT JERVIS, NY  12771
(845) 858-4017

Name of Project Director:

GARY LOPRIORE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE 3 SCOTT AIRPACKS FOR FIRE DEPARTMENT.

Funded Amount:

$10,000

Requested By:

GUNThER-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CITY OF ROCHESTER
30 CHURCH STREET
ROCHESTER, NY  14614
(585) 475-7028  7045

Name of Project Director:

CHARLES REAVES

Purpose of Project:

FUNDS WILL BE USED TO FUND THE CLARISSA STREET REUNION. THE REUNION IS A COMMUNITY GATHERING THAT OVER 10,000 ATTEND EACH YEAR.

Funded Amount:

$5,000

Requested By:

GANTT

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CITY OF RYE
OFFICE OF THE CITY MANAGER, 1051 BOSTON POST ROAD
RYE, NY 10580
(914) 967-7404

Name of Project Director:

SCOTT PICKUP

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT A CITYWIDE SURVEY TO ASSESS BENEFITS OF TRAFFIC CALMING AND RECREATIONAL USES WITHIN THE COMMUNITY.

Funded Amount:

$2,400

Requested By:

LATIMER

Name of Administering State Agency:

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

PATRICK DRISCOLL

FUNDS WILL BE USED TO PURCHASE A COMPUTER-GENERATED ELECTRONIC MESSAGE BOARD.

$10,000

MAGNARELLI

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CITY OF TONAWANDA
200 NIAGARA STREET
TONAWANDA, NY 14150
(716) 695-8645

Name of Project Director:

CHIEF CHARLES STUART

Purpose of Project:

FUNDS WILL BE USED TO REPLACE/UPGRADE AN EMERGENCY GENERATOR AT THE CITY'S FIRE DEPARTMENT HEADQUARTERS.

Funded Amount:

$8,500

Requested By:

SCHIMMINGER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COMMACK FIRE DEPARTMENT
6309 JERICHO TURNPIKE
COMMACK, NY 11725
(631) 499-6690

Name of Project Director:

SALVATORE FORMICA

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT PURCHASE

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

COMMUNITY ACTION PROJECT  
890 FLATBUSH AVENUE  
BROOKLYN, NY  11226  
(718) 287-4334

Name of Project Director:

JUDITH TOLBERT

Purpose of Project:

FUNDS WILL BE USED TO FACILITATE EDUCATIONAL PROGRAMS THAT FOCUS ON EDUCATION REFORM, POLICE COMMUNITY RELATIONS, QUALITY OF LIFE AND CIVIC PARTICIPATION.

Funded Amount:

$5,000

Requested By:

JACOBS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

COMMUNITY ADVOCACY CENTER, INC.
657 FAIRVIEW AVENUE
RIDGEWOOD, NY  11385
(718) 760-8558

Name of Project Director:

ROBERT J. ROTHERMEL

Purpose of Project:

FUNDS WILL BE USED FOR THE QUEENS COUNTY GRANDPARENT RESOURCE CENTER INCLUDING, BUT NOT LIMITED TO, MAINTENANCE, LEGAL AWARENESS CLINICS AND ADVOCACY INTAKE.

Funded Amount:

$2,000

Requested By:

MARKEY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

COMMUNITY CARE DEVELOPMENT CORPORATION, INC.
97-11 SPRINGFIELD BOULEVARD
QUEENS VILLAGE, NY 11429
(718) 465-7617

Name of Project Director:

SHIRLEY ALEXANDER

Purpose of Project:

FUNDS WILL BE USED TO OPERATE A MULTI-SERVICE CENTER WHICH ASSISTS COMMUNITY RESIDENTS IN ACCESSING GOVERNMENT AND OTHER SERVICES. IT SERVES AS A CONDUIT FOR SMALL GRANT NOT-FOR-PROFIT ORGANIZATIONS THAT PROVIDE YOUTH AND COMMUNITY SERVICES.

Funded Amount:

$165,000

Requested By:

CLARK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

COMMUNITY FOUNDATION OF CENTEREACH
P.O. BOX 503
CENTEREACH, NY  11720
(631) 697-7220

Name of Project Director:

KEVIN MCCORMACK

Purpose of Project:

FUNDS WILL BE USED TOWARD EXPENSES ASSOCIATED WITH THE IMPLEMENTATION OF THE SMART GROWTH RECOMMENDATIONS DEVELOPED DURING THE MIDDLE COUNTRY COMMUNITY VISIONING, WHICH TOOK PLACE IN OCTOBER OF 2006.

Funded Amount:

$4,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CONKLIN FIRE DEPARTMENT
1032 CONKLIN ROAD
CONKLIN, NY 13748
(607) 343-4625

Name of Project Director:

GEORGE FRAILEY

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$5,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

COOPERATIVE EXTENSION ASSOCIATION IN THE STATE OF NEW YORK
203 NORTH HAMILTON
WATERTOWN, NY  13601
(315) 788-8450

Name of Project Director:

RICHARD L. HALPIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FACILITY IMPROVEMENTS AND INFRASTRUCTURE UPGRADES TO INCLUDE THE SEPTIC SYSTEM AND WATER SYSTEM.

Funded Amount:

$10,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CORONA - ELMHURST CENTER FOR ECONOMIC DEVELOPMENT
39-13 104TH STREET
CORONA, NY 11368
(718) 424-2512

Name of Project Director:

FERNANDO FERNANDEZ

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY AND ECONOMIC DEVELOPMENT PURPOSES, INCLUDING WORKSHOPS AND SEMINARS ON BUSINESS, HOME BUYING AND LOANS, COMPUTER COURSES, AND OVERALL ASSOCIATED EXPENSES.

Funded Amount:

$80,000

Requested By:

PERALTA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

COUNCIL MANAGEMENT COMPANY, INC.
80 MAIDEN LANE - 21ST FLOOR
NEW YORK, NY 10038
(212) 453-9500

Name of Project Director:

HERB FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET ONGOING COSTS OF ORGANIZATION PROGRAMS AND OPERATION. SOCIAL SERVICES TO NEEDY CHILDREN, FAMILIES AND THE ELDERLY WILL BE PROVIDED AND WILL INCLUDE, BUT NOT BE LIMITED TO CRISIS INTERVENTION, HOUSING SUPPORT TO SPECIAL NEEDS POPULATIONS, EMPLOYMENT TRAINING, JOB DEVELOPMENT, ETC.

Funded Amount:

$160,000

Requested By:

ABBATE, BENEDETTO, BING, BRENnan, BROOK-KRASNY, CANESTRARI, CLARK, CYMBROWITZ-S, DINOWITZ, FARRELL, GLICK, GOTTFRIED, HIKIND, HOYT, MAISEL, MAYERSOHN, MILLMAN, O’DONNELL, PHEFFER, ROSENTHAL, SILVER, WEINSTEIN, WEPRIN, YOUNG

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

COUNCIL OF JEWISH ORGANIZATIONS OF FLATBUSH, INC.
1550 CONEY ISLAND AVENUE
BROOKLYN, NY  11230
(718) 377-2900

Name of Project Director:

RABBI YEHEZKEL PIKUS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ASSISTANCE AND SERVICES TO SMALL BUSINESS IN SOUTHERN BROOKLYN. SERVICES PROVIDED INCLUDE FINANCIAL AND BUSINESS PLANNING WORKSHOPS, ASSISTANCE, IN OBTAINING PERMITS AND LICENSES, TRAINING EMPLOYEES, AND MUCH MORE. SERVICES PROVIDED ARE ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

COLTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

COUNCIL OF NEIGHBORHOOD ORGANIZATIONS, INC.
3911 FORT HAMILTON PARKWAY
BROOKLYN, NY  11218
(718) 853-0100

Name of Project Director:

VINCENT ACCETTA

Purpose of Project:

FUNDS WILL BE USED TO PRINT, PUBLISH AND DISTRIBUTE A MONTHLY NEWSLETTER.

Funded Amount:

$33,000

Requested By:

HIKIND

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CROGHAN FIRE DEPARTMENT
P.O. BOX 5
CROGHAN, NY 13327
(315) 346-6918

Name of Project Director:

BRUCE WIDRICK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TURNOUT GEAR FOR FIRE DEPARTMENT

Funded Amount:

$5,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CRYSTAL BEACH FIRE DEPARTMENT
4468 STATE ROUTE 364
CANANDAIGUA, NY 14424
(585) 394-7434

Name of Project Director:

JAMES MASON

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A THERMAL IMAGING CAMERA

Funded Amount:

$10,000

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

CUYLER FIRE DEPARTMENT
P.O. BOX 118
DERUYTER, NY 13052
(607) 842-6630

Name of Project Director:

LESTER LAMBERT

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

DANSVILLE AMBULANCE COMPANY, INC.
18 OSSIAN STREET, P.O. BOX 235
DANSVILLE, NY 14437
(585) 746-2929

Name of Project Director:

DAVID LEVEN

Purpose of Project:

FUNDS WILL BE USED FOR AUTOMATED EXTERNAL DEFIBRILLATORS

Funded Amount:

$8,000

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

DAVIS PARK FIRE DEPARTMENT, INC.
P.O. BOX 702
PATCHOGUE, NY 11772
(631) 597-6024

Name of Project Director:

CYNTHIA HOM

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE PURCHASE OF SAFETY EQUIPMENT.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

DELPHI FALLS FIRE CO., INC.
2172 ORAN DELPHI ROAD
DELPHI FALLS, NY 13051
(315) 662-3595

Name of Project Director:

JAMES MAWSON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TWO AUTOMATED EXTERNAL DEFIBRILLATOR MACHINES TO EQUIP TWO ADDITIONAL FIRE RESCUE AND EMERGENCY VEHICLES.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

DEPOSIT FIRE DEPARTMENT
146 FRONT STREET
DEPOSIT, NY 13754
(607) 467-2115

Name of Project Director:

GRAIG CONKLIN

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$5,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

DOE FUND, INC.
232 EAST 84TH STREET
NEW YORK, NY  10028-2951
(212) 628-5207

Name of Project Director:

GEORGE MCDONALD

Purpose of Project:

FUNDS WILL BE USED FOR A STREET CLEANING OPERATION ALONG WITH OVERALL MAINTENANCE OF STREETS WITHIN A SPECIFIED AREA IN JACKSON HEIGHTS.

Funded Amount:

$25,000

Requested By:

PERALTA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

DOE FUND, INC.
232 EAST 84TH STREET
NEW YORK, NY 10028-2951
(212) 628-5207

Name of Project Director:

GEORGE MCDONALD

Purpose of Project:

FUNDS WILL BE USED FOR A STREET CLEANING OPERATION ALONG WITH OVERALL MAINTENANCE OF STREETS IN A SPECIFIED AREA WITHIN CORONA.

Funded Amount:

$35,000

Requested By:

PERALTA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

DOE FUND, INC.
232 EAST 84TH STREET
NEW YORK, NY   10028
(212) 628-5207

Name of Project Director:

JOANNA WEST

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A PROGRAM WHEREBY RECOVERING SUBSTANCE ABUSERS CLEAN THE STREETS AND SIDEWALKS OF THE FOREST HILLS BUSINESS DISTRICT.

Funded Amount:

$5,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

DOYLE FIRE DISTRICT #1
2199 WILLIAM STREET
CHEEKTOWAGA, NY  14206
(716) 896-4399

Name of Project Director:

JERRY SPRADA

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF COMPUTER EQUIPMENT.

Funded Amount:

$1,250

Requested By:

GABRYSZAK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

DOYLE FIRE DISTRICT #2
100 WILLOWLAWN PARKWAY
CHEEKTOWAGA, NY 14206
(716) 583-3741

Name of Project Director:

LARRY ROKITKA

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF COMPUTER EQUIPMENT.

Funded Amount:

$1,250

Requested By:

GABRYSZAK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EAST 86TH STREET MERCHANTS RESIDENTS ASSOCIATION, INC.
P.O. BOX 485, GRACIE STATION
NEW YORK, NY  10028
(212) 560-2648

Name of Project Director:

ELAINE WALSH

Purpose of Project:

FUNDS WILL BE USED FOR SUPPLEMENTAL SANITATION, INCLUDING POWER WASHING SIDEWALKS AND TREE CARE IN THE 86TH STREET CORRIDOR.

Funded Amount:

$2,500

Requested By:

BING, GRANNIS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EAST 86TH STREET MERCHANTS RESIDENTS ASSOCIATION, INC.
225 EAST 79TH STREET - SUITE 13B
NEW YORK, NY  10021
(212) 861-7464

Name of Project Director:

ELAINE M. WALSH

Purpose of Project:

FUNDS WILL BE USED FOR THE OUTREACH TOWARD ORGANIZING OF BUSINESSES, RESIDENTS AND THE COMMUNITY AND CIVIC ORGANIZATIONS IN THE 86TH ST. CORRIDOR AND THE SURROUNDING AREA. THE ASSOCIATION WILL BE WORKING ON PROJECTS TO IMPROVE THE QUALITY OF LIFE OF THE RESIDENTS AND BUSINESSES.

Funded Amount:

$2,500

Requested By:

BING, GRANNIS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EAST BRENTWOOD FIRE DEPARTMENT
26 FULTON ST.
EAST BRENTWOOD, NY 11717
(631) 273-4560

Name of Project Director:

EDWARD TULLY, JR.

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AND MAINTAIN EQUIPMENT AND MEALS THAT ARE NON-PERISHABLE IN PREPARATION FOR HURRICANES, HOMELAND SECURITY ISSUES, ETC. (I.E., COTS, MEALS, WATER, SUNDRIES, ETC.).

Funded Amount:

$8,000

Requested By:

RAMOS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EAST SIDE REZONING ALLIANCE
50 PARK AVENUE
NEW YORK, NY  10016
(212) 683-0783

Name of Project Director:

IRENE PEVERI

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP SOUND COMMUNITY PLANNING WITH DEVELOPER'S PROPOSAL FOR THE NEIGHBORHOOD.

Funded Amount:

$7,500

Requested By:

KAVANAGH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EAST WILLISTON FIRE DEPARTMENT
456 SAGAMORE AVENUE
EAST WILLISTON, NY 11596
(516) 248-7566

Name of Project Director:

KEVIN MULROONEY

Purpose of Project:

FUNDS WILL BE USED FOR EMS EQUIPMENT-PULSE OXYMETER AND RELATED ACCESSORIES

Funded Amount:

$2,000

Requested By:

MCKEVITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EASTRIDGE KIWANIS CHARITABLE FOUNDATION, INC.
1780 EAST RIDGE ROAD
ROCHESTER, NY  14622
(585) 467-9360

Name of Project Director:

FRANKLIN D'AURIZIO

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE GAZEBO AND INSTALL FLAG POLES ON THE GROUNDS OF IRONDEQUOIT TOWN HALL.

Funded Amount:

$10,000

Requested By:

MORELLE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

EBENEZER CEMETERY ASSOCIATION MOUNT HOPE, INC.
124 GREYMONT AVENUE
WEST SENECA, NY 14224
(716) 674-2879

Name of Project Director:

JANET ENSMINGER

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE GROUNDS AND INFRASTRUCTURE FOR CEMETERY.

Funded Amount:

$10,000

Requested By:

SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EDEN EMERGENCY SQUAD, INC.
2795 EAST CHURCH STREET, P.O. BOX 111
EDEN, NY 14057
(716) 992-4856

Name of Project Director:

SCOTT HULQUIST

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF HEART MONITORS THAT WILL BE USED TO DETERMINE THE NECESSARY TREATMENT NEEDED BY A PATIENT SO HE OR SHE CAN BE TRANSPORTED TO THE APPROPRIATE FACILITY

Funded Amount:

$10,000

Requested By:

QUINN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EDgewater Park Volunteer Hose Co. No. 1, Inc.
The Mansion Edgewater Park
Bronx, NY 10465
(718) 863-7452

Name of Project Director:

Brian Kelly

Purpose of Project:

Funds will be used to replace and update existing equipment.

Funded Amount:

$5,000

Requested By:

Benedetto

Name of Administering State Agency:

Department of State
Legal Name, Address, and Telephone Number:

EGGERTSVILLE HOSE COMPANY
1880 EGGERT ROAD
AMHERST, NY 14226
(716) 818-0021

Name of Project Director:

MICHAEL J. BOEHM

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF BULLARD T4 THERMAL IMAGING CAMERA

Funded Amount:

$10,000

Requested By:

HAYES

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ELMWOOD PARK FIRE DISTRICT
589 RUSSELL ROAD
ALBANY, NY  12203
(518) 489-6556

Name of Project Director:

PAUL MILLER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT TO ASSIST AND AID VOLUNTEER FIREFIGHTERS IN RESPONDING TO AND ADDRESSING EMERGENCIES.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EMERALD ISLE IMMIGRATION CENTER, INC.
59-26 WOODSIDE AVENUE
WOODSIDE, NY 11377
(718) 478-5502

Name of Project Director:

SIOBHAN DENNEHY

Purpose of Project:

FUNDS WILL BE USED FOR CITIZENSHIP AND EMPLOYMENT PROGRAMS.

Funded Amount:

$1,500

Requested By:

LAFAYETTE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EMERALD ISLE IMMIGRATION CENTER, INC.
59-26 WOODSIDE AVENUE
WOODSIDE, NY  11377
(718) 478-5502

Name of Project Director:

SIOBHAN DENNEHY

Purpose of Project:

FUNDS WILL BE USED FOR, BUT NOT LIMITED TO, PROVIDING SERVICES TO IMMIGRANTS, SUCH AS, COMPUTER TRAINING, SENIOR SERVICES, AND A HEALTH AWARENESS COUNSELOR.

Funded Amount:

$5,000

Requested By:

MARKEY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EMERALD ISLE IMMIGRATION CENTER, INC.
59-36 WOODSIDE AVENUE
WOODSIDE, NY 11377
(718) 478-5502

Name of Project Director:

SIOBHAN DENNEHY

Purpose of Project:

FUNDS WILL BE USED FOR IMMIGRATION SERVICES INCLUDING TELEPHONE HOTLINE, INFORMATION NEWSLETTER AND PUBLIC SEMINARS THAT INCLUDE JOB FAIRS, CITIZENSHIP DRIVES, EMPLOYMENT, COMPUTER TRAINING AND EDUCATIONAL SERVICES.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EMPIRE JUSTICE CENTER
1 WEST MAIN STREET
ROCHESTER, NY  14614
(585) 454-4060

Name of Project Director:

KRISTI HUGHES

Purpose of Project:

FUNDS WILL BE USED FOR RESEARCH, OUTREACH AND EDUCATIONAL ACTIVITIES FOCUSED ON CURBING INSURANCE REDLINING.

Funded Amount:

$20,000

Requested By:

GANTT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

EUREKA GRANGE
7560 SAPP ROAD
LYONS, NY 14489
(315) 946-9497

Name of Project Director:

JOSEPH SAPP

Purpose of Project:

FUNDS WILL BE USED FOR ROOF REPAIRS TO MEETING HALL BUILDING WHICH HOUSES THE COMMUNITY LIBRARY AND HOSTS MANY COMMUNITY ACTIVITIES, SUCH AS 4H MEETINGS, ETC.

Funded Amount:

$16,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

EVANS CENTER FIRE COMPANY
8298 ERIE ROAD, P.O. BOX 193
EVANS, NY 14006
(716) 549-1221

Name of Project Director:

TIGER SCHMITTENDORF

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PURCHASE OF A TOW-BEHIND TRAILER THAT WOULD BE USED IN RESPONSE TO TRAFFIC ACCIDENTS, HAZ-MAT RESPONSES, FIRES AND EMS CALLS

Funded Amount:

$12,000

Requested By:

QUINN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FEDERATION TO PRESERVE THE GREENWICH VILLAGE WATERFRONT AND GREAT PORT, INC.
332 BLEEKER STREET, G47
NEW YORK, NY 10014
(212) 924-5652

Name of Project Director:

CAROL FEINMAN

Purpose of Project:

Funds will be used for an outreach coordinator to oversee activities to fulfill the Federation’s programs, including research to set up neighborhood tours and pamphlets explaining the historic significance of Greenwich Village, liaison with block and neighborhood associations regarding related issues.

Funded Amount:

$8,000

Requested By:

GLICK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FIRE ISLAND PINES VOLUNTEER FIRE DEPARTMENT
P.O. BOX 193
SAYVILLE, NY 11782
(631) 597-9308

Name of Project Director:

RON QUINTO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE VENTILLATION EQUIPMENT.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FISHKILL TOWN HALL
807 ROUTE 52
FISHKILL, NY 12524
(845) 831-7800  3309

Name of Project Director:

JOAN PAGONES

Purpose of Project:

FUNDS WILL BE USED FOR COMPUTER/LASER JET PRINTER FOR SENIOR CENTER

Funded Amount:

$5,500

Requested By:

MILLER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FIVE MILE POINT FIRE DEPARTMENT
16 CRESCENT DRIVE
KIRKWOOD, NY 13795
(607) 237-0642

Name of Project Director:

JUSTIN MACIAK

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$3,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FLATBUSH DEVELOPMENT CORPORATION
1616 NEWKIRK AVENUE
BROOKLYN, NY 11226
(718) 859-3800

Name of Project Director:

SUSAN SIEGEL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT COMMERCIAL REVITALIZATION EFFORTS AND NEIGHBORHOOD IMPROVEMENTS INCLUDING REMOVAL OF GRAFFITI.

Funded Amount:

$15,000

Requested By:

JACOBS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FLATBUSH DEVELOPMENT CORPORATION
1616 NEWKIRK AVENUE
BROOKLYN, NY 11226
(718) 859-3800

Name of Project Director:

SUSAN SEIGEL

Purpose of Project:

FUNDS WILL BE USED TO ATTRACT CORPORATE INVESTMENT THROUGH NEWSLETTERS, NEIGHBORHOOD DIRECTORIES, AND ADVERTISING.

Funded Amount:

$6,000

Requested By:

BRENNAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FLEMING FIRE DEPARTMENT #1
6063 WEST LAKE ROAD
AUBURN, NY 13021
(315) 252-6902

Name of Project Director:

WILLIAM PELC

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FLEMING FIRE DEPARTMENT #2
5024 ROUTE 34
AUBURN, NY 13021
(315) 252-7371

Name of Project Director:

MARK ASWAD

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FLUSHING CHINESE BUSINESS ASSOCIATION, INC.
40-48 MAIN STREET, #302
FLUSHING, NY  11354
(718) 353-2320

Name of Project Director:

PETE KOO

Purpose of Project:

FUNDS WILL BE USED TO ORGANIZE ACTIVITIES/SERVICES TO PROMOTE MULTICULTURAL ACTIVITIES, AND TO BUILD BRIDGES BETWEEN THE COMMUNITY AND GOVERNMENT AGENCIES.

Funded Amount:

$2,000

Requested By:

YOUNG

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FLY CREEK AREA HISTORICAL SOCIETY  
P.O. BOX 87  
FLY CREEK, NY 13337  
(607) 547-2501

Name of Project Director:

JAMES F. WOLFF

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FOUR "WELCOME TO HISTORIC FLY CREEK" SIGNS.

Funded Amount:

$5,000

Requested By:

MAGEE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FLY CREEK VOLUNTEER FIRE COMPANY, INC.
P.O. BOX 218
FLY CREEK, NY 13337
(607) 547-5469

Name of Project Director:

MARGARET WOLFF

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TURNOUT GEAR, RADIOS, PAGERS
AND SAFETY EQUIPMENT FOR FIREFIGHTER AND FIREPOLICE.

Funded Amount:

$10,000

Requested By:

MAGEE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FOREST HILLS CHAMBER OF COMMERCE OF QUEENS, INC.
P.O. BOX 751123
FOREST HILLS, NY 11375
(718) 268-6565

Name of Project Director:

LESLIE BROWN

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN AND FURTHER DEVELOP THEIR WEBSITE.

Funded Amount:

$2,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FOREST HILLS COMMUNITY AND CIVIC ASSOCIATION, INC.
P.O. BOX 754053
FOREST HILLS, NY 11375
(718) 263-7636

Name of Project Director:

BARBARA STUCHINSKI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A COMMUNITY OUTREACH NEWSLETTER.

Funded Amount:

$4,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FOREVER ELMWOOD CORPORATION
890 ELMWOOD AVENUE
BUFFALO, NY 14222
(716) 881-0707

Name of Project Director:

JUSTIN AZZARELLA

Purpose of Project:

Funds will be used to foster economic growth and to stabilize and support neighborhoods in the Elmwood Village.

Funded Amount:

$7,500

Requested By:

HOYT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FORT HUNTER ENGINE AND HOSE COMPANY, INC.
361 MAIN STREET, P.O. BOX 181
FORT HUNTER, NY 12069
(518) 848-7459

Name of Project Director:

RAYMOND TYLUTKI, JR.

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF THE ELECTRONIC SIREN AND ACTIVATION SYSTEM TO HELP IN THE PRENOTIFICATION OF A DISASTER.

Funded Amount:

$5,000

Requested By:

TONKO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FRACO DRILL AREA
55 BARE HILL ROAD
MALONE, NY 12953
(518) 483-2580

Name of Project Director:

MALCOLM JONES

Purpose of Project:

FUNDS WILL BE USED TO REPLACE DRAFTING SITE AND INSTALL YARD HYDRANTS FOR TRAINING FACILITY

Funded Amount:

$9,000

Requested By:

DUPREY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

FREEPORT FIRE DEPARTMENT
15 BROADWAY, P.O. BOX 290
FREEPORT, NY 11520
(516) 377-2488

Name of Project Director:

ALAN GROSSER

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING PROGRAMMATIC EXPENSES

Funded Amount:

$3,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GAINESVILLE FIRE DEPARTMENT
P.O. BOX 353
GAINESVILLE, NY 14066
(585) 493-2763

Name of Project Director:

C. MICHAEL HORTON

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNICATIONS EQUIPMENT

Funded Amount:

$5,000

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GENOA FIRE DEPARTMENT
10015 ROUTE 90
GENOA, NY 13071
(315) 497-0611

Name of Project Director:

JOHN DUCEY

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

ARTHUR DEMELLO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT.

Funded Amount:

$1,500

Requested By:

MAISEL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

GLEN AUBREY FIRE DEPARTMENT
3966 ROUTE 26
WHITNEY POINT, NY 13862
(607) 862-9739

Name of Project Director:

GARY SMITH

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

GLENDALE CIVIC ASSOCIATION OF QUEENS, INC.
88-37 DORAN AVENUE
GLENDALE, NY 11385
(718) 275-9771

Name of Project Director:

CATHY MASI

Purpose of Project:

FUNDS WILL BE USED TOWARD POSTAGE AND OTHER OFFICE MANAGEMENT EXPENSES.

Funded Amount:

$1,500

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

GLENDALE PROPERTY OWNERS ASSOCIATION, INC.
78-40 85TH STREET
GLENDALE, NY   11385
(718) 821-7894

Name of Project Director:

BRIAN DOOLEY

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH POSTAGE COSTS.

Funded Amount:

$1,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

GLENHAM FIRE DISTRICT
P.O. BOX 191
GLENHAM, NY 12527
(845) 831-2322

Name of Project Director:

PETER LYNCH

Purpose of Project:

FUNDS WILL BE USED FOR A BREATHING AIR SYSTEM FOR FIRE DISTRICT

Funded Amount:

$5,000

Requested By:

MILLER

Name of Administering State Agency:

DEPARTMENT OF STATE
GLENVILLE FIRE DISTRICT 7
5 AIRPORT ROAD
GLENVILLE, NY 12302
(518) 377-7269

NORMAN A. PETRICCA

FUNDS WILL BE USED TO PROCURE OFFICE EQUIPMENT TO SUPPORT THE ADMINISTRATIVE AND TRAINING FUNCTIONS OF THE THOMAS CORNERS FIRE DEPARTMENT

TEDISCO

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

GORDON HEIGHTS FIRE DISTRICT  
P.O. BOX 26  
MIDDLE ISLAND, NY  11953  
(631) 698-6303

Name of Project Director:

CINDY WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SAFETY EQUIPMENT FOR THE DEPARTMENT.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

GOUVERNEUR FIRE DEPARTMENT
33 CLINTON STREET
GOUVERNEUR, NY 13642
(315) 287-1720

Name of Project Director:

BOB GLEASON

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING PROJECT FOR NEW QUARTERS FOR FIRE DEPARTMENT

Funded Amount:

$10,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

GOUVERNEUR NEIGHBORHOOD CENTER
15 ROCK ISLAND STREET
GOUVERNEUR, NY 13642
(315) 287-3370

Name of Project Director:

LORRAINE TAYLOR

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE ROOF REPLACEMENT OF THE NEIGHBORHOOD CENTER

Funded Amount:

$5,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GREATER RIDGEWOOD RESTORATION CORPORATION  
68-56 FOREST AVENUE  
RIDGEWOOD, NY 11385  
(718) 366-8721

Name of Project Director:

ANGELA MIRABILE

Purpose of Project:

Funding will be used to operate a graffiti removal program.

Funded Amount:

$8,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

GREATER RIDGEWOOD RESTORATION CORPORATION
68-56 FOREST AVENUE
RIDGEWOOD, NY 11385
(718) 366-8721

Name of Project Director:

ANGELA MIRABILE

Purpose of Project:

FUNDS WILL BE USED FOR THE REMOVAL OF GRAFFITI IN THE COMMUNITY.

Funded Amount:

$1,500

Requested By:

MARKEY

Name of Administering State Agency:

DEPARTMENT OF STATE
GREATER WATERTOWN CHAMBER OF COMMERCE, INC.
1241 COFFEEN STREET
WATERTOWN, NY 13601
(315) 788-4400

KAREN DELMONICO

FUNDS WILL BE USED TO PROVIDE TOURISM AND PROMOTIONAL MATERIALS FOR JEFFERSON COUNTY.

$10,000

AUBERTINE

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

GREECE COMMUNITY BROADCASTING
1139 MAIDEN LANE
ROCHESTER, NY 14615
(585) 966-2405

Name of Project Director:

ROB LINTON

Purpose of Project:

FUNDS WILL BE USED FOR REPLACEMENT OF AGED AND DAMAGED
MASTER CONTROL CONSOLE USED FOR DAILY RADIO STATION
OPERATION

Funded Amount:

$9,300

Requested By:

REILICH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

GREENLAWN FIRE DISTRICT
23 BOULEVARD STREET
GREENLAWN, NY 11740
(516) 932-8100

Name of Project Director:

DOUG TEWKSBURY

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT PURCHASE

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HALFMOON-WATERFORD FIRE DISTRICT #1
P.O. BOX 276
WATERFORD, NY 12188
(518) 371-7571

Name of Project Director:

JOHN C. COOPER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AN ALL PURPOSE ATV AND THERMAL IMAGING CAMERA.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HALSEY VALLEY VOLUNTEER FIRE DEPARTMENT
506 HAMILTON VALLEY ROAD
SPENCER, NY 14883
(607) 589-6128

Name of Project Director:

KEVIN WHALEN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF FIRE FIGHTING/RESCUE EQUIPMENT

Funded Amount:

$6,500

Requested By:

O'MARA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HANCOCK FIRE DEPARTMENT  
P.O. BOX 883  
HANCOCK, NY 13783  
(607) 637-3431

Name of Project Director:

CHRIS GEER

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$5,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HARFORD FIRE DEPARTMENT
760 ROUTE 221, P.O. BOX 7
HARFORD, NY 13784
(607) 844-9200

Name of Project Director:

BRIAN PENDELL

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HARLEM RENAISSANCE ECONOMIC DEVELOPMENT CORPORATION
125-135 WEST 111TH STREET, SUITE 6C
NEW YORK, NY 10026
(212) 932-2141

Name of Project Director:

BONITA G. LLOYD NETTLE

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF EQUIPMENT, SUPPLIES, MARKETING AND ADMINISTRATIVE EXPENSES.

Funded Amount:

$5,000

Requested By:

POWELL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HARLEM WEEK, INC.
200A WEST 136TH STREET
NEW YORK, NY 10030
(212) 862–8477

Name of Project Director:

BARBARA BURWELL, TREASURER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EVENT COSTS OF HARLEM WEEK.

Funded Amount:

$50,000

Requested By:

WRIGHT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HARTFORD VOLUNTEER FIRE COMPANY  
P.O. BOX 121  
HARTFORD, NY 12838  
(518) 632-0269

Name of Project Director:

CHARLES ABBOTT

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT UPGRADE

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HARTSDALE FIRE DEPARTMENT
300 WEST HARTSDALE AVENUE
HARTSDALE, NY  10530
(914) 949-2375

Name of Project Director:

FRED OVERING

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EXO PERSONAL ESCAPE SYSTEMS FOR HARTSDALE FIREFIGHTERS.

Funded Amount:

$7,500

Requested By:

BRODSKY

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HELENA VOLUNTEER FIRE DEPARTMENT
HELENA VOLUNTEER FIRE DEPARTMENT
HELENA, NY 13694
(315) 769-8634

Name of Project Director:

FRANK BURNS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EXTRICATION EQUIPMENT

Funded Amount:

$5,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HEMPSTEAD COORDINATING COUNCIL OF CIVIC ASSOCIATIONS, INC.
73 NICHOLS COURT, P.O. BOX 4484
HEMPSTEAD, NY 11550
(516) 489-3167

Name of Project Director:

REGINAL LUCAS

Purpose of Project:

FUNDS WILL BE USED TO COORDINATE, ORGANIZE, SUPERVISE, AND DISSEMINATE INFORMATION TO ALL HEMPSTEAD CIVIC ASSOCIATIONS IN GROUP (VILLAGE-WIDE TWENTY-FOUR (24) GROUPS).

Funded Amount:

$30,000

Requested By:

HOOPER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HENRY STREET SETTLEMENT
265 HENRY STREET
NEW YORK, NY 10002
(212) 766-9200

Name of Project Director:

VEORONA JEETER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TECHNICAL ASSISTANCE AND AWARD GRANTS TO TENANT ASSOCIATIONS AT NEW YORK CITY HOUSING AUTHORITY (NYCHA) PROJECTS ON THE LOWER EAST SIDE OF MANHATTAN.

Funded Amount:

$59,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HERTEL-NORTH BUFFALO BUSINESS ASSOCIATION, INC.
1173 HERTEL AVENUE
BUFFALO, NY  14216
(716) 877-6607

Name of Project Director:

RICK BZLICKI

Purpose of Project:

FUNDS WILL BE USED TO CREATE AND INSTALL SIGNAGE DESIGNATING THE "LITTLE ITALY" CULTURAL HERITAGE DISTRICT.

Funded Amount:

$4,500

Requested By:

HOYT

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HEWLETT FIRE DEPARTMENT
25 FRANKLIN AVENUE
HEWLETT, NY  11557
(516) 374-4280

Name of Project Director:

BENJAMIN MOLENO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND SUPPLIES FOR THE FIRE DEPARTMENT.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HIAS, INC.
333 7TH AVENUE, 16TH FLOOR
NEW YORK, NY 10001-5004
(212) 613-1351

Name of Project Director:

GENE BORSH

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE CIVIC AND SOCIAL ACTIVITIES FOR PARTICIPANTS THROUGH EDUCATION, TRAINING, AND SHARING OF KNOWLEDGE AND RESOURCES. PROGRAM IS OPEN TO ALL WHO WISH TO JOIN.

Funded Amount:

$9,000

Requested By:

COLTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HIAS, INC.
333 SEVENTH AVENUE, 16TH FLOOR
NEW YORK, NY 10001
(212) 613-1351

Name of Project Director:

GENE BORSH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE RUSSIAN-SPEAKING COMMUNITY IN NEW YORK WITH TOOLS THAT WILL FACILITATE ITS ENGAGEMENT IN SOCIAL AND CIVIC LIFE IN THE UNITED STATES, BY DEVELOPING SKILLS IN LEADERSHIP, COMMUNITY ORGANIZING AND CIVIC PARTICIPATION.

Funded Amount:

$5,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HIAS, INC.
333 SEVENTH AVENUE, 16TH FLOOR
NEW YORK, NY 10001
(212) 613-1300

Name of Project Director:

GENE BORSH

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE NY’S RUSSIAN SPEAKING COMMUNITY ABOUT ACTIVE PARTICIPATION IN CIVIC LIFE AND DEVELOP THEIR LEADERSHIP, COMMUNITY ORGANIZING AND CIVIC PARTICIPATION SKILLS IN ORDER TO BUILD WORKING RELATIONSHIPS BETWEEN THIS COMMUNITY AND LOCAL ELECTED OFFICIALS, ETC.

Funded Amount:

$6,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HILTON FIRE DEPARTMENT
588 WILDER ROAD
HILTON, NY 14468
(585) 392-3060

Name of Project Director:

CARM CARMESTRO

Purpose of Project:

FUNDS WILL BE USED FOR A DEFIBRILLATOR

Funded Amount:

$2,500

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HINSDALE FIRE DISTRICT
113 MALDEN ROAD
MATTYDALE, NY  13211
(315) 455-2511

Name of Project Director:

RAEANN FITCH

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS AND RADIOS FOR THE CAD SYSTEM.

Funded Amount:

$9,500

Requested By:

CHRISTENSEN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HOLBROOK CHAMBER OF COMMERCE, INC.
P.O. BOX 565
HOLBROOK, NY 11741
(631) 471-2725

Name of Project Director:

FRED COSTE

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE WELCOME AREA WITH ELECTRICAL LIGHTING, SIGNAGE AND FLOWERS.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HOLBROOK FIRE DEPARTMENT
390 TERRY BOULEVARD
HOLBROOK, NY 11741
(631) 588-0099

Name of Project Director:

MICHAEL TIMO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE RAPID INTERVENTION EQUIPMENT.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HOLTSVILLE FIRE COMPANY, INC.
1025 WAVERLY AVENUE
HOLTSVILLE, NY  11742
(631) 475-5238

Name of Project Director:

DAVID SHELTON

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE PURCHASE OF SAFETY EQUIPMENT.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HOMER FIRE DEPARTMENT
45 SOUTH MAIN STREET, P.O. BOX 58
HOMER, NY 13077
(607) 749-3121

Name of Project Director:

PHILLIP HESS

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

IMMIGRATION ADVOCACY SERVICES, INC.
24-40 STEINWAY STREET
ASTORIA, NY 11103
(718) 956-8218

Name of Project Director:

ANTONIO MELONI

Purpose of Project:

FUNDS WILL BE USED TO HELP INDIVIDUALS ATTAIN CITIZENSHIP AND RESIDENCY.

Funded Amount:

$3,000

Requested By:

GIANARIS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

INCORPORATED VILLAGE OF BAYVILLE  
34 SCHOOL STREET  
BAYVILLE, NY 11709  
(516) 628−1439

Name of Project Director:

VICTORIA SIEGEL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A SAND SIFTER FOR THE VILLAGE OF BAYVILLE TO MAINTAIN THE SHORELINE.

Funded Amount:

$38,000

Requested By:

LAVINE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

INCORPORATED VILLAGE OF MASSAPEQUA PARK
151 FRONT STREET
MASSAPEQUA PARK, NY 11762
(516) 799-0211

Name of Project Director:

JAMES ALTADONNA

Purpose of Project:

FUNDS WILL BE USED FOR DEFIBRILLATORS AND TRAINING

Funded Amount:

$5,000

Requested By:

SALADINO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

INLET VOLUNTEER EMERGENCY SERVICES, INC.
1 LIMEKILN ROAD
INLET, NY 13360
(315) 357-4328

Name of Project Director:

WILLIAM FARO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EMERGENCY POWER COT

Funded Amount:

$10,000

Requested By:

SAYWARD

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

INTERCESSION COMMUNITY SERVICE COUNCIL, INC.
550 WEST 155TH STREET
NEW YORK, NY 10032
(212) 283-6200

Name of Project Director:

JERRY KEUCHER

Purpose of Project:

FUNDS WILL BE USED TO REPAIR AND RENOVATE THE COMMUNITY ACTIVITIES BUILDING COMMON AREAS, INCLUDING THE KITCHEN. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$20,500

Requested By:

FARRELL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

INTERNATIONAL ASSOCIATION OF FIREFIGHTERS
P.O. BOX 11161
SYRACUSE, NY 13218
(315) 475-0766

Name of Project Director:

JAMES ENNIS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SAFETY, PROTECTIVE, AND TRAINING EQUIPMENT FOR FIREFIGHTERS.

Funded Amount:

$5,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

INTERNATIONAL CENTER OF CAPITAL REGION, INC.
272 BROADWAY, BOX 8
ALBANY, NY 12204
(518) 292-5270

Name of Project Director:

KAY A. WILKIE

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP PROMOTIONAL MATERIAL THAT WILL INFORM THE INTERNATIONAL COMMUNITY OF THE RESOURCES AND ATTRACTIONS OF THE ALBANY REGION.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

INWOOD COMMUNITY SERVICES, INC.
651 ACADEMY STREET
NEW YORK, NY 10034
(212) 942-0043

Name of Project Director:

ANDRES L. EDWARD

Purpose of Project:

FUNDS WILL BE USED FOR ISHAM PARK AND 215TH STEPS BEAUTIFICATION AND HORTICULTURE PROGRAMS FOR LOCAL YOUTH AND ADULTS. FUNDS WILL ALSO BE USED FOR MAINTENANCE OF THE BRUCE REYNOLDS MEMORIAL.

Funded Amount:

$8,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ISLAND PARK VOLUNTEER FIRE DEPARTMENT
440 LONG BEACH ROAD
ISLAND PARK, NY 11558
(516) 432-0738

Name of Project Director:

GOMIE PERSAUD

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FIRE FIGHTING EQUIPMENT AND SUPPLIES.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

JACKSON HEIGHTS ACTION GROUP, INC.
P.O. BOX 853
JACKSON HEIGHTS, NY 11372
(718) 476-9188

Name of Project Director:

RALPH MORENO

Purpose of Project:

FUNDS WILL BE USED FOR GRAFFITI CLEAN-UPS WITHIN THE JACKSON HEIGHTS COMMUNITY, AND FOR THE PURCHASE OF CLEAN-UP MATERIALS AND OTHER CONSUMABLE SUPPLIES. FUNDS ALSO MAY BE USED FOR OFFSETTING EXPENSES OF THE CIVILIAN OBSERVATION PATROL INCLUDING BUYING JACKETS AND OTHER CONSUMABLE SUPPLIES.

Funded Amount:

$3,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

JEFFREY MOSENSON MEMORIAL FUND
7 CASTLE DRIVE
WOODBURY, NY 11797
(516) 921-3599

Name of Project Director:

DAVID MOSENSON

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING THE JEFFREY MOSENSON SCHOOL OF TRAUMA AND EMERGENCY MEDICINE

Funded Amount:

$2,000

Requested By:

WALKER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

JOHNSBURG EMERGENCY MEDICAL SERVICES, INC.
P.O. BOX 413
JOHNSBURG, NY 12853
(518) 251-3739

Name of Project Director:

KELLY NESSIE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EMS PROTECTIVE GEAR

Funded Amount:

$10,000

Requested By:

SAYWARD

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

KENDALL FIRE DEPARTMENT
1879 KENDALL ROAD, P.O. BOX 387
KENDALL, NY 14476
(585) 355-2819

Name of Project Director:

RICH SEAMAN

Purpose of Project:

FUNDS WILL BE USED FOR A HUSK VARNA CIRCULAR SAW FOR USE IN AUTO-VEHICLE EXTRICATIONS, VENTILATION AT FIRES AND "FAST" TEAMS

Funded Amount:

$1,850

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

KILLAWOG FIRE DEPARTMENT
602 JENNINGS CREEK ROAD, P.O. BOX 13
KILLAWOG, NY 13794
(607) 778-1911

Name of Project Director:

KEVIN MAUSER

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

KING FERRY FIRE DEPARTMENT
1009 STATE ROUTE 34B, P.O. BOX 419
KING FERRY, NY 13081
(315) 364-8940

Name of Project Director:

GERALD WARNER

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

KIRKWOOD FIRE DISTRICT #1
85 GRANGE HALL ROAD
KIRKWOOD, NY 13795
(607) 775-7994

Name of Project Director:

JERRY WHEELOCK

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$3,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
KOREAN-AMERICAN ASSOCIATION OF FLUSHING-QUEENS, INC.
163-24 NORTHERN BOULEVARD, 2ND FLOOR
FLUSHING, NY  11358
(718) 961-2389

KWANG KIM

FUNDS WILL BE USED TO PROVIDE SERVICES AND PROGRAMS FOR THE
COMMUNITY - ESPECIALLY CRIME FIGHTING PROGRAMS IN FLUSHING, AS
WELL AS, CIVIC PARTICIPATION PROGRAMS

$2,000

YOUNG

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LAFAYETTE FIRE DEPARTMENT, INC.
2444 ROUTE 11, P.O. BOX 260
LAFAYETTE, NY  13084
(315) 677-3400

Name of Project Director:

GREG HOXIE

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE EQUIPMENT FOR TRAINING.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LAKE DELTA VOLUNTEER FIRE DEPARTMENT
P.O. BOX 596
ROME, NY 13440
(315) 337-2809

Name of Project Director:

JOSEPH M. PATANE

Purpose of Project:

FUNDS WILL BE USED FOR PURCHASE OF NEW LIFEPAK 12

Funded Amount:

$15,000

Requested By:

TOWNSEND

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LAKE VIEW FIRE DISTRICT
P.O. BOX 345
LAKE VIEW, NY 14085
(716) 863-3756

Name of Project Director:

JOHN WICKA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A UTILITY ALL-TERRAIN VEHICLE FOR
SEARCH AND RESCUE MISSIONS AND PATIENT CARE AND TRANSPORT

Funded Amount:

$10,000

Requested By:

QUINN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LAKESHORE FIRE DEPARTMENT
1 LONG POND ROAD
ROCHESTER, NY 14612
(585) 723-8425

Name of Project Director:

JARED MEEKER

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF TRAINING SOFTWARE

Funded Amount:

$7,100

Requested By:

REILICH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LARCHMONT FIRE DEPARTMENT
120 LARCHMONT AVENUE
LARCHMONT, NY   10538
(914) 953-5503

Name of Project Director:

TOM BRODERICK

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PURCHASE OF NEW UH7 RADIOS.
WESTCHESTER COUNTY IS SWITCHING TO A NEW UH7 RADIO SYSTEM.

Funded Amount:

$8,500

Requested By:

LATIMER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LATIN AMERICAN CHAMBER OF COMMERCE AND INDUSTRY OF NY, INC.
85 TIMBERLINE DRIVE
BRENTWOOD, NY 11717
(631) 774-8670

Name of Project Director:

SANTIAGO REYES

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN GENERAL OPERATIONS AND
EQUIPMENT FOR THE CHAMBER OF COMMERCE.

Funded Amount:

$1,500

Requested By:

RAMOS

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LAWRENCE FIRE DEPARTMENT
75 WASHINGTON AVENUE
LAWRENCE, NY  11559
(516) 569-0042  10

Name of Project Director:

EDWARD KOEHLER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND MATERIAL NEEDED FOR FIREFIGHTING.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEGAL AID SOCIETY
19 WATER STREET, 6TH FLOOR
BROOKLYN, NY 10038
(212) 577-3346

Name of Project Director:

PAT BATH

Purpose of Project:

FUNDS WILL BE USED FOR THE BROOKLYN NEIGHBORHOOD OFFICE, WHICH PROVIDES LEGAL SERVICES TO THE ELDERLY, IMMIGRANTS, DISABLED CHILDREN AND ADULTS, HOMELESS FAMILIES AND SURVIVORS OF DOMESTIC VIOLENCE.

Funded Amount:

$4,000

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEGAL AID SOCIETY OF NORTHEASTERN NEW YORK
55 COLVIN AVENUE
ALBANY, NY 12206
(518) 462-6765

Name of Project Director:

LILLIAN MOY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT GENERAL CIVIC LEGAL SERVICES FOR LOW INCOME RESIDENTS OF THE DISTRICT

Funded Amount:

$5,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEGAL INFORMATION FOR FAMILIES TODAY
350 BROADWAY, SUITE 400
NEW YORK, NY 10013
(646) 613-9633

Name of Project Director:

MELISSA BECK

Purpose of Project:

FUNDS WILL BE USED FOR PRODUCTION OF MULTI-LINGUAL WRITTEN MATERIALS FOR PROGRAM/PROJECT.

Funded Amount:

$4,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEGAL INFORMATION FOR FAMILIES TODAY
350 BROADWAY, SUITE 400
NEW YORK, NY  10013
(646) 613-9633

Name of Project Director:

MELISSA BECK

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PRODUCTION OF LIFI'S NEW MULTILINGUAL WRITTEN MATERIALS THAT DIRECTLY SERVE THE NEEDS OF FAMILY COURT LITIGANTS.

Funded Amount:

$5,000

Requested By:

BING, GOTTFRIED, ROSENTHAL

Name of Administering State Agency:

DEPARTMENT OF STATE
LEGAL INFORMATION FOR FAMILIES TODAY
350 BROADWAY, SUITE 400
NEW YORK, NY 10013
(646) 613-9633

Name of Project Director:

MELISSA BECK

Purpose of Project:

FUNDS WILL BE USED TO COVER THE COST OF NEW MULTI-LINGUAL WRITTEN MATERIALS FOR FAMILY COURT LITIGANTS.

Funded Amount:

$2,500

Requested By:

O'DONNELL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEGAL INFORMATION FOR FAMILIES TODAY
350 BROADWAY, SUITE 400
NEW YORK, NY  10013
(646) 613-4633  201

Name of Project Director:

MELISSA BECK

Purpose of Project:

FUNDS WILL BE USED TO ENSURE THAT MANHATTAN FAMILIES WITH LIMITED ENGLISH PROFICIENCY HAVE ACCESS TO LIFT’S SERVICES BY PROVIDING MULTILINGUAL WRITTEN INFORMATION AT OUR MANHATTAN FAMILY COURT EDUCATION AND INFORMATION SITE, AND BY CONDUCTING NEIGHBORHOOD BASED OUTREACH IN MANHATTAN COMMUNITIES.

Funded Amount:

$3,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEGAL INFORMATION FOR FAMILIES TODAY
350 BROADWAY, SUITE 400
NEW YORK, NY 10013
(646) 613-9633

Name of Project Director:

MELISSA BECK

Purpose of Project:

FUNDS WILL BE USED TO INCREASE ACCESS TO JUSTICE BY PROVIDING LEGAL INFORMATION ABOUT THE CRIMINAL JUSTICE SYSTEM; INCREASE ACCESS TO NEIGHBORHOOD AND COURT-BASED RESOURCES; AND PROVIDE THOSE WE SERVE WITH PRACTICAL INFORMATION ABOUT THE OVERLAP BETWEEN FAMILY AND CRIMINAL COURT.

Funded Amount:

$10,000

Requested By:

LENTOL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEGAL SERVICES OF THE HUDSON VALLEY
4 CROMWELL PLACE
WHITE PLAINS, NY 10601
(914) 949-1305 136

Name of Project Director:

BARBARA FINKELSTEIN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A NEW SERVER, FILING CABINETS, AND PRODUCTION OF COPIERS OF INFORMATIONAL DVD.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEGAL SERVICES OF THE HUDSON VALLEY
123 GRAND STREET
NEWBURGH, NY  12550
(845) 569-9110

Name of Project Director:

LEWIS CREEKMORE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OFFICE EQUIPMENT.

Funded Amount:

$1,500

Requested By:

GUNTERH-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEGAL SERVICES OF THE HUDSON VALLEY
123 GRAND STREET
NEWBURGH, NY 12550
(845) 569-9110

Name of Project Director:

LEWIS CREEKMORE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF OFFICE FURNITURE

Funded Amount:

$2,500

Requested By:

KIRWAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEGAL SERVICES OF THE HUDSON VALLEY
4 CROMWELL PLACE
WHITE PLAINS, NY 10601
(914) 949-1305

Name of Project Director:

BARBARA FINKELSTEIN

Purpose of Project:

FUNDS WILL BE USED TO AID IN MEETING THE NEEDS OF THE KINGSTON SITE OF LEGAL SERVICES OF THE HUDSON VALLEY.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEROY VOLUNTEER AMBULANCE
1 TOUNTAS AVENUE
LEROY, NY 14482
(585) 768-2200

Name of Project Director:

ROBERT BOYCE

Purpose of Project:

FUNDS WILL BE USED FOR A STAIR CHAIR

Funded Amount:

$2,600

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LEVITTOWN FIRE DEPARTMENT
120 GARDINERS AVENUE
LEVITTOWN, NY 11756
(516) 731-5800

Name of Project Director:

MARK JANOVSKY

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING PROGRAMMATIC EXPENSES

Funded Amount:

$3,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LIBERTY JOINT FIRE DISTRICT
256 SPRAGUE AVENUE, SUITE 4
LIBERTY, NY 12754
(845) 292-5108

Name of Project Director:

GENE DECARLO

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF DEFIBRILLATORS.

Funded Amount:

$4,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LIDO AND POINT LOOKOUT FIRE DISTRICT
102 LIDO BOULEVARD
POINT LOOKOUT, NY 11569
(516) 432-6645

Name of Project Director:

TERRI RYAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FIREFIGHTING MATERIAL AND EQUIPMENT.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LISLE FIRE DEPARTMENT
P.O. BOX 514
WHITNEY POINT, NY 13862
(607) 849-3399

Name of Project Director:

TIM KELLCUTT

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LIVINGSTON COUNTY CLERK
6 COURT STREET, ROOM 201
GENESEO, NY 14454
(585) 243-7010

Name of Project Director:

JAMES CULBERTSON

Purpose of Project:

FUNDS WILL BE USED FOR PRESERVATION OF RECORDS

Funded Amount:

$3,000

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LIVINGSTON COUNTY CLERK
6 COURT STREET, ROOM 201
GENESEO, NY 14454
(585) 243-7010

Name of Project Director:

JAMES CULBERTSON

Purpose of Project:

FUNDS WILL BE USED FOR PRESERVATION OF BOOKS AND RECORDS

Funded Amount:

$3,000

Requested By:

ERRIGO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LOCK 7-12 CANALFEST
306 STATE STREET
SCHENECTADY, NY   12305
(518) 372-5656

Name of Project Director:

DR. KIRK PANNETON

Purpose of Project:

FUNDS WILL BE USED TO ASSIST PROGRAMMING OF ARTS, CULTURE, HISTORY AND RECREATIONAL ACTIVITIES AT CANALFEST TO INCREASE VISITOR SPENDING WITHIN MONTGOMERY AND SCHENECTADY COUNTIES AND TO PROMOTE THE CANAL.

Funded Amount:

$5,000

Requested By:

TONKO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LOCKE FIRE DEPARTMENT
900 MAIN STREET
LOCKE, NY 13092
(315) 497-0595

Name of Project Director:

RAYMOND DYER, III

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LONG BEACH FIRE DEPARTMENT
1 WEST CHESTER STREET
LONG BEACH, NY  11561
(516) 431-2434

Name of Project Director:

STEVEN FRAISER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR THE FIRE DEPARTMENT.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LONG HILL FIRE DEPARTMENT
3513 LONG HILL ROAD
VENICE CENTER, NY 13161
(315) 497-3805

Name of Project Director:

STEVEN FEDRIZZI

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

LONG ISLAND HISPANIC BUSINESS ROUNDTABLE
1126B SUFFOLK AVENUE
BRENTWOOD, NY 11717
(631) 560-1295

Name of Project Director:

JOSE AVILA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF MEMBERSHIP MAILINGS, MEETINGS, AND RELATED OFFICE EXPENSES.

Funded Amount:

$1,000

Requested By:

RAMOS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MAINE FIRE COMPANY
25 MCGREGOR AVENUE
MAINE, NY 13802
(607) 862-9330

Name of Project Director:

DAVID SILVERSTEIN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MAMARONECK CHAMBER OF COMMERCE, INC.
430 CENTER AVENUE
MAMARONECK, NY 10543
(914) 698-4400

Name of Project Director:

AL TOCKMAN

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE MAMARONECK’S BUSINESSES BY DISTRIBUTING A MAP ALL THROUGH THE VILLAGE.

Funded Amount:

$5,000

Requested By:

LATIMER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MANLIUS VOLUNTEER FIRE COMPANY, INC.
4 STICKLEY DRIVE
MANLIUS, NY 13104
(315) 682-8318

Name of Project Director:

RAY DILL

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE COMMUNICATION 2-WAY RADIOS, ALERT PAGERS, AS WELL AS, PERSONAL PROTECTION EQUIPMENT AND RAPID INTERVENTION TEAM (RIT) EQUIPMENT.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MARATHON FIRE DEPARTMENT
PECK AVENUE, P.O. BOX 488
MARATHON, NY 13083
(607) 849-6157

Name of Project Director:

NORM FORREST

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MARILLA FIRE COMPANY, INC.
P.O. BOX 124
MARILLA, NY 14102
(716) 652-1080

Name of Project Director:

RONALD BOURJEOIS

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A FIRE SAFETY HOUSE

Funded Amount:

$2,500

Requested By:

COLE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MCDONOUGH FIRE DEPARTMENT
856 COUNTY ROAD 7
MCDONOUGH, NY 13801
(607) 647-5308

Name of Project Director:

MIKE BECKWITH

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MCKOWNVILLE FIRE DEPARTMENT
1250 WESTERN AVENUE
ALBANY, NY  12203
(518) 475-5873

Name of Project Director:

DAVID CLANCY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT THAT WILL ASSIST AND AID VOLUNTEER FIREFIGHTERS IN RESPONDING TO AND ADDRESSING EMERGENCIES.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MEADOWMERE FIRE DEPARTMENT
EAST AND MYERS AVENUES
LAWRENCE, NY  11559
(516) 239-3088

Name of Project Director:

MICHAEL YORK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FIREFIGHTING EQUIPMENT AND SUPPLIES.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MEDFORD CHAMBER OF COMMERCE
P.O. BOX 926
MEDFORD, NY 11763
(631) 654-8446

Name of Project Director:

JAMES GUBITOSI

Purpose of Project:

FUNDS WILL BE USED TO COMPLETE THE RENOVATION OF THE CHAMBER’S OFFICES, INCLUDING THE PURCHASE OF EQUIPMENT.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MEDFORD FIRE DEPARTMENT, INC.
171 OREGON AVENUE
MEDFORD, NY  11763
(631) 475-0413

Name of Project Director:

MICHAEL BARRY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SAFETY EQUIPMENT.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MERRICK FIRE DEPARTMENT
P.O. BOX 235
MERRICK, NY 11566
(516) 221-7055

Name of Project Director:

CHRISTOPHER SIMMONS

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING PROGRAMMATIC EXPENSES

Funded Amount:

$3,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF STATE
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:

HERB FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIAL SERVICE PROGRAMS INCLUDING CASE MANAGEMENT, CRISIS INTERVENTION, FOOD VOUCHERS, ETC. IN THE BORO PARK, BROOKLYN COMMUNITY. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$98,000

Requested By:

ABBATE, BENEDETTA, BING, BRENNAN, BROOK-KRASNY, CANESTRARI, CLARK, CYMBROWITZ-S, DINOWITZ, FARRELL, GLICK, GOTTFRIED, HIKIND, HOYT, MAISEL, MAYERSOHN, MILLMAN, O’DONNELL, PHEFFER, ROSENTHAL, SILVER, WEINSTEIN, WEPRIN, YOUNG

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MFY LEGAL SERVICES, INC.
299 BROADWAY
NEW YORK, NY 10023
(212) 417-3700

Name of Project Director:

LYNN KELLY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LEGAL SERVICES TO LOW-INCOME NEW YORKERS.

Funded Amount:

$5,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MFY LEGAL SERVICES, INC.
299 BROADWAY
NEW YORK, NY 10007
(212) 417-3731

Name of Project Director:

DOLORES SCHAEFER

Purpose of Project:

FUNDS WILL BE USED TO SUPPLEMENT GENERAL OPERATING EXPENSES FOR PRACTICE AREAS THAT RECEIVE MINIMAL OR NO PUBLIC FUNDING, ESPECIALLY EMPLOYMENT, CONSUMER RIGHTS, KINSHIP CARE, AND LANDLORD-TENANT ISSUES OF LEGALLY INDIGENT MANHATTAN RESIDENTS.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MIDDLE COUNTRY COALITION FOR SMART GROWTH, INC.
101 EASTWOOD BOULEVARD, P.O. BOX 503
CENTEREACH, NY 11720
(631) 697-7220

Name of Project Director:

KEVIN MCCORMACK

Purpose of Project:

FUNDS WILL BE USED FOR AN ELECTRONIC COMMUNITY BULLETIN BOARD NETWORK.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MIDDLE VILLAGE CHAMBER OF COMMERCE, INC.
75-25 METROPOLITAN AVENUE
MIDDLE VILLAGE, NY 11379
(718) 894-7272

Name of Project Director:

TANN BROSCHART

Purpose of Project:

FUNDS WILL BE USED TOWARD COMMUNITY PROJECTS AND EVENTS, SUCH AS A SPRING FESTIVAL.

Funded Amount:

$2,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MIDDLEBURGH EMERGENCY VOLUNTEER AMBULANCE CORP.
121 SQUAW TRAIL
MIDDLEBURGH, NY 12122
(518) 827-4585

Name of Project Director:

RALPH BENHAM

Purpose of Project:

FUNDS WILL BE USED FOR NON-INVASIVE CARDIAC SUPPORT PUMP

Funded Amount:

$8,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MIDWOOD DEVELOPMENT CORP.
1416 AVENUE M
BROOKLYN, NY  11230
(718) 376-0999

Name of Project Director:

LINDA GOODMAN

Purpose of Project:

FUNDS WILL BE USED FOR ESL CLASSES, HOUSING ASSISTANCE AND SENIOR CITIZEN PARTICIPATION PROGRAMS AND COMMUNITY PROGRAMS.

Funded Amount:

$32,000

Requested By:

JACOBS

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MILITARY ORDER OF THE PURPLE HEART OF THE USA - CENTRAL NY
P.O. BOX 4491
UTICA, NY 13504-4491
(315) 797-5089

Name of Project Director:

JOSEPH T. FRACCOLA

Purpose of Project:

FUNDS WILL BE USED TOWARD THE CONSTRUCTION OF A GAZEBO AND
OTHER CAPITAL IMPROVEMENTS TO THE PURPLE HEART MEMORIAL PARK
IN UTICA, NEW YORK.

Funded Amount:

$10,000

Requested By:

DESTITO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MILLER HOSE COMPANY, INC.
2737 MAIN STREET
NEWFANE, NY 14108
(716) 778-8870

Name of Project Director:

MICHAEL MILLS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE PURCHASE OF A 2007 FORD EXPEDITION PARAMEDIC ALS FLY-CAR. ADVANCED LIFE SUPPORT VEHICLE PROVIDES BACK UP TO SURROUNDING FIRE COMPANIES IN NIAGARA COUNTY.

Funded Amount:

$8,000

Requested By:

DELMONTE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MINEOLA VOLUNTEER AMBULANCE CORPS., INC.
170 ELM PLACE, P.O. BOX 587
MINEOLA, NY 11501
(516) 248-0141

Name of Project Director:

THOMAS J. DEVANEY

Purpose of Project:

FUNDS WILL BE USED FOR RESCUE GEAR

Funded Amount:

$1,900

Requested By:

MCKEVITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MONROE LAKESIDE FIRE DEPARTMENT
P.O. BOX 779
MONROE, NY 10949
(845) 783-4156

Name of Project Director:

THOMAS CARTON

Purpose of Project:

FUNDS WILL BE USED FOR TWO LUCAS TOOLS, RAMS

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MONTICELLO FIRE DEPARTMENT, INC.
23 RICHARDSON AVENUE
MONTICELLO, NY 12701
(845) 794-6330

Name of Project Director:

GLENN SOMERS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT TO CREATE A COLLAPSE TEAM.

Funded Amount:

$10,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MOUNT VERNON CHAMBER OF COMMERCE, INC.
P.O. BOX 351
MOUNT VERNON, NY 10550
(914) 667-7500

Name of Project Director:

JERRY POST

Purpose of Project:

FUNDS WILL BE USED TO START ACTIVITIES FOR A MT. VERNON JUNIOR CHAMBER OF COMMERCE TO INTRODUCE ENTREPRENEURSHIP AND PROVIDE BUSINESS MENTORS TO STUDENTS IN THE MT. VERNON SCHOOLS.

Funded Amount:

$10,000

Requested By:

PRETLOW

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MOYERS CORNERS FIRE DEPARTMENT, INC.
7697 MORGAN ROAD
LIVERPOOL, NY  13090
(315) 652-7733

Name of Project Director:

STEPHEN G. RACE

Purpose of Project:

FUNDS WILL BE USED TO REPLACE SAFETY BELTS AND UPGRADE BAIL-OUT BAGS.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MURRAY HILL COMMITTEE, INC.
36 EAST 36TH STREET
NEW YORK, NY 10016
(212) 243-0202

Name of Project Director:

ED CURTIN

Purpose of Project:

FUNDS WILL BE USED FOR TRASH RECEPTACLE REPAIR AND REPLACEMENT, TREE BED MAINTENANCE, AND A COMMUNITY NEWSLETTER.

Funded Amount:

$3,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

MY SISTERS' PLACE, INC.
2 LYON PLACE, SUITE 300
WHITE PLAINS, NY 10601
(914) 683-1333

Name of Project Director:

KAREN CHEEKS-LOMAX

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE CIVIL LEGAL SERVICES TO LOW-INCOME VICTIMS OF DOMESTIC VIOLENCE IN A CULTURALLY AND LINGUISTICALLY SENSITIVE FRAMEWORK.

Funded Amount:

$10,000

Requested By:

PAULIN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NANTICOKE FIRE DEPARTMENT
P.O. BOX 138
MAINE, NY 13802
(607) 862-4677

Name of Project Director:

ANDREW MIHALKO, JR.

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NASSAU COUNTY COALITION AGAINST DOMESTIC VIOLENCE, INC.
250 FULTON AVENUE
HEMPSTEAD, NY  11550
(516) 572-0700

Name of Project Director:

LOIS SCHWAEBER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LEGAL ADVOCACY, CONSULTATION AND REPRESENTATION FOR VICTIMS OF DOMESTIC VIOLENCE.

Funded Amount:

$1,000

Requested By:

LAVINE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NASSAU COUNTY FIREFIGHTERS MUSEUM AND EDUCATION CENTER
ONE DAVIS AVENUE
GARDEN CITY, NY 11530
(516) 572-4177

Name of Project Director:

FRANK SARACINO

Purpose of Project:

FUNDS WILL BE USED TO TEACH THE PUBLIC HOW TO PREVENT INJURIES AND SAVE LIVES.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NATIONAL FEDERATION FOR JUST COMMUNITIES OF WESTERN NEW YORK,
360 DELAWARE AVENUE, SUITE 106
BUFFALO, NY 14202
(716) 853-9596

Name of Project Director:

LANA D. BENATORICH

Purpose of Project:

FUNDS WILL BE USED FOR THE NFJC YOUTH DIVERSITY PROGRAMMING
DEPARTMENT TO PROVIDE CULTURAL DIVERSITY EDUCATION
PROGRAMMING AND PROACTIVE INTERVENTION IN THE SCHOOLS AND
COMMUNITIES OF WNY.

Funded Amount:

$15,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NATIONAL FEDERATION FOR JUST COMMUNITIES OF WESTERN NEW YORK, INC.
360 DELAWARE AVENUE, SUITE 106
BUFFALO, NY 14202
(716) 853-9596

Name of Project Director:

LANA BENATOVICH

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES OF THE YOUTH DIVERSITY DEPARTMENT PROGRAM.

Funded Amount:

$6,000

Requested By:

HOYT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NEIGHBORHOOD TECHNICAL ASSISTANCE CLINIC
544 MACDONOUGH STREET
BROOKLYN, NY 11233
(718) 455-3784

Name of Project Director:

VALERIE OLIVER-DURRAH

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE OUTCOMES OF COMMUNITY BASED SOCIAL INVESTMENT THROUGH TECHNICAL ASSISTANCE AND TRAINING SERVICES.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NEIGHBORS AGAINST GARBAGE, INC.
101 KENT AVENUE
BROOKLYN, NY 11211
(718) 384-2248

Name of Project Director:

PETER GILLESPIE

Purpose of Project:

FUNDS WILL BE USED TO HELP ORGANIZE THE COMMUNITY ON CERTAIN LOCAL PROJECTS THROUGH THE PRINTING OF LITERATURE AND OTHER MATERIALS.

Funded Amount:

$3,000

Requested By:

LENTOL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NEW YORK LEGAL ASSISTANCE GROUP, INC.
450 WEST 33RD STREET, 11TH FLOOR
NEW YORK, NY  10001
(212) 613-5000

Name of Project Director:

YISROEL SCHULMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EMERGENCY LEGAL SERVICES TO VICTIMS OF DOMESTIC VIOLENCE.

Funded Amount:

$43,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NEWARK VALLEY FIRE DEPARTMENT
47 ROCK STREET
NEWARK VALLEY, NY 13811
(607) 642-9555

Name of Project Director:

CLIFF ALEXANDER

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEWSTEAD FIRE COMPANY, INC.
5691 CUMMINGS ROAD
AKRON, NY 14001
(716) 553-8742

Name of Project Director:

STEVEN YOUNG

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF FIRE EQUIPMENT/TRAINING

Funded Amount:

$5,000

Requested By:

COLE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NIAGARA COMMUNITY ACTION PROGRAM
1521 MAIN STREET
NIAGARA FALLS, NY 14305
(716) 285-9681

Name of Project Director:

SUZANNE SHEARS

Purpose of Project:

FUNDS WILL BE USED FOR STRUCTURAL IMPROVEMENTS TO MAIN STREET OFFICE

Funded Amount:

$1,000

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NIAGARA COUNTY BICENTENNIAL STEERING COMMITTEE
P.O. BOX 461
LOCKPORT, NY 14095
(716) 439-7022

Name of Project Director:

WAYNE JAGOW

Purpose of Project:

FUNDS WILL BE USED IN A COUNTY-WIDE BICENTENNIAL EVENT FEATURING SCENIC "BARN PAINTINGS" AND COMMUNITY EVENTS.

Funded Amount:

$5,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NIAGARA FALLS BLOCK CLUB COUNCIL
P.O. BOX 2132
NIAGARA FALLS, NY  14302
(716) 282-3599

Name of Project Director:

SUZANNE SHEARS

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE DEVELOPMENT OF CRIME PREVENTION PROGRAMS.

Funded Amount:

$10,000

Requested By:

DELMONTE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NIAGARA WINE TRAIL
3760 QUAKER ROAD
GASPORT, NY  14067
(716) 772-7429

Name of Project Director:

TOM KRAUS

Purpose of Project:

FUNDS WILL BE USED TO COVER THE COST OF PRINTING, DESIGNING AND DISTRIBUTING THE NIAGARA WINE TRAIL BROCHURES.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NORTH AMITYVILLE COMMUNITY ECONOMIC COUNCIL, INC.
P.O. BOX 785
AMITYVILLE, NY 11701
(631) 842-5376

Name of Project Director:

ROSEMARIE DEARING

Purpose of Project:

FUNDS WILL BE USED FOR OPERATING EXPENSES FOR ECONOMIC DEVELOPMENT AND EDUCATION PROGRAMS IN NORTH AMITYVILLE.

Funded Amount:

$10,000

Requested By:

SWEENEY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NORTH BAY VOLUNTEER FIRE DEPARTMENT, INC.
BOX 246
NORTH BAY, NY 13123
(315) 245-0005

Name of Project Director:

ALICE MATTHEWS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW AIR PACKS

Funded Amount:

$10,000

Requested By:

TOWNSEND

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NORTH BELLMORE FIRE DEPARTMENT
821 NEWBRIDGE ROAD
NORTH BELLMORE, NY 11710
(516) 409-4700

Name of Project Director:

MICHAEL BOLAND

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING PROGRAMMATIC EXPENSES

Funded Amount:

$3,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NORTH COUNTRY SPCA  
P.O. BOX 337  
WILLSBORO, NY 12996  
(518) 963-8662

Name of Project Director:

MARGARET REUTHER

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING REHAB INCLUDING HEATING SYSTEM AND GENERATOR

Funded Amount:

$10,000

Requested By:

SAYWARD

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NORTH CROWN HEIGHTS NOSTRAND AVENUE MERCHANT ASSOCIATION, INC.
728 NOSTRAND AVENUE
BROOKLYN, NY  11216
(718) 604-1080

Name of Project Director:

BARBARA BROWN ALLEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FOR THE CLEANING OF SIDEWALKS SO AS TO INCREASE PEDESTRIAN TRAFFIC.

Funded Amount:

$3,500

Requested By:

CAMARA

Name of Administering State Agency:

DEPARTMENT OF STATE
NORTH EVANS FIRE COMPANY
2044 SHADAGEE ROAD, P.O. BOX 68
NORTH EVANS, NY 14112
(716) 627-5197

RENEE HAZARD

FUNDS WILL BE USED TOWARDS THE UPGRADE OF THE FIREMAN’S PARK PLAYGROUND WHICH ARE IN NEED OF REPAIR AND HAZARDOUS TO THE HEALTH OF CHILDREN USING THE PLAYGROUND

$5,000

QUINN

DEPARTMENT OF STATE
NORTH GREECE FIRE DEPARTMENT
1766 LATTA ROAD
ROCHESTER, NY 14612
(585) 227-4669

FRANK LOMBARDO

FUNDS WILL BE USED FOR DEFIBRILLATORS/PANASONIC TOUGHBOOK FOR EMS

$7,500

REILICH

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NORTH MERRICK FIRE DEPARTMENT
2095 CAMP AVENUE
NORTH MERRICK, NY 11566
(516) 322-1335

Name of Project Director:

SCOTT ROCKWIN

Purpose of Project:

FUNDS WILL BE USED FOR FIREFIGHTING AND AMBULANCE EQUIPMENT

Funded Amount:

$1,500

Requested By:

MCKEVITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NORTH MERRICK FIRE DEPARTMENT
2095 CAMP AVENUE
NORTH MERRICK, NY 11566
(516) 378-9405

Name of Project Director:

SCOTT SABEL

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING PROGRAMMATIC EXPENSES

Funded Amount:

$3,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NORTH NORWICH FIRE DEPARTMENT
317 COUNTY ROUTE 20
SHERBURNE, NY 13460
(607) 627-6639

Name of Project Director:

GERALD PARRY, JR.

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NORTH PATCHOGUE FIRE COMPANY, INC.
33 DAVIDSON AVENUE
PATCHOGUE, NY 11772
(631) 475-1788

Name of Project Director:

JOHN C. DREWS, III

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SECURITY EQUIPMENT.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NORTH WINTON VILLAGE ASSOCIATION, LTD.
P.O. BOX 10835
ROCHESTER, NY 14610
(585) 482-2898

Name of Project Director:

MARILYN SCHUTTE

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE INSTALLING THE TEARDROP STYLE LIGHTS ALONG EAST MAIN STREET AND MERCHANTS ROAD.

Funded Amount:

$7,500

Requested By:

MORELLE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NORTHSIDE FIRE DISTRICT
85 SARATOGA AVENUE
WATERFORD, NY 12188
(518) 235-4609

Name of Project Director:

DANIEL E. SHEFFER, JR.

Purpose of Project:

FUNDS WILL BE USED TO REPLACE A 17 YEAR OLD BOAT WITH A NEW HIGH-TECH FIRE BOAT THAT WILL BETTER SUIT THEIR NEEDS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

NOSTRAND AVENUE MERCHANT ASSOCIATION, INC.
1143 NOSTRAND AVENUE
BROOKLYN, NY  11225
(718) 363-9200

Name of Project Director:

LINDIWIE KAMAU

Purpose of Project:

FUNDS WILL BE USED TO INCREASE THE FLOW OF PEDESTRIAN TRAFFIC TO LOCAL MERCHANTS BY IMPROVING THE AESTHETICS OF THE MERCHANT CORRIDOR ALONG NOSTRAND AVENUE.

Funded Amount:

$3,500

Requested By:

CAMARA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

OAKDALE CHAMBER OF COMMERCE
1311 MONTAUK HIGHWAY
OAKDALE, NY 11769
(631) 348-2059

Name of Project Director:

ELIZABETH KENNEDY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMMUNITY EVENTS. FUNDS WILL ALSO BE USED TO CREATE A WEBSITE.

Funded Amount:

$2,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ONEIDA COUNTY CONVENTION AND VISITORS BUREAU
P.O. BOX 551
UTICA, NY 13503-0551
(315) 724-7221

Name of Project Director:

PAUL ZIEGLER

Purpose of Project:

FUNDS WILL BE USED FOR COSTS ASSOCIATED WITH HOSPITALITY TRAINING.

Funded Amount:

$5,000

Requested By:

DESTITO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ONEIDA COUNTY EMERGENCY SERVICES
120 BASE ROAD
ORISKANY, NY 13424
(315) 765-2526

Name of Project Director:

FRED VAN NAMEE

Purpose of Project:

FUNDS WILL BE USED TO BOOST THE CAPACITY OF AIR VANS THAT ARE USED BY CITY AND VOLUNTEER FIRE DEPARTMENTS IN ONEIDA COUNTY. THIS INVOLVES INCREASED GENERATOR CAPACITY FOR THE TWO TRUCKS.

Funded Amount:

$5,000

Requested By:

DESTITO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

OPPORTUNITIES FOR CHENANGO, INC.
44 WEST MAIN STREET, P.O. BOX 470
NORWICH, NY 13815
(607) 336-2101 116

Name of Project Director:

WAYNE H. VIERA

Purpose of Project:

FUNDS WILL BE USED FOR WELL REPLACEMENT

Funded Amount:

$20,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ORANGETOWN FIRE COMPANY NO. 1
92 DEPOT PLACE
SOUTH NYACK, NY 10960
(845) 577-2530

Name of Project Director:

RICHARD MATHSEN

Purpose of Project:

FUNDS WILL BE USED TO REMODEL THE INTERIOR ROOM IN ORDER TO CREATE A DISPLAY SPACE FOR PUBLIC VIEWING OF HISTORIC ITEMS INCLUDING A HANDPUMPER FROM 1749.

Funded Amount:

$2,000

Requested By:

JAFFEE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ORCHARD PARK FIRE DISTRICT
P.O. BOX 1290
ORCHARD PARK, NY 14127
(716) 983-6083

Name of Project Director:

BILL SZEWC

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SCOTT EAGLE 160 THERMAL IMAGING DEVICES.

Funded Amount:

$10,600

Requested By:

SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

OTSEGO COUNTY SOIL & WATER CONSERVATION DISTRICT
967 COUNTY HIGHWAY 33
COOPERSTOWN, NY 13326
(607) 547-8337 4

Name of Project Director:

BLANCHE L. HURLBUTT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A VEHICLE TO PROVIDE SERVICE SUCH AS PULLING SOIL TO MAKE SURE IT IS ENVIRONMENTALLY SOUND FOR LANDOWNERS AND FARMERS IN OTSEGO COUNTY.

Funded Amount:

$12,500

Requested By:

MAGEE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

OWEGO FIRE DEPARTMENT
178 MAIN STREET
OWEGO, NY 13827
(607) 687-1201

Name of Project Director:

TOM TAFT

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PARK SLOPE CIVIC COUNCIL, INC.
357 9TH STREET
BROOKLYN, NY  11215
(718) 832-8227

Name of Project Director:

LYDIA DENWORTH

Purpose of Project:

FUNDS WILL BE USED FOR PRINTING OF CIVIC NEWS; THE MONTHLY NEWSLETTER.

Funded Amount:

$3,500

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PATCHOGUE FIRE DEPARTMENT, INC.
15 JENNINGS AVENUE
PATCHOGUE, NY  11772
(631) 207-9423

Name of Project Director:

BRIAN WARD

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE DIVING AND SCUBA GEAR.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PAVILION FIRE DEPARTMENT
P.O. BOX 126
PAVILION, NY 14525
(585) 584-3841

Name of Project Director:

DONALD ROBLEE

Purpose of Project:

FUNDS WILL BE USED FOR A NEW GENERATOR

Funded Amount:

$5,000

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PHARSALIA FIRE DEPARTMENT
839 COUNTY ROAD 7
MCDONOUGH, NY 13801
(607) 647-5487

Name of Project Director:

RONALD BECKWITH

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PHILLIPSPORT COMMUNITY CENTER ASSOCIATION, INC.
657 REDHILL ROAD, BOX 828
PHILLIPSPORT, NY  12769
(212) 662-9978

Name of Project Director:

BOB SPEZIALE

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS OF COMMUNITY CENTER TO MEET ADA STANDARDS.

Funded Amount:

$10,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PIKE VOLUNTEER FIRE DEPARTMENT
P.O. BOX 175, 67 MAIN STREET
PIKE, NY 14130
(585) 493-5718

Name of Project Director:

DOUG FLINT

Purpose of Project:

FUNDS WILL BE USED FOR TURNOUT GEAR

Funded Amount:

$8,500

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PLAYWRIGHTS HORIZONS
416 WEST 42ND ST
NEW YORK, NY 10036 – 6809
(212) 564 – 1235

Name of Project Director:

LESLIE MARCUS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF THE PLAYWRIGHTS HORIZON THEATER SCHOOL.

Funded Amount:

$55,000

Requested By:

GOTTFRIED, MORELLE, SILVER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PLYMOUTH FIRE DEPARTMENT
P.O. BOX 88
PLYMOUTH, NY 13832
(607) 336-5786

Name of Project Director:

MATTHEW BATES

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

POINT BREEZE VOLUNTEER FIRE DEPARTMENT, INC.
ONE FIREMAN'S PLAZA
BREEZY POINT, NY 11697
(718) 634-7967

Name of Project Director:

JOHN INGRAM

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PURCHASE OF EQUIPMENT AND TO HELP OFFSET THE GENERAL OPERATING EXPENSES OF THE VFD.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

POPLAR RIDGE FIRE DEPARTMENT
2423 ROUTE 34B
POPLAR RIDGE, NY 13139
(315) 364-7344

Name of Project Director:

DAN HETHERINGTON

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PORT CHESTER-TOWN OF RYE CHAMBER OF COMMERCE & CIVIC ASSOCIATION, INC.
122 NORTH RIDGE STREET
PORT CHESTER, NY 10573
(914) 939-1900

Name of Project Director:

KEN MANNING

Purpose of Project:

FUNDS WILL BE USED TO UPDATE AND MODERNIZE THE WEBSITE, THUS ENABLING THE CHAMBER AND THEIR MEMBERS TO REACH THE MAXIMUM AMOUNT OF POTENTIAL CUSTOMERS.

Funded Amount:

$5,000

Requested By:

LATIMER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PRESTON FIRE DEPARTMENT
3337 STATE HIGHWAY 220
OXFORD, NY 13830
(607) 843-9048

Name of Project Director:

KRIS BARTLE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PRO CO TECHNOLOGY, INC.
647 EAST 180TH STREET
BRONX, NY 10457
(718) 220-6910

Name of Project Director:

DAMIAN PEREZ

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE NEIGHBORHOOD TECHNOLOGY CENTER’S OPERATING EXPENSES.

Funded Amount:

$5,000

Requested By:

BENJAMIN

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PROJECT CARE OF BROOKLYN, INC.
164 CLYMER STREET
BROOKLYN, NY 11211
(718) 387-4500

Name of Project Director:

ISAAC BRAUNER

Purpose of Project:

FUNDS WILL BE USED TO ASSIST PROJECT CARE’S JOB PLACEMENT PROGRAM WHICH OFFERS JOB COUNSELING, INTENSIVE SKILLS INSTRUCTION AND JOB DEVELOPMENT.

Funded Amount:

$3,000

Requested By:

LENTOL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PUBLIC UTILITY LAW PROJECT OF NEW YORK, INC.
194 WASHINGTON AVENUE, SUITE 420
ALBANY, NY  12210
(518) 449-3375

Name of Project Director:

GERALD NORLANDER

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF A COPIER/PRINTER FOR THE OFFICES.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PUERTO RICAN BAR ASSOCIATION, INC.
26 COURT STREET, SUITE 2200
BROOKLYN, NY 11242
(718) 522-0009

Name of Project Director:

FRANK CRUZ

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ASSOCIATION’S LAWYER REFERRAL AND INFORMATION SERVICES PROGRAM WHICH PRIMARILY SERVES MIDDLE AND LOW INCOME PEOPLE.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

PUTNAM COUNTY HUMANE SOCIETY
P.O. BOX 297
CARMEL, NY 10512
(845) 216-2669

Name of Project Director:

ALISON GENEZ

Purpose of Project:

FUNDS WILL BE USED FOR TAGS FOR PETS

Funded Amount:

$3,000

Requested By:

BALL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

QUEENS LEGAL SERVICES CORPORATION
89-90 SUTPHIN BOULEVARD
JAMAICA, NY 11435
(718) 657-8611

Name of Project Director:

CARL O CALLENDER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LEGAL SERVICES TO CLIENTS THROUGHOUT QUEENS COUNTY.

Funded Amount:

$40,000

Requested By:

COOK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

QUEENS LEGAL SERVICES CORPORATION
89-02 SUTPHEN BOULEVARD
JAMAICA, NY  11691
(718) 657-8611

Name of Project Director:

CARL O. CALLENDAR

Purpose of Project:

FUNDS WILL BE USED TO EXPAND LEGAL SERVICES TO PROVIDE ASSISTANCE IN SECURING ORDERS OF PROTECTION AND OTHER EMERGENCY ASSISTANCE TO VICTIMS OF DOMESTIC VIOLENCE AND TO PROMOTE LEGAL COUNSEL AND ADVICE ON CUSTODY, VISITATION AND SPOUSAL SUPPORT.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

RAPIDS VOLUNTEER FIRE COMPANY, INC.
7195 PLANK ROAD
LOCKPORT, NY 14094
(716) 434-9932

Name of Project Director:

RICH NEWTON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FIREMATIC EQUIPMENT SUCH AS A "CHOP SAW" AND OTHER EQUIPMENT

Funded Amount:

$4,000

Requested By:

COLE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

RENEWABLE ENERGY LONG ISLAND, INC.
P.O. BOX 789
BRIDGEHAMPTON, NY  11932
(631) 537-8282

Name of Project Director:

KATHLEEN CUNNINGHAM

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE CLEAN, SUSTAINABLE ENERGY GROWTH FOR LONG ISLAND.

Funded Amount:

$5,000

Requested By:

ALESSI

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

RESCUE HOSE CO. #5
111 OHIO AVENUE
PLATTSBURGH, NY 12901
(518) 297-1229

Name of Project Director:

JAMES A. COBB

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE CONTAINMENT FILL STATIONS FOR RESCUE TRUCKS

Funded Amount:

$9,000

Requested By:

DUPREY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

RESERVE HOSE COMPANY OF THE TOWN OF WEST SENECA
2400 BERG ROAD
WEST SENECA, NY 14218
(716) 675-1122

Name of Project Director:

JOSEPH EVANS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AN AMKUS CUTTING TOOL (AKA JAWS OF LIFE) FOR EMERGENCY SITUATIONS.

Funded Amount:

$5,000

Requested By:

SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RICHFORD FIRE DEPARTMENT
P.O. BOX 70
RICHFORD, NY 13835
(607) 657-4414

Name of Project Director:

KENNETH GORDINIER

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

RIDGE ROAD FIRE DISTRICT
1229 LONG POND ROAD
ROCHESTER, NY 14626
(585) 453-1201

Name of Project Director:

BUD PHILLIPS

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A THERMAL IMAGING CAMERA

Funded Amount:

$5,000

Requested By:

REILICH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

RIVERDALE JEWISH COMMUNITY COUNCIL, INC.
C/O RIVERDALE YM-YWHA, 5625 ARLINGTON AVENUE
BRONX, NY  10471
(718) 548-8200  217

Name of Project Director:

DEVORIE GOLDHAIR

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS RELATED TO THE MAINTENANCE OF RJCC’S WEBSITE AND ONLINE NEWSLETTER. FUNDS WILL ALSO BE USED FOR THE PUBLICATION OF A COMMUNITY NEWSPAPER, "THE SOURCE".

Funded Amount:

$5,000

Requested By:

DINOWITZ

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ROME UP AND RUNNING, INC.
503 NORTH GEORGE STREET
ROME, NY 13440
(315) 339-1500

Name of Project Director:

DONNA J. BURCH

Purpose of Project:

FUNDS WILL BE USED FOR CAPITAL IMPROVEMENTS AND EQUIPMENT TO EXPAND THE ROME FIRE AND POLICE MEMORIAL PARK, WHICH MEMORIALIZES THE ACCOMPLISHMENTS OF ROME FIRE AND POLICE PERSONNEL, AND INCLUDES A 9/11 MEMORIAL.

Funded Amount:

$5,000

Requested By:

DESTITO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ROSCOE ROCKLAND FIRE COMPANY
P.O. BOX 174
ROSCOE, NY 12776
(845) 313-5679

Name of Project Director:

GARY A. BURY

Purpose of Project:

FUNDS WILL BE USED TO REPLACE EMERGENCY RADIO BASE AND HANDHELDs.

Funded Amount:

$10,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ROXBURY VOLUNTEER EMERGENCY SERVICES, INC.
42 STATE ROAD
ROCKAWAY POINT, NY  11697
(718) 945-2678

Name of Project Director:

PAUL HEDDERSON

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE PURCHASE OF VITAL EQUIPMENT FOR LIFE-SAVING EFFORTS OF THIS VOLUNTEER ORGANIZATION.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007 – 2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROUNDABOUT THEATRE COMPANY
231 WEST 39TH STREET, SUITE 1200
NEW YORK, NY 10018
(212) 719 – 9393

Name of Project Director:

JULIA C. LEVY

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL PROGRAMMING.

Funded Amount:

$55,000

Requested By:

FARRELL, SILVER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RURAL AND MIGRANT MINISTRY OF OSWEGO COUNTY
P.O. BOX 192, 15 STEWART STREET
RICHLAND, NY 13144
(315) 298-1154

Name of Project Director:

SHAWN DOYLE

Purpose of Project:

FUNDS WILL BE USED FOR FUNDING FOR LOCAL PROJECTS FOR MEMBERS OF THE COMMUNITY SUCH AS FREE HEALTH CARE CLINIC AND LITERACY PROGRAMS

Funded Amount:

$5,000

Requested By:

BARCLAY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

RURAL GROVE VOLUNTEER FIRE CO., INC.
STATE HIGHWAY 162, P.O. BOX 219
SPRAKERS, NY   12166
(518) 922-8801

Name of Project Director:

JEFFREY R. KACZOR

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A THERMAL IMAGING CAMERA FOR
THE PROTECTION AND AID OF FIREFIGHTERS.

Funded Amount:

$5,000

Requested By:

TONKO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

RURITAN NATIONAL CORP.
P.O. BOX 146
DERUYTER, NY 13052
(315) 480-2525

Name of Project Director:

SHAWN SKEELE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A PROJECTOR AND A SCREEN.

Funded Amount:

$5,000

Requested By:

MAGEE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SALEM REVOLUTIONARY WAR CEMETERY COMMITTEE
P.O. BOX 458
SALEM, NY 12865
(518) 854-3527

Name of Project Director:

AL CORMIER

Purpose of Project:

FUNDS WILL BE USED FOR RECONSTRUCTION COSTS

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SALVATION ARMY OF CANANDAIGUA
110 SALTONSTALL STREET
CANANDAIGUA, NY 14424
(315) 394-6968

Name of Project Director:

ROBERT GINTER

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION IMPROVEMENTS TO THE BUILDING INCLUDING HANDICAP ACCESSIBLE IMPROVEMENTS

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SARATOGA COUNTY ECONOMIC OPPORTUNITY COUNCIL, INC.
40 NEW STREET P.O. BOX 5120
SARATOGA SPRINGS, NY  12866
(518) 587-3158

Name of Project Director:

DENNIS BRUNELLE

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE PROVIDING PERSONAL FINANCE ASSISTANCE SERVICES AND SUPPORT TO UNDERPRIVILEGED CITIZENS OF SARATOGA COUNTY.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SAW MILL RIVER AUDUBON SOCIETY, INC.
275 MILLWOOD ROAD
CHAPPAQUA, NY 10514
(914) 666-6503

Name of Project Director:

ANNE SWAIM

Purpose of Project:

FUNDS WILL BE USED TO INSTALL ROADSIDE SIGNS IN THREE SANCTUARIES IN THE TOWN OF NEW CASTLE; (PINECLIFF SANCTUARY, CAMERON-MURTFELDT SANCTUARY, CHOATE SANCTUARY) TO INCREASE AWARENESS AND INCREASE VISITATION BY THE PUBLIC.

Funded Amount:

$5,000

Requested By:

BRADLEY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SAYVILLE FIRE DISTRICT
107 NORTH MAIN STREET
SAYVILLE, NY 11782
(631) 589-0189

Name of Project Director:

DON HODGKINSON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AIR CYLINDER REFILLING UNITS.

Funded Amount:

$4,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SCHENECTADY ACCESS CABLE COUNCIL, INC.
115 NORTH BROADWAY
SCHENECTADY, NY 12305
(518) 346-3181

Name of Project Director:

SUSAN MANCINI

Purpose of Project:

FUNDS WILL BE USED FOR REPLACEMENT OF OLD, BROKEN AND LEAKING WINDOWS AND ROOF LEAKS

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SCHODACK LANDING FIRE DISTRICT  
FIREHOUSE LANE  
SCHODACK LANDING, NY 12156  
(518) 732-7579

Name of Project Director:

EDWARD SECOVNE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A WARMING STATION FOR THE RESIDENTS OF THE SCHODACK LANDING FIRE DISTRICT AND THE TOWN OF SCHODACK.

Funded Amount:

$5,000

Requested By:

GORDON-T

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SCHO-WRIGHT AMBULANCE SERVICE
P.O. BOX 325
SCHOHARIE, NY 12157
(518) 295-6100

Name of Project Director:

GEN OVERHOLT

Purpose of Project:

FUNDS WILL BE USED FOR REBUILDING OF AN AMBULANCE BARN

Funded Amount:

$10,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SCHUYLER HILL CIVIC ASSOCIATION, INC.
3087 MITCHELL PLACE
BRONX, NY 10465
(718) 822-6212

Name of Project Director:

ROBERT KURZ

Purpose of Project:

FUNDS WILL BE USED TO MODERNIZE THE EXISTING CLUB HOUSE KITCHEN.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SCORE ROCHESTER, CHAPTER 23
100 STATE STREET, #410
ROCHESTER, NY  14614
(585) 263-6473

Name of Project Director:

LARRY FELDMAN

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THEIR WORKSHOP, EDUCATION AND SEMINAR INITIATIVES.

Funded Amount:

$2,500

Requested By:

MORELLE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SEA BREEZE COMMUNITY ASSOCIATION, INC.
4600 CULVER ROAD
ROCHESTER, NY 14622
(585) 467-5622

Name of Project Director:

ALAYNA HILL ALDERMAN

Purpose of Project:

FUNDS WILL BE USED FOR VARIOUS BEAUTIFICATION IMPROVEMENTS IN THE SEA BREEZE NEIGHBORHOOD, INCLUDING HANGING FLOWER BASKETS AND TRASH RECEPTICLES.

Funded Amount:

$7,500

Requested By:

MORELLE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SEAFORD FIRE DEPARTMENT
2170 SOUTHARD AVENUE
SEAFORD, NY 11783
(516) 679-2623

Name of Project Director:

STEPHEN FEIL

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING PROGRAMMATIC EXPENSES

Funded Amount:

$3,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SEATAUKET FIRE DEPARTMENT, INC.
190 MAIN STREET
SEATAUKET, NY 11733
(631) 751-5884

Name of Project Director:

GLEN PINKAVA

Purpose of Project:

FUNDS WILL BE USED TO CREATE, PRODUCE, AND INSTALL HIGHWAY SIGNAGE IN ORDER TO DIRECT VISITORS TO THE SEPTEMBER 11TH MEMORIAL PARK AT THE SETAUKET FIREHOUSE.

Funded Amount:

$1,500

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

DEPARTMENT OF STATE
SHAKER ROAD / LOUDONVILLE FIRE DEPARTMENT, INC.
550 ALBANY SHAKER ROAD
LOUDONVILLE, NY 12211
(518) 458-1352

JAY LEBARRON

FUNDS WILL BE USED FOR THE PURCHASE OF AN OUTDOOR TENT.

$3,000

REILLY

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SHERBURNE FIRE DEPARTMENT
P.O. BOX 575
SHERBURNE, NY 13460
(607) 316-4698

Name of Project Director:

MICHAEL HODGE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SHILOH BAPTIST CHURCH  
14 WARREN STREET  
HUDSON, NY 12534  
(518) 828-9723

Name of Project Director:

REV. RONALD GRANT

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF TWO COMPUTERS WITH PRINTERS AND SCANNERS FOR THEIR COMMUNITY OUTREACH PROGRAM THAT INSTRUCTS AND FAMILIARIZES YOUTH AND SENIOR CITIZENS WITH COMPUTERS AND INFORMATION TECHNOLOGY

Funded Amount:

$1,500

Requested By:

MOLINARO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SHORT TRACT VOLUNTEER FIRE COMPANY
10300 COUNTY ROUTE 15
FILLMORE, NY 14735
(585) 567-8838

Name of Project Director:

TIMOTHY VOSS

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$5,000

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SMYRNA FIRE DEPARTMENT
654 COUNTY ROAD 20
SMYRNA, NY 13464
(607) 627-6605

Name of Project Director:

NORM WYNN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SOLVAY FIRE DEPARTMENT, INC.
P.O. BOX 123
SOLVAY, NY 13209
(315) 468-1710

Name of Project Director:

DAVID BOSCO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE PROTECTIVE SUITS AND MASKS FOR FIREFIGHTERS.

Funded Amount:

$5,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SOUTH BAY FIRE DEPARTMENT, INC.
8819 CICERO CENTER ROAD
CICERO, NY 13039
(315) 699-2893

Name of Project Director:

DAN DELARGY

Purpose of Project:

FUNDS WILL BE USED TO REPLACE A TWENTY YEAR OLD ATV SEARCH AND RESCUE VEHICLE.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SOUTH BEACH CIVIC ASSOCIATION
24 CAMBRIA STREET
STATEN ISLAND, NY 10305
(718) 720-5199

Name of Project Director:

JOSEPH MCALLISTER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MATERIALS AND OFFSET COSTS OF COMMUNITY OUTREACH EFFORTS FOR EMERGENCY PREPAREDNESS AND COMMUNITY SAFETY PROGRAMMING.

Funded Amount:

$3,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SOUTH BROOKLYN LEGAL SERVICES
105 COURT STREET
BROOKLYN, NY 11201
(718) 237-5500

Name of Project Director:

CHIP GRAY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LEGAL SERVICES TO LOW-INCOME FAMILIES TO PREVENT THEM FROM LOSING THEIR HOMES AND ADDRESS NEEDS ARISING FROM DOMESTIC ABUSE.

Funded Amount:

$5,000

Requested By:

JACOBS

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SOUTH BROOKLYN LEGAL SERVICES
105 COURT STREET
BROOKLYN, NY  11201
(718) 237-5500

Name of Project Director:

CHIP GRAY

Purpose of Project:

FUNDS WILL BE USED TO PREVENT HOMELESSNESS BY PREVENTING
EVICTIONS, PRESERVING FAMILIES BY KEEPING KIDS OUT OF FOSTER CARE,
AND REMEDYING DOMESTIC VIOLENCE BY REPRESENTING VICTIMS.

Funded Amount:

$4,752

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SOUTH BROOKLYN LEGAL SERVICES
105 COURT STREET
BROOKLYN, NY 11201
(718) 237-5500

Name of Project Director:

JOHN GRAY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LEGAL SERVICES TO INDIGENT COMMUNITY MEMBERS.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SOUTH BROOKLYN LOCAL DEVELOPMENT CORPORATION
268 SMITH STREET
BROOKLYN, NY 11231
(718) 852-0328

Name of Project Director:

BETTE STOLTZ

Purpose of Project:

FUNDS WILL BE USED TO WORK WITH THE SCHOOL FOR INTERNATIONAL STUDIES TO UPGRADE THE FACILITIES AND INVOLVE THE LOCAL BUSINESS COMMUNITY IN THE LAUNCHING OF AN IN-SCHOOL HIGH SCHOOL CULINARY ARTS PROGRAM.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SOUTH HEMPSTEAD CIVIC ASSOCIATION, INC.
555 MAY STREET
SOUTH HEMPSTEAD, NY 11550
(516) 385-5712

Name of Project Director:

KATHY SPATZ

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY BEAUTIFICATION.

Funded Amount:

$5,000

Requested By:

HOOPER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SOUTH LINE FIRE DISTRICT #10
1049 FRENCH ROAD
CHEEKTOWAGA, NY  14227
(716) 668-1232

Name of Project Director:

JOEL SCHNURSTEIN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A SMART BOARD.

Funded Amount:

$3,500

Requested By:

GABRYSZAK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SOUTH OTSELIC FIRE DEPARTMENT
2718 COUNTY ROUTE 16
GEORGETOWN, NY 13072
(315) 837-4173

Name of Project Director:

JIM CROSS

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SOUTHSIDE FIRE DEPARTMENT
3120 WAITES ROAD
OWEGO, NY 13827
(607) 687-5212

Name of Project Director:

FRANK OKRASINSKI

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SOUTHSIDE MISSION OF TRANSFIGURATION CHURCH
280 MARCY AVENUE
BROOKLYN, NY 11211
(718) 782-8181

Name of Project Director:

JOHN MULHERN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE IMMIGRATION AND REFUGEE ASSISTANCE, LEGAL REPRESENTATION AND ADVOCACY. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

LOPEZ-V

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SPAY NEUTER NOW
47 DUCK COVE ROAD
HAMMOND, NY 13646
(315) 324-5969

Name of Project Director:

BEA SCHERMERHORN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE SPAY NEUTER NOW PROVIDES

Funded Amount:

$4,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SPENCER FIRE DEPARTMENT
P.O. BOX 507
SPENCER, NY 14883
(607) 589-6168

Name of Project Director:

AL ERVAY

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SPENCERPORT FIRE DISTRICT
2629 SPENCERPORT ROAD
SPENCERPORT, NY 14559
(585) 509-5757

Name of Project Director:

JOSEPH MUNIZ

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF PORTABLE RADIOS

Funded Amount:

$10,175

Requested By:

REILICH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

ST. LAWRENCE COUNTY CHAMBER OF COMMERCE, INC.
101 MAIN STREET
CANTON, NY  13617
(315) 386-4000

Name of Project Director:

KAREN ST. HILAIRE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TOURISM AND PROMOTIONAL MATERIALS FOR ST. LAWRENCE COUNTY.

Funded Amount:

$10,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF STATE
ST. LAWRENCE COUNTY ENERGY EFFICIENCY DEMONSTRATION PROJECT
48 COURT STREET
CANTON, NY 13617
(315) 379-2292

JASON C. PFOTENHAURER

FUNDS WILL BE USED TO ASSIST WITH THE IMPLEMENTATION OF AN
ENERGY EFFICIENCY PROGRAM CONSISTING OF EDUCATIONAL MATERIALS,
MEASUREMENTS OF ENERGY NEEDS AND IMPLEMENTATION OF
RENOVATIONS FOR LOW TO MODERATE INCOME FAMILIES

$5,000

SCOZZAFAVA

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SUFFOLK COUNTY SPCA
202 OYSTER BAY ROAD
LOCUST VALLEY, NY 11560
(516) 676-1446

Name of Project Director:

RICK BELYEA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HUMANE SUPPORT SERVICES TO HOMELESS ANIMALS IN SUFFOLK COUNTY AND SPAY/NEUTER

Funded Amount:

$5,000

Requested By:

THIELE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SUNNYSIDE CHAMBER OF COMMERCE
P.O. BOX 4050
SUNNYSIDE, NY 11104
(718) 482-6053

Name of Project Director:

JOHN VOGT

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF TWO INTERNS TO ASSIST IN PROJECTS SUCH AS MANAGING A WEB PAGE, TO OFFSET GENERAL EXPENSES AND TO PURCHASE OFFICE SUPPLIES AND EQUIPMENT.

Funded Amount:

$10,000

Requested By:

NOLAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SUNSET PARK BUSINESS IMPROVEMENT DISTRICT
476 51ST STREET, 2ND FLOOR
BROOKLYN, NY  11220
(718) 439-7767

Name of Project Director:

RENEE GIORDANO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE 15-BLOCK STREET FESTIVAL EVENT, SUCH AS PROVIDING ENTERTAINMENT, REFRESHMENTS, ETC.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

SWAN LAKE PARK CIVIC ASS’N, INC.
86 LAKE DRIVE
PATCHOGUE, NY  11772
(631) 447-9144

Name of Project Director:

TERRACE G. PEARSELL

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH OPERATING COSTS INCLUDING WEBSITE, POSTAGE, PRINTING AND GENERAL OFFICE EXPENSES.

Funded Amount:

$1,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

THE COUNCIL FOR A CLEANER CHINATOWN
194 GRAND STREET, SUITE 328
NEW YORK, NY  10013
(212) 226-3821

Name of Project Director:

BILL LAM

Purpose of Project:

FUNDS WILL BE USED TO ACHIEVE A CLEANER AND MORE BEAUTIFUL CHINATOWN THROUGH SELF-POLICING BY COMMUNITY BUSINESSES AND RESIDENTS, A VIGOROUS VOLUNTEER EFFORT, AND STRONG ENFORCEMENT BY CITY AND STATE AGENCIES. THE PROGRAM WILL EDUCATE THE COMMUNITY AND INVOLVE RESIDENTS, SCHOOLS, AND BUSINESSES WHO PARTICIPATE.

Funded Amount:

$12,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

THREE VILLAGE COMMUNITY TRUST, INC.
P.O. BOX 2596
SETAUKET, NY 11733
(631) 689-0225

Name of Project Director:

CYNTHIA BARNES

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE TRUST INCLUDING EQUIPMENT, UTILITIES, PRINTING, MAILING AND SIGNAGE.

Funded Amount:

$3,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF ARIETTA  
P.O. BOX 97  
PISECO, NY 12139  
(518) 548-3415

Name of Project Director:

RICHARD WILT

Purpose of Project:

FUNDS WILL BE USED TO REPLACE PLAYGROUND EQUIPMENT

Funded Amount:

$10,000

Requested By:

SAYWARD

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF BEEKMAN
4 MAIN STREET
POUGHQUAG, NY 12570
(845) 724-3000

Name of Project Director:

JOHN ADAMS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SIGNS FOR VARIOUS MUNICIPALLY OWNED BUILDINGS AND PARKS

Funded Amount:

$3,000

Requested By:

MOLINARO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF BLOOMING GROVE
6 HORTON ROAD, P.O. BOX 358
BLOOMING GROVE, NY 10914
(845) 496-5223

Name of Project Director:

ANGELA DOERING

Purpose of Project:

FUNDS WILL BE USED FOR SENIOR CENTER IMPROVEMENTS

Funded Amount:

$5,000

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF BLOOMING GROVE
6 HORTON ROAD, P.O. BOX 358
BLOOMING GROVE, NY 10914
(845) 496-5223

Name of Project Director:

ANGELA DOERING

Purpose of Project:

FUNDS WILL BE USED FOR RECREATION EQUIPMENT AT MAYS FIELD

Funded Amount:

$5,000

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF BRIGHTON
P.O. BOX 260
PAUL SMITHS, NY 12970
(518) 327-3202

Name of Project Director:

DAVID KNAPP

Purpose of Project:

FUNDS WILL BE USED FOR RESTORATION OF HISTORIC TOWN HALL

Funded Amount:

$10,000

Requested By:

DUPREY

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF CAIRO
P.O. BOX 728
CAIRO, NY 12413
(518) 622-2060

Name of Project Director:

JOE CALAVECCHIA

Purpose of Project:

FUNDS WILL BE USED FOR SIDEWALK PROJECT ENGINEERING DESIGN

Funded Amount:

$10,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF CARMEL
60 MCALPIN AVENUE
MAHOPAC, NY 10541
(845) 628-1500

Name of Project Director:

CONNIE MUNDAY

Purpose of Project:

FUNDS WILL BE USED FOR ENHANCEMENT TO BUSINESS DISTRICT OF MAHOPAC

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF CHARLTON
784 CHARLTON ROAD
CHARLTON, NY 12019
(518) 384-0152 207

Name of Project Director:

ALAN GRATTIDGE

Purpose of Project:

FUNDS WILL BE USED FOR AN EMERGENCY GENERATOR FOR TOWN HALL

Funded Amount:

$40,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF CHEEKTOWAGA
3301 BROADWAY STREET
CHEEKTOWAGA, NY 14227
(716) 684-5838

Name of Project Director:

TOM ADAMCZAK

Purpose of Project:

FUNDS WILL BE USED FOR RODENT CONTROL IN CHEEKTOWAGA.

Funded Amount:

$2,500

Requested By:

GABRYSZAK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF CHESTER
1786 KINGS HIGHWAY
CHESTER, NY 10918
(845) 469-7000

Name of Project Director:

STEPHEN NEUHAUS

Purpose of Project:

FUNDS WILL BE USED FOR SUGAR LOAF PLANNING GRANT

Funded Amount:

$10,000

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF CLERMONT
1795 ROUTE 9
GERMANTOWN, NY 12526
(518) 537-6868

Name of Project Director:

WILLIAM BANKS

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION/REPAIRS AT A COMMUNITY HOUSE

Funded Amount:

$4,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF CLINTON
P.O. BOX 208
CLINTON CORNERS, NY 12514
(845) 266-5721 105

Name of Project Director:

RAYMON OBERLY

Purpose of Project:

FUNDS WILL BE USED FOR TYMETAL FENCING FOR HIGHWAY GARAGE AREA

Funded Amount:

$5,500

Requested By:

MILLER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF CONCORD
86 FRANKLIN STREET, P.O. BOX 368
SPRINGVILLE, NY 14141
(716) 592-4946

Name of Project Director:

GARY EPPOLITO

Purpose of Project:

FUNDS WILL BE USED FOR A FEASIBILITY STUDY OF CREATING A NEW WATER DISTRICT OR EXTENDING AN EXISTING WATER DISTRICT

Funded Amount:

$5,500

Requested By:

QUINN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF CONKLIN
1271 CONKLIN ROAD, P.O. BOX 182
CONKLIN, NY 13748
(607) 775-4114

Name of Project Director:

DEBRA A. PRESTON

Purpose of Project:

FUNDS WILL BE USED FOR DEFIBRILLATORS

Funded Amount:

$6,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF CONSTANTIA-HIGHWAY DEPARTMENT
60 RAILROAD STREET
BERNHARDS BAY, NY 13028
(315) 675-8264

Name of Project Director:

DAVID C. WEBB

Purpose of Project:

FUNDS WILL BE USED FOR SITE PREPARATION FOR SALT/SAND STORAGE BUILDING

Funded Amount:

$10,000

Requested By:

TOWNSEND

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF CORNWALL
395 HUDSON STREET
CORNWALL, NY 12518
(845) 534-8282

Name of Project Director:

MOLLY ROBBINS

Purpose of Project:

FUNDS WILL BE USED TO DIGITALIZE HISTORICAL ISSUES

Funded Amount:

$5,000

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF COXSACKIE
16 REED STREET
COXSACKIE, NY 12051
(518) 731-2727

Name of Project Director:

ALEX BETKE

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE PURCHASE OF AIR PACKS AND BREATHERS.

Funded Amount:

$6,000

Requested By:

GORDON-T

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF CRAWFORD
62 MAIN STREET, P.O. BOX 109
CRAWFORD, NY 12566
(845) 744-5010

Name of Project Director:

CHARLES CARNES

Purpose of Project:

FUNDS WILL BE USED FOR SECURITY, DRAINAGE AND LIGHTING AT TOWN PARK

Funded Amount:

$10,000

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF DEERPARK
420 ROUTE 209, P.O. BOX A
HUGUENOT, NY 12746
(845) 856-2210

Name of Project Director:

MARK HOUSE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A PHOTO ID SYSTEM, INCLUDING CARD, PRINTER, CAMERA, SOFTWARE AND SUPPLIES.

Funded Amount:

$2,000

Requested By:

GUNTER-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF DEPOSIT
3 ELM STREET
DEPOSIT, NY 13754
(607) 467-3208

Name of Project Director:

STABLEY E. WOODFORD

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$4,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF DEWITT
5400 BUTTERNUT DRIVE
EAST SYRACUSE, NY 13057
(315) 446-9250

Name of Project Director:

MIKE MORACCO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE PEOPLE IN ACTION PROGRAM AT NEW LEARNING CENTER AT SPRINGFIELD GARDENS, OFFERING SPACE FOR EDUCATION AND RECREATION PROGRAMS.

Funded Amount:

$10,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF DOVER
126 EAST DUNCAN HILL ROAD
DOVER PLAINS, NY 12522
(845) 656-4275

Name of Project Director:

JILL WAY

Purpose of Project:

FUNDS WILL BE USED TO BUILD A STATE OF THE ART SKATE PARK AT THOMAS J. BOYCE PARK IN WINGDALE, NY

Funded Amount:

$5,000

Requested By:

MOLINARO

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF ELMA
1600 BOWEN ROAD
ELMA, NY 14059
(716) 652-3260

Name of Project Director:

MIKE NOLAN

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A VETERANS ORGANIZATION’S GUN SAFE AT ELMA TOWN HALL

Funded Amount:

$5,000

Requested By:

COLE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

   TOWN OF ELMA  
   1600 BOWEN ROAD  
   ELMA, NY 14059  
   (716) 652-3260

Name of Project Director:

   MIKE NOLAN

Purpose of Project:

   FUNDS WILL BE USED FOR INTERMUNICIPAL RECREATIONAL SERVICES AND  
   PARK IMPROVEMENTS AT THE CREEK ROAD PARK IN THE TOWN OF ELMA

Funded Amount:

   $12,500

Requested By:

   COLE

Name of Administering State Agency:

   DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF GALLATIN
2242 ROUTE 82
ANCRAM, NY 12502
(518) 398-7519

Name of Project Director:

LINDA SCHREER

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A BACKUP GENERATOR FOR THE TOWN HALL AS AN EMERGENCY SHELTER

Funded Amount:

$4,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF GALWAY
BOX 15
GALWAY, NY 12074
(518) 882-5557

Name of Project Director:

DONNA SOWLE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OPPORTUNITIES FOR ALL YOUTH TO PARTICIPATE IN SAFE, SUPERVISED YOUTH PREVENTION ACTIVITIES AND SUPPORT PROGRAMS IN THE COMMUNITY

Funded Amount:

$7,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF GALWAY
P.O. BOX 219
GALWAY, NY 12074
(518) 882-6070

Name of Project Director:

GEORGE HARGRAVE

Purpose of Project:

FUNDS WILL BE USED FOR AN EMERGENCY STANDBY GENERATOR

Funded Amount:

$40,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF GERMANTOWN
50 PALATINE PARK ROAD
GERMANTOWN, NY 12526
(518) 537-6687

Name of Project Director:

ROY BROWN

Purpose of Project:

FUNDS WILL BE USED FOR EMS SUPPORT

Funded Amount:

$4,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF GLENVILLE
18 GLENRIDGE ROAD
GLENVILLE, NY 12302
(518) 688-1200

Name of Project Director:

MICHAEL RANALLI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A CLOSED CIRCUIT SURVEILLANCE SYSTEM WITH EIGHT SECURITY CAMERAS FOR THE MUNICIPAL BUILDING

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF GOSHEN
41 WEBSTER AVENUE, P.O. BOX 217
GOSHEN, NY 10924
(845) 294-6250

Name of Project Director:

SUPERVISOR BLOOMFIELD

Purpose of Project:

FUNDS WILL BE USED FOR A FUEL DISPENSING SYSTEM

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF GRAND ISLAND
2255 BASELINE ROAD
GRAND ISLAND, NY  14072
(716) 773-9600

Name of Project Director:

PETER McMAHON

Purpose of Project:

FUNDS WILL BE USED FOR THE TOWN’S GOLDEN AGE CENTER AND SECURITY ENHANCEMENTS AT TOWN HALL.

Funded Amount:

$8,000

Requested By:

HOYT

Name of Administering State Agency:

DEPARTMENT OF STATE
SUNDAY FUNDING 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF GREENWOOD
2738 STATE ROUTE 248
GREENWOOD, NY 14839
(607) 225-4235

Name of Project Director:

RONALD HURD, JR

Purpose of Project:

FUNDS WILL BE USED TO REPLACE STOP DOORS, INSTALL NEW CONCRETE FLOOR WITH RADIANT HEAT SYSTEM AND FINISH INSIDE WITH INSULATION AND METAL AT THE HIGHWAY DEPARTMENT BUILDING

Funded Amount:

$50,000

Requested By:

BACALLES

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF HAMBURG
S6100 SOUTH PARK AVENUE
HAMBURG, NY 14075
(716) 649-6111

Name of Project Director:

STEVE WALTERS

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE ESTABLISHMENT OF RAILROAD QUIET ZONES IN THE CLOVERBANK AREA OF THE TOWN OF HAMBURG

Funded Amount:

$25,000

Requested By:

QUINN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

    TOWN OF HAMPTONBURGH
    18 BULL ROAD
    CAMPBELL HALL, NY 10916
    (845) 427-2424

Name of Project Director:

    DIANE FORTUNA

Purpose of Project:

    FUNDS WILL BE USED TO CONSTRUCT OUTDOOR PICNIC AREA AT
    HAMPTONBURGH SENIOR CENTER

Funded Amount:

    $4,524

Requested By:

    RABBITT

Name of Administering State Agency:

    DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

    TOWN OF HANCOCK
    661 WEST MAIN STREET
    HANCOCK, NY 13783
    (607) 637-3651

Name of Project Director:

    SAMUEL N. ROWE, JR.

Purpose of Project:

    FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

    $4,000

Requested By:

    CROUCH

Name of Administering State Agency:

    DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF HEMPSTEAD
1 WASHINGTON STREET
HEMPESTAD, NY 11550
(516) 489-5000

Name of Project Director:

KENDALL LAMPKIN

Purpose of Project:

FUNDS WILL BE USED FOR BEAUTIFICATION

Funded Amount:

$5,000

Requested By:

SALADINO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF HIGHLANDS
BOX 376
FORT MONTGOMERY, NY 10922
(845) 446-0400

Name of Project Director:

STELLA BAILEY

Purpose of Project:

FUNDS WILL BE USED FOR OFFICE EQUIPMENT AND SUPPLIES FOR FT. MONTGOMERY BATTLE SITE

Funded Amount:

$2,500

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
TOWN OF HIGHLANDS AMBULANCE CORPS., INC.  
P.O. BOX 353  
HIGHLAND FALLS, NY 10928  
(845) 446-3010  

WILLIAM STROPEL  

FUNDS WILL BE USED FOR TWO DEFIBRILLATORS, THREE PORTABLES AND THREE PAGERS  

$7,500  

CALHOUN  

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF HOOSICK
P.O. BOX 17, 80 CHURCH STREET
HOOSICK FALLS, NY 12090
(518) 686-4571

Name of Project Director:

MARILYN DOUGLAS

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY CENTER

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF HYDE PARK
4383 ALBANY POST ROAD
HYDE PARK, NY 12538
(845) 229-5111

Name of Project Director:

POMPEY DELAFIELD

Purpose of Project:

FUNDS WILL BE USED FOR THE EXPANSION OF WEBCASTING PROGRAM
PROMOTING OPEN GOVERNMENT

Funded Amount:

$5,000

Requested By:

MILLER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF IRA
P.O. BOX 239
CATO, NY 13033
(315) 626-6905

Name of Project Director:

JAMES KUNKENHEIMER

Purpose of Project:

FUNDS WILL BE USED TO MITIGATE THE DRAINAGE PROBLEMS EXACERBATED BY THE FLOODING OF 2006 IN COMMUNITY RECREATIONAL FIELD THAT IS UTILIZED BY ADULT AND YOUTH TEAMS

Funded Amount:

$12,500

Requested By:

OAKS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF ISLIP FIRE POLICE ASSOCIATION
100 ATLANTIC AVENUE
EAST ISLIP, NY 11730
(631) 277-5783

Name of Project Director:

MICHAEL CHICARELLI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF PROGRAMS THAT THE TOWN OF ISLIP FIRE POLICE ASSOCIATION PROVIDES

Funded Amount:

$1,000

Requested By:

BOYLE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF KINDERHOOK
P.O. BOX P
NIVERVILLE, NY 12130
(518) 784-2527

Name of Project Director:

DOUGLAS MCGIVNEY

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE, EQUIP, AND IMPROVE THE VOLUNTEERS' PARK BUILDINGS (SENIOR CENTER, LITTLE LEAGUE, CYO, SOCCER, AND OTHER PARK USERS OFFICES AND FACILITIES).

Funded Amount:

$10,000

Requested By:

GORDON-T

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF KIRKWOOD
70 CRESCENT DRIVE
KIRKWOOD, NY 13795
(607) 775-1370

Name of Project Director:

GORDON E. KNIFFEN

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$6,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF KNOX
KNOX TOWN HALL
KNOX, NY  12107
(518) 872-1457

Name of Project Director:

MICHAEL HAMMOND

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COST OF REPAIRS AND RENOVATIONS TO THE KNOX TOWN HALL.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF LAGRANGE
120 STRINGHAM ROAD
LAGRANGEVILLE, NY 12540
(845) 452-1830

Name of Project Director:

JON WAGNER

Purpose of Project:

FUNDS WILL BE USED FOR ROAD IMPROVEMENTS INTO PARK

Funded Amount:

$5,000

Requested By:

MILLER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF LIVINGSTON
667 ROUTE 31
HUDSON, NY 12534
(518) 851-9441

Name of Project Director:

PHILIP WILLIAMS

Purpose of Project:

FUNDS WILL BE USED FOR EMS SUPPORT

Funded Amount:

$4,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF MACOMB
6663 STATE HIGHWAY 58
HAMMOND, NY  13646
(315) 578-2212

Name of Project Director:

KEVIN BRESSETT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FACILITY IMPROVEMENTS AT TOWN BARN, AND TO SUPPORT THE SOLID WASTE AND JUNK CAR PICK UP PROGRAM KNOWN AS "CLEAN UP MACOMB".

Funded Amount:

$15,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF MARCELLUS, BALTIMORE WOODS
P.O. BOX 133
MARCELLUS, NY 13108
(315) 673-1350

Name of Project Director:

PATTY WEISSE

Purpose of Project:

FUNDS WILL BE USED FOR PROJECT WATERSHED'S VOLUNTEER MONITORING PROGRAM

Funded Amount:

$7,500

Requested By:

BARCLAY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF MENDON
16 WEST MAIN STREET
HONEOYE FALLS, NY 14472
(585) 624-6068

Name of Project Director:

WILLIAM E. SMITH

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE EMERGENCY FACILITIES OF THE MENDON HIGHWAY DEPARTMENT SPECIFICALLY TO UPGRADE THE STANDBY GENERATOR CURRENTLY IN SERVICE AT THE HIGHWAY DEPARTMENT

Funded Amount:

$12,000

Requested By:

ERRIGO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF MINERVA
P.O. BOX 937
OLMSTEDVILLE, NY 12857
(518) 251-2869

Name of Project Director:

WILLIAM PALMER

Purpose of Project:

FUNDS WILL BE USED TO REPLACE DILAPIDATED BATHROOM FACILITY, INCLUDING HANDICAPPED ACCESSIBILITY

Funded Amount:

$10,000

Requested By:

SAYWARD

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF MONTGOMERY
P.O. BOX 25
WALDEN, NY 12586
(845) 778-5993

Name of Project Director:

DEBORAH PALEN

Purpose of Project:

FUNDS WILL BE USED FOR CAMERA BASED SECURITY SYSTEM WITH MAGNETIC LOCKS FOR VIDEO SURVEILLANCE

Funded Amount:

$7,500

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF MOUNT HOPE
1706 ROUTE 211W
OTISVILLE, NY 10963
(845) 386-2211

Name of Project Director:

SUPERVISOR NOVAK

Purpose of Project:

FUNDS WILL BE USED FOR PARK PLAYGROUND EQUIPMENT

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF NEW HARTFORD
BUTLER MEMORIAL HALL
NEW HARTFORD, NY 13413
(315) 733-7500 2331

Name of Project Director:

EARLE REED

Purpose of Project:

FUNDS WILL BE USED FOR ACQUISITION OF AN APPROXIMATELY 5 ACRE PARCEL PART OF A PLANNED IMPROVEMENT PROGRAM FOR THE HEADWATERS AREA OF MUD CREEK RELATING TO STORMWATER MANAGEMENT, WETLANDS ENHANCEMENT AND ENVIRONMENTAL EDUCATION

Funded Amount:

$3,000

Requested By:

TOWNSEND

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF NEW WINDSOR
555 UNION AVENUE
NEW WINDSOR, NY 12553
(845) 563-4610

Name of Project Director:

GEORGE GREEN

Purpose of Project:

FUNDS WILL BE USED FOR A GENERATOR FOR BACKUP POWER FOR THE RADIO SYSTEMS

Funded Amount:

$8,500

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF NEWBURGH
1496 ROUTE 300
NEWBURGH, NY 12550
(845) 564-4552

Name of Project Director:

WAYNE BOOTH

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PURCHASE OF A 4 WHEEL PICKUP
FOR THE PARKS & RECREATION DEPARTMENT

Funded Amount:

$20,000

Requested By:

KIRWAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF OGDEN
269 OGDEN CENTER ROAD
SPENCERPORT, NY 14559
(585) 352-2128

Name of Project Director:

GAY LENHARD

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF BENCHES AND PICNIC TABLES INCLUDING HANDICAPPED ONES

Funded Amount:

$9,079

Requested By:

REILICH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF OTISCO
1924 BARKER STREET
TULLY, NY 13159
(315) 696-8651

Name of Project Director:

WAYNE AMATO

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF EQUIPMENT FOR SERVICES FOR THE RESIDENTS OF THE TOWN OF OTISCO

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF OXFORD
P.O. BOX 271
OXFORD, NY 13830
(607) 843-9714

Name of Project Director:

LAWRENCE WILCOX

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$5,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF OYSTER BAY
54 AUDREY AVENUE
OYSTER BAY, NY 11771
(516) 624-6180

Name of Project Director:

JON KLEIN

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL TOWN-WIDE PROGRAMS

Funded Amount:

$15,000

Requested By:

WALKER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF OYSTER BAY
54 AUDREY AVENUE
OYSTER BAY, NY 11771
(516) 624-6180

Name of Project Director:

JOHN KLEIN

Purpose of Project:

FUNDS WILL BE USED FOR MUSIC UNDER THE STARS

Funded Amount:

$15,000

Requested By:

SALADINO

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF PAWLING
160 CHARLES COLEMAN BOULEVARD
PAWLING, NY 12564
(845) 855-4464

Name of Project Director:

BETH COURSEN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF BULLET PROOF VESTS

Funded Amount:

$4,500

Requested By:

BALL

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF PLEASANT VALLEY
1554 MAIN STREET
PLEASANT VALLEY, NY 12569
(845) 635-3598

Name of Project Director:

JEFFREY BATTISTONI

Purpose of Project:

FUNDS WILL BE USED TO INSTALL NEW BLEACHERS AT THE TOWN PARK

Funded Amount:

$2,275

Requested By:

MOLINARO

Name of Administering State Agency:

DEPARTMENT OF STATE
TOWN OF POUGHKEEPSIE
ONE OVEROCKER ROAD
POUGHKEEPSIE, NY 12601
(845) 485-3603

PATRICIA MYERS

FUNDS WILL BE USED FOR AN ATV FOR HAMBURG FIRE DEPARTMENT

$6,000

MILLER

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF READING
P.O. BOX 5
READING CENTER, NY 14876
(607) 535-7459

Name of Project Director:

MARVIN SWITZER

Purpose of Project:

FUNDS WILL BE USED FOR WATER DISTRICT EXPANSION ENGINEERING STUDY

Funded Amount:

$10,000

Requested By:

O'MARA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF ROTTERDAM
JOHN F. KIRVIN GOVERNMENT CENTER, 1100 SUNRISE BOULEVARD
ROTTERDAM, NY 12306
(518) 355-7575

Name of Project Director:

STEVEN TOMMASONE

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF AN ENGINEERING AND FEASIBILITY STUDY FOR THE CONSTRUCTION OF A NEW POLICE STATION IN ROTTERDAM.

Funded Amount:

$10,000

Requested By:

TONKO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF ROYALTON
5316 ROYALTON CENTER ROAD
MIDDLEPORT, NY 14105
(716) 772-2431

Name of Project Director:

CAL RHONEY

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A POWER GENERATOR FOR TOWN HALL AND OTHER DISASTER PREPAREDNESS MATERIALS AND/OR PROGRAMS

Funded Amount:

$10,000

Requested By:

COLE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF RYE
10 PEARL STREET
PORT CHESTER, NY 10573
(914) 939-3075

Name of Project Director:

RAYMOND L. SCULKY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RYE TOWN COURT AND CRAWFORD PARK WITH DEFIBRILLATORS FOR EMERGENCY SITUATIONS.

Funded Amount:

$4,500

Requested By:

LATIMER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF SANDY CREEK
P.O. BOX 52
SANDY CREEK, NY 13145
(315) 387-5456

Name of Project Director:

MARGARET KASTLER

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PURCHASE OF A GENERATOR FOR THE TOWN HALL

Funded Amount:

$7,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF SANFORD
91 SECOND STREET
DEPOSIT, NY 13754
(607) 467-2935

Name of Project Director:

DEWEY A. DECKER

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$4,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF SARATOGA
1104 ROUTE 29
SCHUYLERVILLE, NY 12871
(518) 695-3644

Name of Project Director:

THOMAS WOOD, III

Purpose of Project:

FUNDS WILL BE USED FOR THE OLD SARATOGA ATHLETIC ASSOCIATION

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF SAUGERTIES
4 HIGH STREET
SAUGERTIES, NY 12477
(845) 246-2800

Name of Project Director:

GREG HELMSMOORTEL

Purpose of Project:

FUNDS WILL BE USED FOR COMPLETION OF A VETERANS MEMORIAL

Funded Amount:

$1,800

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF SCHODACK
265 SCHUURMAN ROAD
CASTLETON-ON-HUDSON, NY 12033
(518) 477-7918

Name of Project Director:

BETH KNAUF SECOR

Purpose of Project:

FUNDS WILL BE USED FOR EMERGENCY ACCESS SYSTEMS (LOCK BOXES) TO ENABLE EMERGENCY SERVICES PROVIDERS TO ENTER PROPERTIES RAPIDLY FOR EMERGENCY MEDICAL SERVICES AND/OR FIRE SUPPRESSION. THIS PROJECT WOULD ALLOW THE TOWN TO RETROFIT TWO PIECES OF APPARATUS FROM EACH OF ITS FIRE/AMBULANCE COMPANIES WITH LOCK BOXES AND KEYS. COMMERCIAL PROPERTY OWNERS WOULD BE RESPONSIBLE FOR THE BOX ON THEIR PREMISES.

Funded Amount:

$12,500

Requested By:

GORDON-T

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF SHAWANGUNK
P.O. BOX 247
WALLKILL, NY 12589
(845) 895-2900

Name of Project Director:

JOHN VALK

Purpose of Project:

FUNDS WILL BE USED FOR PUBLIC ADDRESS SYSTEM, FURNITURE AND TV AT TOWN SENIOR CENTER

Funded Amount:

$5,000

Requested By:

KIRWAN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF STERLING
1290 STATE ROUTE 104A
STERLING, NY 13156
(315) 947-6104

Name of Project Director:

JOAN KELLEY

Purpose of Project:

FUNDS WILL BE USED FOR PURCHASE AND INSTALLATION OF A GENERATOR THAT WOULD PROVIDE AN ADEQUATE HEATED SHELTER FOR RESIDENTS DURING EMERGENCY SITUATIONS

Funded Amount:

$4,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF STONY POINT
6 LEE AVENUE
STONY POINT, NY 10980
(845) 786-5990

Name of Project Director:

ALAN HOROWITZ

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE TOWN OF STONY POINT PROVIDES

Funded Amount:

$10,000

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF STONY POINT
79 ROUTE 210
STONY POINT, NY 10980
(845) 786-2422

Name of Project Director:

PATRICK BROPHY

Purpose of Project:

FUNDS WILL BE USED FOR A SOIKKIA TOTAL STATION FOR USE AT AUTO ACCIDENTS AND CRIME SCENES

Funded Amount:

$4,500

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF STUYVESANT
P.O. BOX 250
STUYVESANT, NY 12173
(518) 758-6248

Name of Project Director:

VALERIE BERTRAM

Purpose of Project:

FUNDS WILL BE USED FOR THE DEVELOPMENT OF A NEW PARK AND CONSERVATION AREA. THE CONSERVATION AREA WILL HAVE TRAILS AND BIRD WATCHING SIGNAGE. THE 18 ACRES OF PARKLAND WILL HAVE SOCCER AND BASEBALL FIELDS, BATHROOM FACILITIES, AND A PARKING AREA. FUNDS WILL ALSO BE USED TO CONSTRUCT AN ACCESS ROAD TO THE SITE.

Funded Amount:

$5,000

Requested By:

GORDON-T

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF TAGHKANIC
977 LIVINGSTON ROAD
ELIZAVILLE, NY 12523
(518) 851-9683

Name of Project Director:

BETTY YOUNG

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A SALT SHED

Funded Amount:

$4,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

DEPARTMENT OF STATE
TOWN OF TONAWANDA
2919 DELAWARE AVENUE, #11
KENMORE, NY 14217
(716) 877-8804

DANIEL J. WITES

FUNDS WILL BE USED TO REPLACE THE LINER AT THE LINCOLN PARK
WADING POOL.

$25,000

SCHIMMINGER

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF ULYSSES
10 ELM STREET
TRUMANSBURG, NY 14886
(607) 387-5767

Name of Project Director:

JACK FULTON

Purpose of Project:

FUNDS WILL BE USED TO ALLOW THE TOWN OF ULYSSES TO COMPLY WITH NYS PROPERTY MAINTENANCE CODE SECTION 303.3 BY PURCHASING IDENTIFICATION SIGNS.

Funded Amount:

$20,000

Requested By:

LIFTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF WALTON
129 NORTH STREET
WALTON, NY 13856
(607) 865-4052

Name of Project Director:

JOHN W. MEREDITH

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$4,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF WAPPINGERS
20 MIDDLEBUSH ROAD
WAPPINGERS FALLS, NY 12590
(845) 297-2744

Name of Project Director:

JOSEPH RUGGEIRO

Purpose of Project:

FUNDS WILL BE USED FOR SECURITY CAMERAS FOR CARNWATH FARMS

Funded Amount:

$5,000

Requested By:

MILLER

Name of Administering State Agency:

DEPARTMENT OF STATE
TOWN OF WARWICK
132 KINGS HIGHWAY
WARWICK, NY 10990
(845) 986-1120

SUPERVISOR SWEETON

FUNDS WILL BE USED FOR PAVING AROUND TOWN OWNED ANIMAL SHELTER

$4,524

RABBITT

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF WEBB
P.O. BOX 157
OLD FORGE, NY 13420
(315) 369-3121

Name of Project Director:

ROBERT MOORE

Purpose of Project:

FUNDS WILL BE USED TOWARD DESIGN AND CONSTRUCTION OF A "HAMLET CENTER" PARK IN OLD FORGE

Funded Amount:

$5,000

Requested By:

BUTLER-M

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF WEBB INFORMATION CENTER
P.O. BOX 68
OLD FORGE, NY 13420
(315) 369-6983

Name of Project Director:

BRUCE CONDIE

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PURCHASE AND UPGRADE OF
COMPUTER HARDWARE/SOFTWARE FOR THE TOWN OF WEBB PUBLICITY
DEPARTMENT

Funded Amount:

$3,600

Requested By:

BUTLER-M

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF WEBSTER  
1000 RIDGE ROAD  
WEBSTER, NY 14580-2917  
(585) 872-1000

Name of Project Director:

RONALD NESBITT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE APPROXIMATELY SIX PICNIC TABLES AND THREE BARBEQUE GRILLS.

Funded Amount:

$3,000

Requested By:

KOON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

    TOWN OF WEBSTER
    1000 RIDGE ROAD
    WEBSTER, NY  14580-2917
    (585) 872-1000

Name of Project Director:

    RONALD NESBITT

Purpose of Project:

    FUNDS WILL BE USED TO RENOVATE THE TOWN HIGHWAY DEPARTMENT'S
    FACILITIES.  THIS AREA IS USED FOR STAFF MEETINGS AND TRAINING.

Funded Amount:

    $13,000

Requested By:

    KOON

Name of Administering State Agency:

    DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF WEBSTER
1000 RIDGE ROAD
WEBSTER, NY  14580-2917
(585) 872-1000

Name of Project Director:

RON NESBITT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TWO NEW AED UNITS FOR THE SENIOR CENTER.

Funded Amount:

$3,000

Requested By:

KOON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF WEST ALMOND
2769 COUNTY ROUTE 2
WEST ALMOND, NY 14804
(607) 276-6680

Name of Project Director:

GIRARD KELLY

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING RENOVATIONS

Funded Amount:

$6,000

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF WHEATFIELD  
2800 CHURCH ROAD  
NORTH TONAWANDA, NY 14120  
(716) 694-6440

Name of Project Director:

BERNIE ROTELLA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A USED 2001 FORD CROWN VICTORIA POLICE INTERCEPTOR.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TOWN OF WHITE CREEK  
28 MOUNTAIN VIEW DRIVE  
CAMBRIDGE, NY 12816  
(518) 677-8545

Name of Project Director:

ROBERT SHAY

Purpose of Project:

FUNDS WILL BE USED FOR SALT BARN CONSTRUCTION

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TOWN OF WOODBURY
P.O. BOX 1004, 511 ROUTE 32
HIGHLAND FALLS, NY 10928
(845) 563-4610

Name of Project Director:

JOHN BURKE

Purpose of Project:

FUNDS WILL BE USED FOR SENIOR CENTER UPGRADES AND/OR OPERATION

Funded Amount:

$10,000

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TRIANGLE FIRE COMPANY
3621 NY ROUTE 206
WHITNEY POINT, NY 13862
(607) 692-4029

Name of Project Director:

GLEN PAHLMANN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TRUXTON FIRE DEPARTMENT
3741 ROUTE 13, P.O. BOX 118
TRUXTON, NY 13158
(607) 842-6291

Name of Project Director:

JOHN PERRY

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

TWIN DISTRICT VOLUNTEER FIRE COMPANY, INC.
4999 WILLIAMS STREET
LANCASTER, NY 14086
(716) 685-3118

Name of Project Director:

RON ROZLER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A THERMAL IMAGING CAMERA.

Funded Amount:

$12,500

Requested By:

GABRYSZAK

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNIFORMED FIRE FIGHTERS' ASSOCIATION OF THE CITY OF MOUNT VERNON
P.O. BOX 2085
MT. VERNON, NY 10551-2085
(914) 664-4401

Name of Project Director:

THEODORE W. BEALE SR.

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FIREFIGHTERS WITH A USEABLE SYSTEM TO ENABLE THEM TO SAFELY AND QUICKLY "BAIL OUT" IN A LIFE AND DEATH SITUATION.

Funded Amount:

$10,000

Requested By:

PRETLOW

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

UNION SPRINGS FIRE DEPARTMENT
127 CAYUGA STREET
UNION SPRINGS, NY 13160
(315) 889-7614

Name of Project Director:

GARRET WALDRON

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

UNITED JEWISH COUNCIL OF THE EAST SIDE, INC.
500-A GRAND STREET
NEW YORK, NY 10002
(212) 460-5730

Name of Project Director:

JOEL KAPLAN

Purpose of Project:

FUNDS WILL BE USED FOR IN-STATE TRIPS, RECREATION AND EDUCATIONAL PROGRAMS TARGETING DISADVANTAGED SENIORS, ADOLESCENTS AND FAMILIES, AS WELL AS TO SUPPORT A PROGRAM THAT INFORMS SENIORS ABOUT LOWER EASTSIDE MERCHANTS. FUNDS ARE ALSO USED FOR A TELEPHONE REASSURANCE PROGRAM DURING EVENING HOURS TARGETING HOMEBOUND SENIORS AND FOR PROGRAM OUTREACH.

Funded Amount:

$307,000

Requested By:

SILVER

Name of Administering State Agency:

DEPARTMENT OF STATE
LEGAL NAME, ADDRESS, AND TELEPHONE NUMBER:

UNITED JEWISH COUNCIL OF THE EAST SIDE, INC.
500-A GRAND ST.
NEW YORK, NY  10002
(212) 460-5730

NAME OF PROJECT DIRECTOR:

JOEL KAPLAN

PURPOSE OF PROJECT:

FUNDS WILL BE USED FOR EXPENSES RELATED TO THE IMPLEMENTATION OF AN ADVERTISING AND PUBLIC RELATIONS CAMPAIGN TO EXTOLL THE BENEFITS OF THE LOWER EAST SIDE. IN ADDITION, A LISTING SERVICE WILL BE CREATED TO MATCH INTERESTED BUYERS WITH THOSE PARTIES INTERESTED IN SELLING THEIR PROPERTY WITHIN THE LOWER EAST SIDE.

FUNDED AMOUNT:

$156,000

REQUESTED BY:

SILVER

NAME OF ADMINISTERING STATE AGENCY:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

UNITED STATES NAVAL SEA CADET AMSTERDAM DIVISION
143-145 EAST MAIN STREET
AMSTERDAM, NY 12010
(518) 843-6251

Name of Project Director:

MICAH SCHROM

Purpose of Project:

FUNDS WILL BE USED TO EXPAND YOUTH PROGRAMS INTO ST. JOHNSVILLE, AND PROVIDE CADET UNIFORMS, NEWSLETTER AND MAILING COSTS.

Funded Amount:

$4,000

Requested By:

TONKO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

UNITY HOUSE OF TROY, INC.
33 SECOND STREET
TROY, NY 12180
(518) 274-2607

Name of Project Director:

CHRISTOPHER BURKE

Purpose of Project:

FUNDS WILL BE USED TO HELP VICTIMS OF DOMESTIC VIOLENCE AND THEIR FAMILIES DEAL WITH A HOST OF LEGAL ISSUES AS THEY STRIVE TO REBUILD SAFE, SECURE LIVES FOR THEMSELVES AND THEIR CHILDREN. THE LAW PROJECT WILL PROVIDE LEGAL COUNSELING AND REPRESENTATION.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UPPER DELAWARE COUNCIL, INC.
P.O. BOX 192, 211 BRIDGE STREET
NARROWSBURG, NY 12764
(845) 252-3002

Name of Project Director:

WILLIAM DOUGLASS

Purpose of Project:

FUNDS WILL BE USED TO CREATE A WEBSITE; FOR COMMUNITY TRAINING ON LAND USE; AND FOR OFFICE MAINTENANCE.

Funded Amount:

$10,000

Requested By:

GUNTER-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VALATIE FIRE DEPARTMENT
P. O. BOX 473
VALATIE, NY 12184
(518) 758-7659

Name of Project Director:

FRANK BEVENS

Purpose of Project:

FUNDS WILL BE USED TO CLEAN AND DRY THE DEPARTMENT’S TURNOUT GEAR TO REMOVE THE HAZARDS FROM FIREFIGHTING AND MEET NFPA STANDARDS.

Funded Amount:

$5,000

Requested By:

GORDON-T

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VALE CEMETERY ASSOCIATION
907 STATE STREET
SCHENECTADY, NY 12307
(518) 421-0079

Name of Project Director:

DR. BERNARD MCEVOY

Purpose of Project:

FUNDS WILL BE USED FOR RESTORATION AND IMPROVEMENTS TO VALE CEMETERY TO KEEP IT SAFE AND CRIME FREE

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VICTORY FIRE DEPARTMENT, INC.
12009 ROUTE 38
CATO, NY 13033
(315) 626-6866

Name of Project Director:

JAMES NODINE

Purpose of Project:

Funds will be used for upgrading equipment by purchasing new 60 minute SCBA's that will better protect volunteers

Funded Amount:

$12,500

Requested By:

OAKS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE ALLIANCE DISTRICT MANAGEMENT ASSOCIATION, INC.
8 EAST 8TH STREET
NEW YORK, NY 10003
(212) 777-2173

Name of Project Director:

HONI KLEIN

Purpose of Project:

FUNDS WILL BE USED FOR THE DESIGN AND PRODUCTION OF 35,000 FULL COLOR AND BLACK AND WHITE COUPON BOOKS WHICH ENCOURAGE PATRONAGE OF LOCAL BUSINESSES. THE DISCOUNT BOOK IS PRIMARILY DESIGNED FOR STUDENTS, COLLEGE PERSONNEL AND AREA RESIDENTS LIVING, WORKING, VISITING, OR STUDYING IN GREENWICH VILLAGE.

Funded Amount:

$2,000

Requested By:

GLICK

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF ANGOLA
41 COMMERCIAL STREET
ANGOLA, NY 14006
(716) 549-1126

Name of Project Director:

HOWARD FRAWLEY

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PURCHASE OF TWO OIL/WATER SEPARATORS THAT WILL BE INSTALLED AT THE VILLAGE OF ANGOLA FIRE DEPARTMENT AND THE DEPARTMENT OF PUBLIC WORKS

Funded Amount:

$5,000

Requested By:

QUINN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF ATTICA
9 WATER STREET
ATTICA, NY 14011
(585) 591-0898

Name of Project Director:

DOUGLAS A. POST

Purpose of Project:

FUNDS WILL BE USED FOR EMERGENCY EQUIPMENT

Funded Amount:

$5,000

Requested By:

BURLING

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF BERGEN
11 BUFFALO STREET
BERGEN, NY 14416
(585) 494-1513

Name of Project Director:

STACEY BROWN

Purpose of Project:

FUNDS WILL BE USED FOR A SCHEMATIC DESIGN FOR RENOVATED HISTORIC BUILDING

Funded Amount:

$3,400

Requested By:

HAWLEY

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF BREWSTER
208 MAIN STREET
BREWSTER, NY 10509
(845) 279-2493

Name of Project Director:

JOHN DEGNAN

Purpose of Project:

FUNDS WILL BE USED FOR TROUT HATCHERY DESIGN AND ENGINEERING FEES

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF BROCKPORT
49 STATE STREET
BROCKPORT, NY 14420
(585) 637-5300

Name of Project Director:
IAN M. COYLE

Purpose of Project:
FUNDS WILL BE USED FOR MAIN STREET BUSINESS DISTRICT ENHANCEMENT

Funded Amount:
$5,000

Requested By:
REILICH

Name of Administering State Agency:
DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF BURDETT VOLUNTEER FIRE DEPARTMENT
3830 MAIN STREET
BURDETT, NY 14818
(607) 546-2266

Name of Project Director:

JASON KELLY

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN CONSTRUCTION OF NEW FIRE HALL

Funded Amount:

$20,000

Requested By:

O’MARA

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF CHAUMONT
P.O. BOX 297
CHAUMONT, NY  13622
(315) 649-2900

Name of Project Director:

PAULA RADLEY

Purpose of Project:

FUNDS WILL BE USED TO REPLACE LEAKING HYDRANTS IN THE VILLAGE OF CHAUMONT.

Funded Amount:

$10,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF CHITTENANGO
222 GENESEE STREET
CHITTENANGO, NY  13037
(315) 687-3936

Name of Project Director:

MAYOR ROBERT A. FREUNSCHT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL EIGHT STORAGE DISPLAY UNITS TO EXHIBIT OZ/BAUM ARTIFACTS.

Funded Amount:

$10,000

Requested By:

MAGEE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF CORNWALL-ON-HUDSON
195 HUDSON STREET
CORNWALL-ON-HUDSON, NY 12520
(845) 534-5344

Name of Project Director:

JAN WHITMAN

Purpose of Project:

FUNDS WILL BE USED FOR A COMMERCIAL FREEZER DOOR

Funded Amount:

$5,000

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF CUBA
17 EAST MAIN STREET
CUBA, NY 14727
(585) 968-1560

Name of Project Director:

JAMES WETHERBY

Purpose of Project:

FUNDS WILL BE USED FOR INFLOW AND INFILTRATION REMEDIATION ENGINEERING REPORT

Funded Amount:

$6,750

Requested By:

GIGLIO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF DEPOSIT
146 FRONT STREET
DEPOSIT, NY 13754
(607) 467-2492

Name of Project Director:

CHERYL R. DECKER

Purpose of Project:

FUNDS WILL BE USED FOR AUTOMATED EXTERNAL DEFIBRILLATOR FOR POLICE VEHICLES (3)

Funded Amount:

$5,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF EAST ROCHESTER
120 WEST COMMERCIAL STREET
EAST ROCHESTER, NY  14445
(585) 586-3553

Name of Project Director:

TONY ARGENTO

Purpose of Project:

FUNDS WILL BE USED TOWARD DECORATIVE STREET SIGN REPLACEMENT PROGRAM.

Funded Amount:

$20,000

Requested By:

KOON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF FAYETTEVILLE
425 EAST GENESEE STREET
FAYETTEVILLE, NY  13066
(315) 637-9864  103

Name of Project Director:

MAYOR MARK OLSON

Purpose of Project:

FUNDS WILL BE USED TO REPLACE ORIGINAL 50 YEAR OLD WINDOWS.

Funded Amount:

$14,000

Requested By:

STIRPE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF GOSHEN
276 MAIN STREET
GOSHEN, NY 10924
(845) 294-6750

Name of Project Director:

MAYOR WOHL

Purpose of Project:

FUNDS WILL BE USED FOR NEW CARPET AND CHAIRS FOR VILLAGE HALL

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF HANNIBAL
824 COUNTY ROUTE 34
HANNIBAL, NY 13074
(315) 564-6037

Name of Project Director:

LOWELL NEWVINE

Purpose of Project:

FUNDS WILL BE USED TO MITIGATE THE PERSISTENT DRAINAGE PROBLEMS IN COMMUNITY RECREATIONAL FIELD

Funded Amount:

$12,500

Requested By:

OAKS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF HARRIMAN
1 CHURCH STREET
HARRIMAN, NY 10926
(845) 783-4421

Name of Project Director:

STEPHEN WELLE

Purpose of Project:

FUNDS WILL BE USED FOR PAINTING AND REPLACE ENTRANCE CARPETS AND WINDOW TREATMENTS THROUGHOUT VILLAGE HALL

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF HAVERSTRAW
40 NEW MAIN STREET
HAVERSTRAW, NY 10927
(845) 429-0300

Name of Project Director:

HONORABLE FRANCIS J. WASSMER

Purpose of Project:

FUNDS WILL BE USED TO SPONSOR A ROOM AT THE NEW HAVERSTRAW CENTER.

Funded Amount:

$30,000

Requested By:

ZEBROWSKI

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF HILLBURN
31 MOUNTAIN AVENUE
HILLBURN, NY 10931
(845) 357-2036

Name of Project Director:

MAYOR MIELE

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT FOR DPW

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF IRVINGTON
85 MAIN STREET
IRVINGTON, NY 10533
(914) 591-4358

Name of Project Director:

DONALD MARRA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A BOAT LIFT FOR THE FIRE DEPARTMENT.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF JEFFERSONVILLE
P.O. BOX 555
JEFFERSONVILLE, NY  12748
(845) 482-4275

Name of Project Director:

EDWARD J. JUSTUS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A FLOOD WARNING SYSTEM.

Funded Amount:

$10,000

Requested By:

GUNThER-A

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF JOHNSON CITY
243 MAIN STREET
JOHNSON CITY, NY   13790
(607) 798-7861

Name of Project Director:

ROBERT BENNETT

Purpose of Project:

FUNDS WILL BE USED TO INSTALL LIGHTED GAZEBO WITH SEATING, PURCHASE NEW PARK BENCHES AND REPLACE AN EXISTING DETERIORATED FENCE WITH NEW FENCING.

Funded Amount:

$8,000

Requested By:

LUPARDO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF JORDAN
P.O. BOX 561
JORDAN, NY 13080
(315) 689-7350

Name of Project Director:

RICHARD PLATTEN

Purpose of Project:

FUNDS WILL BE USED FOR PHASE 1 OF THE SPRAY PARK AT THE VETERAN’S MEMORIAL POOL

Funded Amount:

$10,000

Requested By:

BARCLAY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF KIRYAS JOEL
P.O. BOX 566
MONROE, NY 10949
(845) 783-8300

Name of Project Director:

MOSES WITRIOL

Purpose of Project:

FUNDS WILL BE USED FOR A RADIO REPEATER

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF LANCASTER
MUNICIPAL BUILDING, 5423 BROADWAY
LANCASTER, NY 14086
(716) 684-4891

Name of Project Director:

MAYOR WILLIAM CANSDALE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE HOLIDAY DECORATIONS FOR THE VILLAGE OF LANCASTER.

Funded Amount:

$2,500

Requested By:

GABRYSZAK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF MONROE
7 STAGE ROAD
MONROE, NY 10950
(845) 783-0762

Name of Project Director:

JOHN KARL

Purpose of Project:

FUNDS WILL BE USED FOR PLANTING CHERRY TREES IN CRANE PARK

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF MONTEBELLO
1 MONTEBELLO ROAD
MONTEBELLO, NY 10901
(845) 368-2211

Name of Project Director:

MAYOR ELLSWORTH

Purpose of Project:

FUNDS WILL BE USED FOR SOLAR ELECTRIC PANELS FOR VILLAGE HALL AND 20TH ANNIVERSARY HISTORY BOOKLET TO SEND TO RESIDENTS

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF MONTOUR FALLS
311 SOUTH GENESEE STREET
MONTOUR FALLS, NY 14865
(607) 535-4790

Name of Project Director:

DONNA KELLEY

Purpose of Project:

FUNDS WILL BE USED FOR PARK IMPROVEMENTS/BEAUTIFICATION TO MONTOUR FALLS PARK

Funded Amount:

$20,000

Requested By:

O'MARA

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF NELLISTON
P.O. BOX 305
NELLISTON, NY 13410
(518) 993-2861

Name of Project Director:

DONALD YERDON, MAYOR

Purpose of Project:

FUNDS WILL BE USED TO HELP REPLACE THE ROOF ON THE HISTORIC NELLISTON SCHOOL.

Funded Amount:

$10,000

Requested By:

TONKO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF OCEAN BEACH
P.O. BOX 457
OCEAN BEACH, NY 11770
(631) 583-5940

Name of Project Director:

MAYOR JOE LOEFFLER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOFTWARE, INSTALLATION AND TRAINING FOR IN HOUSE COMPUTER NETWORK FOR ALL VILLAGE DEPARTMENTS.

Funded Amount:

$6,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF ONEIDA CASTLE
P.O. BOX 275
ONEIDA CASTLE, NY 13421
(315) 363-1689

Name of Project Director:

MAYOR JOHN DESCHAMPS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE INSTALLATION OF SIDEWALKS AND LIGHTING FOR THE VILLAGE OF ONEIDA CASTLE’S PARK.

Funded Amount:

$15,000

Requested By:

MAGEE

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF ORISKANY FALLS
185 NORTH MAIN STREET
ORISKANY FALLS, NY  13425
(315) 821-7275

Name of Project Director:

AMBER BELL

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A 120X100 PARKING LOT AND 20X30 DRIVEWAY- GRADE LAND, HAUL STONE TO AREA AND LEVEL. FUNDS WILL ALSO BE USED TO INSTALL PARKING LOT LIGHTS AND FENCING.

Funded Amount:

$10,000

Requested By:

MAGEE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF OTISVILLE
66 HIGHLAND AVENUE
OTISVILLE, NY 10963
(845) 386-5172

Name of Project Director:

MAYOR MAURIZZO

Purpose of Project:

FUNDS WILL BE USED FOR UPGRADES TO MUNICIPAL PARKING LOT, NEW CURBS AND TREES

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
VILLAGE OF OWEGO
178 MAIN STREET
OWEGO, NY 13827
(607) 687-1710

JOHN M. LOFTUS

FUNDS WILL BE USED FOR ERIE STREET BEAUTIFICATION PROJECT

$7,000

TEDISCO

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF OXFORD
P.O. BOX 866
OXFORD, NY 13830
(607) 843-9414

Name of Project Director:

TERRY M. STARK

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$3,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF PALMYRA
144 EAST MAIN STREET
PALMYRA, NY 14522
(315) 597-4849

Name of Project Director:

VICKY DALY

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION OF A SIDEWALK ON STAFFORD STREET IN THE VICINITY OF THE PALMYRA COMMUNITY CENTER

Funded Amount:

$15,000

Requested By:

OAKS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF PATCHOGUE
14 BAKER STREET
PATCHOGUE, NY  11772
(631) 475-4300

Name of Project Director:

STEVE GILL

Purpose of Project:

FUNDS WILL BE USED FOR RESTORATION OF A CEMETERY.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF PAWLING
9 MEMORIAL AVENUE
PAWLING, NY 12564
(845) 855-1122

Name of Project Director:

ROBERT LIFFLAND

Purpose of Project:

FUNDS WILL BE USED FOR RELOCATION COSTS ASSOCIATED WITH THE VETERANS MONUMENT AND THE VILLAGE GREEN AND WILL INCORPORATE IMPROVEMENTS INTO THE PLAN

Funded Amount:

$2,500

Requested By:

BALL

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF PELHAM
195 SPARKS AVENUE
PELHAM, NY  10803
(914) 738-2015

Name of Project Director:

RICH SLINGERLAND

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE POLICE HEADQUARTERS WITH SECURITY CAMERAS, DIGITAL CAMERAS FOR PATROL AND DETECTIVE UNIT INVESTIGATIONS, AND FIRE DEPARTMENT PERSONAL ESCAPE HARNESSSES.

Funded Amount:

$10,000

Requested By:

PAULIN

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF PELHAM MANOR
4 PENFIELD PLACE
PELHAM MANOR, NY 10803
(914) 738-8820

Name of Project Director:

JOSEPH RUGGIERO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A HEAT SENSING THERMAL IMAGING CAMERA FOR THE VILLAGE OF PELHAM MANOR FIRE DEPARTMENT.

Funded Amount:

$10,000

Requested By:

PAULIN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF POMONA
100 LADENTOWN ROAD
POMONA, NY 10970
(845) 354-0545

Name of Project Director:

HONORABLE HERB MARSHAL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AN EMERGENCY GENERATOR FOR THE CENTER AND COMMUNICATION EQUIPMENT.

Funded Amount:

$8,500

Requested By:

ZEBROWSKI

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF PORT CHESTER
10 PEARL STREET
PORT CHESTER, NY 10573
(914) 939-5205

Name of Project Director:

CHIEF CHARLES NIELSEN

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE FIRE DEPARTMENT'S COMMUNICATION SYSTEM BY PURCHASING NEW RADIOS.

Funded Amount:

$8,500

Requested By:

LATIMER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF PORT CHESTER
10 PEARL STREET
PORT CHESTER, NY  10573
(914) 939-2200

Name of Project Director:

KEITH RANG

Purpose of Project:

FUNDS WILL BE USED TO FURTHER UPGRADE AND ARCHIVE ESSENTIAL RECORDS.

Funded Amount:

$2,400

Requested By:

LATIMER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF PROSPECT
P.O. BOX 159
PROSPECT, NY 13435
(315) 896-9875

Name of Project Director:

MADELINE SCHNELL

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE MUNICIPAL ANNEX WITH NEW ROOF

Funded Amount:

$10,000

Requested By:

TOWNSEND

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF RED HOOK
7467 SOUTH BROADWAY
RED HOOK, NY 12571
(845) 758-1081

Name of Project Director:

CINDI COLE

Purpose of Project:

FUNDS WILL BE USED FOR MAINTENANCE, UPKEEP AND OUTDOOR CONCERTS HELD AT ABRAHAMS PARK

Funded Amount:

$1,457

Requested By:

MOLINARO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF RYE BROOK  
938 KING STREET  
RYE BROOK, NY  10573  
(914) 939-1121  102

Name of Project Director:

FRED SEIFERT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE HARDWARE AND SOFTWARE SERVICES TO PROVIDE STREAMING VIDEO FROM THE VILLAGE OF RYE BROOK'S WEBSITE TO THE RESIDENTS OF RYE BROOK.

Funded Amount:

$8,000

Requested By:

LATIMER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF SCOTIA
4 NORTH TEN BROECK STREET
SCOTIA, NY 12302
(518) 374-3848

Name of Project Director:

JOHN C. PYTLOVANY

Purpose of Project:

FUNDS WILL BE USED TO SUPPLY POLICE DEPARTMENT WITH TASERS

Funded Amount:

$6,500

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF SCOTIA
148 MOHAWK AVENUE
SCOTIA, NY 12302
(518) 381-6114

Name of Project Director:

RICHARD KASKO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE THERMAL IMAGING CAMERAS FOR INTERIOR SEARCH AND RESCUE OF FIRE VICTIMS

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF SENECA FALLS
60 STATE STREET
SENECA FALLS, NY 13148
(315) 568-8107

Name of Project Director:

DIANA SMITH

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING PRESERVATION EFFORTS FOR THE RESIDENTS OF SENECA FALLS

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF SLOAN
425 REMAIN STREET
SLOAN, NY  14212
(716) 897-1560

Name of Project Director:

LEONARD SZYMANSKI

Purpose of Project:

FUNDS WILL BE USED FOR RODENT CONTROL IN SLOAN.

Funded Amount:

$2,500

Requested By:

GABRYSZAK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF SLOATSBURG
96 ORANGE TURNPIKE
SLOATSBURG, NY 10979
(845) 753-2727

Name of Project Director:

CARL WRIGHT

Purpose of Project:

FUNDS WILL BE USED FOR INSTALLING NEW SOFTWARE PACKAGE IN BUILDING DEPARTMENT COMPUTERS

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF SOUTH BLOOMING GROVE
P.O. BOX 295
SOUTH BLOOMING GROVE, NY 10914
(845) 774-1441

Name of Project Director:

BARBARA VOTJA

Purpose of Project:

FUNDS WILL BE USED FOR START-UP EXPENSES

Funded Amount:

$2,500

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
VILLAGE OF SPENCERPORT
27 WEST AVENUE
SPENCERPORT, NY 14559
(585) 352-4771

TED RAUBER

FUNDS WILL BE USED FOR A CANAL KAYAK BOAT LAUNCH

$3,500

REILICH

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF SPRING VALLEY
200 N. MAIN STREET
SPRING VALLEY, NY 10977
(845) 352-1100

Name of Project Director:

HONORABLE GEORGE DARDEN

Purpose of Project:

FUNDS WILL BE USED TO REPLACE THE HEATING SYSTEM AT THE LOUIS
KURTZ CIVIC CENTER.

Funded Amount:

$50,000

Requested By:

ZEBROWSKI

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF SUFFERN
61 WASHINGTON AVENUE
SUFFERN, NY 10901
(845) 357-2600

Name of Project Director:

JOHN KEEGAN

Purpose of Project:

FUNDS WILL BE USED FOR SUFFERN DAY

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF THERESA
P.O. BOX 299
THERESA, NY  13691
(315) 628-4425

Name of Project Director:

SYLVIA BUSH

Purpose of Project:

FUNDS WILL BE USED TO REPLACE LATERAL AND SERVICE WATER LINES FROM CURB STOPS TO METERS IN THE VILLAGE OF THERESA.

Funded Amount:

$10,000

Requested By:

AUBERTINE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF TUXEDO PARK
80 LORILLARD ROAD, P.O. BOX 31
TUXEDO PARK, NY 10987
(845) 351-4745

Name of Project Director:

DAVID MCFADDEN

Purpose of Project:

FUNDS WILL BE USED FOR REPAIRING OF THE TUXEDO LAKE DAM

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF WALDEN
P.O. BOX 392
WALDEN, NY 12586
(845) 733-6085

Name of Project Director:

MIKE BROAS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF PROGRAMS THAT THE VILLAGE OF WALDEN PROVIDES

Funded Amount:

$2,500

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF WALTON
21 NORTH STREET, P.O. BOX 29
WALTON, NY 13856
(607) 865-4358

Name of Project Director:

EDWARD H. SNOW

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$4,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF WAPPINGERS FALLS
2628 SOUTH AVENUE
WAPPINGERS FALLS, NY 12590
(845) 297-8773

Name of Project Director:

JOHN KARGE

Purpose of Project:

FUNDS WILL BE USED FOR OFFICE EQUIPMENT/FURNITURE FOR VILLAGE HALL

Funded Amount:

$3,000

Requested By:

MILLER

Name of Administering State Agency:

DEPARTMENT OF STATE
VILLAGE OF WARWICK
77 MAIN STREET, P.O. BOX 369
WARWICK, NY 10990
(845) 986-2031

MAYOR NEWHARD

FUNDS WILL BE USED FOR HISTORIC BENCHES FOR THE CENTRAL BUSINESS DISTRICT

$4,524

RABBITT

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF WATERLOO
41 WEST MAIN STREET
WATERLOO, NY 13165
(315) 539-9131

Name of Project Director:

LEE PATCHEN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF EQUIPMENT AND SPECIFICALLY FOR THE WATER DEPARTMENT

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF WOODBURY  
P.O. BOX 546  
CENTRAL VALLEY, NY 10917  
(845) 928-6829

Name of Project Director:

DESIREE POTVIN

Purpose of Project:

FUNDS WILL BE USED FOR START-UP EXPENSES

Funded Amount:

$2,500

Requested By:

CALHOUN

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

VILLAGE OF YOUNGSTOWN
240 LOCKPORT STREET, P.O. BOX 168
YOUNGSTOWN, NY 14174
(716) 745-7721

Name of Project Director:

HON. NEIL RIORGAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BUILDING MATERIALS AND SUPPLIES FOR A NEW RECREATION COMMUNITY CENTER.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

DEPARTMENT OF STATE
VOLUNTEER LEGAL SERVICES PROJECT OF MONROE COUNTY, INC.  
ONE WEST MAIN STREET, 5TH FLOOR  
ROCHESTER, NY  14614  
(585) 232-3051

SHEILA GADDIS

FUNDS WILL BE USED TO ASSIST IN PREPARING MATERIALS AND RESEARCH ANALYST TO FOCUS ON THE RE-ENTRY OF INCARCERATED INDIVIDUALS INTO SOCIETY. FUNDS WILL ALSO BE USED TO PROVIDE BILINGUAL SERVICES TO CLIENTS.

$25,000

GANTT

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WALTON FIRE DEPARTMENT
59-63 WEST STREET
WALTON, NY 13856
(607) 865-4985

Name of Project Director:

JAMES JACOB

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$5,000

Requested By:

CROUCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WANTAGH FIRE DEPARTMENT
2995 JERUSALEM AVENUE
WANTAGH, NY 11793
(516) 783-4680

Name of Project Director:

ROBERT NICOSIA

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING PROGRAMMATIC EXPENSES

Funded Amount:

$3,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WASHINGTON HEIGHTS AND INWOOD DEVELOPMENT CORP.
57 WADSWORTH AVENUE
NEW YORK, NY 10033
(212) 795-1600

Name of Project Director:

DENNIS C. REEDER

Purpose of Project:

FUNDS WILL BE USED FOR THE COMMUNITY EMERGENCY RESPONSE TEAM PROGRAM WHICH IS DESIGNED TO TRAIN AND HELP PEOPLE TO BETTER RESPOND TO EMERGENCY SITUATIONS.

Funded Amount:

$3,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WATERFORD RESCUE SQUAD, INC.
P.O. BOX 249
WATERFORD, NY  12188
(518) 237-2473

Name of Project Director:

TRACY WEIR

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TWO STRYKER STAIR CHAIRS WITH A TREAD SYSTEM TO HELP PREVENT INJURIES TO MEMBERS.

Funded Amount:

$4,500

Requested By:

CANESTRARI

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WELTONVILLE FIRE DEPARTMENT
42 LOWER FAIRFIELD ROAD
NEWARK VALLEY, NY 13811
(607) 687-0643

Name of Project Director:

STEVE GUNTHER

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WEST ALBANY FIRE DEPARTMENT
120 SAND CREEK ROAD
ALBANY, NY 12205
(518) 857-5742

Name of Project Director:

VICTOR GRAVES

Purpose of Project:

FUNDS WILL BE USED TO HELP PURCHASE A MASS DECONTAMINATION SYSTEM.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WEST BLOOMFIELD VOLUNTEER FIRE DEPARTMENT
P.O. BOX 24
WEST BLOOMFIELD, NY 14585
(585) 624-2915

Name of Project Director:

KEVIN CAREY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A GAS POWERED WATER PUMP AND SMOKE DETECTOR FAN

Funded Amount:

$1,300

Requested By:

ERRIGO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WEST CRESCENT FIRE DISTRICT
1440 CRESCENT ROAD
CLIFTON PARK, NY  12065
(518) 371-7478

Name of Project Director:

DENNIS R. AYOTTE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW LIFESAVING EQUIPMENT.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WEST GLENVILLE FIRE DISTRICT #6, TOWN OF GLENVILLE
2024 WEST GLENVILLE ROAD
AMSTERDAM, NY 12010
(518) 280-4077

Name of Project Director:

THOMAS BEATTY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NECESSARY SELF CONTAINED BREATHING APPARATUS AND PAGERS FOR THE FIRE DISTRICT

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WEST HAMILTON BEACH VOLUNTEERS, INC.
P.O. BOX 77
HOWARD BEACH, NY 11414
(718) 843-1716

Name of Project Director:

JONAH COHEN

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE GENERAL OPERATING EXPENSES OF THE WEST HAMILTON BEACH VOLUNTEERS.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WEST HILL CIVIC ASSOCIATION, INC.
251 SHERIDAN AVENUE
ALBANY, NY  12210
(518) 432-9717

Name of Project Director:

RONALD BAILEY

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE AND ENHANCE THE QUALITY OF LIFE OF THE RESIDENTS OF WEST HILL COMMUNITY, AS WELL AS, THE CITY OF ALBANY.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WEST MONROE VOLUNTEER FIRE DEPARTMENT
54 COUNTY ROUTE 11, P.O. BOX 29
WEST MONROE, NY 13167
(315) 676-4600

Name of Project Director:

DAVID EIFFE

Purpose of Project:

FUNDS WILL BE USED FOR NEW ENGINE FOR THE FIRE STATION'S
BATTALION III WATER RESCUE BOAT

Funded Amount:

$15,000

Requested By:

TOWSENDE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WEST SAYVILLE CIVIC ASSOCIATION, INC.
P.O. BOX 118
WEST SAYVILLE, NY 11796
(631) 589-4033

Name of Project Director:

BRENDAN MCCURDY

Purpose of Project:

FUNDS WILL BE USED TO PRODUCE A NEWSLETTER.

Funded Amount:

$2,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WEST SAYVILLE-OAKDALE FIRE DEPARTMENT
80 MAIN STREET
WEST SAYVILLE, NY 11796
(631) 218-8969

Name of Project Director:

DEBORAH THERMAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FIREFIGHTING AND SAFETY EQUIPMENT.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WEST SIDE NEIGHBORHOOD COMMUNITY COLLABORATIVE
359 CONNECTICUT STREET
BUFFALO, NY  14213
(716) 834-8489

Name of Project Director:

ROBERT FRANKE

Purpose of Project:

FUNDS WILL BE USED TO OFFSET STREETSCAPE IMPROVEMENTS, BY INCLUDING BENCHES, TREES, SIGNAGE AND MURALS.

Funded Amount:

$5,000

Requested By:

HOYT

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WESTERN NEW YORK LAW CENTER, INC.
237 MAIN STREET, SUITE 1030
BUFFALO, NY 14203
(716) 855-0203

Name of Project Director:

KATHLEEN A. LYNCH, ESQ.

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUED SUPPORT FOR THE "ANTI-FLIPPING" TASK FORCE.

Funded Amount:

$15,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WHERE TO TURN, INC.
150-L GREAVES LANE #312
STATEN ISLAND, NY 10308
(718) 966-6531

Name of Project Director:

DENNIS MCKEON

Purpose of Project:

FUNDS WILL BE USED TO COORDINATE COMMUNITY EFFORTS FOR THE REHABILITATION OF GRAFFITI SCARRED AREAS ON STATEN ISLAND WITH STUDENT VOLUNTEERS.

Funded Amount:

$5,000

Requested By:

CUSICK

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WHERE TO TURN, INC.
150-L GREAVES LANE, #312
STATEN ISLAND, NY 10308
(718) 966-6531

Name of Project Director:

DENNIS MCKEON

Purpose of Project:

FUNDS WILL BE USED TO CREATE A PERMANENT HOME FOR THE UNITED IN MEMORY VICTIMS 9-11 MEMORIAL QUILT, REHAB OF EXISTING STRUCTURE, CONSTRUCTION OF MEMORIAL GARDEN, EDUCATION INFO, AND CREATION OF A SERENE SPACE FOR FAMILIES WHO LOST STATEN ISLAND MEMBERS IN 9-11.

Funded Amount:

$5,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WHITNEY POINT FIRE DEPARTMENT
32 NORTH PASONS DRIVE, P.O. BOX 1006
WHITNEY POINT, NY 13862
(607) 692-3845

Name of Project Director:
NICK SCULLEY

Purpose of Project:
FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:
$1,000

Requested By:
FINCH

Name of Administering State Agency:
DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WILLET FIRE DEPARTMENT
5524 ROUTE 41
WILLET, NY 13863
(607) 863-3363

Name of Project Director:

GREGORY MCGOWAN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SAFETY EQUIPMENT

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WILLIAMSVILLE EXEMPT FIREMEN’S ASSOCIATION, INC.
5045 SHERIDAN DRIVE
WILLIAMSVILLE, NY 14221
(716) 632-4987

Name of Project Director:

MICHAEL P. WUTZ

Purpose of Project:

FUNDS WILL BE USED FOR ELEMENTARY SCHOOL FIRE PREVENTION PROGRAMS

Funded Amount:

$2,000

Requested By:

HAYES

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WILLIAMSVILLE FIRE DEPARTMENT
5565 MAIN STREET
WILLIAMSVILLE, NY 14221
(716) 632-4070

Name of Project Director:

RICHARD J. MADDIGAN

Purpose of Project:

FUNDS WILL BE USED TO UPDATE COMMUNICATION EQUIPMENT

Funded Amount:

$10,000

Requested By:

HAYES

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WOMEN’S ENTERPRISE DEVELOPMENT CENTER, INC.
707 WESTCHESTER AVENUE, SUITE 213
WHITE PLAINS, NY 10604
(914) 948-6098

Name of Project Director:

ANNE JANIAK

Purpose of Project:

FUNDS WILL BE USED FOR THE PRODUCTION OF BUSINESS CARDS,
STATIONARY, FOLDERS AND BROCHURES WITH NEW 10TH ANNIVERSARY
LETTERHEAD.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WOODMERE FIRE DEPARTMENT
20 IRVING PLACE
WOODMERE, NY 11598
(516) 316-7658

Name of Project Director:

COMMISSIONER DAVID MILLER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FIREFIGHTING EQUIPMENT AND SUPPLIES.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WOODSIDE ON THE MOVE, INC.
39-42 59TH STREET, 2ND FLOOR
WOODSIDE, NY  11377
(718) 476-8449

Name of Project Director:

HEATHER STRAFER

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE COMMUNITY DEVELOPMENT PROJECTS THAT INCLUDE, BUT ARE NOT LIMITED TO, PRESERVING AREA HOUSING STOCK, PROVIDING EDUCATIONAL AND RECREATIONAL OPPORTUNITIES TO LOCAL YOUTH, REVITALIZING THE LOCAL BUSINESS ENVIRONMENT AND PROMOTING CULTURAL PERFORMANCES.

Funded Amount:

$25,000

Requested By:

MARKEY

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

WORLD TRADE CENTER BUFFALO NIAGARA, INC.
661 DELAWARE AVENUE
BUFFALO, NY  14202
(716) 852-7160

Name of Project Director:

HOLLY A. SINNOTT

Purpose of Project:

FUNDS WILL BE USED FOR THE CREATION OF "GLOBAL NEW YORK" WEBSITE.

Funded Amount:

$12,300

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF STATE
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WORLD TRADE CENTER BUFFALO NIAGARA, INC.
661 DELAWARE AVENUE
BUFFALO, NY 14202
(716) 852-7160

Name of Project Director:

MOLLY A. SINNOTT

Purpose of Project:

FUNDS WILL BE USED FOR THE CREATION OF THE GLOBAL NEW YORK WEBSITE.

Funded Amount:

$12,300

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

YAPHANK VOLUNTEER FIRE COMPANY, INC.
451A MAIN STREET
YAPHANK, NY 11980
(631) 924-3200

Name of Project Director:

DONALD SCHARF

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE PURCHASE OF SAFETY EQUIPMENT.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

YONKERS FIREFIGHTERS LOCAL 628
P.O. BOX 1071
YONKERS, NY 10701
(914) 476-1200

Name of Project Director:

HUGH FOX

Purpose of Project:

FUNDS WILL BE USED FOR PROMOTING FIRE SAFETY

Funded Amount:

$5,000

Requested By:

SPANO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

YONKERS UNIFORMED FIRE OFFICERS ASSOCIATION
573 WARBURTON AVENUE
YONKERS, NY 10701
(914) 377-7524

Name of Project Director:

ROBERT MASICK

Purpose of Project:

FUNDS WILL BE USED FOR PROMOTING "OPERATION SAFE CHILD"

Funded Amount:

$2,500

Requested By:

SPANO

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

YOUNGSTOWN VOLUNTEER FIRE CO.
P.O. BOX 387
YOUNGSTOWN, NY  14174
(716) 745-3324

Name of Project Director:

GREG ROBERTSON

Purpose of Project:

FUNDS WILL BE USED TO REPLACE THE 20-YEAR-OLD ROOF ON THE FIRE HALL THAT IS LEAKING EXTENSIVELY AND CAUSING SEVERE WATER DAMAGE.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

DEPARTMENT OF STATE
Legal Name, Address, and Telephone Number:

HC DETACHMENT-MARINE CORPS LEAGUE
178 SECOND STREET
ILION, NY 13357
(315) 894-4636

Name of Project Director:

DONALD STERLING

Purpose of Project:

FUNDS WILL BE USED TOWARDS COSTS ASSOCIATED WITH REPAVING OF PARKING LOT

Funded Amount:

$5,000

Requested By:

BUTLER-M

Name of Administering State Agency:

DEPARTMENT OF TRANSPORTATION
Legal Name, Address, and Telephone Number:

HERKIMER AREA RESOURCE CENTER
350 SOUTH WASHINGTON STREET, BOX 271
HERKIMER, NY 13350
(315) 866-2920

Name of Project Director:

KEVIN CROSLEY

Purpose of Project:

FUNDS WILL BE USED TOWARD COSTS ASSOCIATED WITH PAVING THE CLARENCE G. GUYER TRANSPORTATION CENTER PARKING LOT

Funded Amount:

$18,000

Requested By:

BUTLER-M

Name of Administering State Agency:

DEPARTMENT OF TRANSPORTATION
Legal Name, Address, and Telephone Number:

TOWN OF AMHERST HIGHWAY DEPARTMENT
1042 NORTH FOREST ROAD
WILLIAMSVILLE, NY 14221
(716) 631-5992

Name of Project Director:

ROBERT ANDERSON

Purpose of Project:

FUNDS WILL BE USED FOR MUNICIPAL TREE FUND-COSTS ASSOCIATED WITH OCTOBER 2006 SURPRISE STORM

Funded Amount:

$25,000

Requested By:

HAYES

Name of Administering State Agency:

DEPARTMENT OF TRANSPORTATION
Legal Name, Address, and Telephone Number:

TOWN OF MARLBOROUGH
1650 ROUTE 9W, P.O. BOX 305
MILTON, NY 12547
(845) 795-2220

Name of Project Director:

AL LANZETTA

Purpose of Project:

FUNDS WILL BE USED FOR THE EXTENSION OF SIDEWALKS IN THE HAMLET OF MILTON

Funded Amount:

$24,500

Requested By:

KIRWAN

Name of Administering State Agency:

DEPARTMENT OF TRANSPORTATION
Legal Name, Address, and Telephone Number:

   TOWN OF PINE PLAINS HIGHWAY DEPARTMENT
   P.O. BOX 955
   PINE PLAINS, NY 12567
   (518) 398-6662

Name of Project Director:

   A. GREGG PULVER

Purpose of Project:

   FUNDS WILL BE USED FOR A NEW GENERATOR

Funded Amount:

   $5,000

Requested By:

   MOLINARO

Name of Administering State Agency:

   DEPARTMENT OF TRANSPORTATION
Legal Name, Address, and Telephone Number:

VILLAGE OF PLEASANTVILLE
80 WHEELER AVENUE
PLEASANTVILLE, NY  10570
(914) 769-1900

Name of Project Director:

PATTI DWYER

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF LARGE-DISPLAY M.P.H. READERS.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

DEPARTMENT OF TRANSPORTATION
Legal Name, Address, and Telephone Number:

CHINATOWN MANPOWER PROJECT INC.
70 MULBERRY STREET
NEW YORK, NY 10013 - 4499
(212) 571 - 1690

Name of Project Director:

JAMES MELEDEZ, EXECUTIVE DIRECTOR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BUSINESS COUNSELING, TECHNICAL
ASSISTANCE, JOB TRAINING AND RETRAINING, AND OTHER SERVICES TO
ENHANCE SMALL BUSINESS DEVELOPMENT.

Funded Amount:

$166,000

Requested By:

SILVER, YOUNG

Name of Administering State Agency:

URBAN DEVELOPMENT CORPORATION
Legal Name, Address, and Telephone Number:

LOWER EAST SIDE BUSINESS IMPROVEMENT DISTRICT
261 BROOME STREET
NEW YORK, NY 10002
(212) 226–9010

Name of Project Director:

JOSEPH E. CUNIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES AND ASSISTANCE TO BUSINESSES IN THE COMMUNITY FOR VARIOUS ACTIVITIES INCLUDING OUTREACH.

Funded Amount:

$80,000

Requested By:

SILVER

Name of Administering State Agency:

URBAN DEVELOPMENT CORPORATION
Legal Name, Address, and Telephone Number:

NORTHERN MANHATTAN COALITION FOR ECONOMIC DEVELOPMENT
600 WEST 185TH STREET – 2ND FLOOR
NEW YORK, NY 10033
(212) 543 – 0010

Name of Project Director:

NURYS DEOLEO

Purpose of Project:

FUNDS WILL BE USED FOR THE MAINTENANCE & SUPPORT OF THE BUSINESS OUTREACH CENTER. THE CENTER WILL PROVIDE TECHNICAL & PROFESSIONAL ASSISTANCE TO LOCAL BUSINESSES TO MAINTAIN AND GROW THE COMMUNITY’S ECONOMIC BASE.

Funded Amount:

$70,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

URBAN DEVELOPMENT CORPORATION
Legal Name, Address, and Telephone Number:
ROCHESTER PROCUREMENT TECHNICAL ASSISTANCE CENTER (PTAC)
150 STATE STREET, 4TH FLOOR
ROCHESTER, NY  14614
(585) 263 – 3667

Name of Project Director:
JEAN KASE, VICE PRESIDENT RBA & DIRECTOR

Purpose of Project:
FUNDS WILL BE USED TOWARD OPERATING EXPENSES OF THE
PROCUREMENT TECHNICAL ASSISTANCE PROGRAM, ASSISTING
SMALL BUSINESSES IN ACCESSING PROCUREMENT OPPORTUNITIES.

Funded Amount:
$100,000

Requested By:
JOHN

Name of Administering State Agency:
URBAN DEVELOPMENT CORPORATION
Legal Name, Address, and Telephone Number:

114TH CIVILIAN OBSERVATION PATROL
31-38 29TH STREET, BASEMENT
ASTORIA, NY 11106
(718) 728-8763

Name of Project Director:

BARTBARA POLLACK

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT TO ERADICATE GRAFFITI.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

114TH CIVILIAN OBSERVATION PATROL
31-38 29TH STREET, BASEMENT
ASTORIA, NY 11106
(718) 728-8763

Name of Project Director:

BARBARA POLLACK

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COST OF THE COUNCIL’S ANNUAL FELLOWSHIP BREAKFAST, WHICH GIVES THE COMMUNITY A CHANCE TO MEET OFFICERS FROM THE PRECINCT AND DISCUSS ISSUES OF CONCERN. ADDITIONAL FUNDS WILL SUPPORT THE ANNUAL NIGHT OUT AGAINST CRIME.

Funded Amount:

$2,000

Requested By:

GIANARIS

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

47TH PRECINCT COMMUNITY COUNCIL
P.O. BOX 753147
BRONX, NY 10475
(718) 379-9662

Name of Project Director:

ELIZABETH GILL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SUPPLIES FOR A PROJECT THAT WILL CREATE SAFER STREETS AND NEIGHBORHOODS BY UTILIZING VOLUNTEERS TO PATROL THE COMMUNITY AND ASSIST THE LOCAL AUTHORITIES WITH LOGISTICS.

Funded Amount:

$1,000

Requested By:

HEASTIE

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

63RD PRECINCT COMMUNITY COUNCIL
1844 BROOKLYN AVENUE
BROOKLYN, NY  11210
(718) 258-4411

Name of Project Director:

POLICE OFFICER EMILY LOPEZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE UNIFORMS FOR THE EXPLORERS GROUP.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

81ST PRECINCT YOUTH COUNCIL, INC.
30 RALPH AVENUE
BROOKLYN, NY 11221
(718) 574-0433

Name of Project Director:

CYNTHIA HERRERA

Purpose of Project:

FUNDS WILL BE USED TO GIVE YOUTH THE OPPORTUNITY TO EXPERIENCE RECREATIONAL AND CULTURAL EVENTS THAT THEY MIGHT NOT OTHERWISE BE ABLE TO DO AND TO BRIDGE THE GAP BETWEEN YOUTH AND POLICE OFFICERS.

Funded Amount:

$3,000

Requested By:

ROBINSON

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

ALBANY COUNTY SHERIFF'S DEPARTMENT
COUNTY COURT HOUSE
ALBANY, NY 12207
(518) 487-5400

Name of Project Director:

JAMES L. CAMPBELL

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN BUILDING A CRIME VICTIMS MEMORIAL.

Funded Amount:

$4,000

Requested By:

CANESTRARI, GORDON-T, MCEVENY, REILLY

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
ALLIANCE FOR SAFE KIDS (ASK)
P.O. BOX 106
YORKTOWN HEIGHTS, NY 10598
(914) 736-1450

JOAN VALENSTEIN

FUNDS WILL BE USED FOR THE YORKTOWN YOUTH COURT

$4,000

BALL

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

BAYSWATER SECURITY PATROL
2911 BEACH CHANNEL DRIVE
FAR ROCKAWAY, NY  11691
(718) 327-7464

Name of Project Director:

MICHAEL GLINER

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE AND MAINTAIN A HIGHER QUALITY OF LIFE IN AND AROUND BAYSWATER AND TO MAKE THE NEIGHBORHOOD ONE OF WHICH PEOPLE WISH TO BE A PART.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

BETHLEHEM YOUTH COURT, INC.
261 ELM AVENUE
DELMAR, NY 12054
(518) 439-4955

Name of Project Director:

STACEY WHITELEY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN ALTERNATIVE SENTENCING PROGRAM FOR YOUTH AGES 10 THROUGH 19 WHO ARE CHARGED WITH LOW LEVEL CRIMES OR OFFENSES. THE PROGRAM ALSO PROVIDES A SERVICE LEARNING COMPONENT FOR THOSE YOUTH THAT WISH TO LEARN MORE ABOUT JUVENILE JUSTICE.

Funded Amount:

$7,500

Requested By:

GORDON-T

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

BINGHAMTON CRIME STOPPERS, INC.
P.O. BOX 1544
BINGHAMTON, NY 13902
(607) 772-7093

Name of Project Director:

MIKE WHALEN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE COSTS OF TIP LINE FEES, AS WELL
AS, FAX AND WEBSITE FEES THAT INSURE INSTANT COMMUNICATION TO
POLICE AGENCIES.

Funded Amount:

$5,000

Requested By:

LUPARDO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

BROCKPORT POLICE DEPARTMENT
1 CLINTON STREET
BROCKPORT, NY 14420
(585) 637-1020

Name of Project Director:

DOUGLAS ZIEGLER

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT NEEDED TO REPLACE WORN RIFLES IN PATROL CARS

Funded Amount:

$8,430

Requested By:

REILICH

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

BROOME COUNTY GOVERNMENT - SECURITY DIVISION
BROOME COUNTY OFFICE BLDG. - GOV'T PLAZA
44 HAWLEY STREET, P.O. BOX 1766
BINGHAMTON, NY 13902
(607) 778-2107

Name of Project Director:

JAMES D. DADAMIO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AUTOMATED ROBOTIC DVD UNIT, AND TO PURCHASE ADDITIONAL DATA STORAGE CAPABILITY AND THREE VIDEO DISPLAY UNITS ON FORENSIC STATIONS TO ENHANCE FORENSIC LAB CAPABILITIES.

Funded Amount:

$20,000

Requested By:

LUPARDO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOME COUNTY STOP-DWI PROGRAM
P.O. BOX 1766, BROOME COUNTY COURTHOUSE
BINGHAMTON, NY 13902
(607) 778-2056

Name of Project Director:

JAMES MAY

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE AND SPONSOR THE CHRIS THATER BICYCLE RACE.

Funded Amount:

$5,000

Requested By:

LUPARDO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

CATTARAUGUS COUNTY SHERIFF’S DEPARTMENT
303 COURT STREET
LITTLE VALLEY, NY 14755
(716) 938-9191

Name of Project Director:

DENNIS B. JOHN

Purpose of Project:

FUNDS WILL BE USED FOR CONTINUED IMPLEMENTATION FUNDING OF SEX OFFENDER WATCH PROGRAM

Funded Amount:

$7,500

Requested By:

GIGLIO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

CENTER FOR ALTERNATIVE SENTENCING AND EMPLOYMENT SERVICES
346 BROADWAY, 3RD FLOOR
NEW YORK, NY  10013
(212) 732 – 0076

Name of Project Director:

JOEL COPPERMAN

Purpose of Project:

FUNDING TO SUPPORT THE LEGIT PROGRAM AND TO PROVIDE AN ALTERNATIVE TO DETENTION, PLACEMENT OR INCARCERATION.

Funded Amount:

$136,000

Requested By:

AUBRY, LENTOL

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

CITIZENS FOR LAW, ORDER & JUSTICE
144 BARRETT STREET
SCHENECTADY, NY 12305
(518) 346-1281

Name of Project Director:

LAURA E. ZELIGER

Purpose of Project:

FUNDS WILL BE USED TO ACQUIRE AND INSTALL ITEMS DIRECTED AT IMPROVING SAFETY TECHNOLOGY AND PROFESSIONAL UPGRADE TO LOJ FACILITY

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

CITY OF ELMIRA POLICE DEPARTMENT
317 EAST CHURCH STREET
ELMIRA, NY 14901
(607) 735-8600

Name of Project Director:

SCOTT DRAKE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF LICENSE PLATE READER

Funded Amount:

$15,000

Requested By:

O’MARA

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

CITY OF RYE AUXILIARY POLICE UNIT
21 MCCULLOUGH PLACE
RYE, NY  10580
(914) 967-8413

Name of Project Director:

WILLIAM R. CONNORS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE PORTABLE RADIOS FOR THE CITY OF RYE AUXILIARY POLICE UNIT TO FACILITATE AUXILIARY POLICE OPERATIONS.

Funded Amount:

$5,500

Requested By:

LATIMER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

CITY OF TONAWANDA
200 NIAGARA STREET
TONAWANDA, NY 14150
(716) 695-8645

Name of Project Director:

CAPTAIN JAMES HARMON

Purpose of Project:

FUNDS WILL BE USED TO ACQUIRE A REMINGTON ELSAG LICENSE PLATE READER SYSTEM.

Funded Amount:

$20,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

COLUMBIA COUNTY SHERIFF’S OFFICE
85 INDUSTRIAL TRACT
HUDSON, NY 12534
(518) 828-0601

Name of Project Director:

DAVID W. HARRISON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A PERSONAL WATERCRAFT TO INCREASE SAFETY AND ENFORCEMENT ABILITIES ON THE WATERWAYS AND ASSIST WITH DIVE OPERATIONS

Funded Amount:

$8,500

Requested By:

MOLINARO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

COPS CARE INC.
P.O. BOX 6506
ALBANY, NY 12206
(518) 573-1979

Name of Project Director:

DAVID MARTIN

Purpose of Project:

FUNDS WILL BE USED FOR SAFETY PROGRAMS IN NYS.

Funded Amount:

$2,500

Requested By:

MILLMAN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

DIVISION OF CRIMINAL JUSTICE SERVICES
4 TOWER PLACE
ALBANY, NEW YORK 12203
(518) 457-8462

Name of Project Director:

Purpose of Project:

FUNDS SHOULD BE ADMINISTERED FOR THE COST ASSOCIATED WITH REIMBURSEMENT TO CONTRACT COUNTIES FOR THE PROVISION OF LEGAL ASSISTANCE AND REPRESENTATION TO INDIGENT PAROLEES. ALLOCATE AS FOLLOWS: MONROE $85,247; NASSAU $52,208, NYC $515,545.

Funded Amount:

$653,000

Requested By:

AUBRY, LENTOL, O’DONNELL

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

DUTCHESS COUNTY SHERIFF
150 NORTH HAMILTON STREET
POUGHKEEPSIE, NY 12601
(845) 486-3810

Name of Project Director:

ADRIAN ANDERSON

Purpose of Project:

FUNDS WILL BE USED FOR A SECURITY PROJECT TO INCLUDE CAMERAS/DOOR/GUN DROP

Funded Amount:

$6,000

Requested By:

MILLER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

DUTCHESS COUNTY SHERIFF’S DEPARTMENT
150 NORTH HAMILTON STREET
POUGHKEEPSIE, NY 12601
(845) 486-3800

Name of Project Director:

ADRIAN ANDERSON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TWO SETS OF THE POLARIS ATV PROSPECTOR TRACK SYSTEM THAT CONVERT THE ATV TIRES TO TRACKS

Funded Amount:

$8,305

Requested By:

MOLINARO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

EDUCATION & ASSISTANCE CORPORATION, INC.
50 CLINTON STREET, SUITE 608
HEMSTEAD, NY 11550
(516) 539–0150

Name of Project Director:

KENNETH LINN

Purpose of Project:

TO PROVIDE FUNDING FOR ENHANCED SERVICES FOR THE BROOKLYN TASC PROGRAM.

Funded Amount:

$129,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

ERIE COUNTY SHERIFF LAW ENFORCEMENT EXPLORER POST 505
10 DELAWARE AVENUE
BUFFALO, NY 14202
(716) 858-7618

Name of Project Director:

LT. RUSSELL P. SCANIO

Purpose of Project:

FUNDS WILL BE USED TO OPERATE AND SUPPLY OPERATION SAFE CHILD, A CHILDREN’S I.D. CARD PROVIDER THAT MAKES I.D.’S AVAILABLE THROUGHOUT WNY.

Funded Amount:

$5,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FLATBUSH SHOMRIM SAFETY PATROL, INC.
2294 NOSTRAND AVENUE - SUITE 1000
BROOKLYN, NY  11210
(718) 338-9453

Name of Project Director:

CHAIM DEUTSCH

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE QUALITY OF LIFE AND DETER CRIME FOR ALL IN THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

HIKIND

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

FLATBUSH SHOMRIM SAFETY PATROL, INC.
2294 NOSTRAND AVENUE, 1000
BROOKLYN, NY  11210
(718) 338-9453

Name of Project Director:

CHAIM DEUTCH

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR THE FLATBUSH SHOMRIM SAFETY PATROL.

Funded Amount:

$3,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

GENESEO POLICE DEPARTMENT
119 MAIN STREET
GENESEO, NY 14454
(585) 243-2420

Name of Project Director:

ERIC OSGANIAN

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNICATIONS EQUIPMENT

Funded Amount:

$3,500

Requested By:

BURLING

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

GLEN COVE POLICE DEPARTMENT
ONE BRIDGE STREET
GLEN COVE, NY 11542
(516) 676-1000

Name of Project Director:

DET. ROBERT SCHLEE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TRAINING FOR LAW ENFORCEMENT PERSONNEL IN CONTEMPORARY INVESTIGATIVE TECHNIQUES.

Funded Amount:

$3,000

Requested By:

LAVINE

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

GLENDALE CIVILIAN OBSERVATION PATROL, INC.
70-24 MYRTLE AVENUE
GLENDALE, NY 11385
(718) 487-1500

Name of Project Director:

FRANK KOTNICK

Purpose of Project:

FUNDS WILL BE USED TO SUPERVISE CONVICTED GRAFFITI VANDALS AND OTHER NON-VIOLENT CRIMINALS SENTENCED TO PERFORM COMMUNITY SERVICE. GCOP VOLUNTEERS SUPERVISE THE CLEANING AND PAINTING OF PUBLIC AND PRIVATE PROPERTIES UP TO FIVE DAYS A WEEK IN AND AROUND GLENDALE. FUNDS WILL BE USED TO CONTINUE THE EXPANSION OF PATROLS AND REPAIR RADIOS.

Funded Amount:

$10,000

Requested By:

SEMINERIO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

GREATER RIDGEWOOD RESTORATION CORPORATION
68-56 FOREST AVENUE
RIDGEWOOD, NY  11385
(718) 366-8721

Name of Project Director:

ANGELA MIRABLE

Purpose of Project:

FUNDS WILL BE USED FOR CRIME PRESERVATION PROGRAMS AND GRAFFITI REMOVAL.

Funded Amount:

$2,250

Requested By:

NOLAN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

GREATER RIDGEWOOD RESTORATION CORPORATION
68-56 FOREST AVENUE
RIDGEWOOD, NY 11385
(718) 366-8721

Name of Project Director:

ANGELA MIRABILE

Purpose of Project:

FUNDS WILL BE USED TO COORDINATE A PROGRAM TO REMOVE GRAFFITI FROM NEIGHBORHOOD BUILDINGS USING CAUSTIC REMOVER AND HIGH WATER PRESSURE MACHINES. LABOR IS SUPPLIED FREE OF CHARGE TO BUILDING OWNERS THROUGH PAID SUPERVISOR AND INMATES OF THE NYC CORRECTION DEPARTMENT, PROBATION AND DISTRICT ATTORNEY’S OFFICE. FUNDS WILL BE USED FOR THE COST OF THE PAINT.

Funded Amount:

$6,000

Requested By:

SEMINERIO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:
GREENPOINT OUTREACH DOMESTIC AND FAMILY INTERVENTION PROGRAM
117–11 MYRTLE AVENUE
RICHMOND HILL, NY 11418
(718) 847–9233

Name of Project Director:
NEIL J. SHEEHAN, EXEC. VICE PRESIDENT

Purpose of Project:
FUNDS WILL BE USED TO PROVIDE DRUG AND ALCOHOL TREATMENT, PREVENTION, DIVERSION AND COUNSELING SERVICES TO INDIVIDUALS AND THEIR FAMILIES INVOLVED AND/OR AT RISK OF INVOLVEMENT WITH THE CRIMINAL JUSTICE SYSTEM.

Funded Amount:
$149,000

Requested By:
AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:
DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

IRONDEQUOIT CRIME PREVENTION COALITION
1300 TITUS AVENUE
ROCHESTER, NY 14617
(585) 336-6000

Name of Project Director:

LISA STORER

Purpose of Project:

FUNDS WILL BE USED FOR VARIOUS ITEMS RELATED TO NEIGHBORHOOD WATCH ACTIVITIES.

Funded Amount:

$7,500

Requested By:

MORELLE

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

KENSINGTON COMMUNITY ACTION FORCE, INC.
623 CORTELYOU ROAD
BROOKLYN, NY 11218
(718) 941-5500

Name of Project Director:

SIDNEY ZELMAN

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE RESIDENT AWARENESS OF THE BENEFITS OF COMMUNITY TEAM EFFORTS TO PREVENT CRIME.

Funded Amount:

$5,000

Requested By:

BRENNAN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LANCASTER POLICE DEPARTMENT
525 PAVEMENT ROAD
LANCASTER, NY 14086
(716) 683-2800

Name of Project Director:

CAPTAIN TIMOTHY MURPHY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A LIVE SCAN MACHINE FOR FINGERPRINTING.

Funded Amount:

$12,000

Requested By:

GABRYSZAK

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

LEGAL ACTION CENTER
153 WAVERLY PLACE
NEW YORK, NY 10014
(212) 243 – 1313

Name of Project Director:

PAUL SAMUELS

Purpose of Project:

TO PROVIDE SUPPORT SERVICES FOR EX–OFFENDERS, AND TO PROVIDE STAFF TRAINING, RESEARCH AND PROGRAM ADVOCACY FOR ALTERNATIVE TO INCARCERATION PROGRAMS.

Funded Amount:

$131,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

MICHELE E-MARTIN MEMORIAL TRUST
17 DALTON COURT
DELMAR, NY  12054
(518) 439-4780

Name of Project Director:

ELIZABETH MARTIN

Purpose of Project:

FUNDS WILL BE USED FOR THE CREATION OF A CRIME VICTIMS MEMORIAL IN ALBANY’S ACADEMY PARK.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
MILLBROOK POLICE DEPARTMENT
35 MERRITT AVENUE
MILLBROOK, NY 12545
(845) 677-8200

JOHN IMPERATO

FUNDS WILL BE USED TO PURCHASE EQUIPMENT TO BEGIN A TWO OFFICER BIKE PATROL IN THE VILLAGE OF MILLBROOK

$3,148

MOLINARO

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

MITCHELL-LINDEN CIVIC ASSOCIATION, INC.
P.O. BOX 545481, LINDEN HILL STATION
FLUSHING, NY  11354
(718) 886-2138

Name of Project Director:

JUDY KARLIN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF OPERATING A CRIME PREVENTION VEHICLE, INCLUDING CAR INSURANCE AND MAINTENANCE.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

MONT PLEASANT ACTION COALITION
P.O. BOX 4525
SCHENECTADY, NY 12303
(518) 370-5130

Name of Project Director:

CARMEN PANTALONE

Purpose of Project:

FUNDS WILL BE USED TO INSTALL VIDEO SURVEILLANCE CAMERAS THROUGHOUT THE NEIGHBORHOOD

Funded Amount:

$20,000

Requested By:

TEDISCO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

MONTGOMERY COUNTY SHERIFF’S OFFICE
P.O. BOX 432, 200 CLARK DRIVE
FULTONVILLE, NY 12072
(518) 853-5533

Name of Project Director:

JEFFREY T. SMITH

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE, MAINTAIN AND TRAIN ALL STAFF IN THE USE OF AEDS.

Funded Amount:

$5,000

Requested By:

TONKO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

MONTICELLO POLICE DEPARTMENT
2 PLEASANT STREET
MONTICELLO, NY  12701
(845) 794-4422

Name of Project Director:

DOUG SOLOMON

Purpose of Project:

FUNDING WILL BE USED TO PURCHASE NECO BASE RADIO AND HANDHELDs.

Funded Amount:

$10,000

Requested By:

GUNThER-A

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

MORRIS PARK COMMUNITY ASSOCIATION
1824 BRONXDALE AVENUE
BRONX, NY 10462
(718) 823-0596

Name of Project Director:

SILVIO MAZZELLA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE NEIGHBORHOOD PATROL BY PURCHASING POSTAGE, FLYERS, FLASH LIGHTS, PATROL SHIRTS/JACKETS, AND GASOLINE FOR THE TWO PATROL VEHICLES. FUNDS WILL ALSO BE USED TO PAY FOR PATROL RADIO TIME.

Funded Amount:

$3,000

Requested By:

RIVERA-N

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

N. BROOKLYN YOUTH ANTI DRUG TASK FORCE – 94TH PRECINCT
100 MESEROLE AVENUE
BROOKLYN, NY 11222
(718) 383 – 3879

Name of Project Director:

LESLIE FERGUSON AND JOHN LISA

Purpose of Project:

THESE FUNDS SHALL BE USED TO SUPPORT A YOUTH COURT AND COMMUNITY JUSTICE PROGRAM. THIS PROGRAM WILL BE ADMINISTERED BY THE 94TH POLICE PRECINCT AND BROOKLYN LAW SCHOOL PROFESSORS.

Funded Amount:

$193,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

NEIGHBORHOOD CRIME PREVENTION, INC.
82-17 153RD AVENUE, ROOM 209
HOWARD BEACH, NY 11414
(718) 641-4254

Name of Project Director:

PAM GOLDSTEIN

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET THE COST OF THE SECURITY PATROL IN LINDENWOOD VILLAGE TO ENSURE THE SAFETY OF COMMUNITY RESIDENTS.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

NEIGHBORHOOD DEFENDER SERVICE OF HARLEM
55 WEST 125TH STREET, 2ND FLOOR
NEW YORK, NY  10027
(212) 876 – 5500

Name of Project Director:

LEONARD E. NOISSETTE, EXECUTIVE DIRECTOR

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE PROVISION OF INDIGENT DEFENSE SERVICES.

Funded Amount:

$294,000

Requested By:

AUBRY, FARRELL, LENTOL

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

NEW HARTFORD POLICE DEPARTMENT
32 KELLOGG ROAD
NEW HARTFORD, NY 13413
(315) 733-6666

Name of Project Director:

RAYMOND PHILO

Purpose of Project:

FUNDS WILL BE USED TO EQUIP THE NEW SUB-STATION WITH COMPUTER EQUIPMENT AND TO UPGRADE IN-VEHICLE LAPTOP COMPUTERS

Funded Amount:

$7,000

Requested By:

TOWNSEND

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

NEW MARBLE HILL TENANTS AND CIVIC ASSOCIATION
125 W. 228TH STREET, APT. 8A
NEW YORK, NY 10463
(718) 562-7031

Name of Project Director:

PAULETTE SHOMO

Purpose of Project:

FUNDS WILL BE USED FOR THE ANNUAL MARBLE HILL FAMILY DAY ($4,000) INCLUDING ACTIVITIES FOR SENIORS, YOUTH, AND CHILDREN. FUNDS WILL ALSO BE USED TOWARD STUDENTS ORGANIZED WITH PARENTS AGAINST VIOLENCE AND DRUGS ($5,000).

Funded Amount:

$9,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK CITY LEGAL AID SOCIETY
199 WATER STREET
NEW YORK, NY 10038
(212) 577 – 3300

Name of Project Director:

SUSAN HENDRICKS

Purpose of Project:

TO ASSIST IN THE INDEEDITION OF CRIMINAL ACTIVITIES CONNECTED WITH POINTS OF ENTRY INTO THE U.S., INCLUDING DRUG AND CONTRABAND SMUGGLING.

Funded Amount:

$40,000

Requested By:

AUBRY, LENTOL, O’DONNELL, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK COUNTY DISTRICT ATTORNEY
1 HOGAN PLACE
NEW YORK, NY 10013
(212) 335 – 9000

Name of Project Director:

LEROY FRASER

Purpose of Project:

THESE FUNDS SHALL SUPPORT A PROGRAM TO FOCUS ON CORRUPT PRACTICES IN THE CONSTRUCTION INDUSTRY. FUNDING WILL PROVIDE FOR LEGAL, INVESTIGATIVE AND ANALYTICAL STAFF.

Funded Amount:

$131,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

NORTH AMITYVILLE TAXPAYERS ASSOCIATION, INC.
P.O. BOX 761
AMITYVILLE, NY 11701
(631) 789-8869

Name of Project Director:

EARL WILLIAMS

Purpose of Project:

FUNDS WILL BE USED FOR COSTS ASSOCIATED WITH A
NEIGHBORHOOD WATCH PROGRAM IN NORTH AMITYVILLE.

Funded Amount:

$10,000

Requested By:

SWEENEY

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

NORTHEAST BRONX ASSOCIATION, INC.
2325 VANCE STREET
BRONX, NY 10469
(718) 231-8569

Name of Project Director:

VINCENT PREZIOZO

Purpose of Project:

FUNDS WILL BE USED TO HELP LOWER CRIME BY REPORTING VIOLATIONS TO THE PRECINCTS, AS WELL AS, BEING A DETERRENT TO QUALITY OF LIFE VIOLATIONS BY INCREASING THE PRESENCE OF ANTICRIME MEASURES.

Funded Amount:

$3,000

Requested By:

RIVERA-N

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NOTTINGHAM ASSOCIATION, INC.
2821 KINGS HIGHWAY - APT. 10
BROOKLYN, NY 11229
(718) 253-2592

Name of Project Director:

HELEN ROSEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A NEIGHBORHOOD PATROL BY CAR THROUGHOUT THE COMMUNITY.

Funded Amount:

$3,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
NOTTINGHAM ASSOCIATION, INC.
2821 KINGS HIGHWAY, APT. 1-0
BROOKLYN, NY 11229
(718) 253-2592

BRUCE MCINTYRE

FUNDS WILL BE USED TO OFFSET THE COST OF MAINTENANCE OF SECURITY EQUIPMENT.

$3,000

CYMBROWITZ-S

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

NYC CENTER FOR EMPLOYMENT OPPORTUNITIES
32 BROADWAY, 15TH FLOOR
NEW YORK, NY 10004
(212) 422 – 4430

Name of Project Director:

MINDY S. TARLOW

Purpose of Project:

TO ENHANCE SERVICES AT THE CENTER FOR EMPLOYMENT OPPORTUNITIES.

Funded Amount:

$26,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

OGDEN POLICE DEPARTMENT
269 OGDEN CENTER ROAD
SPENCERPORT, NY 14559
(585) 352-2131

Name of Project Director:

DOUGLAS NORDQUIST

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT NEEDED TO REPLACE WORN HAND GUNS

Funded Amount:

$4,000

Requested By:

REILICH

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

ONTARIO COUNTY SHERIFF DEPARTMENT
74 ONTARIO STREET
CANANDAIGUA, NY 14424
(585) 394-4560

Name of Project Director:

PHILIP C. POVERO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A MOTORCYCLE TO CONTINUE WITH
ONTARIO COUNTY SHERIFF’S MOTOR CYCLE TRAFFIC ENFORCEMENT
PROGRAM

Funded Amount:

$10,000

Requested By:

ERRIGO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ORLEANS COUNTY SHERIFF
13925 ROUTE 31 WEST
ALBION, NY 14411
(585) 598-7000

Name of Project Director:

SCOTT HESS

Purpose of Project:

FUNDS WILL BE USED FOR A SECURE EVIDENCE STORAGE VAULT

Funded Amount:

$5,000

Requested By:

HAWLEY

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PARENTS FOR MEGAN'S LAW
1320 STONY BROOK ROAD, SUITE 201
STONY BROOK, NY 11790
(631) 689-2672

Name of Project Director:

LAURA AHEARN

Purpose of Project:

FUNDS WILL BE USED FOR THE CRIME VICTIM'S CENTER PROGRAM.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

PARENTS FOR MEGAN'S LAW
1320 STONY BROOK ROAD, SUITE 201
STONY BROOK, NY 11790
(631) 689-2672

Name of Project Director:

LAURA AHERN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS ASSOCIATED WITH THE CRIME VICTIM CENTER.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

PARENTS FOR MEGAN'S LAW  
1320 STONY BROOK ROAD, SUITE 201  
STONY BROOK, NY 11790  
(631) 689-2972

Name of Project Director:

LAURA AHEARN

Purpose of Project:

FUNDS WILL BE USED FOR CRIME VICTIM CENTER PROGRAM

Funded Amount:

$2,000

Requested By:

MCKEVITT

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PHILMONT POLICE DEPARTMENT
P.O. BOX 822, 824 MAIN STREET
PHILMONT, NY 12565
(518) 672-4000

Name of Project Director:

PAUL CALCAGNO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW RADIO EQUIPMENT

Funded Amount:

$5,000

Requested By:

MOLINARO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

PRISONERS' LEGAL SERVICES OF NEW YORK
118 PROSPECT STREET, SUITE 307
ITHACA, NY  14850
(212) 513−7373

Name of Project Director:

SUSAN JOHNSON

Purpose of Project:

TO PROVIDE FUNDING FOR SERVICES RENDERED BY PRISONER LEGAL SERVICES.

Funded Amount:

$2,285,000

Requested By:

ARROYO, AUBRY, BENJAMIN, BOYLAND, BRENNAN, CAMARA, CLARK, COOK, DIAZ−L, DIAZ−R, ESPAILLAT, FARRELL, GANTT, GORDON−D, GREENE, HEASTIE, HOOPER, JEFFRIES, LENTOL, LIFTON, MAISEL, MENG, ORTIZ, PEOPLES, PERALTA, PERRY, POWELL, PRETLOW, RAMOS, REILLY, RIVERA−J, RIVERA−N, ROBINSON, SCARBOROUGH, TITUS, TOWNS, WRIGHT

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

PUTNAM COUNTY SHERIFF’S DEPARTMENT
3 COUNTY CENTER
CARMEL, NY 10512
(845) 225-4300

Name of Project Director:

PETER CONVEREY

Purpose of Project:

FUNDS WILL BE USED FOR SEX OFFENDER WATCH SOFTWARE

Funded Amount:

$8,000

Requested By:

BALL

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007 – 2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:
QUEENS COUNTY DISTRICT ATTORNEY
125–01 QUEENS BOULEVARD
KEW GARDENS, NY  11415
(718) 286 – 6000

Name of Project Director:
EILEEN SULLIVAN, EXECUTIVE ASSISTANT DA

Purpose of Project:
TO PROVIDE FUNDING TO ASSIST THE QUEENS DISTRICT ATTORNEY IN EARLY CASE INTERVENTION.

Funded Amount:
$25,000

Requested By:
LAFAYETTE

Name of Administering State Agency:
DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:
QUEENS COUNTY DISTRICT ATTORNEY
125-01 QUEENS BOULEVARD
KEW GARDENS, NY 11415
(718) 286-6000

Name of Project Director:
EILEEN SULLIVAN, EXECUTIVE ASSISTANT DA

Purpose of Project:
TO ASSIST IN THE INTERDICTION OF CRIMINAL ACTIVITIES CONNECTED WITH POINTS OF ENTRY INTO THE U.S., INCLUDING DRUGS AND CONTRABAND SMUGGLING.

Funded Amount:
$140,000

Requested By:
LAFAYETTE

Name of Administering State Agency:
DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

RED HOOK POLICE DEPARTMENT  
7467 SOUTH BROADWAY  
RED HOOK, NY 12571  
(845) 758-1081

Name of Project Director:

CINDI COLE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF COMPUTERS

Funded Amount:

$5,000

Requested By:

MOLINARO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

RICHMOND HILL BLOCK ASSOCIATION, INC.
110-08 JAMAICA AVENUE
RICHMOND HILL, NY  11418
(718) 849-3795

Name of Project Director:

SIMCHA WAISMAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT COMMUNITY OUTREACH, ASSIST IN SOLVING PROBLEMS FOR THE RESIDENTS, HANDLING COMPLAINTS AND KEEPING THE BLOCK ASSOCIATION OFFICE FUNCTIONING.

Funded Amount:

$10,000

Requested By:

SEMINERIO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

ROCKLAND COUNTY SHERIFF'S DEPARTMENT
55 NEW HEMPSTEAD ROAD
NEW CITY, NY 10956
(845) 638-5400

Name of Project Director:

LOUIS FALCO

Purpose of Project:

FUNDS WILL BE USED FOR OFFENDER WATCH SOFTWARE

Funded Amount:

$2,500

Requested By:

CALHOUN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SANCTUARY FOR FAMILIES
PO BOX 1406, WALL STREET STATION
NEW YORK, NEW YORK 10268
(212) 349 – 6009

LAUREL W. EISNER, EXECUTIVE DIRECTOR

Funds shall be used to support victims of domestic violence by providing for legal assistance, counseling, advocacy, and shelter services.

$77,000

WEINSTEIN, SILVER

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

SCHENECTADY AVENUE BLOCK ASSOCIATION, INC.
1303 SCHENECTADY AVENUE
BROOKLYN, NY 11203
(718) 629-3363

Name of Project Director:

LAUREL FRASER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT ANTI-VIOLENCE ACTIVITIES FOR YOUTH IN THE E. FLATBUSH COMMUNITY AND OFFER ALTERNATE WAYS OF DEALING WITH CONFLICT. THE ACTIVITIES WILL LINK TENANT GROUPS AND CIVICS WITH LOCAL POLICE.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SCHUYLER COUNTY SHERIFF’S DEPARTMENT
105 NINTH STREET
WATKINS GLEN, NY 14891
(607) 535-8100

Name of Project Director:

WILLIAM YESSMAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF LAPTOP COMPUTERS FOR PATROL CARS

Funded Amount:

$10,000

Requested By:

O’MARA

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

SEVENTY-NINTH PRECINCT YOUTH COUNCIL, INC.
263 TOMPKINS AVENUE
BROOKLYN, NY 11216
(718) 636-6636

Name of Project Director:

TONY SAUNDERS

Purpose of Project:

FUNDS WILL BE USED TO DIVERT YOUTH FROM CRIMINAL BEHAVIOR, DRUG ABUSE AND RELATED PROBLEMS, ALSO TO FURTHER ENCOURAGE A POSITIVE RELATIONSHIP BETWEEN YOUTH, POLICE AND THE COMMUNITY.

Funded Amount:

$3,000

Requested By:

ROBINSON

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

SIMON WIESENTHAL CENTER
342 MADISON AVENUE, SUITE 1624
NEW YORK, NY  10173
(212) 370–0320

Name of Project Director:

RHONDA BARAD

Purpose of Project:

THESE FUNDS SHALL BE USED TO PROVIDE SERVICES AT THE SIMON WIESENTHAL CENTER, AND MAY ALSO BE USED TO SUPPORT THE PRODUCTION OF INTERACTIVE FILMS FOR THE NEW YORK TOLERANCE CENTER.

Funded Amount:

$170,000

Requested By:

AUBRY, DESTITO, KAVANAGH, LENTOL, SILVER, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

SUFFOLK COUNTY POLICE DEPARTMENT
30 YAPHANK AVENUE
YAPHANK, NEW YORK  11980
(631) 852 – 6000

Name of Project Director:

JOHN C. GALAGHER

Purpose of Project:

FUNDS WILL BE USED TO ALLOW THIS PROGRAM TO SERVE A TARGET POPULATION OR PROVIDE A TYPE OF SERVICE HERETOFORE NOT SERVED/PROVIDED AND ARE IN KEEPING WITH BYRNE PROGRAM GUIDELINES.

Funded Amount:

$100,000

Requested By:

AUBRY, DESTITO, LENTOL, SWEENEY, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

THE CORRECTIONAL ASSOCIATION  
135 EAST 15TH STREET  
NEW YORK, NY 10003  
(212) 254 – 5700

Name of Project Director:

ROBERT GANGI, EXECUTIVE DIRECTOR

Purpose of Project:

THESE FUNDS SHALL SUPPORT THE OPERATION OF THE PRISON VISITING PROJECT, TO MONITOR THE CONDITIONS OF PRISONS IN NEW YORK STATE AND REPORT FINDINGS TO POLICYMAKERS AND THE GENERAL PUBLIC.

Funded Amount:

$50,000

Requested By:

AUBRY, LENTOL

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:
THE CORRECTIONAL ASSOCIATION OF NEW YORK
135 EAST 15TH STREET
NEW YORK, NY 10003
(212) 254 – 5700

Name of Project Director:
ROBERT GANGI, EXECUTIVE DIRECTOR

Purpose of Project:
TO STUDY ISSUES AFFECTING WOMEN IN THE NYS PRISON SYSTEM AND TO RECOMMEND POLICY CHANGES TO IMPROVE THE EFFECTIVENESS OF PROGRAMMING THAT AFFECTS WOMEN OFFENDERS.

Funded Amount:
$59,000

Requested By:
AUBRY, LENTOL

Name of Administering State Agency:
DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

THE LEGAL AID SOCIETY
199 WATER STREET
NEW YORK, NY 10038
(212) 577 – 3300

Name of Project Director:

STEVEN BANKS

Purpose of Project:

THESE FUNDS SHALL BE USED TO PROVIDE LEGAL SERVICES AND DEFENSE BASED ADVOCACY SERVICES TO INDIGENT PERSONS IN THE CITY OF NEW YORK.

Funded Amount:

$485,000

Requested By:

AUBRY, DESTITO, LENTOL, O’DONNELL, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

THE LEGAL AID SOCIETY
199 WATER STREET
NEW YORK, NY 10038
(212) 577 – 3300

Name of Project Director:

STEVEN BANKS, ATTORNEY – IN – CHIEF

Purpose of Project:

THESE FUNDS SHALL BE USED TO PROVIDE FOR THE CONTINUED OPERATION OF THE MENTALLY ILL INMATE PROJECT.

Funded Amount:

$273,700

Requested By:

AUBRY, DESTITO, LENTOL, O’DONNELL, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

THE OSBORNE ASSOCIATION, INC.
135 EAST 15TH STREET
NEW YORK, NY  10003
(212) 673 – 6633

Name of Project Director:

ELIZABETH GAYNES

Purpose of Project:

THESE FUNDS SHALL BE USED FOR DEFENDER–BASED ADVOCACY FOR ALTERNATIVES TO INCARCERATION AND MAY ALSO BE USED TO SUPPORT LEGAL SERVICES FOR JUVENILE AND YOUTHFUL OFFENDERS.

Funded Amount:

$407,300

Requested By:

AUBRY, LENTOL

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

    TOWN OF CAMILLUS, POLICE DEPARTMENT
    4600 WEST GENESEE STREET
    CAMILLUS, NY 13031
    (315) 487-0102

Name of Project Director:

    THOMAS WINN

Purpose of Project:

    FUNDS WILL BE USED FOR NEW POLICE EQUIPMENT

Funded Amount:

    $20,000

Requested By:

    BARCLAY

Name of Administering State Agency:

    DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

TOWN OF EAST FISHKILL POLICE DEPARTMENT
2468 ROUTE 52
HOPEWELL JUNCTION, NY 12533
(845) 221-2111

Name of Project Director:

BRIAN NICHOLS

Purpose of Project:

FUNDS WILL BE USED TO ACQUIRE LASER OPERATED ACCIDENT INVESTIGATION EQUIPMENT

Funded Amount:

$7,000

Requested By:

MOLINARO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

TOWN OF EAST GREENBUSH
225 COLUMBIA TURNPIKE
RENSSELAER, NY 12144
(518) 477-4527

Name of Project Director:

TIM MCLAUGHLIN/JIM CONDO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MOBILE COMPUTERS, SOFTWARE, AND RELATED ITEMS FOR THE POLICE DEPARTMENT TO OPERATE EFFECTIVELY.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

TOWN OF HYDE PARK POLICE DEPARTMENT
1433 9G
HYDE PARK, NY 12538
(845) 229-5062

Name of Project Director:

JAMES MCKENNA

Purpose of Project:

FUNDS WILL BE USED FOR TRAFFIC RADAR TRAILER SMART-LP

Funded Amount:

$5,000

Requested By:

MILLER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

TOWN OF LLOYD POLICE DEPARTMENT
12 CHURCH STREET
HIGHLAND, NY 12528
(845) 691-2144

Name of Project Director:

BOB SHEPARD

Purpose of Project:

FUNDS WILL BE USED FOR LICENSE PLATES AND SCANNERS FOR THE POLICE DEPARTMENT

Funded Amount:

$10,500

Requested By:

KIRWAN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

TOWN OF POUGHKEEPSIE POLICE DEPARTMENT
19 TUCKER DRIVE
POUGHKEEPSIE, NY 12601
(845) 485-3666

Name of Project Director:

DONALD WILKINSON

Purpose of Project:

FUNDS WILL BE USED FOR MOBILE DATA TERMINAL SYSTEM AND VEHICLE REPLACEMENT/EQUIPMENT

Funded Amount:

$13,500

Requested By:

MILLER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

TOWN POLICE OF FISHKILL
801 ROUTE 52
FISHKILL, NY 12524
(845) 831-1110

Name of Project Director:

DONALD WILLIAMS

Purpose of Project:

FUNDS WILL BE USED FOR DECATUR GEMINI PLUS II IN CAR VIDEO SYSTEM

Funded Amount:

$5,000

Requested By:

MILLER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

ULSTER COUNTY SHERIFF'S OFFICE
380 BOULEVARD
KINGSTON, NY 12401
(845) 338-3640

Name of Project Director:

SARGEANT TIMOTHY E. MCGUIRE

Purpose of Project:

FUNDS WILL BE USED TO AID IN IMPLEMENTING "OFFENDER WATCH" AN
INTERNET BASED PROGRAM DESIGNED TO PROFILE AND TRACK
REGISTERED LEVEL THREE SEXUAL PREDATORS.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

VERA INSTITUTE OF JUSTICE
233 BROADWAY, 12TH FLOOR
NEW YORK, NY 10279
(212) 334–1300

Name of Project Director:

MEGAN GOLDEN

Purpose of Project:

FUNDS SHALL BE USED TO SUPPORT A PROGRAM WHICH SEeks TO REDUCE LEVELS OF JUVENILE DETENTION AND TO OTHERWISE IMPROVE PUBLIC SAFETY OUTCOMES FOR YOUTHS INVOLVED WITH THE JUSTICE SYSTEM.

Funded Amount:

$92,685

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

VERA INSTITUTE OF JUSTICE
233 BROADWAY, 12TH FLOOR
NEW YORK, NY 10279
(212) 334 – 1300

Name of Project Director:

MEGAN GOLDEN

Purpose of Project:

THESE FUNDS SHALL SUPPORT CASE MANAGEMENT AND TRAINING FOR 16 – 18 YEARS OLDS EMERGING FROM RIKER’S ISLAND. THESE FUNDS MAY ALSO PROVIDE FOR AN EVALUATION OF PROGRAMS WHICH PROVIDE SERVICES TO THIS POPULATION OF OFFENDERS.

Funded Amount:

$49,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

VICTIMS INFORMATION BUREAU OF SERVICES  
P.O. BOX 5483  
HAUPPAUGE, NY 11788  
(631) 360-3730

Name of Project Director:

PAMELA JOHNSTON

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM DEVELOPMENT

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF ELMIRA HEIGHTS POLICE DEPARTMENT
215 ELMWOOD AVENUE
ELMIRA, NY 14903
(607) 733-6580

Name of Project Director:

A.R. CHURCHES

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF TASERS AND TRAINING

Funded Amount:

$6,500

Requested By:

O’MARA

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

VILLAGE OF FISHKILL POLICE DEPARTMENT
1095 MAIN STREET
FISHKILL, NY 12524
(845) 897-4430

Name of Project Director:

PETER PHILLIPS

Purpose of Project:

FUNDS WILL BE USED FOR 3 AED UNITS/PEDIATRIC ELECTRODE KITS

Funded Amount:

$5,000

Requested By:

MILLER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
VILLAGE OF FLORIDA POLICE DEPARTMENT
P.O. BOX 505
FLORIDA, NY 10921
(845) 651-7800

JOHN CARR

FUNDS WILL BE USED FOR SECURITY CAMERAS AT RESERVOIRS

$4,524

RABBITT

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

VILLAGE OF GREENWOOD LAKE POLICE DEPARTMENT
CHURCH STREET, P.O. BOX 7
GREENWOOD LAKE, NY 10925
(845) 477-9215

Name of Project Director:

PAUL BARASEL

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE COMPUTER SYSTEM

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

VILLAGE OF KENMORE
2919 DELAWARE AVENUE
KENMORE, NY  14217
(716) 873-5700

Name of Project Director:

CHIEF CARL LACORTE

Purpose of Project:

FUNDS WILL BE USED TO ACQUIRE A NEW LIVE SCAN FINGERPRINT DEVICE, A NEW BOOKING PERSONAL COMPUTER AND RELATED SERVICES.

Funded Amount:

$18,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

VILLAGE OF LARCHMONT
120 LARCHMONT AVENUE
LARCHMONT, NY    10538
(914) 834-6230

Name of Project Director:

CHIEF STEPHEN RUBE0

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF UPGRADED TECHNOLOGY FOR A LIVE SCAN FINGERPRINT SCANNER TO FACILITATE CRIME PREVENTION AND EFFECTIVE UTILIZATION OF RESOURCES.

Funded Amount:

$5,000

Requested By:

LATIMER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VILLAGE OF MAMARONECK POLICE DEPARTMENT
169 MT. PLEASANT AVENUE
MAMARONECK, NY 10543
(914) 777-7797

Name of Project Director:

SGT. REGAN KELLY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MILITARY COMBAT HELMETS FOR NIGHT VISION RESPONSES.

Funded Amount:

$8,500

Requested By:

LATIMER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

VILLAGE OF WAPPINGERS POLICE DEPARTMENT
2628 SOUTH AVENUE
WAPPINGERS FALLS, NY 12590
(845) 297-1011

Name of Project Director:

JAMES WOHLRAB

Purpose of Project:

FUNDS WILL BE USED FOR CONSOLE EQUIPMENT UPGRADE

Funded Amount:

$5,000

Requested By:

MILLER

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

WALLKILL POLICE DEPARTMENT
600 ROUTE 211 EAST, P.O. BOX 398
MIDDLETOWN, NY 10940
(845) 692-7800

Name of Project Director:

ROBERT HERTMAN

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT FOR OFFICE OF EMERGENCY MANAGEMENT ROOM

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

WESTCHESTER COUNTY
148 MARTINE AVENUE
WHITE PLAINS, NY  10601
(914) 864-7710

Name of Project Director:

TOM BELFIORE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND TRAINING OF TWO DOGS FOR THE WESTCHESTER COUNTY DEPARTMENT OF PUBLIC SAFETY.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

WESTCHESTER COUNTY POLICE OFFICERS BENEVOLENT ASSOCIATION, INC.
P.O. BOX 27
HAWTHORNE, NY 10532
(914) 864-7815

Name of Project Director:

MICHAEL HAGAN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE ADMINISTRATION OF THE EXPLORER PROGRAM, INCLUDING EDUCATIONAL MATERIALS, CLASSROOM EQUIPMENT AND UNIFORMS.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

WESTSIDE CRIME PREVENTION PROGRAM, INC.
893 AMSTERDAM AVENUE
NEW YORK, NY  10025
(212) 866-8603

Name of Project Director:

MARJORIE COHEN

Purpose of Project:

FUNDS WILL BE USED FOR THE ACT PROJECT, A PROGRAM THAT WILL ASSIST COMMUNITY RESIDENTS WITH CRIME AND SAFETY ISSUES.

Funded Amount:

$4,500

Requested By:

O'DONNELL

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

WESTSIDE CRIME PREVENTION PROGRAM, INC.
893 AMSTERDAM AVENUE
NEW YORK, NY 10025
(212) 866-8603

Name of Project Director:

MARJORIE A. COHEN

Purpose of Project:

FUNDS WILL BE USED FOR CRIME PREVENTION PROGRAMS IN CHELSEA.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

WOODHAVEN RESIDENTS BLOCK ASSOCIATION, INC.
84-20 JAMAICA AVENUE
WOODHAVEN, NY 11421
(718) 296-3735

Name of Project Director:

MARIA THOMSON

Purpose of Project:

FUNDS WILL BE USED FOR THE SECURITY PATROL WHICH EFFECTIVELY REDUCES CRIME AND DRUG RELATED PROBLEMS WITH THE COMMUNITY BY MAINTAINING VOLUNTEER NEIGHBORHOOD SECURITY AND PATROLS.

Funded Amount:

$5,000

Requested By:

SEMINERIO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

YONKERS POLICE BENEVOLENT ASSOCIATION
104 SOUTH BROADWAY
YONKERS, NY 10701
(914) 377-7371

Name of Project Director:

EDDIE ARMOUR

Purpose of Project:

FUNDS WILL BE USED FOR PROMOTING "OPERATION SAFE CHILD"

Funded Amount:

$5,000

Requested By:

SPANO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

YONKERS POLICE CAPTAINS, LIEUTENANT & SERGEANTS ASSOCIATION
104 SOUTH BROADWAY
YONKERS, NY 10701
(914) 494-4046

Name of Project Director:

JOHN MUELLER

Purpose of Project:

FUNDS WILL BE USED FOR PROMOTING "OPERATION SAFE CHILD"

Funded Amount:

$2,500

Requested By:

SPANO

Name of Administering State Agency:

DIVISION OF CRIMINAL JUSTICE SERVICES
Legal Name, Address, and Telephone Number:

ADAPTIVE DESIGN ASSOCIATION
98 RIVERSIDE DRIVE
NEW YORK, NY  10024
(212) 904 – 1200

Name of Project Director:

ALEX TRUESDELL

Purpose of Project:

TO PROVIDE SUPPORT FOR JOB DEVELOPMENT SERVICES FOR WOMEN OFFENDERS IN TRANSITION FROM A CORRECTIONAL INSTITUTION TO COMMUNITY LIVING.

Funded Amount:

$49,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

CENTER FOR COMMUNITY ALTERNATIVES
115 E. JEFFERSON STREET, SUITE 300
SYRACUSE, NY  13202
(315) 422 – 5638

Name of Project Director:

MARSHA WEISSMAN

Purpose of Project:

TO PROVIDE FUNDING SUPPORT FOR THE DEVELOPMENT OF ALTERNATIVES TO INCARCERATION SERVICE PLANS.

Funded Amount:

$66,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

CENTER FOR COMMUNITY ALTERNATIVES
115 EAST JEFFERSON STREET, SUITE 300
SYRACUSE, NY  13202
(315) 422 – 5638

Name of Project Director:

MARSHA WEISSMAN

Purpose of Project:

TO ENHANCE SERVICES PROVIDED THROUGH THE CROSSROADS PROGRAM.

Funded Amount:

$174,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

DPCA – ATI DEMONSTRATION PROJECTS
80 WOLF ROAD
ALBANY, NY 12205
(518) 485 – 5145

Name of Project Director:

HOWARD BANCROFT

Purpose of Project:

TO PROVIDE A SUPPLEMENT FOR LOCALLY BASED ATI PROGRAMS OPERATED BY NOT – FOR – PROFITS AND MUNICIPALITIES TO BE ALLOCATED PROPORTIONALLY BASED ON CURRENT FUNDING FOR SUCH PROGRAMS.

Funded Amount:

$550,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

EDUCATION & ASSISTANCE CORPORATION, INC.
80 – 20 KEW GARDENS ROAD STE 203
KEW GARDENS, NY 11415
(718) 268 – 5657

Name of Project Director:

SUSAN TIMLER

Purpose of Project:

TO PROVIDE FUNDING FOR ENHANCED SERVICES AT THE QUEENS TASC PROGRAM.

Funded Amount:

$66,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:
GREENHOPE SERVICES FOR WOMEN, INC.
448 EAST 119TH STREET
NEW YORK, NY 10035
(212) 369 – 5100

Name of Project Director:
ANNE ELLIOTT, PHD, EXECUTIVE DIRECTOR

Purpose of Project:
TO PROVIDE FUNDING SUPPORT FOR RESIDENTIAL AND TREATMENT SERVICES FOR WOMEN OFFENDERS.

Funded Amount:
$147,000

Requested By:
AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:
PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

NYC CENTER FOR ALTERNATIVE SENTENCING & EMPLOYMENT SERVICES
346 BROADWAY, 3RD FLOOR WEST
NEW YORK, NY 10013
(212) 732 – 0076

Name of Project Director:

JOEL COPPERMAN

Purpose of Project:

TO PROVIDE FUNDING FOR ENHANCEMENT AND/OR EXPANSION OF ALTERNATIVES TO INCARCERATION PROGRAMMING.

Funded Amount:

$138,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

NYC FORTUNE SOCIETY, INC.
39 WEST 19TH STREET
NEW YORK, NY  10011
(212) 206 – 7070

Name of Project Director:

JOANNE PAGE

Purpose of Project:

FOR SUPPORT OF PROGRAMS AND SERVICES USED AS ALTERNATIVES TO INCARCERATION.

Funded Amount:

$180,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
SFY 2007 – 2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYC WOMEN’S PRISON ASSOCIATION AND HOME, INC.
110 SECOND AVENUE
NEW YORK, NY 10003
(212) 674 – 1163

Name of Project Director:

ANN JACOBS

Purpose of Project:

TO SUPPORT AND ENHANCE SERVICES PROVIDED BY THE WOMEN’S PRISON ASSOCIATION.

Funded Amount:

$179,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NEW YORK
230 WEST 41ST STREET
NEW YORK, NY 10036
(212) 484 – 1327

Name of Project Director:

BENAY RUBENSTEIN, DIRECTOR

Purpose of Project:

THESE FUNDS SHALL BE USED TO SUPPORT "THE COLLEGE INITIATIVE", ADMINISTERED BY THE PRISONER REENTRY INSTITUTE AT THE JOHN JAY SCHOOL OF CRIMINAL JUSTICE.

Funded Amount:

$50,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

TASC OF THE CAPITAL DISTRICT, INC.
87 COLUMBIA STREET
ALBANY, NY  12210
(518) 465−1455

Name of Project Director:

JOANNE SCHLANG

Purpose of Project:

TO SUPPORT ENHANCEMENTS OF ALTERNATIVES TO INCARCERATION SERVICES PROVIDED BY CAPITAL DISTRICT TASC.

Funded Amount:

$285,631

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

THE OSBORNE ASSOCIATION, INC.
135 EAST 15TH STREET
NEW YORK, NY  10003
(212) 673 – 6633

Name of Project Director:

ELIZABETH GAYNES

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE EL RIO SUBSTANCE ABUSE TREATMENT PROGRAM, WHICH PROVIDES AN ALTERNATIVE TO INCARCERATION.

Funded Amount:

$131,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

ULSTER COUNTY COMMUNITY CORRECTIONS
63 GOLDEN HILL DRIVE
KINGSTON, NY 12401
(914) 340–3330

Name of Project Director:

PAUL NOBLE

Purpose of Project:

TO PROVIDE SUPPORT FOR THE PROVISION OF ALTERNATIVES TO INCARCERATION SERVICES FOR MEN AND WOMEN WHO HAVE COMMITTED CRIMES AND HAVE SUBSTANCE ABUSE PROBLEMS.

Funded Amount:

$131,000

Requested By:

AUBRY, DESTITO, LENTOL, WEINSTEIN

Name of Administering State Agency:

PROBATION AND CORRECTIONAL ALTERNATIVES, DIVISION OF
Legal Name, Address, and Telephone Number:

2460 ADAM CLAYTON POWELL BLVD. ASSOCIATION, INC.
270 WEST 136TH STREET
NEW YORK, NY  10030
(212) 234-4391

Name of Project Director:

DAZIVEDO A. WATSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HOUSING ADVOCACY AND SERVICES THROUGHOUT HARLEM.

Funded Amount:

$5,000

Requested By:

WRIGHT

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

ASIAN AMERICANS FOR EQUALITY, INC.
108-110 NORFOLK STREET
NEW YORK, NY  10002
(212) 680-1374

Name of Project Director:

CHRISTOPHER KUI

Purpose of Project:

FUNDS WILL BE USED TO ASSIST LOW-INCOME AND HOMELESS INDIVIDUALS AND FAMILIES IN QUEENS IN ACCESSING SERVICES AND AFFORDABLE HOUSING.

Funded Amount:

$7,500

Requested By:

AUBRY

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

ASSOCIATION OF RIVERDALE COOPERATIVES
523 WEST 238TH STREET
BRONX, NY  10403
(718) 548-5604

Name of Project Director:

DR. STEVEN BENARDO

Purpose of Project:

FUNDS WILL BE USED TO SPONSOR COMMUNITY FORUMS FOR BRONX RESIDENTS.

Funded Amount:

$5,000

Requested By:

DINOWITZ

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

ASTORIA HOUSES TENANT ASSOCIATION
2-10 27TH AVENUE
ASTORIA, NY  11102
(718) 204-5046

Name of Project Director:

BRIAN HONAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SUPPLIES AND EQUIPMENT NECESSARY TO OPERATE THE TENANTS ASSOCIATION.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BEDFORD CENTRAL COMMUNITY DEVELOPMENT CORPORATION, INC.
1200 DEAN STREET
BROOKLYN, NY 11216
(718) 467-0740

Name of Project Director:

WAYNE DEVONISH

Purpose of Project:

FUNDS WILL BE USED FOR THE HOME BUYER SEMINAR SERIES WHICH ALLOWS LOW-MIDDLE INCOME PERSONS OR FAMILIES THE OPPORTUNITY TO GAIN INFORMATION ON HOME PURCHASING AND TO ACQUIRE PRE-QUALIFICATION COMMITMENTS FROM PRIME LISTING INSTITUTIONS.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:
BEDFORD-STUYVESANT COMMUNITY LEGAL SERVICES, CORPORATION
1360 FULTON STREET, 3RD FLOOR
BROOKLYN, NY 11216
(718) 233-6400

Name of Project Director:
JUDGE BETTE E. STATON

Purpose of Project:
FUNDS WILL BE USED TO PROVIDE LEGAL REPRESENTATION FOR BEDFORD
STUYVESANT AND CROWN HEIGHTS RESIDENTS WITH HOUSING AND/OR
LANDLORD-TENANT ISSUES.

Funded Amount:
$5,000

Requested By:
JEFFRIES

Name of Administering State Agency:
DIVISION OF HOUSING AND COMMUNITY RENEWAL
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BENSONHURST COUNCIL OF JEWISH ORGANIZATIONS, INC.
8635 21 AVENUE, SUITE 1B
BROOKLYN, NY 11214
(718) 333-1834

Name of Project Director:

SHIRLEY FINEMAN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST TENANTS AND THE NEEDY WITH HOUSING PROBLEMS INCLUDING SENIOR HOUSING, SCRIE, SECTION 8, ETC. THIS PROGRAM IS OPEN TO ALL MEMBERS OF THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

COLTON

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BETTER NEIGHBORHOODS, INC.
986 ALBANY STREET
SCHENECTADY, NY 12307
(518) 372-6469

Name of Project Director:

EDWARD AUGUST

Purpose of Project:

FUNDS WILL BE USED FOR ASSISTING INDIVIDUALS IN MEETING HOUSING NEEDS INCLUDING MORTGAGE FORECLOSURE PREVENTION AND INCREASE RESIDENTIAL HOMEOWNERSHIP

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BRIGHTON NEIGHBORHOOD ASSOCIATION, INC.
1121 BRIGHTON BEACH AVENUE
BROOKLYN, NY 11235
(718) 891-0800

Name of Project Director:

PAT SINGER

Purpose of Project:

FUNDS WILL BE USED TO KEEP STOREFRONT OFFICE OPEN TO THE PUBLIC FIVE DAYS A WEEK AND SOMETIMES EVENINGS TO ACT ON COMPLAINTS FROM LOCAL RESIDENTS.

Funded Amount:

$5,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BRONX NORTH ASSOCIATION OF RESIDENT COUNCILS, INC.
625 CASTLE HILL AVENUE
BRONX, NY 10473
(718) 828-4518

Name of Project Director:

GERALDINE B. LAMB

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS AND ACTIVITIES THAT ENHANCE THE QUALITY OF LIFE AND PARTICIPATION OF ALL RESIDENTS OF PUBLIC HOUSING.

Funded Amount:

$8,000

Requested By:

RIVERA-P

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BROOKLYN COMMUNITY AND HOUSING SERVICES, INC.
105 CARLTON AVENUE
BROOKLYN, NY 11205
(718) 625-4545

Name of Project Director:

DORIS CLARK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE HOUSING PROGRAM AT CARLTON AVENUE.

Funded Amount:

$1,500

Requested By:

LENTOL

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BROOKLYN HOUSING AND FAMILY SERVICES, INC.
415 ALBEMARLE ROAD
BROOKLYN, NY  11218-2351
(718) 435-7701

Name of Project Director:

LARRY JAYSON

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE PROVIDING HOUSING SERVICES TO LOW AND MODERATE INCOME RESIDENTS OF BROOKLYN TO PREVENT HOMLESSNESS.

Funded Amount:

$5,000

Requested By:

MILLMAN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BROOKLYN HOUSING AND FAMILY SERVICES, INC.
415 ALBERMARLE ROAD
BROOKLYN, NY 11218
(718) 435-7701

Name of Project Director:

LARRY JAYSON

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE HOMELESSNESS PREVENTION AND HOUSING PRESERVATION THROUGH ADVOCACY.

Funded Amount:

$8,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKLYN HOUSING AND FAMILY SERVICES, INC.
415 ALBEMARLE ROAD
BROOKLYN, NY 11218
(718) 435-7701

Name of Project Director:

LARRY JAYSON

Purpose of Project:

FUNDS WILL BE USED TO FOSTER ECONOMIC DEVELOPMENT THROUGH THE IMPROVEMENT OF HOUSING STOCK AND BY ACCESSING CITY SERVICES.

Funded Amount:

$4,012

Requested By:

BRENNAN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BROOKLYN HOUSING AND FAMILY SERVICES, INC.
415 ALBEMARLE ROAD
BROOKLYN, NY 11218
(718) 435-7584

Name of Project Director:

LARRY JAYSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PROGRAMS ON HOUSING EDUCATION AND EVICTION PREVENTION TO RESIDENTS OF BROOKLYN.

Funded Amount:

$2,000

Requested By:

PERRY

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BROOKLYN HOUSING AND FAMILY SERVICES, INC.
415 ALBERMARLE ROAD
BROOKLYN, NY 11218
(718) 435-7701

Name of Project Director:

LARRY JAYSON

Purpose of Project:

BROOKLYN TENANT'S COUNCIL WILL DELIVER A WELL INTEGRATED PROGRAM WITHIN THE NEIGHBORHOOD WHICH WILL FOSTER ECONOMIC DEVELOPMENT THROUGH THE IMPROVEMENT OF HOUSING STOCK IN DELIVERY OF CITY SERVICES.

Funded Amount:

$5,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKLYN HOUSING AND FAMILY SERVICES, INC.
415 ALBERMARLE ROAD
BROOKLYN, NY  11218
(718) 836-2687

Name of Project Director:

LARRY JAYSON

Purpose of Project:

FUNDS WILL BE USED TO PREVENT THE DETERIORATION OF BUILDINGS THROUGHOUT BROOKLYN NEIGHBORHOODS CAUSED BY NEGLECT AND ABANDONMENT. THE PROGRAM WILL ASSIST THE TENANTS OF THESE BUILDINGS.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BROOKLYN TENANTS COUNCIL, INC.
415 ALBERMARLE ROAD
BROOKLYN, NY  11218
(718) 435-7585

Name of Project Director:

LARRY JAYSON

Purpose of Project:

FUNDS WILL BE USED TO DEFEND AND PRESERVE THE LOW AND MODERATELY PRICED MULTIPLE DWELLINGS IN BROOKLYN, AS WELL AS, TO DEFEND AND PROTECT THE RESIDENTS OF THESE MULTIPLE DWELLINGS FROM DISPLACEMENT AND HOMELESSNESS.

Funded Amount:

$10,000

Requested By:

JACOBS

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

BUFFALO REUSE, INC.
P.O. BOX 1132
BUFFALO, NY  14213
(716) 949-0900

Name of Project Director:

MICHAEL GAINER

Purpose of Project:

FUNDS WILL BE USED FOR THE START-UP OF A DECONSTRUCTION ORGANIZATION WHICH DISASSEMBLES BUILDINGS AND MODIFIES ITS PARTS TO SERVE NEW PURPOSES.

Funded Amount:

$6,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

CAZENOVIA AREA COMMUNITY DEVELOPMENT ASSOCIATION, INC.
7 NICKERSON STREET
CAZENOVIA, NY 13035
(315) 655-7651

Name of Project Director:

BARBARA HENDERSON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTER EQUIPMENT, SOFTWARE, AND BROCHURES.

Funded Amount:

$5,000

Requested By:

MAGEE

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

MARIE TORNIALI

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROVIDING HOUSING SERVICES TO THE ASTORIA COMMUNITY.

Funded Amount:

$4,500

Requested By:

MARKEY

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

CENTRAL ASTORIA LOCAL DEVELOPMENT COALITION, INC.
28-37 STEINWAY STREET
ASTORIA, NY 111023
(718) 728-7820

Name of Project Director:

MARK TORNIALI

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE PUBLICATION OF AN INFORMATION BOOKLET ON RESIDENTIAL LEASING AND RENT STABILIZATION AND CONTROL IN NYC.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

CITY WIDE TASK FORCE ON HOUSING COURT, INC.
125 MAIDEN LANE, 3RD FLOOR
NEW YORK, NY  10036
(212) 962-4266

Name of Project Director:

LOUISE SEELEY

Purpose of Project:

FUNDS WILL BE USED TO ASSIST TENANTS WITH HOUSING PROBLEMS AND REPRESENT THEM IN HOUSING COURTS.

Funded Amount:

$5,000

Requested By:

KAVANAGH

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

COMMUNITY LAND TRUST OF SCHENECTADY, INC.
1677 VAN VRANKEN AVENUE
SCHENECTADY, NY 12308
(518) 372-7616

Name of Project Director:

BEVERLY R. BURNETT

Purpose of Project:

FUNDS WILL BE USED TO REVITALIZE NEIGHBORHOODS AND IMPROVE THE QUALITY OF LIFE IN THE CITY OF SCHENECTADY BY PROVIDING HOMEOWNERSHIP OPPORTUNITIES

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

COOPER SQUARE COMMITTEE FISCAL CONDUCT OF SHALOM TENANTS ALLIANCE
61 EAST 4TH STREET
NEW YORK, NY 10003
(212) 228-8210

Name of Project Director:

STEVEN HERRICK

Purpose of Project:

FUNDS WILL BE USED TO EXPAND SERVICES WHICH ASSIST TENANTS WITH EVICTIONS AND DISPLACEMENT, AS WELL AS, PRESERVE AFFORDABLE HOUSING.

Funded Amount:

$2,000

Requested By:

O'DONNELL

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

COOPER SQUARE COMMUNITY DEVELOPMENT COMMITTEE AND BUSINESSMEN’S ASSOC., INC.
61 EAST 4TH STREET
NEW YORK, NY 10003
(212) 228-8210

Name of Project Director:

STEVE HERRICK

Purpose of Project:

FUNDS WILL BE USED TO STAFF WEEKLY SITE MEETINGS FOR THE SUPPORTIVE HOUSING PROJECT FOR PEOPLE WITH PSYCHIATRIC DISABILITIES, AND TO STAFF THE MAIN STREET PROJECT WHICH PROVIDES CAPITAL FUNDS TO FIVE CULTURAL BUILDINGS ON EAST 4TH STREET.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

COOPER SQUARE COMMUNITY DEVELOPMENT COMMITTEE AND BUSINESSMEN’S ASSOC., INC.
61 EAST 4TH STREET
NEW YORK, NY 10003
(212) 228-8210

Name of Project Director:

STEVEN M. HERRICK

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE SHALOM TENANTS ALLIANCE’S REACH TO OTHER TENANTS, PREVENT EVICTIONS AND DISPLACEMENT OF RENT REGULATED TENANTS, AS WELL AS TO PRESERVE AFFORDABLE HOUSING IN 14 NY STATE ASSEMBLY DISTRICTS.

Funded Amount:

$2,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

COUNCIL OF NEIGHBORHOOD ORGANIZATIONS, INC.
3911 FORT HAMILTON PARKWAY
BROOKLYN, NY 11218
(718) 853-0100

Name of Project Director:

VINCENT ACETA

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH AND COUNSELING OF CITIZENS REGARDING HOUSING, SCRIE, HEAP, AND OTHER RESIDENTIAL ASSISTANCE SERVICES.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

COUNCIL OF NEIGHBORHOOD ORGANIZATIONS, INC.
3911 FORT HAMILTON PARKWAY
BROOKLYN, NY   11218
(718) 853-0100

Name of Project Director:

VINCENT ACCETTA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A FULL SERVICE OF NEIGHBORHOOD PRESERVATION AND ASSISTANCE DIRECTLY AND INDIRECTLY WITH HOMEOWNERS, TENANTS, BUSINESS AND COMMUNITY GROUPS. ASSISTANCE WITH SCRIP APPLICATIONS, TENANT/LANDLORD PROBLEMS AND BUILDING RENOVATIONS ARE ALSO PROVIDED.

Funded Amount:

$5,000

Requested By:

ABBATE, HIKIND

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

CROWN HEIGHTS JEWISH COMMUNITY COUNCIL, INC.
387 KINGSTON AVENUE
BROOKLYN, NY 11225
(718) 778-8808

Name of Project Director:

SARA KARASIK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ASSISTANCE TO FAMILIES IN STRESS AND IN DANGER OF BECOMING DYSFUNCTIONAL AND/OR ABUSIVE. WITH EARLY INTERVENTION AND THE GUIDANCE OF TRAINED STAFF AND VOLUNTEERS, FAMILIES BECOME BETTER FUNCTIONING. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$64,000

Requested By:

CAMARA

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

DEERFIELD TENANT ASSOCIATION, INC.
676 RIVERSIDE DRIVE, #4FF
NEW YORK, NY  10031
(917) 270-4862

Name of Project Director:

LORRAINE NIXON

Purpose of Project:

FUNDS WILL BE USED TO ENABLE TENANT ACTIVISM, SELF-HELP, AND PROTECTION.

Funded Amount:

$2,500

Requested By:

WRIGHT

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

EIS - EVICTION INTERVENTION SERVICES HOMELESS PREVENTION, INC.
150 EAST 62ND STREET
NEW YORK, NY  10021
(212) 308-2210

Name of Project Director:

KAREN INGENTHRON

Purpose of Project:

FUNDS WILL BE USED TO PROTECT AND PRESERVE AFFORDABLE HOUSING
AND THE QUALITY OF LIFE FOR THE ELDERLY RESIDENTS OF MANHATTAN’S
EASTSIDE. THIS PROGRAM REDUCES THE LIKELIHOOD OF HOMELESSNESS
BY PREVENTING EVICTION.

Funded Amount:

$15,000

Requested By:

GRANNIS

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
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 SUPPORT HOUSING PROGRAMS THAT IMPROVE
AND MAINTAIN QUALITY OF LIFE IN NEIGHBORHOODS AND FOR
COMMUNITY OUTREACH PROGRAMS.

Funded Amount:

$25,000

Requested By:

JACOBS

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

ERASMUS NEIGHBORHOOD FEDERATION, INC.
814 ROGERS AVENUE
BROOKLYN, NY 11226-3606
(718) 462-7700

Name of Project Director:

YVES VILUS

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT COMMUNITY HOUSING PROGRAMS
WHICH DEAL WITH PREDATORY LENDING AND SENIORS.

Funded Amount:

$4,000

Requested By:

CAMARA

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FAMILY RESIDENCES AND ESSENTIAL ENTERPRISES, INC.
191 SWEET HOLLOW ROAD
OLD BETHPAGE, NY  11804
(516) 870-1600

Name of Project Director:

PATRICE RADOWITZ

Purpose of Project:

FUNDS WILL BE USED TO MAKE DESPERATELY NEEDED IMPROVEMENTS TO PROTECT CONSUMERS AND PRESERVE LANDSCAPE OF THE COMMUNITY.

Funded Amount:

$2,000

Requested By:

ALESSI

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

MICHELLE DE LA UZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TENANT COUNSELING AND HOUSING COURT ASSISTANCE FOR NEIGHBORHOOD RESIDENTS AND SUPPORT FOR THE CONTINUED DEVELOPMENT OF AFFORDABLE HOUSING PARTICULARLY FOR LOW INCOME SENIORS.

Funded Amount:

$4,000

Requested By:

MILLMAN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

GODDARD-RIVERSIDE COMMUNITY CENTER  
593 COLUMBUS AVENUE  
NEW YORK, NY 10024-1998  
(212) 873-6600

Name of Project Director:

MOLLY DOHERTY

Purpose of Project:

FUNDS WILL BE USED TOWARDS EXPENSES ASSOCIATED WITH MAINTAINING STAFF WHO WORK WITH TENANTS IN SRO (SINGLE ROOM OCCUPANCY) BUILDINGS.

Funded Amount:

$7,500

Requested By:

ROSENTHAL

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

GOOD OLD LOWER EAST SIDE, INC.
169 AVENUE B
NEW YORK, NY 10009
(212) 358-1231

Name of Project Director:

DAMARIS REYES

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HOUSING COUNSELING INCLUDING EVICTION PREVENTION, LEGAL REFERRALS, AND JOB TRAINING TO LOW-INCOME RESIDENTS. FUNDING WILL ALSO HELP TO ORGANIZE TENANT ASSOCIATIONS TO SECURE REPAIRS AND MAINTENANCE, AND SUPPORT WORKSHOPS ON HOUSING RIGHTS AND OTHER ISSUES FOR TENANTS.

Funded Amount:

$4,000

Requested By:

GLICK

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GREATER SHEEPSHEAD BAY DEVELOPMENT CORP.
2105 EAST 22ND STREET
BROOKLYN, NY 11229
(718) 332-0582

Name of Project Director:

ELLEN SUSNOW

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ONGOING SUPPORT AND COUNSELING SERVICES REGARDING HOUSING ISSUES TO RESIDENTS OF THE COMMUNITY. SERVICES INCLUDE MEDIATION BETWEEN TENANTS AND LANDLORDS, INFORMING TENANTS OF THEIR RIGHTS, ETC.

Funded Amount:

$4,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

GREATER WOODHAVEN DEVELOPMENT CORP.
84-01 JAMAICA AVENUE
WOODHAVEN, NY 11421
(718) 805-0220

Name of Project Director:

MARIA THOMSON

Purpose of Project:

FUNDS WILL BE USED TO ALLOW THE CORPORATION TO BEAUTIFY COMMERCIAL AREAS THROUGH REMOVAL OF GRAFFITI VANDALISM. THE CORPORATION ALSO PROVIDES ASSISTANCE TO COMMUNITY RESIDENTS SO THAT THEY CAN OBTAIN HOME IMPROVEMENT LOANS.

Funded Amount:

$3,500

Requested By:

SEMINERIO

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HABITAT FOR HUMANITY
745 BROADWAY
NEWBURGH, NY 12550
(845) 568-6035

Name of Project Director:

DEIDRE GLENN

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING SUPPLIES

Funded Amount:

$5,000

Requested By:

KIRWAN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

HABITAT FOR HUMANITY OF WYOMING COUNTY NY, INC.
52 GENESEE STREET
ATTICA, NY 14011
(585) 591-0152

Name of Project Director:

BILL COLVENBACH

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION MATERIALS

Funded Amount:

$1,000

Requested By:

BURLING

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

HISTORIC DISTRICTS COUNCIL, INC.
232 EAST 11 STREET
NEW YORK, NY  10003
(212) 614-9107  12

Name of Project Director:

SIMEON BANKOFF

Purpose of Project:

FUNDS WILL BE USED FOR THE "HDC PRESERVATION TOOLKIT" - TO DEVELOP MATERIALS THAT WILL HELP NEIGHBORHOOD PARTNERS ADDRESS THE NEEDS OF EACH COMMUNITY, SPECIFICALLY, AND PARTNER WITH OTHER GROUPS ACROSS THE CITY.

Funded Amount:

$3,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

HOUSING CONSERVATION COORDINATORS, INC.
777 TENTH AVENUE
NEW YORK, NY 10019
(212) 541-5996

Name of Project Director:

SARAH DESMOND

Purpose of Project:

FUNDS WILL BE USED FOR TENANTS' RIGHTS EDUCATION.

Funded Amount:

$5,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

HOUSING CONSERVATION COORDINATORS, INC.  
777 TENTH AVENUE  
NEW YORK, NY 10019  
(212) 541-5996

Name of Project Director:

SARAH DESMOND

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LEGAL AND TENANT ADVOCACY SERVICES TO LOW- AND MODERATE-INCOME RESIDENTS OF HELL'S KITCHEN/CLINTON NEIGHBORHOOD OF MANHATTAN, AND FULL LEGAL REPRESENTATION. HCC STAFF WILL ALSO PROVIDE PRE-LITIGATION COUNSELING AND TENANT ORGANIZING SERVICES.

Funded Amount:

$17,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

HUDSON GUILD
441 WEST 26TH STREET
NEW YORK, NY 10001
(212) 760-9800

Name of Project Director:

BRIAN SABER

Purpose of Project:

FUNDS WILL BE USED TO PRESERVE AND PROMOTE AFFORDABLE HOUSING IN CHELSEA, TO EDUCATE TENANTS, ORGANIZE BUILDING BLOCK ASSOCIATIONS, COMMUNITY FORUMS, ETC.

Funded Amount:

$16,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
JEWISH COMMUNITY COUNCIL OF THE ROCKAWAY PENINSULA, INC.
1525 CENTRAL AVENUE
FAR ROCKAWAY, NY 11691
(718) 327-7755

HARVEY GORDON

FUNDS WILL BE USED FOR HOUSING COUNSELING, PROGRAMS FOR IMMIGRANTS AND A COMMUNITY CONCERT.

$5,000

TITUS

DIVISION OF HOUSING AND COMMUNITY RENEWAL
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY COUNCIL OF THE ROCKAWAY PENINSULA, INC.
1525 CENTRAL AVENUE
FAR ROCKAWAY, NY  11691
(718) 327-7755

Name of Project Director:

HARVEY GORDON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RESETTLEMENT PROGRAMS AND BENEFITS ADVOCACY, AS WELL AS, JOB PLACEMENT AND COUNSELING SERVICES. SERVICES ARE OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$15,500

Requested By:

PHEFFER

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

LOCAL DEVELOPMENT CORPORATION OF CROWN HEIGHTS, INC.
230 KINGSTON AVENUE
BROOKLYN, NY  11213
(718) 493-5200

Name of Project Director:

REVERAND WILLIAM GRANT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LOW-INCOME HOUSING EDUCATION AND SUPPORT SERVICES TO RESIDENTS OF CROWN HEIGHTS AND CENTRAL BROOKLYN.

Funded Amount:

$7,000

Requested By:

CAMARA

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

LONG ISLAND HOUSING PARTNERSHIP
180 OSER AVENUE, SUITE 800
HAUPPAUGE, NY 11788
(631) 435-4710

Name of Project Director:

PETER ELKOWITZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFFORDABLE HOUSING ASSISTANCE

Funded Amount:

$2,000

Requested By:

THIELE

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

LONG ISLAND HOUSING PARTNERSHIP, INC.
180 OSER AVENUE
HAUPPAUGE, NY 11788
(631) 435-4710

Name of Project Director:

DIANA WEIR

Purpose of Project:

FUNDS WILL BE USED TO OFFER MORTGAGE COUNSELING TO THE COMMUNITY.

Funded Amount:

$3,000

Requested By:

RAMOS

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

LONG ISLAND HOUSING SERVICES, INC.
3900 VETERANS MEMORIAL HIGHWAY, SUITE 251
BOHEMIA, NY  11716
(631) 467-5111

Name of Project Director:

MICHELLE SANTANTONIS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH COSTS INVOLVED IN PRESENTING AN INFORMATIONAL SEMINAR.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

MET COUNCIL, INC.
339 LAFAYETTE STREET
NEW YORK, NY 10012
(212) 979-6238

Name of Project Director:

JENNY LAURIE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TENANT ASSISTANCE WITH EVICTION PREVENTION, PRESERVATION, TENANT RIGHTS.

Funded Amount:

$5,000

Requested By:

KAVANAGH

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

MIDWOOD DEVELOPMENT CORP.
1416 AVENUE M
BROOKLYN, NY 11230
(718) 376-1098

Name of Project Director:

LINDA GOODMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ONGOING SUPPORT AND COUNSELING SERVICES REGARDING HOUSING ISSUES TO RESIDENTS OF THE COMMUNITY. SERVICES INCLUDE MEDIATION BETWEEN TENANTS AND LANDLORDS, INFORMING TENANTS OF THEIR RIGHTS, ETC.

Funded Amount:

$4,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

MURRAY HILL NEIGHBORHOOD ASSOCIATION
P.O. BOX 1897, MURRAY HILL STATION
NEW YORK, NY 10156-1897
(212) 886-5867

Name of Project Director:

JOE LEBENSON

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT AN ANALYSIS OF ZONING IN ORDER TO CREATE ZONING TO ALLOW FOR SAFER PRESERVATION OF THE COMMUNITY.

Funded Amount:

$3,500

Requested By:

KAVANAGH

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

NEIGHBORHOOD HOUSING SERVICES OF JAMAICA, INC.
89-70 162ND STREET
JAMAICA, NY  11432
(718) 739-8279

Name of Project Director:

CATHY MICKENS

Purpose of Project:

FUNDS WILL BE USED TO HELP REVITALIZE NEIGHBORHOODS IN SOUTHERN QUEENS BY OFFERING EDUCATION, COUNSELING, TECHNICAL AND FINANCIAL ASSISTANCE TO LOW AND MODERATE INCOME RESIDENTS. FUNDS WILL ALSO HELP SUPPORT THE NEIGHBORHOOD HOUSING SERVICES AND ITS OWNER-OCCUPIED REHABILITATION PROGRAM.

Funded Amount:

$20,000

Requested By:

COOK

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEIGHBORHOOD HOUSING SERVICES OF SOUTH BUFFALO, INC.
1937 SOUTH PARK AVENUE
BUFFALO, NY 14220
(716) 823-3630

Name of Project Director:

SHYRL DUDERWICK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MATERIALS TO CONSTRUCT A GARAGE FOR A LOCAL COMMUNITY CENTER.

Funded Amount:

$5,000

Requested By:

SCHROEDER

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

NEIGHBORS HELPING NEIGHBORS, INC.
443 39TH STREET, SUITE 202
BROOKLYN, NY 11232
(718) 686-7946

Name of Project Director:

LISA NICOLE GRIST

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HOMEOWNER COUNSELING.

Funded Amount:

$5,000

Requested By:

BRENNAN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

NEIGHBORS HELPING NEIGHBORS, INC.
443 39TH STREET, SUITE 202
BROOKLYN, NY  11232
(718) 686-7946

Name of Project Director:

JULIA FITZGERALD

Purpose of Project:

FUNDS WILL USED TO SUPPORT HOUSING COUNSELING WORK WITH LOW-INCOME TENANTS AND FIRST TIME HOMEBUYERS.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

NEW YORK CITY HOUSING AUTHORITY
250 BROADWAY
NEW YORK, NY 10007
(212) 306-6501

Name of Project Director:

JOSE MERCADE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OUTREACH EFFORTS TO THE BAYVIEW HOUSES RESIDENT ASSOCIATION AND THEIR MEMBERS.

Funded Amount:

$3,000

Requested By:

MAISEL

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

NEW YORK CITY HOUSING AUTHORITY
250 BROADWAY
NEW YORK, NY  10007
(212) 306-8100

Name of Project Director:

CARMINE RIVETTI

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY EVENTS AND TENANT ASSOCIATION COMMUNICATION IN BARUCH HOUSES, WALD, RIIS, BRACE TTI, GOMPERS, STRAUS, 344 EAST 28 STREET AND COMPUS PLAZA.

Funded Amount:

$12,000

Requested By:

KAVANAGH

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

NEW YORK PROVINCE OF THE SOCIETY OF JESUS
39 E. 83RD STREET
NEW YORK, NY 10028
(212) 774-5500

Name of Project Director:

RICHARD ESPINAL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PUBLIC HOUSING RESIDENTS IN THE WASHINGTON HEIGHTS-INWOOD AREA WITH EDUCATION, TECHNICAL ASSISTANCE, AND SUPPORT TO ESTABLISH OR STRENGTHEN PUBLIC HOUSING RESIDENT COUNCILS SO PUBLIC HOUSING RESIDENTS CAN PARTICIPATE INTELLIGENTLY WITH THEIR HOUSING AUTHORITY. THIS PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$9,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

NIAGARA FALLS NEIGHBORHOOD HOUSING SERVICES, INC.
479 16TH STREET
NIAGARA FALLS, NY  14303
(716) 285-7778

Name of Project Director:

LARRY KRIZAN

Purpose of Project:

FUNDS WILL BE USED TO INSTALL A NEW SECURITY SYSTEM FOR THE PRESTI SENIOR CITIZEN APARTMENT BUILDING.

Funded Amount:

$3,000

Requested By:

DELMONTE

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

NYC HOUSING AUTHORITY - GLENWOOD HOUSES
250 BROADWAY
NEW YORK, NY  10007
(212) 306-8100

Name of Project Director:

CAROLYN WALTON

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN A TENANT ASSOCIATION OFFICE THAT WILL FOSTER BETTER RELATIONS BETWEEN MANAGEMENT AND RESIDENTS. ADDITIONALLY, FUNDS WILL BE USED TO PURCHASE SUPPLIES FOR THE "BABY THINK IT OVER" PROGRAM.

Funded Amount:

$2,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

NYC HOUSING AUTHORITY - NOSTRAND HOUSES
250 BROADWAY
NEW YORK, NY 10007
(212) 306-8100

Name of Project Director:

ANNIE STATEN

Purpose of Project:

FUNDS WILL BE USED TO ESTABLISH AND MAINTAIN A TENANT ASSOCIATION OFFICE THAT WILL FOSTER BETTER RELATIONS BETWEEN MANAGEMENT AND RESIDENTS.

Funded Amount:

$1,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

NYC HOUSING AUTHORITY - SHEEPSHEAD HOUSES  
250 BROADWAY  
NEW YORK, NY  10007  
(212) 306-8100

Name of Project Director:

PAT DALE

Purpose of Project:

FUNDS WILL BE USED TO COVER THE COSTS ASSOCIATED WITH SHEEPSHEAD TENANTS "FAMILY DAY". ADDITIONALLY, FUNDS WILL BE USED TO ESTABLISH AND MAINTAIN AN OFFICE THAT WILL FOSTER BETTER RELATIONS BETWEEN MANAGEMENT AND RESIDENTS.

Funded Amount:

$1,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

PADOQUOHAN MEDICINE LODGE  
P.O. BOX 5078  
SOUTHAMPTON, NY 11969  
(631) 283-8428

Name of Project Director:

REV. HAILE DAVIS

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS

Funded Amount:

$5,000

Requested By:

THIELE

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

PEOPLE UNITED FOR SUSTAINABLE HOUSING, INC.
89 PLYMOUTH AVENUE
BUFFALO, NY 14201
(716) 796-5008

Name of Project Director:

ERIC WALKER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE CHENANGO STREET REVITALIZATION.

Funded Amount:

$5,000

Requested By:

HOYT

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

PHIPPS PLAZA WEST TENANT ASSOCIATION, INC.
454 2ND AVENUE, APARTMENT 19F
NEW YORK, NY  10016
(646) 567-7532

Name of Project Director:

STEVEN SACS

Purpose of Project:

FUNDS WILL BE USED TO ISSUE INFORMATIONAL MATERIALS TO TENANTS AND FOR RENTAL FEES FOR PPWTA MEETINGS AT LOCAL CHURCH.

Funded Amount:

$2,000

Requested By:

KAVANAGH

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

PUEBLO EN MARCHA, INC.
401 EAST 145TH STREET
BRONX, NY  10455
(718) 665-7375

Name of Project Director:

MAXIMINO RIVERA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LOW-INCOME AND UNEMPLOYED RESIDENTS OF THE SOUTH BRONX WITH HOUSING ASSISTANCE SERVICES. THESE SERVICES INCLUDE DIRECT INTERVENTION IN HOUSING COURT, HOUSING CODE VIOLATION, TENANT AND BLOCK ASSOCIATION TECHNICAL ASSISTANCE AND SOCIAL SERVICES REFERRALS.

Funded Amount:

$20,000

Requested By:

ARROYO

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS COMMUNITY CIVIC CORP.
68-01A 136TH STREET
FLUSHING, NY 11367
(718) 261-8015

Name of Project Director:

FLORENCE FISHER

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PRESERVATION OF EXISTING HOUSING STOCK, BOTH INSIDE AND OUT; AND FOR THE MEDIATION SERVICES BETWEEN LANDLORDS AND TENANTS. FUNDS WILL ALSO BE USED TO PROVIDE SERVICES TO SENIORS WITH AN EMPHASIS ON HOUSING PROBLEMS.

Funded Amount:

$5,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

QUEENSBRIDGE TENANTS ASSOCIATION, INC.
10-06 41ST AVENUE
LONG ISLAND CITY, NY  11101
(718) 937-6661

Name of Project Director:

NINA ADAMS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPLIES AND EQUIPMENT NECESSARY TO OPERATE THE TENANT ASSOCIATION.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

RAVENSWOOD TENANTS ASSOCIATION, INC.
35-35 21 STREET
LONG ISLAND CITY, NY  11106
(718) 433-4869

Name of Project Director:

CAROL WILKINS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPLIES AND EQUIPMENT NECESSARY TO OPERATE THE TENANTS ASSOCIATION.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

SHALOM TENANTS ALLIANCE
61 EAST 4TH STREET
NEW YORK, NY 10003
(917) 667-7701

Name of Project Director:

SUSANNE SCHROPP

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUED EXPANSION OF THE ALLIANCE, EDUCATIONAL WORKSHOPS AND ORGANIZING.

Funded Amount:

$2,500

Requested By:

BING

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

SHALOM TENANTS ALLIANCE
61 EAST 4TH STREET
NEW YORK, NY 10003
(212) 228-8210

Name of Project Director:

STEVEN M. HERRICK

Purpose of Project:

FUNDS WILL BE USED FOR CONTINUED DEVELOPMENT AND MAINTENANCE OF WEBSITE, EDUCATION OF TENANTS AND TENANT WORKSHOPS, AND ORGANIZING AND BUILDING OF TENANT NETWORK.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

SHALOM TENANTS ALLIANCE
61 EAST 4TH STREET
NEW YORK, NY 10003
(212) 633-2707

Name of Project Director:

MS. SCHROPP

Purpose of Project:

FUNDS WILL BE USED TO PREVENT EVICTION AND DISPLACEMENT OF RENT REGULATED TENANTS AND PRESERVE AFFORDABLE HOUSING.

Funded Amount:

$1,500

Requested By:

KAVANAGH

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

SPRING CREEK TENANT ASSOCIATION, INC.
903 DREW STREET, #108
BROOKLYN, NY  11208
(646) 243-7673

Name of Project Director:

ALICE LOWMAN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF REFRESHMENTS, GAMES, MUSIC, AND T-SHIRTS FOR TENANTS FOR FAMILY DAY.

Funded Amount:

$1,000

Requested By:

GORDON-D

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

STUYVESANT TOWN - PETER COOPER VILLAGE TENANTS ASSOCIATION, INC.
P.O. BOX 1202
NEW YORK, NY 10009
(212) 772-7790

Name of Project Director:

AL DOYLE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ASSISTANCE TO RESIDENTS, INCLUDING COMMUNICATION WITH RESIDENTS TO PROTECT TENANT RIGHTS, LANDLORD OBLIGATIONS, SAFETY AND OTHER COMMUNITY CONCERNS.

Funded Amount:

$15,000

Requested By:

KAVANAGH

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

TENANT COUNCIL OF THE VILLAGE OF HEMPSTEAD
P.O. BOX 5328
HEMPSTEAD, NY 11550
(516) 292-0007

Name of Project Director:

CARLOS MACKEY

Purpose of Project:

FUNDS WILL BE USED TO ASSIST AND ADVOCATE ON BEHALF OF TENANTS IN COURT, LANDLORD/TENANT DISPUTES, EVICTION ASSISTANCE, ETC.

Funded Amount:

$5,000

Requested By:

HOOPER

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

TOWN OF CHEEKTOWAGA
3301 BROADWAY STREET
CHEEKTOWAGA, NY 14227
(716) 684-5838

Name of Project Director:

TOM ADAMCZAK

Purpose of Project:

FUNDS WILL BE USED FOR THE DEMOLITION OF CONDEMNED HOUSING.

Funded Amount:

$15,000

Requested By:

GABRYSZAK

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

UNIFIED NEW CASSEL COMMUNITY REVITALIZATION CORPORATION
211 GARDEN STREET
WESTBURY, NY  11590
(516) 997-9399

Name of Project Director:

DAPHNE WILSON

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE AND INFORM FIRST-TIME HOME BUYERS ABOUT HOW TO MAKE INTELLIGENT DECISIONS ON THE PURCHASE OF RESIDENTIAL REAL ESTATE.

Funded Amount:

$10,000

Requested By:

LAVINE

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

WATERSIDE TENANTS ASSOCIATION
40 WATERSIDE PLAZA, SUITE C-1
NEW YORK, NY 10010
(646) 228-8847

Name of Project Director:

MELVIN DENNIS

Purpose of Project:

FUNDS WILL BE USED TO ISSUE INFORMATIONAL MATERIAL: WEBSITE MAINTENANCE; COPYING; DISTRIBUTION OF MEETINGS AND NEWSLETTERS.

Funded Amount:

$2,000

Requested By:

KAVANAGH

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

WEST SIDE NEIGHBORHOOD HOUSING SERVICES, INC.
359 CONNECTICUT STREET
BUFFALO, NY  14213
(716) 885-2344

Name of Project Director:

LINDA CHIARENZA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET ADVERTISING AND MARKETING EXPENSES.

Funded Amount:

$6,000

Requested By:

HOYT

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

WESTCHESTER HISPANIC COALITION, INC.
46 WALLER AVENUE
WHITE PLAINS, NY 10605
(914) 948-8466

Name of Project Director:

SANDRA ARBOLEDA

Purpose of Project:

FUNDS WILL BE USED TO ASSIST HOUSEHOLDS/INDIVIDUALS TO PREVENT THE INITIAL INCIDENCE OF HOMELESSNESS BY PROVIDING COMPREHENSIVE CASE MANAGEMENT WHICH INCLUDES RENT ASSISTANCE PAYMENTS, BUDGET COUNSELING, HOUSING REFERRALS, TRANSLATION SERVICES AND LANDLORD-TENANT MEDIATION.

Funded Amount:

$5,000

Requested By:

BRADLEY

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

WILLIAMS PLAZA TENANTS ASSOCIATION
190 MARCY AVENUE, UNIT 8A
BROOKLYN, NY 11211
(718) 387-8735

Name of Project Director:

MICHAEL BABAD

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE DISTRIBUTION OF INFORMATION ON HOUSING AND SOCIAL SERVICE PROGRAMS TO WILLIAMS PLAZA RESIDENTS.

Funded Amount:

$3,000

Requested By:

LENTOL

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

WYANDANCH COMMUNITY DEVELOPMENT CORPORATION
59 CUMBERBACH STREET
WYANDANCH, NY 11798
(631) 643-4786

Name of Project Director:

SONDRA COCHRAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ENERGY CONSERVATION AND HOUSING REPAIRS TO ELDERLY HOMEOWNERS.

Funded Amount:

$7,500

Requested By:

SWEENEY

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

MARINE CORP.-SUNRISE DETACHMENT
99 NEW YORK AVENUE
MASSAPEQUA, NY 11758
(516) 799-7259

Name of Project Director:

JAMES MACMILLAN

Purpose of Project:

FUNDS WILL BE USED TO REPAIR FACILITIES

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

DIVISION OF MILITARY AND NAVAL AFFAIRS
Legal Name, Address, and Telephone Number:

US AIR FORCE AUXILIARY CIVIL AIR PATROL BATAVIA CADET SQUADRON
8157 ROUTE 237
LEROY, NY 14482
(585) 409-7624

Name of Project Director:

MELISSA MORTIMER

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM SUPPLIES AND TRAINING SUCH AS AUTO EXTERNAL DEFIBRILLATOR TRAINING, EMERGENCY SERVICES EQUIPMENT, CADET SPECIAL ACTIVITY FUNDING

Funded Amount:

$1,150

Requested By:

HAWLEY

Name of Administering State Agency:

DIVISION OF MILITARY AND NAVAL AFFAIRS
Legal Name, Address, and Telephone Number:

ALLIED VETERANS MEMORIAL COMMITTEE OF GREATER RIDGEWOOD AND GLENDALE
72-14 67TH PLACE
GLENDALE, NY 11385
(718) 366-0121

Name of Project Director:

JULIUS LANDHERR

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COST ASSOCIATED WITH THE MEMORIAL DAY PARADE INCLUDING RENTAL, FOOD, AND EQUIPMENT.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AMERICAN LEGION ERIE COUNTY COMMITTEE
609 CITY HALL
BUFFALO, NY 14202
(716) 852-6500

Name of Project Director:

JOSEPH AMENTA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND DISTRIBUTE FLAGS FOR AREA VETERAN PLOTS FOR MEMORIAL DAY AND FOR CEREMONIES THROUGHOUT THE YEAR.

Funded Amount:

$1,900

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

AMERICAN LEGION POST 150  
18 WEST O'REILLY STREET  
KINGSTON, NY 12401  
(845) 338-1914

Name of Project Director:

WILLIMA J.J. FORTE

Purpose of Project:

FUNDS WILL BE USED TO CLEAN UP LANDSCAPE AND MAINTAIN THE  
ULSTER COUNTY VIETNAM VETERANS MEMORIAL

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

AMERICAN LEGION TONAWANDAS' POST 264 THE TONAWANDAS
P.O. BOX 66 (60 MAIN STREET)
TONAWANDA, NY  14151-0066
(716) 692-9785

Name of Project Director:

RICHARD JENKINS

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING RENOVATIONS INCLUDING REPLACING SEWER LINES AND MAKING RELATED REPAIRS.

Funded Amount:

$14,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

AMERICAN LEGION-ERIE COUNTY COMMITTEE
609 CITY HALL
BUFFALO, NY 14202
(716) 852-6500

Name of Project Director:

JOSEPH AMENTA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND DISTRIBUTE FLAGS FOR AREA VETERAN PLOTS FOR MEMORIAL DAY, AS WELL AS FOR CEREMONIES THROUGHOUT THE YEAR.

Funded Amount:

$3,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLE, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

BROOME COUNTY VETERANS MEMORIAL ASSOCIATION, INC.
C/O AMERICAN LEGION POST 80, 76 MAIN STREET
BINGHAMTON, NY  13905
(607) 797-2290

Name of Project Director:

RALPH LUCIANI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AN ELECTRONIC BUGLE, TWO RIFLE
SAFES, A PORTABLE CD PLAYER, FLAGS AND POLES, MEMBER ID BADGES
AND ALL WEATHER COATS.

Funded Amount:

$2,500

Requested By:

LUPARDO

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

CATHOLIC WAR VETERANS OF THE USA, INC.
ST. SEBASTIAN’S POST #870 - 39-46 61ST STREET
WOODSIDE, NY  11337
(718) 476-8539

Name of Project Director:

GERALD F. OLT

Purpose of Project:

FUNDS WILL BE USED FOR WREATHS INCLUDING, BUT NOT LIMITED TO,
THREE WAR MONUMENTS IN THE WOODSIDE COMMUNITY; AND TO
PROVIDE SERVICES TO WAR VETERANS ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

MARKEY

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

CO-OP CITY POST 108, AMERICAN LEGION
135 EINSTEIN LOOP, ROOM 41
BRONX, NY  10475
(718) 320-8165

Name of Project Director:

BENJAMIN J. WRIGHT

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT VARIOUS PROJECTS BENEFITING BOTH THE VETERANS AND POST ACTIVITIES.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

EASTERN NEW YORK HOMELESS VETERANS COALITION
76 SOUTHGATE ROAD
LOUDONVILLE, NY 12211
(518) 785-1523

Name of Project Director:

JAMES C. AUBE

Purpose of Project:

FUNDS WILL BE USED FOR ADVERTISING AND OUTREACH.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

FRANK A. JOHNSON AMERICAN LEGION POST 758
429 MAIN STREET
JOHNSON CITY, NY 13790
(607) 729-2865

Name of Project Director:

RICHARD O’DONNELL

Purpose of Project:

FUNDS WILL BE USED TO BUILD A HANDICAP RAMP TO THE ENTRANCE/EXIT OF THE BUILDING FOR HANDICAPPED VETERANS AND PUBLIC.

Funded Amount:

$7,500

Requested By:

LUPARDO

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

GEORGE F. JOHNSON POST 1700 (AMERICAN LEGION)
305 MAPLE STREET
ENDICOTT, NY 13760
(607) 785-1700

Name of Project Director:

BARBARA J. BEEBE

Purpose of Project:

FUNDS WILL BE USED TO COMPLETE A MEMORIAL WITH THE PURCHASE OF A MONUMENT.

Funded Amount:

$7,500

Requested By:

LUPARDO

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

GREENPOINT MEMORIAL PARADE COMMITTEE
519 LEONARD STREET
BROOKLYN, NY 11222
(718) 389-9853

Name of Project Director:

JIM FEITH

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE GREENPOINT MEMORIAL PARADE.

Funded Amount:

$3,000

Requested By:

LENTOL

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
LEGAL INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ITALIAN AMERICAN WAR VETERANS OF THE U.S. - POST #46
P.O. BOX 255
LINDENHURST, NY 11757
(631) 667-4932

Name of Project Director:

RALPH ESPOSITO

Purpose of Project:

FUNDS WILL BE USED FOR OPERATING EXPENSES FOR VETERANS POST,
WHERE COMMUNITY EVENTS ARE HELD THROUGHOUT THE YEAR.

Funded Amount:

$5,000

Requested By:

SWEENEY

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JWV LIPSKY POST
139-16 28 ROAD
FLUSHING, NY  11354
(718) 353-7838

Name of Project Director:

BENJAMIN SINGER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMMUNITY OUTREACH AND OTHER PROGRAMS AND SERVICES, INCLUDING VISITS TO VETERANS WHO ARE IN HOSPITALS OR NURSING HOMES.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

MARTIN A. KESSLER POST 2912, VFW
BOX 414, 19 COLONIAL SPRINGS ROAD
WHEATLEY HEIGHTS, NY 11798
(631) 491-9703

Name of Project Director:

WILLIAM GOGLAS

Purpose of Project:

FUNDS WILL BE USED FOR REPAIRS AND IMPROVEMENTS TO THE VETERANS POST, WHERE COMMUNITY EVENTS TAKE PLACE THROUGHOUT THE YEAR.

Funded Amount:

$7,500

Requested By:

SWEENEY

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

PLUMB BEACH CIVIC ASSOCIATION OF SHEEPSHEAD BAY, INC.
2814 FORD STREET
BROOKLYN, NY 11235
(718) 891-8400

Name of Project Director:

KATHY FLYNN

Purpose of Project:

FUNDS WILL BE USED FOR THE WAR VETERANS MEMORIAL.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

RIVERHEAD COMBINED VETERANS
223 MAPLE ROAD
WADING RIVER, NY  11792
(631) 987-3319

Name of Project Director:

EUGENE MCSHERRY

Purpose of Project:

FUNDS WILL BE USED TO REPAIR FACILITY, AS WELL AS REPAIRING BRICKING AT THE WORLD WAR II MEMORIAL.

Funded Amount:

$2,000

Requested By:

ALESSI

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

SAYVILLE VETERANS OF FOREIGN WARS-POST #433
400 LAKELAND AVENUE
SAYVILLE, NY 11782
(631) 589-9674

Name of Project Director:

RICK ERDMAN

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS TO ASSIST VETERANS.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

TRI-COUNTY COUNCIL, VIETNAM ERA VETERANS, INC.
P.O. BOX 11100
ALBANY, NY 12211
(518) 447-7710

Name of Project Director:

JOE POLLICINO

Purpose of Project:

FUNDS WILL BE USED TO CLEAN AND REPAIR VARIOUS VETERAN'S MEMORIALS IN THE COUNTY OF ALBANY.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNITED VETERANS ORGANIZATION
23 FERN STREET
FLORAL PARK, NY 11001-3207
(516) 352-8539

Name of Project Director:

JOSEPH J. REALE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FLAGS FOR STUDENTS FROM NURSERY THROUGH HIGH SCHOOL AND FOR THE PURCHASE OF SUPPLIES.

Funded Amount:

$5,000

Requested By:

HOOPER

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

UNITED VETERANS ORGANIZATION OF NASSAU COUNTY
74 SHAW DRIVE
NORTH MERRICK, NY 11566
(516) 546-4272

Name of Project Director:

JOSEPH REALE

Purpose of Project:

FUNDS WILL BE USED TO ASSIST HOMELESS VETERANS BY PROVIDING FOOD, CLOTHING AND COUNSELING.

Funded Amount:

$2,000

Requested By:

LAVINE

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

VETERANS OF FOREIGN WARS - VFW POST 4927
31 HORSEBLOCK ROAD
CENTEREACH, NY 11720
(631) 585-7390

Name of Project Director:

DENNIS SULLIVAN

Purpose of Project:

FUNDS WILL BE USED TO REFIT BUILDINGS WITH ELECTRICAL WIRING.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

VETERANS OF FOREIGN WARS, EAST SETAUKET POST #3054
8 JONES STREET
EAST SETAUKET, NY 11733
(631) 941-2812

Name of Project Director:

JACK KEKALOS

Purpose of Project:

FUNDS WILL BE USED FOR EXPENSES ASSOCIATED WITH THE REPAIR, REFURBISHMENT AND PAINTING OF THE VFW POST'S WOODEN EXTERIOR.

Funded Amount:

$4,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

VFW - BERNARD J. COLEMEN POST #2565
102-17 160TH AVENUE
HOWARD BEACH, NY  11414
(718) 835-3690

Name of Project Director:

PATRICK G. CONNOLLY

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE GENERAL OPERATING EXPENSES OF THE POST, AND/OR TO GO TOWARD THE PURCHASE OF EQUIPMENT, AND/OR SERVICES TO BENEFIT THE POST. COMMUNITY EVENTS ARE HELD AT THE POST THROUGHOUT THE YEAR.

Funded Amount:

$2,500

Requested By:

PHEFFER

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

VFW POST 313
434 3RD STREET
YOUNGSTOWN, NY  14174
(716) 754-7363

Name of Project Director:

RALPH BORELLI

Purpose of Project:

FUNDS WILL BE USED TO REMODEL THE KITCHEN AT THE VFW POST.

Funded Amount:

$3,000

Requested By:

DELMONTE

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

VIETNAM VETERANS OF AMERICA - CHAPTER 32
88-61 76TH AVENUE
GLENDALE, NY  11385
(718) 830-0037

Name of Project Director:

PAT TORO, JR.

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BENEFITS COUNSELING TO VETERANS AND TO COVER OPERATING EXPENSES SUCH AS RENT, ETC.

Funded Amount:

$1,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

VIETNAM VETERANS OF AMERICA - CHAPTER 32
88-61 76 AVENUE
GLENDALE, NY  11385
(718) 830-0037

Name of Project Director:

PAT TORO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH PROVIDING RECREATIONAL PROGRAMS TO DISABLED VETERANS.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VIETNAM VETERANS OF AMERICA QUEENS CHAPTER 32, INC.  
88-61 76TH AVENUE  
GLENDALE, NY 11385  
(718) 830-0037

Name of Project Director:

PAT TORO, JR.

Purpose of Project:

FUNDS WILL BE USED TO ASSIST VETERANS INCLUDING, BUT NOT LIMITED TO, THE ESTABLISHMENT OF A RESOURCE CENTER, WORKING WITH VETERANS SUFFERING FROM POST TRAUMATIC STRESS DISORDER.

Funded Amount:

$2,500

Requested By:

MARKEY

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

VIETNAM VETERANS OF AMERICA WNY CHAPTER 77
57 MAIN STREET
TONAWANDA, NY 14150
(716) 693-4479

Name of Project Director:

PATRICK W. WELCH

Purpose of Project:

FUNDS WILL BE USED FOR DISPLAY BOARDS, CASES, ACCESSORIES AND EQUIPMENT UPGRADES TO MUSEUM DISPLAY AND TRAVELING EDUCATION EXPERIENCE PRESENTED TO WNY STUDENTS.

Funded Amount:

$2,500

Requested By:

DELMONTE, GABRYSZAK, HOYT,PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

VIETNAM VETERANS OF AMERICA, INC.
86-61 76TH AVENUE
GLENDALE, NY 11385
(718) 830-0037

Name of Project Director:

PAT TORO

Purpose of Project:

FUNDS WILL BE USED TO ORGANIZE PROGRAM FOR QUEENS VIETNAM VETERANS.

Funded Amount:

$2,000

Requested By:

HEVESI-A

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

VIETNAM VETERANS OF AMERICA, INC. CHAPTER #32
88-61 76TH AVENUE
GLENDALE, NY  11385
(718) 830-0037

Name of Project Director:

PAT TORO, JR.

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BENEFITS COUNSELING TO VETERANS
AND TO COVER OPERATING EXPENSES SUCH AS RENT, ETC.

Funded Amount:

$1,500

Requested By:

PHEFFER

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

WOUNDED WARRIOR PROJECT
519 8TH AVENUE, ROOM 805
NEW YORK, NY 10018
(845) 707-0318

Name of Project Director:

JOHN FERNANDEZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COUNSELING, MEDICAL AND SUPPORT SERVICES TO WOUNDED AND INJURED VETERANS RETURNING FROM THE CONFLICTS IN THE MIDDLE EAST.

Funded Amount:

$1,000

Requested By:

LAVINE

Name of Administering State Agency:

DIVISION OF VETERANS' AFFAIRS
Legal Name, Address, and Telephone Number:

82ND STREET ACADEMICS
81-10 35TH AVENUE
JACKSON HEIGHTS, NY  11372
(718) 446-0690

Name of Project Director:

SHANNON HAPPY

Purpose of Project:

FUNDS WILL BE USED FOR THE PRE-SCHOOL PROGRAM, INCLUDING RECREATIONAL ACTIVITIES AND SUPPLIES.

Funded Amount:

$2,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AFRICAN-AMERICAN MEN'S ASSOCIATION OF GENEVA, INC.
P.O. BOX 98
GENEVA, NY 14456
(315) 789-0400

Name of Project Director:

VICTOR NELSON

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN PROGRAMS TO EXPOSE YOUTH TO LIFE SKILLS RELATING TO COLLEGE PREPARATION AND PERTINENT INFORMATION TO BE SUCCESSFUL IN THIS AREA, AND THE PRINTING AND EDUCATIONAL MATERIALS OF SUCH

Funded Amount:

$5,500

Requested By:

KOLB

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AGUDATH ISRAEL OF AMERICA COMMUNITY SERVICES, INC.
4520 18TH AVENUE
BROOKLYN, NY 11204
(718) 382-7500

Name of Project Director:

RABBI PINCHUS HOROWITZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE INFORMATIONAL SERVICES TO ALL NON-PUBLIC SCHOOLS REGARDING GOVERNMENT REQUIREMENTS, DEADLINES, AND AVAILABLE FUNDING.

Funded Amount:

$10,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

AGUDATH ISRAEL OF AMERICA COMMUNITY SERVICES, INC.
42 BROADWAY
NEW YORK, NY 10004
(212) 797-9000

Name of Project Director:

DAVID SEEVE

Purpose of Project:

FUNDS WILL BE USED TO DISSEMINATE CURRENT INFORMATION REGARDING REGULATIONS TO APPROXIMATELY 300 NON-PUBLIC SCHOOLS VIA WORKSHOPS, TRAINING AND INDIVIDUAL ASSISTANCE TO SCHOOL ADMINISTRATORS AND EDUCATIONAL PERSONNEL.

Funded Amount:

$4,000

Requested By:

JACOBS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

AGUDATH ISRAEL OF AMERICA COMMUNITY SERVICES, INC.
42 BROADWAY, 14TH FLOOR
NEW YORK, NY 10004
(212) 797-9000

Name of Project Director:

RABBI DAVID SEEVE

Purpose of Project:

FUNDS WILL BE USED TO DISSEMINATE CURRENT INFORMATION REGARDING RELEVANT GOVERNMENT LAWS, RULES AND REGULATIONS TO APPROXIMATELY 300 NON-PUBLIC SCHOOLS VIA WORKSHOPS, TRAINING AND INDIVIDUAL ASSISTANCE.

Funded Amount:

$9,000

Requested By:

COLTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

AGUDATH ISRAEL OF AMERICA COMMUNITY SERVICES, INC.
42 BROADWAY, 14TH FLOOR
NEW YORK, NY 10004
(212) 797-9000

Name of Project Director:

DAVID SEEVE

Purpose of Project:

FUNDS WILL BE USED TO DISSEMINATE INFORMATION REGARDING RELEVANT GOVERNMENT LAWS, RULES, AND REGULATIONS TO APPROXIMATELY 300 NON-PUBLIC SCHOOLS VIA WORKSHOPS, TRAINING, AND INDIVIDUAL ASSISTANCE.

Funded Amount:

$5,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

AGUDATH ISRAEL OF AMERICA, INC.
42 BROADWAY, 14TH FLOOR
NEW YORK, NY  10004
(212) 797-9000

Name of Project Director:

DAVID SEEVE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES FOR COMMUNITY AND CHILDREN, INCLUDING HELP TO PREPARE TAP, PELL GRANT, AND OTHER COLLEGE GRANT APPLICATIONS, AS WELL AS OBTAINING INFORMATION FOR STATE AND CITY UNIVERSITIES WHEN APPLYING TO COLLEGE. SERVICES ARE AVAILABLE ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

ABBATE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

AGUDATH ISRAEL OF AMERICA, INC.
42 BROADWAY - 14TH FLOOR
NEW YORK, NY  10004
(212) 797-9000

Name of Project Director:

DAVID SEEVE

Purpose of Project:

TO EXPAND A PROGRAM OF IDENTIFYING AND WORKING WITH STUDENTS WHO ARE AT RISK OF DROPPING OUT OF SCHOOL. FUNDS WILL BE USED TO TRAIN VOLUNTEERS, WORK WITH EDUCATORS, CONDUCT PARENTING SEMINARS AND EXPAND BIG BROTHER/SISTER PILOT PROGRAM.

Funded Amount:

$50,000

Requested By:

HIKIND, SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

AGUDATH ISRAEL OF AMERICA, INC.
42 BROADWAY, 14TH FL.
NEW YORK, NY  10004
(212) 797-9000

Name of Project Director:

DAVID SEEVE

Purpose of Project:

FUNDS WILL BE USED TO DISSEMINATE CURRENT INFORMATION REGARDING RELEVANT GOVERNMENT LAWS, RULES AND REGULATIONS TO APPROXIMATELY 300 NON-PUBLIC SCHOOLS.

Funded Amount:

$3,500

Requested By:

PHEFFER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

AGUDATH ISRAEL OF AMERICA, INC.
42 BROADWAY
NEW YORK, NY  10004
(212) 797-9000

Name of Project Director:

RABBI DAVID SEEVE

Purpose of Project:

FUNDS WILL BE USED TO DISSEMINATE CURRENT INFORMATION REGARDING GOVERNMENT, LAWS, RULES AND REGULATIONS TO APPROXIMATELY 300 NON-PROFIT SCHOOLS VIA NEWSLETTER AND WORKSHOPS.

Funded Amount:

$6,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ALBANY CITY SCHOOL DISTRICT
ACADEMY PARK
ALBANY, NY 12207
(518) 475-6080

Name of Project Director:

RONNIE PASTECKI

Purpose of Project:

FUNDS WILL BE USED TO PRESERVE AND RELOCATE A STAINED GLASS WINDOW THAT IS PRESENTLY LOCATED AT THE "OLD" ALBANY HIGH SCHOOL.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ALBANY COUNTY CONVENTION & VISITORS BUREAU EDUCATION FOUNDATION
25 QUACKENBUSH SQUARE
ALBANY, NY 12207
(518) 434-1217 300

Name of Project Director:

MICHELLE VENNARD

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP A CURRICULUM RELATED TO THE VISITOR CENTER EXHIBITS TO PROVIDE INFORMATION TO THE VARIOUS GROUPS THAT VISIT THE CENTER.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ALBANY COUNTY CONVENTION & VISITORS BUREAU EDUCATION FOUNDATION
25 QUACKENBUSH SQUARE
ALBANY, NY 12207
(518) 434-1217 300

Name of Project Director:

MICHELE VENNARD

Purpose of Project:

FUNDS WILL BE USED FOR CURRICULUM DEVELOPMENT TO ENHANCE
STUDENT EXPERIENCES AND MARKETING ASSISTANCE FOR MAJOR EXHIBITS
AND EVENTS.

Funded Amount:

$5,000

Requested By:

CANESTRARI, MCENENY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ALLEGANY PUBLIC LIBRARY
90 WEST MAIN STREET
ALLEGANY, NY 14706
(716) 373-1056

Name of Project Director:

NATHAN AUSTIN

Purpose of Project:

FUNDS WILL BE USED FOR EXPANSION OF LARGE PRINT BOOK COLLECTION

Funded Amount:

$3,000

Requested By:

GIGLIO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ALTERNATIVES FOR CHILDREN
P.O. BOX 1120
AQUEBOGUE, NY  11931
(631) 722-2170

Name of Project Director:

MARLENE CLIFFORD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SHADE FOR CHILDREN RECEIVING THERAPEUTIC SERVICES OUTDOORS.

Funded Amount:

$2,000

Requested By:

ALESSI

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ALTERNATIVES FOR CHILDREN
14 RESEARCH WAY
EAST SETAUKET, NY  11733
(631) 331-6400

Name of Project Director:

DR. MARIE FICANO

Purpose of Project:

FUNDS WILL BE USED TO INSTITUTE A LITERACY-BASED EARLY CHILDHOOD CURRICULUM WITH THE GOAL OF PREPARING SPECIAL NEEDS CHILDREN FOR SUCCESSFUL TRANSITION INTO THEIR LOCAL SCHOOL DISTRICTS WITH THE COMPETENCY LEVELS TO MEET STATE STANDARDS.

Funded Amount:

$3,500

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

AMAGANSETT FREE LIBRARY
P.O. BOX 2550
AMAGANSETT, NY 11930
(631) 267-3810

Name of Project Director:

CYNTHIA YOUNG

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ANNE SULLIVAN SCHOOL (PUBLIC SCHOOL 238)
1633 EAST 8TH STREET
BROOKLYN, NY 11223
(718) 339-4355

Name of Project Director:

HARLA MUSOFF-WEISS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE LIBRARY BOOKS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

APALACHIN PUBLIC LIBRARY
719 MAIN STREET, P.O. BOX 163
APALACHIN, NY 13732
(607) 625-3333

Name of Project Director:

CATHY SORBER

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN’S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

AUGUST MARTIN HIGH SCHOOL
156-10 BAISLEY BOULEVARD
JAMAICA, NY  11434
(718) 528-2920

Name of Project Director:

CARRYL COLE

Purpose of Project:

FUNDS WILL BE USED TO PREPARE EACH STUDENT WITH LIFETIME JOB SKILLS, AND TO EXPLORE THE REQUIREMENTS OF OWNING AND OPERATING A SMALL BUSINESS. EACH STUDENT THROUGH MASTERY OF COMMUNICATION AND COMPUTATION SKILLS ALONG WITH THE APPROPRIATE HANDS-ON EXPERIENCE, WILL DEVELOP MAXIMUM INDIVIDUAL GROWTH, SELF AWARENESS AND JOB SKILLS.

Funded Amount:

$8,000

Requested By:

COOK

Name of Administering State Agency:

EDUCATION DEPARTMENT
AURORA FREE LIBRARY
370 MAIN STREET, P.O. BOX 85
AURORA, NY 13026
(315) 364-8074

SANDRA GROTH

FUNDS WILL BE USED FOR CHILDREN’S BOOKS PURCHASE

$1,000

FINCH

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BABYLON PUBLIC LIBRARY
24 SOUTH CARLL AVENUE
BABYLON, NY 11702
(631) 669-1624

Name of Project Director:

MARINA SULLIVAN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF PROGRAMS THAT THE BABYLON PUBLIC LIBRARY PROVIDES AS WELL AS UPDATES

Funded Amount:

$7,150

Requested By:

BOYLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BALDWIN UNION FREE SCHOOL DISTRICT
960 HASTINGS STREET
BALDWIN, NY 11510
(516) 377-9306

Name of Project Director:

SANDY FREIBERG

Purpose of Project:

FUNDS WILL BE USED FOR COMPUTER PURCHASES

Funded Amount:

$17,500

Requested By:

BARRA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

MICHAEL DENNY

Purpose of Project:

FUNDS WILL BE USED FOR PLAYGROUND EQUIPMENT AND OUTDOOR PHYSICAL EXERCISE AREAS.

Funded Amount:

$10,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BARKER FREE LIBRARY
8706 MAIN STREET, P.O. BOX 261
BARKER, NY 14012
(716) 795-3344

Name of Project Director:

LISA THOMPSON

Purpose of Project:

FUNDS WILL BE USED FOR DVD'S AND BOOKS ON CD

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BAY SHORE - BRIGHTWATERS PUBLIC LIBRARY
1 SOUTH COUNTRY ROAD
BRIGHTWATERS, NY 11718
(631) 665-4350

Name of Project Director:

EILEEN KAVANAGH

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL A FLAGPOLE IN FRONT OF THE BUILDING.

Funded Amount:

$3,000

Requested By:

RAMOS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BAY SHORE SCHOOL DISTRICT
393 BROOK AVENUE
BAY SHORE, NY 11706
(631) 968-1113

Name of Project Director:

EVELYN BLOSE HOLMAN

Purpose of Project:

FUNDS WILL BE USED FOR MULTIPLE WORKSHOPS TO PROMOTE AND CELEBRATE ETHNIC AND CULTURAL DIVERSITY AND TO ELIMINATE RACISM THROUGH THE ARTS.

Funded Amount:

$2,000

Requested By:

RAMOS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BAYPORT BLUE POINT SCHOOL DISTRICT  
189 ACADEMY STREET  
BAYPORT, NY  11705  
(631) 472-7860

Name of Project Director:

JOAN GUAZDA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A SELF ESTEEM PROGRAM FOR PARENTS AND CHILDREN.

Funded Amount:

$3,000

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BAYPORT-BLUE POINT PUBLIC LIBRARY
203 BLUE POINT AVENUE
BLUE POINT, NY 11715
(631) 363-6133

Name of Project Director:

JOHN D. O’HARE

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS ASSOCIATED WITH THE UPGRADE OF EQUIPMENT.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BEACH CHANNEL HIGH SCHOOL
100-00 BEACH CHANNEL DRIVE
ROCKAWAY PARK, NY  11694
(718) 945-6900

Name of Project Director:

CHRIS HORN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE TO OFFSET COSTS ASSOCIATED WITH PROVIDING FOR A JUNIOR VARSITY ROWING CREW TEAM FOR 9TH AND 10TH GRADE STUDENTS. IT IS THE ONLY NYC PUBLIC SCHOOL THAT HAS A ROWING TEAM.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BE’ER HAGOLAH INSTITUTES, INC.
671 LOUISIANA AVENUE
BROOKLYN, NY  11239
(718) 642-6800

Name of Project Director:

PEARL KAUFMAN

Purpose of Project:

FUNDS WILL BE USED FOR IN-STATE FIELD TRIPS. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

GORDON-D

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BERKSHIRE FREE LIBRARY
P.O. BOX 151
BERKSHIRE, NY 13736
(607) 657-4418

Name of Project Director:

MARLETA ANDERSON

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN'S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
BERNE PUBLIC LIBRARY
P.O. BOX 209  ATTN. JAMES O'SHEA
BERNE, NY  12023
(518) 872-0041

HELEN LOUNSBERRY

FUNDS WILL BE USED TO PURCHASE BOOKS, PERIODICALS, COMPUTER RELATED MEDIA AND OTHER MATERIAL TO UPDATE AND EXPAND THE LIBRARY'S INVENTORY.

$4,000

MCENENY

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BLOCK INSTITUTE SCHOOL
376 BAY 44TH STREET
BROOKLYN, NY  11214
(718) 906-5413

Name of Project Director:

SCOTT BARKIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SELF CONTAINED MOBILE LEARNING UNITS FOR THE CHILDREN.

Funded Amount:

$3,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BLOSSOM GARDEN SCHOOL
13961 SISSION HIGHWAY
COLLINS, NY 14034
(716) 532-1004

Name of Project Director:

JAMES HALL

Purpose of Project:

FUNDS WILL BE USED FOR THE IMPLEMENTATION OF THE SCHOOL'S GED
STUDY CLASSES AND PRIME TIME COMPUTER TRAINING COURSES FOR
RURAL YOUTH

Funded Amount:

$2,500

Requested By:

QUINN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BOOKER T. WASHINGTON MS 54
103 WEST 107TH STREET
NEW YORK, NY  10025
(212) 662-2775

Name of Project Director:

JENNIFER FREEMAN

Purpose of Project:

FUNDS WILL BE USED FOR EACH CORE CLASS TO TAKE A CURRICULUM-RELATED IN-STATE FIELD TRIp.

Funded Amount:

$4,500

Requested By:

O'DONNELL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BRENTWOOD PUBLIC LIBRARY
34 SECOND AVENUE
BRENTWOOD, NY 11717
(631) 273-7883

Name of Project Director:

THOMAS TARANTOWICZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE UPDATED COLLECTIONS, ON-LINE DATABASES, AND COMPUTER EQUIPMENT FOR YOUNG PATRONS.

Funded Amount:

$3,000

Requested By:

RAMOS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BREUKELEN TENANTS ASSOC., INC.
254 STANLEY AVENUE, SUITE #1D
BROOKLYN, NY 11236
(347) 439-1247

Name of Project Director:

GLORIA GUY

Purpose of Project:

FUNDS WILL BE USED FOR FAMILY DAY OUTING, REFRESHMENTS, SPORTS EQUIPMENT AND AWARDS.

Funded Amount:

$2,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BRIARWOOD COMMUNITY FOUNDATION, INC.
139-15 PERSHING CRESCENT
BRIARWOOD, NY   11435
(718) 297-4542

Name of Project Director:

SEYMOUR SCHWARTZ

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT COMMUNITY ACTIVITIES IN THE BRIARWOOD BRANCH OF THE QUEENS BOROUGH PUBLIC LIBRARY AND AREA SCHOOLS.

Funded Amount:

$4,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BRIDGE STREET PREPARATORY SCHOOL
266 STUYVESANT AVENUE
BROOKLYN, NY 11221
(718) 455-2777

Name of Project Director:

PATRICIA HOLDER

Purpose of Project:

FUNDS WILL BE USED FOR THE PROGRAMS GENERAL COSTS, AS WELL AS, ASSIST WITH THE PURCHASE OF SCIENCE, MATH, AND PHONICS TEXTBOOKS FOR GRADES K-5.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BRIGHTON CENTRAL SCHOOL DISTRICT
2035 MONROE AVENUE
ROCHESTER, NY 14618
(585) 461-9670

Name of Project Director:

CHRISTOPHER MANASERI

Purpose of Project:

FUNDS WILL BE USED FOR A SUMMER READING PROGRAM FOR AT-RISK ELEMENTARY SCHOOL STUDENTS.

Funded Amount:

$10,000

Requested By:

MORELLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BRONX ARTS ENSEMBLE, INC.
80 VAN CORTLANDT PARK SOUTH, SUITE 7D-1
BRONX, NY 10463
(718) 601-7399

Name of Project Director:

WILLIAM SCRIBNER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MUSICAL INSTRUMENTS FOR SCHOOL MUSIC PROGRAMS IN NORTHWEST BRONX PUBLIC SCHOOLS.

Funded Amount:

$10,000

Requested By:

DINOWITZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BRONX COMMUNITY COLLEGE
UNIVERSITY AVENUE AT WEST 181 STREET
BRONX, NY  10453
(718) 289-5100

Name of Project Director:

ERIC MERCADO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A NEW SCORE BOARD FOR BRONX COMMUNITY COLLEGE ATHLETIC LEAGUE ($15,000) AND FOR THE PURCHASE OF NEW UNIFORMS ($1,500).

Funded Amount:

$16,500

Requested By:

DIAZ-L

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKHAVEN FREE LIBRARY
273 BEAVER DAM ROAD
BROOKHAVEN, NY 11719
(631) 286-1923

Name of Project Director:

MATTHEW BOLLERMAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A SUBSCRIPTION TO AN ON LINE
SUMMER READING PROGRAM.

Funded Amount:

$1,500

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKHAVEN SCIENCE ASSOCIATES
BUILDING 438
UPTON, NY  11973
(631) 344-7171

Name of Project Director:

KEN WHITE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MATERIALS FOR OUTREACH CENTERS FOR STUDENTS.

Funded Amount:

$4,000

Requested By:

ALESSI

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN CENTER FOR THE URBAN ENVIRONMENT
TENNIS HOUSE, PROSPECT PARK
BROOKLYN, NY 11215
(718) 788-8500

Name of Project Director:

SANDI D. FRANKLIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE 100,000 STUDENTS, PARENTS AND TEACHERS A YEAR WITH OPPORTUNITIES TO EXPLORE AND INTERACT WITH THE URBAN DEVELOPMENT.

Funded Amount:

$2,500

Requested By:

MILLMAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKLYN CENTER FOR THE URBAN ENVIRONMENT
THE TENNIS HOUSE, PROSPECT PARK
BROOKLYN, NY  11215
(718) 788-8500

Name of Project Director:

AISHA BROWN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ENVIRONMENTAL EDUCATION PROGRAMS IN SELECTED ELEMENTARY SCHOOLS.

Funded Amount:

$7,500

Requested By:

JACOBS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN CENTER FOR THE URBAN ENVIRONMENT
TENNIS HOUSE, PROSPECT PARK
BROOKLYN, NY 11215
(718) 788-8500

Name of Project Director:

SANDI D. FRANKLIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ENVIRONMENTAL EDUCATION PROGRAMS TO BROOKLYN RESIDENTS.

Funded Amount:

$2,500

Requested By:

JEFFRIES

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKLYN CENTER FOR THE URBAN ENVIRONMENT
THE TENNIS HOUSE, PROSPECT PARK
BROOKLYN, NY 11215-9992
(718) 788-8500

Name of Project Director:

SANDI D. FRANKLIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE CENTER’ S EDUCATIONAL URBAN ENVIRONMENT PROGRAMS.

Funded Amount:

$2,000

Requested By:

ORTIZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN CENTER FOR THE URBAN ENVIRONMENT
TENNIS HOUSE, PROSPECT PARK
BROOKLYN, NY  11215
(718) 788-8500

Name of Project Director:

SANDI D. FRANKLIN, PHD

Purpose of Project:

FUNDS WILL BE USED TO STRENGTHEN PUBLIC EDUCATION AND DEVELOP STRONGER COMMUNITIES, ROOTED IN THE BELIEF THAT CREATING A HEALTHY, SUSTAINABLE AND LIVABLE CITY REQUIRES INSTILLING AN APPRECIATION FOR AND AN UNDERSTANDING OF THE URBAN LANDSCAPE.

Funded Amount:

$5,000

Requested By:

CAMARA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN CHILDREN'S MUSEUM CORP.
145 BROOKLYN AVENUE
BROOKLYN, NY 11213
(718) 735-4406

Name of Project Director:

CAROL ENSECKI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS FOR CHILDREN VISITING THE MUSEUM AND IN CLASSROOMS.

Funded Amount:

$22,664

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN COLLEGE COMMUNITY PARTNERSHIP FOR RESEARCH AND LEARNING
2900 BEDFORD AVENUE, RM. 5405 JAMES HALL
BROOKLYN, NY 11210
(718) 951-5015

Name of Project Director:

DIANE REISER

Purpose of Project:

FUNDS WILL BE USED TO GIVE HIGH SCHOOL STUDENTS AN OPPORTUNITY TO EXPLORE DIFFERENT CAREERS THROUGH INTERNSHIPS AND/OR FOCUSED, INTENSE 2-4 WEEK WORKSHOPS. THE AREAS EXPLORED WOULD VARY WITH A CONCENTRATION IN ARTS AND TECHNOLOGY.

Funded Amount:

$15,000

Requested By:

JACOBS

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKLYN EDUCATIONAL OPPORTUNITY CENTER
111 LIVINGSTON STREET
BROOKLYN, NY  11210
(718) 802-3300

Name of Project Director:

LOIS BLADWS-ROSADO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FURNITURE AND TECHNOLOGY EQUIPMENT FOR ADULT EDUCATION PROGRAMS.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKLYN EDUCATIONAL OPPORTUNITY CENTER
111 LIVINGSTON STREET
BROOKLYN, NY 11201
(718) 802-3300

Name of Project Director:

LOIS BLADES-ROSADO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OUTREACH TO BROOKLYN RESIDENTS, THROUGH ACADEMIC AND CAREER PROGRAMS.

Funded Amount:

$2,500

Requested By:

JEFFRIES

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN EDUCATIONAL OPPORTUNITY CENTER
111 LIVINGSTON STREET
BROOKLYN, NY  11201
(718) 802-3308

Name of Project Director:

LOIS BLADES-ROSADO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OUTREACH FOR BROOKLYN RESIDENTS WHO NEED SERVICES.

Funded Amount:

$5,000

Requested By:

TOWNS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN HISTORICAL SOCIETY
128 PIERREPONT STREET
BROOKLYN, NY  11201
(718) 222-4111

Name of Project Director:

DEBORAH SCHWARTZ

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE PUBLIC’S ACCESS TO THE HISTORY OF BROOKLYN THROUGH EDUCATION PROGRAMS AND FOR THE DEVELOPMENT OF THE SOCIETY’S LIBRARY.

Funded Amount:

$5,000

Requested By:

MILLMAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN MUSIC AND ARTS PROGRAM, INC.
321 ASHLAND PLACE
BROOKLYN, NY 11217
(718) 399-2300

Name of Project Director:

TYRONE BROWN

Purpose of Project:


Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN NAACP
39 BROADWAY, 2ND FLOOR
NEW YORK, NY 10006
(212) 344-7474

Name of Project Director:

HAZEL DUKES

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EMPOWERMENT OPPORTUNITIES FOR WOMEN AND MINORITIES.

Funded Amount:

$7,500

Requested By:

TOWNS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN OLD TIMERS FOUNDATION, INC.
1491 PRESIDENT STREET
BROOKLYN, NY 11213
(718) 693-5689

Name of Project Director:

SYDNEY MOSHETTE

Purpose of Project:

FUNDS WILL BE USED TO HELP STUDENTS AND PARENTS TO BECOME FAMILIAR WITH THE FINANCIAL, AS WELL AS, ACADEMIC REQUIREMENTS FOR ACCEPTANCE AND ENROLLMENT TO COLLEGE AFTER HIGH SCHOOL GRADUATION.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY
GRAND ARMY PLAZA
BROOKLYN, NY 11238
(718) 230-2437

Name of Project Director:

DIONNE MAK-HARVIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL PROGRAMS AND FOR THE PROMOTION OF PROGRAMS AND EXHIBITS AT THE LIBRARY.

Funded Amount:

$12,792

Requested By:

ABBATE, BOYLAND, BREN NAN, BROOK-KRAS NY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HI KIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY
GRAND ARMY PLAZA
BROOKLYN, NY  11238
(718) 280-2091

Name of Project Director:

DIONNE MACK HARVIN

Purpose of Project:

FUNDS WILL BE USED FOR SEVERAL YOUTH DEVELOPMENT READING PROGRAMS WITHIN DISTRICT LIBRARIES.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY
GRAND ARMY PLAZA
BROOKLYN, NY  11238
(718) 230-2091

Name of Project Director:

DIONNE MACK HARVIN

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL PROGRAMMING AND ACTIVITIES FOR YOUTH.

Funded Amount:

$5,000

Requested By:

JEFFRIES

Name of Administering State Agency:

EDUCATION DEPARTMENT
BROOKLYN PUBLIC LIBRARY
GRAND ARMY PLAZA
BROOKLYN, NY 11238
(718) 230-2437

DIONNE MAK-HARVIN

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL PROGRAMS AND FOR THE PROMOTION OF PROGRAMS AND EXHIBITS AT THE LIBRARY - BROWER PARK - $2,500, CROWN HEIGHTS - $2,500, FLATBUSH - $2,500, GRAND ARMY PLAZA - $1,458.

$8,958

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY
GRAND ARMY PLAZA
BROOKLYN, NY 11238
(718) 230-2091

Name of Project Director:

STEVEN A. SCHECHTER

Purpose of Project:

FUNDS WILL BE USED TO SPONSOR MUSICAL CONCERTS OPEN TO THE PUBLIC.

Funded Amount:

$2,000

Requested By:

MILLMAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY
GRAND ARMY PLAZA
BROOKLYN, NY 11238-5619
(718) 230-2091

Name of Project Director:

DIONNE MACK HARVIN

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY COSTS OF SUPPLIES AND PROGRAMS OFFERED AT THE LIBRARY.

Funded Amount:

$10,000

Requested By:

BOYLAND

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY
GRAND ARMY PLAZA
BROOKLYN, NY 11238-5619
(718) 230-2792

Name of Project Director:

STEVEN SCHOCCHTER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SPECIAL PROGRAMS FOR CHILDREN, TEENS, AND SENIORS, PURCHASE COMPUTERS FOR TODDLERS, AND BUY SPECIALIZED BOOKS FOR THE LIBRARY.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY
GRAND ARMY PLAZA
BROOKLYN, NY 11238
(718) 230-2091

Name of Project Director:

DIONNE MACK HARVIN

Purpose of Project:

FUNDS WILL BE USED TO BENEFIT THE BAY RIDGE NEIGHBORHOOD LIBRARY.

Funded Amount:

$5,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY
GRAND ARMY PLAZA
BROOKLYN, NY  11238
(718) 230-2437

Name of Project Director:

DIONNE MAK-HARVIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL PROGRAMS AND FOR PROMOTION OF PROGRAMS AND EXHIBITS AT THE RED HOOK AND SUNSET PARK BRANCHES OF THE LIBRARY.

Funded Amount:

$1,500

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY FOUNDATION, INC.
GRAND ARMY PLAZA
BROOKLYN, NY 11238
(718) 230-2437

Name of Project Director:

DIONNE MACK-HARVIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL PROGRAMS AND FOR THE PROMOTION OF CONCERTS AND MUSICAL PRODUCTIONS.

Funded Amount:

$1,458

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKind, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY FOUNDATION, INC.
GRAND ARMY PLAZA
BROOKLYN, 11238
(718) 230-2437

Name of Project Director:

DIONNE MACK-HARVIN

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE PROGRAMMING AT THE RUGBY, KINGS HIGHWAY, KINGS BAY AND PAERDEGAT BRANCHES OF BROOKLYN PUBLIC LIBRARY SYSTEM, INCLUDING THE PURCHASE OF MULTICULTURAL MATERIALS.

Funded Amount:

$7,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROOKLYN PUBLIC LIBRARY FOUNDATION, INC.
GRAND ARMY PLAZA
BROOKLYN, NY 11238
(718) 230-2431

Name of Project Director:

DIONNE MAK-HARVIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL PROGRAMS AND FOR THE PROMOTION OF PROGRAMS AND EXHIBITS AT THE LIBRARY.

Funded Amount:

$1,458

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BROWN SCHOOL  
150 CORLEAR AVENUE  
SCHENECTADY, NY 12304  
(518) 370-0366

Name of Project Director:

DR. MARC MEYER

Purpose of Project:

FUNDS WILL BE USED TO INSTALL A FENCE AROUND THE BOUNDARIES OF THE SCHOOL AND INSTALL A PLAYGROUND AND LANDSCAPING

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BRYANT LIBRARY
2 PAPER MILL ROAD
ROSLYN, NY  11576
(516) 621-2240

Name of Project Director:

TINETTE STERLING

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ANNUAL WILLIAM CULLEN BRYANT LECTURE FOR THE COMMUNITY’S BENEFIT.

Funded Amount:

$1,000

Requested By:

LAVINE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

BYRON-BERGEN PUBLIC LIBRARY
13 SOUTH LAKE AVENUE, P.O. BOX 430
BERGEN, NY 14416
(585) 494-1621

Name of Project Director:

NANCY BAILEY

Purpose of Project:

FUNDS WILL BE USED TO UPDATE AUDIO COLLECTION FROM VHS TO DVD

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CAMBRIDGE SCHOOL DISTRICT
23 WEST MAIN STREET
CAMBRIDGE, NY 12816
(518) 677-3889

Name of Project Director:

MELODY TROY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF EMERGENCY GENERATOR

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CANASTOTA CENTRAL SCHOOL  
120 ROBERTS STREET  
CANASTOTA, NY 13032  
(315) 697-2003

Name of Project Director:

PAULA J. BURNOR

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A 80X200 GREENHOUSE TO HAVE INSTRUCTIONAL, BASIC AGRICULTURE, ENVIRONMENTAL SCIENCE AND FOOD PRODUCTION CLASSES.

Funded Amount:

$15,000

Requested By:

MAGEE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CANDOR FREE LIBRARY
2 BANK STREET, P.O. BOX 104
CANDOR, NY 13743
(607) 659-7258

Name of Project Director:
FRAN HOWE

Purpose of Project:
FUNDS WILL BE USED FOR CHILDREN'S BOOKS PURCHASE

Funded Amount:
$1,000

Requested By:
FINCH

Name of Administering State Agency:
EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CANISIUS COLLEGE  
2001 MAIN STREET  
BUFFALO, NY 14208  
(716) 883-7000

Name of Project Director:

KENNETH KRULY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A SUMMER YOUTH SPORTS PROGRAM, WHICH IS OPEN TO ALL CHILDREN ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CARLE PLACE UNION FREE SCHOOL DISTRICT
251 RUSHMORE AVENUE
CARLE PLACE, NY 11514
(516) 622-6410

Name of Project Director:

SUSAN FOLKSON

Purpose of Project:

FUNDS WILL BE USED FOR RUSHMORE SCHOOL 4TH GRADE CLASS TRIP TO ALBANY INCLUDING BUS TRANSPORT AND LUNCH

Funded Amount:

$3,750

Requested By:

MCKEVIIT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CAZENOVIA PUBLIC LIBRARY SOCIETY
100 ALBANY STREET
CAZENOVIA, NY  13035
(315) 655-9322

Name of Project Director:

ELIZABETH A. KENNEDY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE INTERPRETIVE SIGNAGE FOR ARTIFACTS IN THE LIBRARY.

Funded Amount:

$8,000

Requested By:

MAGEE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CENTER FOR BLACK LITERATURE
MEDGAR EVERS COLLEGE - 1650 BEDFORD
BROOKLYN, NY 11225
(718) 270-6976

Name of Project Director:

DR. BRENDA GREENE

Purpose of Project:

FUNDS WILL BE USED FOR THE SYMPOSIUM ENTITLED REDEMPTION SONG.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTER FOR LESBIAN AND GAY STUDIES
CUNY/THE GRADUATE CENTER
365 FIFTH AVENUE, ROOM 7115
NEW YORK, NY  10016
(212) 817-1955

Name of Project Director:

PAISLEY CURRAH

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE PRODUCTION OF A BI-ANNUAL NEWSLETTER WHICH PROVIDES INFORMATION, EDUCATION AND OUTREACH ON ISSUES OF CONCERN TO THIS COMMUNITY.

Funded Amount:

$7,500

Requested By:

GLICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CENTER MORICHES FREE PUBLIC LIBRARY
235 MAIN STREET
CENTER MORICHES, NY 11934
(631) 878-0940

Name of Project Director:

NAN PEEL

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CHARTER SCHOOL ATHLETIC ASSOCIATION
1340 THIERIOT AVENUE
BRONX, NY  10472
(718) 319-9686

Name of Project Director:

JED SILVERSTEIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ALL NEW YORK CITY CHARTER SCHOOLS WITH THE RESOURCES NECESSARY TO SUPPORT A HIGH QUALITY EXTRACURRICULAR PROGRAM OF INTER SCHOLASTIC ATHLETICS AND PERFORMING ARTS.

Funded Amount:

$7,500

Requested By:

BENJAMIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CHARTER SCHOOL ATHLETIC ASSOCIATION
1340 THIERIOT AVENUE
BRONX, NY  10472
(718) 319-9686

Name of Project Director:

TY MOORE OR MIRIAM SUAZO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE GENERAL OPERATING EXPENSES TO SUPPORT CHARTER SCHOOL ATHLETIC AND PERFORMING ARTS EXTRACURRICULAR PROGRAMS IN THE BRONX.

Funded Amount:

$5,000

Requested By:

DIAZ-R

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CHARTER SCHOOL ATHLETIC ASSOCIATION
1340 THIERIOT AVENUE
BRONX, NY  10472
(718) 319-9686

Name of Project Director:

TY MOORE AND MIRIAM SUAZO

Purpose of Project:

Funds will be used to provide local charter schools with the resources and facilities necessary to support high equality extracurricular programs of interscholastic athletics and performing arts.

Funded Amount:

$5,000

Requested By:

CAMARA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CHILD CARE SOLUTIONS, INC.
6724 THOMPSON ROAD
SYRACUSE, NY  13211
(315) 446-1220

Name of Project Director:

PEGGY LIUZZI

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE EARLY CHILDHOOD CAREER ADVANCEMENT LADDER (ECCAL) PROGRAM ($10,000) AND TOWARD THE PARTICIPATION OF INFANT/TODDLER TEACHERS AND AIDES IN THE NATIONAL QUALITY INFANT/TODDLER CAREGIVING WORKSHOP CONDUCTED AT SYRACUSE UNIVERSITY ($6,000).

Funded Amount:

$16,000

Requested By:

CHRISTENSEN, MAGNARELLI

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CHILDRENS ENVIRONMENTAL LITERACY FOUNDATION
41 OLD LYME ROAD
CHAPPAQUA, NY  10514
(914) 238-4743

Name of Project Director:

KATIE GINSBERG

Purpose of Project:

FUNDS WILL BE USED TO PREPARE K-12 STUDENTS TO COPE WITH ENVIRONMENTAL, SOCIAL AND ECONOMIC CHALLENGES BY TRAINING 40-50 K-12 TEACHERS TO LEAD STUDENTS THROUGH CRITICAL INVESTIGATIONS IN THESE AREAS/ISSUES THROUGH INTEGRATION OF SUSTAINABILITY CONTENT IN STANDARDS-BASED CURRICULUM.

Funded Amount:

$5,000

Requested By:

BRADLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CHINATOWN YMCA
100 HESTER STREET
NEW YORK, NY 10002
(212) 219-8393

Name of Project Director:

HONG SHING LEE

Purpose of Project:

FUNDS WILL BE USED BY THE CHINATOWN YMCA TO PROVIDE CULTURALLY ENRICHING PROGRAMS TO COMMUNITY RESIDENTS.

Funded Amount:

$36,000

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CITY UNIVERSITY OF NEW YORK - CREATIVE ARTS TEAM
101 W. 31ST STREET, 6TH FLOOR
NEW YORK, NY 10001
(212) 652-2830

Name of Project Director:

HELEN WHEELOCK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PRE-SCHOOL CLASSROOMS WITH EDUCATIONAL PROGRAMS TO INCREASE MOTOR CREATIVITY SKILLS THROUGH DRAMA ACTIVITIES.

Funded Amount:

$2,000

Requested By:

GIANARIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CITY UNIVERSITY OF NEW YORK SCHOOL OF LAW FOUNDATION, INC.
65-21 MAIN STREET
FLUSHING, NY 11367
(718) 340-4451

Name of Project Director:

FRED ROONEY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT LEGAL HOUSING CLINICS THAT ARE DESIGNED TO PREVENT LARGE SCALE EVICTION FROM NEIGHBORHOODS IN WASHINGTON HEIGHTS AND INWOOD.

Funded Amount:

$19,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CLINTON ESSEX FRANKLIN LIBRARY SYSTEM  
33 OAK STREET  
PLATTSBURGH, NY 12901  
(518) 563-5190

Name of Project Director:

BETSY BROOKS

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE TO UPGRADE AUTOMATION SYSTEM

Funded Amount:

$6,000

Requested By:

SAYWARD

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COBURN FREE LIBRARY
275 MAIN STREET
OWEGO, NY 13827
(607) 687-3520

Name of Project Director:

KAREN BERNARDO

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN'S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CODY CARES FOR KIDS, INC.
1692 EAST 45 STREET
BROOKLYN, NY  11234
(718) 758-1090

Name of Project Director:

JACQUELINE CODY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COLLEGE WORKSHOPS AT CANARSIE HIGH SCHOOL.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COLLEGE CAREERS FUND OF WESTCHESTER, INC.
190 EAST POST ROAD - 3RD FLOOR, P.O. BOX 1530
WHITE PLAINS, NY 10602
(914) 428-3435

Name of Project Director:

BLANCHE WALKER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE DEDICATED OUTREACH AT FOUR HIGH SCHOOLS AND COMMUNITIES IN WESTCHESTER WHERE THERE ARE SIGNIFICANT NUMBERS OF AT-RISK, LOW INCOME YOUTH WHO NEED GUIDANCE AND ASSISTANCE TO SEEK HIGHER EDUCATION.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COLLEGE OF NEW ROCHELLE
29 CASTLE PLACE
NEW ROCHELLE, NY 10805
(914) 654-5271

Name of Project Director:

TERRI BOYLE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR A "SMART CLASS ROOM" IN THE WELLNESS CLINIC. THESE RESOURCES WILL ENHANCE WELLNESS EDUCATION FOR CNR STUDENTS, EMPLOYEES AND COMMUNITY MEMBERS.

Funded Amount:

$5,000

Requested By:

LATIMER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COLLEGE OF NEW ROCHELLE
SCHOOL OF NEW RESOURCES, 755 CO-OP CITY BOULEVARD
BRONX, NY  10475
(718) 320-0300

Name of Project Director:

TERRI BOYLE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR THE PROGRAM THAT WILL HELP ENHANCE LEARNING AND SKILL DEVELOPMENT FOR FACULTY AND ADULT STUDENTS.

Funded Amount:

$5,000

Requested By:

BENEDETTO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COLLEGE OF NEW ROCHELLE
73-68 FULTON STREET, 2ND FLOOR
BROOKLYN, NY 11216
(718) 638-2500

Name of Project Director:

TERRI BOYLE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TECHNOLOGY EQUIPMENT THAT WILL HELP BRIDGE THE DIGITAL DIVIDE THAT MANY LOW-INCOME ADULT STUDENTS EXPERIENCE AND ENSURE THESE STUDENTS ARE BETTER PREPARED TO USE TECHNOLOGY.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

EDUCATION DEPARTMENT
COLUMBIA HIGH SCHOOL
262 LUTHER ROAD
EAST GREENBUSH, NY 12061
(518) 207-2000

JOHN P. SAWCHUK

FUNDS WILL BE USED TO PROVIDE A FUNDING SOURCE FOR TEACHERS SEEKING NATIONAL BOARD CERTIFICATION, AND TO IMPROVE STUDENT LEARNING, ADDRESS HIGH NEEDS STUDENTS, AND TO ATTRACT AND RETAIN NEW TEACHERS.

$5,000

CANESTRARI

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COLUMBUS SCHOOL PTO
P.O. BOX 3
NEW YORK MILLS, NY  13417
(315) 724-2979

Name of Project Director:

KRYSTYN MASONE

Purpose of Project:

FUNDS WILL BE USED FOR CAPITAL EXPENSES ASSOCIATED WITH CONSTRUCTION OF A NEW PLAYGROUND AND WALKING TRAIL FOR THE COLUMBUS ELEMENTARY SCHOOL IN UTICA, WHICH CURRENTLY HAS NO OUTDOOR RECREATIONAL FACILITIES FOR STUDENTS.

Funded Amount:

$17,500

Requested By:

DESTITO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMMUNITY FREE LIBRARY
86 PUBLIC SQUARE
HOLLEY, NY 14470
(585) 638-6987

Name of Project Director:

SANDY SHAW

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF NEW BOARD ROOM CHAIRS

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMMUNITY PARENT CENTER
1260 MEADOWBROOK ROAD
NORTH MERRICK, NY 11566
(516) 771-9346

Name of Project Director:

WENDY TEPFER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE COMMUNITY PARENT CENTER PROVIDES

Funded Amount:

$3,500

Requested By:

MCKEVITT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMMUNITY SCHOOL DISTRICT #27, REGION #5
82-01 ROCKAWAY BOULEVARD
OZONE PARK, NY 11416
(718) 391-8189

Name of Project Director:

CHERYL PERL

Purpose of Project:

FUNDS WILL BE USED FOR AFTER SCHOOL PROGRAMS, SPECIAL INSTRUCTION AND PURCHASE OF SERVICES AND/OR EQUIPMENT. EACH OF THE FOLLOWING SCHOOLS WILL RECEIVE $1500: PS 47Q, PS 63Q, PS 64Q, PS 114Q, PS 146Q, PS 207Q, PS 225Q, PS 232Q, PS 104Q, MS 137Q, MS 202Q, MS 210Q AND SCHOLARS ACADEMY.

Funded Amount:

$19,500

Requested By:

PHEFFER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMMUNITY SCHOOL DISTRICT 17/PUBLIC SCHOOL 181
1023 NEW YORK AVENUE
BROOKLYN, NY  11203
(718) 462-5298

Name of Project Director:

DR. COLMAN

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE ACADEMIC EXPERIENCE OF STUDENTS THROUGH THE SATURDAY ARTS PROGRAM, WHICH WILL PROVIDE EDUCATIONAL ENRICHMENT PROGRAMS FOR YOUTH AGES 4-14.

Funded Amount:

$3,000

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMMUNITY SCHOOL DISTRICT 17/PUBLIC SCHOOL 398
60 EAST 94TH STREET
BROOKLYN, NY  11212
(718) 774-4466

Name of Project Director:

MS. DIANE DANAY-CARBAN

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE PARENT INVOLVEMENT IN THE SCHOOL, AS WELL AS, TO PURCHASE EQUIPMENT AND SUPPLIES.

Funded Amount:

$2,000

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMMUNITY SCHOOL DISTRICT 18/IS 211
1001 EAST 100TH STREET
BROOKLYN, NY 11236
(718) 251-4411

Name of Project Director:

BUFFY PEARL-SIMMONS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF THE MUSIC PROGRAM FOR STUDENTS AT IS 211.

Funded Amount:

$7,000

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMMUNITY SCHOOL DISTRICT 18/IS 252
EAST 94TH AND LENOX ROAD
BROOKLYN, NY  11212
(718) 342-1144

Name of Project Director:

MENDIS P. BROWN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN AFTER SCHOOL PROGRAM FOR CHILDREN IN THE BROOKLYN COMMUNITY.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMMUNITY SCHOOL DISTRICT 18/PUBLIC SCHOOL 219
755 EAST 100TH STREET
BROOKLYN, NY 11236
(718) 927-5150

Name of Project Director:

WINSOME SMITH

Purpose of Project:

FUNDS WILL BE USED FOR THE OPERATION OF AFTER SCHOOL PROGRAMS THAT SERVE BROOKLYN'S YOUTH.

Funded Amount:

$6,000

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMMUNITY SCHOOL DISTRICT 18/PUBLIC SCHOOL 233
9301 AVENUE B
BROOKLYN, NY 11236
(718) 346-8103

Name of Project Director:

ALETTA SEALES

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF A MUSIC PROGRAM FOR STUDENTS AT PUBLIC SCHOOL 233.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COMMUNITY SCHOOL DISTRICT 18/PUBLIC SCHOOL 268
133 EAST 53RD STREET
BROOKLYN, NY  11203
(718) 773-5332

Name of Project Director:

MOSEZETTA OVERBY

Purpose of Project:

FUNDS WILL BE USED TOWARD THE CONTINUED ADMINISTRATION OF PUBLIC SCHOOL 268'S AFTER SCHOOL PROGRAM.

Funded Amount:

$3,500

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMMUNITY SCHOOL DISTRICT 22/PUBLIC SCHOOL 269
1957 NOSTRAND AVENUE
BROOKLYN, NY  11210
(718) 941-2800

Name of Project Director:

PHYLLIS CORBIN

Purpose of Project:

FUNDS WILL BE USED TO ADMINISTER ALL FACETS OF THE LIBRARY PROGRAM THAT SERVE PUBLIC SCHOOL 269 STUDENTS.

Funded Amount:

$4,500

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COMSEWOGUE PARENT’S MUSIC ASSOCIATION, INC.
15 OXFORD DRIVE
PORT JEFFERSON STATION, NY  11776
(631) 756-4418

Name of Project Director:

PAULA PLOTKIN

Purpose of Project:

FUNDS WILL BE USED FOR THE PRODUCTION OF MASTER CLASS WORKSHOPS TO ENRICH AND ENHANCE CLASSROOM MUSIC EDUCATION.

Funded Amount:

$1,500

Requested By:

INGLEBRIGHT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CONSTANTIA LIBRARY
1411 STATE ROUTE 49, P.O. BOX 453
CONSTANTIA, NY 13044
(315) 623-9543

Name of Project Director:

NORMA WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO EXPAND BOOK COLLECTION

Funded Amount:

$6,000

Requested By:

TOWNSEND

Name of Administering State Agency:

EDUCATION DEPARTMENT
COOPERSTOWN CENTRAL SCHOOL
39 LINDEN AVENUE
COOPERSTOWN, NY  13326-1496
(607) 547-5364

MARY JO MCPHAIL

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COPIAGUE PUBLIC SCHOOLS
2650 GREAT NECK ROAD
COPIAGUE, NY 11726
(631) 842-4015

Name of Project Director:

DR. WILLIAM BOLTON

Purpose of Project:

FUNDS WILL BE USED TO REFURBISH AN EXISTING WAR MEMORIAL AT THE GREAT NECK ROAD SCHOOL.

Funded Amount:

$10,000

Requested By:

SWEENEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CORFU FREE LIBRARY
P.O. BOX 419
CORFU, NY 14036
(585) 599-3321

Name of Project Director:

KELLY MARCH

Purpose of Project:

FUNDS WILL BE USED TO FUND AUTOMATIC CIRCULATION AND ON-LINE PUBLIC ACCESS

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CORONA EAST ELMHURST LIBRARY ACTION COMMITTEE  
10001 NORTHERN BOULEVARD  
CORONA, NY  11368  
(718) 651-1100

Name of Project Director:

ANDREW JACKSON

Purpose of Project:

FUNDS WILL BE USED TO REPLENISH THE BLACK HERITAGE LIBRARY COLLECTION.

Funded Amount:

$25,000

Requested By:

AUBRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

COUNCIL FOR UNITY INC.
50 BROADWAY, SUITE 1503
NEW YORK, NY  10004
(212) 701 – 9440

Name of Project Director:

ROBERT DESENA

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT SCHOOL BASED PROGRAMS THROUGHOUT NEW YORK CITY IN AN EFFORT TO PROMOTE UNITY AND SAFETY IN SCHOOLS AND COMMUNITIES WHICH WILL INCLUDE PROGRAMS THAT FOCUS ON ISSUES AND CONCERNS RESULTING FROM THE EVENTS OF 9/11.

Funded Amount:

$150,000

Requested By:

NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
CRAIG ELEMENTARY SCHOOL PTO  
2508 ANTONIA DRIVE  
NISKAYUNA, NY 12309  
(518) 372-8722

BETHAN DAVENPORT

FUNDS WILL BE USED TO RENOVATE THE KINDERGARTEN PLAYGROUND  
TO CREATE A SAFE, OUTDOOR LEARNING AND PLAY SPACE

$27,565

TEDISCO

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CRAOBH ULL MOR COMHALTAS CEOLTORI EIREANN
29 MARSHALL ROAD
YONKERS, NY 10705
(914) 433-2370

Name of Project Director:

IRA GOODMAN

Purpose of Project:

FUNDS WILL BE USED FOR IRISH CULTURAL PROGRAMS

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CUBA LIBRARY
39 EAST MAIN STREET
CUBA, NY 14727
(585) 968-1668

Name of Project Director:

CYNTHIA DUTTON

Purpose of Project:

FUNDS WILL BE USED FOR A MICROFILM READER

Funded Amount:

$5,900

Requested By:

GIGLIO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CUNY CITIZENSHIP AND IMMIGRATION PROJECT
101 WEST 31ST STREET, 12TH FLR.
NEW YORK, NY 10001
(646) 344-7245

Name of Project Director:

ALLAN WERNICK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT CITIZENSHIP AND IMMIGRATION PROGRAMS IN BROOKLYN.

Funded Amount:

$5,000

Requested By:

JACOBS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

CUNY DOMINICAN STUDIES INSTITUTE
CCNY, CONVENT AVE AT 138TH ST, NAC4 – 107
NEW YORK, NY 10031
(212) 650 – 7496

Name of Project Director:

DR. RAMONA HERNANDEZ

Purpose of Project:

FUNDS WILL BE USED TO FACILITATE STUDENT/TEACHER EXCHANGES IN DOMINICAN STUDIES. FUNDS WILL ALSO BE USED TO SUPPORT THE CASA DUARTE PROJECT.

Funded Amount:

$100,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

DAVID HOCHSTEIN MEMORIAL MUSIC SCHOOL, INC.
50 N. PLYMOUTH AVENUE
ROCHESTER, NY  14614
(585) 454-4403

Name of Project Director:

DR. MARGARET QUACKENBUSH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MUSIC AND DANCE INSTRUCTION TO ECONOMICALLY CHALLENGED FAMILIES.

Funded Amount:

$7,500

Requested By:

GANTT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

DENTAL CLINICS
WASHINGTON AVENUE
ALBANY, NY 12203
(518) 473 – 5733

Name of Project Director:

JIM GRIGOLEIT

Purpose of Project:

FUNDS WILL BE USED FOR EXPENSES INCURRED AS A RESULT OF PROVIDING DENTAL CARE TO INDIGENT MEMBERS OF THE COMMUNITY – (NEW YORK UNIVERSITY – $640,000; COLUMBIA – $240,000).

Funded Amount:

$1,050,000

Requested By:

ARROYO, AUBRY, BING, CANESTRARI, CLARK, GIANARIS, GOTTFRIED, GREENE, JACOBS, LENTOL, LOPEZ – V, MARKEY, NOLAN, PERALTA, ROBINSON, TOWNS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

DOLL AND TOY MUSEUM OF NEW YORK CITY
157 MONTAGUE STREET, 4TH FLOOR
BROOKLYN, NY 11201
(718) 243-0820

Name of Project Director:

MARLENE HOCHMAN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE TO DEVELOP LIBRARY PARTNERSHIPS IN BROOKLYN AND DEVELOP A TOY INVENTION FAIR WITH LOCAL PUBLIC SCHOOLS AS PARTNERS.

Funded Amount:

$2,500

Requested By:

MILLMAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008Legislative Initiative Form

Legal Name, Address, and Telephone Number:

DOWLING COLLEGE
150 IDLE HOUR BOULEVARD
OAKDALE, NY 11769
(631) 244-3394

Name of Project Director:

DR. JOHN TANACREDI

Purpose of Project:

FUNDS WILL BE USED FOR ARCHITECTURAL DESIGNS AND FLOOR PLANS
FOR THE SCIENCE CENTER AT BLUEPOINTS.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

DR. SUN YAT SEN MIDDLE SCHOOL 131M
100 HESTER
NEW YORK, NY  10002
(212) 925-6386

Name of Project Director:

MR. DENNIS LEE, PRESIDENT PTA

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE SOUND SYSTEM IN THE SCHOOL AUDITORIUM.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

E.B. CRAWFORD PUBLIC LIBRARY
393 BROADWAY
MONTICELLO, NY  12701
(845) 794-4660

Name of Project Director:

ALAN BARRISH

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF AN LCD PROJECTOR FOR PRESENTATION SHOWS.

Funded Amount:

$3,000

Requested By:

GUNThER-A

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EAGLE ACADEMY FOR YOUNG MEN
244 EAST 163RD STREET
BRONX, NY  10451
(718) 410-4091

Name of Project Director:

KEVIN JACKSON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE EXPENSE OF A COMMUNITY SERVICE/VOLUNTEER/LEADERSHIP PROGRAM FOR 9TH GRADE TO 12TH GRADE STUDENTS SEEKING COLLEGE.

Funded Amount:

$25,000

Requested By:

BENJAMIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EAST FISHKILL COMMUNITY LIBRARY
348 ROUTE 376
HOPEWELL JUNCTION, NY 12533
(845) 221-9943

Name of Project Director:

SAM PATTON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SOFTWARE UPGRADES

Funded Amount:

$3,000

Requested By:

MOLINARO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EAST HAMPTON LIBRARY
159 MAIN STREET
EAST HAMPTON, NY 11937
(631) 324-0222

Name of Project Director:

DENNIS FABISZAK

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EAST ISLIP PUBLIC LIBRARY
381 EAST MAIN STREET
EAST ISLIP, NY 11730
(631) 581-9200

Name of Project Director:

GUY EDWARDS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE LAPTOPS TO BE USED FOR TRAINING CLASSES AND FOR USE WITHIN THE LIBRARY

Funded Amount:

$7,150

Requested By:

BOYLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

EAST MEADOW PUBLIC LIBRARY
1886 FRONT STREET
EAST MEADOW, NY 11554
(516) 794-2570

Name of Project Director:

CAROL PROBEYAN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN VARIOUS LIBRARY RELATED PROGRAMS, PURCHASE OF BOOKS, VIDEOS AND EQUIPMENT

Funded Amount:

$4,000

Requested By:

WALKER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

EAST MEADOW PUBLIC LIBRARY
1886 FRONT STREET
EAST MEADOW, NY  11554-1700
(516) 794-2570  213

Name of Project Director:

JUDE SCHANZER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF A CONCERT SERIES.

Funded Amount:

$5,000

Requested By:

HOOPER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EAST MEADOW PUBLIC LIBRARY
1886 FRONT STREET
EAST MEADOW, NY 11554
(516) 794-2570 555

Name of Project Director:

CAROL PROBEYAHN

Purpose of Project:

FUNDS WILL BE USED FOR FURNITURE AND EQUIPMENT FOR TEEN READING ROOM

Funded Amount:

$5,000

Requested By:

MCKEVITT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EAST RIVER DEVELOPMENT ALLIANCE
12-11 40TH AVENUE
LONG ISLAND CITY, NY 11101
(718) 784 – 0877

Name of Project Director:

DEBRA – ELLEN GLICKSTEIN

Purpose of Project:

FUNDING IS FOR AN EDUCATIONAL PROGRAM PROVIDING CAREER EXPLORATION FOR STUDENTS FROM PUBLIC ELEMENTARY SCHOOLS ($48,195) AND FOR THE BUILDING FINANCIAL WEALTH PROGRAM ($26,805).

Funded Amount:

$75,000

Requested By:

NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EAST SYRACUSE-MINOA CENTRAL SCHOOL DISTRICT
407 FREMOND ROAD
EAST SYRACUSE, NY  13057
(315) 656-7262

Name of Project Director:

SHEILA TUFANKJIAN

Purpose of Project:

FUNDS WILL BE USED TO EXPAND INSTRUCTIONAL TECHNOLOGICAL CAPABILITIES.

Funded Amount:

$9,000

Requested By:

STIRPE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EASTERN SUFFOLK BOCES
969 ROANOKE AVENUE
RIVERHEAD, NY 11901
(631) 727-0501

Name of Project Director:

PATRICIA MCCABE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FINANCIAL SUPPORT FOR A MOBILE OUTREACH PROGRAM THAT WILL EDUCATE AND PROVIDE PRE-SCHOOL PROGRAMS THAT WOULD TRAVEL TO THE FAMILIES AND CHILDREN THAT ARE HOMELESS.

Funded Amount:

$3,000

Requested By:

RAMOS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EASTRIDGE PARENTS FOR MUSIC
2350 EAST RIDGE ROAD
ROCHESTER, NY 14622
(585) 733-0402

Name of Project Director:

LEE STEINFELDT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE INSTRUMENTS AND ACCESSORIES FOR THE SCHOOL BAND.

Funded Amount:

$5,000

Requested By:

MORELLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EDEN CO-OPERATIVE NURSERY SCHOOL
8765 MAIN STREET
EDEN, NY 14057
(716) 992-3344

Name of Project Director:

CHERYL JOHNSON

Purpose of Project:

FUNDS WILL BE USED TOWARDS RENOVATING THE EDEN CO-OP’S ROOF AND NUMEROUS WINDOWS THROUGHOUT THE BUILDING

Funded Amount:

$4,000

Requested By:

QUINN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EDEN II SCHOOL FOR AUTISTIC CHILDREN, INC.
150 GRANITE AVENUE
STATEN ISLAND, NY 10303
(718) 816-1422

Name of Project Director:

MARY MCDONALD, PH.D.

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP A COMPREHENSIVE PROGRAM FOR TEACHERS TO ENHANCE SKILLS, PROVIDE MAXIMUM GROWTH POTENTIAL WITHIN THE FIELD OF AUTISM AND HELP TO REDUCE THE TURNOVER RATE.

Funded Amount:

$3,000

Requested By:

LAVINE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EDMESTON CENTRAL SCHOOL DISTRICT
P.O. BOX 5129, 11 NORTH STREET
EDMESTON, NY 13335
(607) 965-8931

Name of Project Director:

DAVID P. ROWLEY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE HARDWARE AND EQUIPMENT TO INCLUDE VISUAL PRESENTERS, DLP PROJECTORS, AND LAPTOP COMPUTERS.

Funded Amount:

$15,000

Requested By:

MAGEE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

EIBS POND EDUCATION RESTORATION PROGRAM
50 DONGAN HILLS AVENUE
STATEN ISLAND, NY 10306
(718) 667-5639

Name of Project Director:

PATRICIA LOCKHART

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE CHILDREN ABOUT THE ENVIRONMENT AND ECOLOGY OF THE PARKS AND WETLANDS ON STATEN ISLAND IN A HANDS ON PROGRAM.

Funded Amount:

$3,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ELMONT UNION FREE SCHOOL DISTRICT
135 ELMONT ROAD
ELMONT, NY 11003
(516) 326-5500

Name of Project Director:
AL HARPER

Purpose of Project:
FUNDS WILL BE USED FOR PROGRAMS AND SERVICES IN THE ELMONT UNION FREE SCHOOL DISTRICT

Funded Amount:
$29,000

Requested By:
ALFANO

Name of Administering State Agency:
EDUCATION DEPARTMENT
EUGENIO MARIA DE HOSTOS COMMUNITY COLLEGE FOUNDATION
475 GRAND CONCOURSE
BRONX, NY 10451
(718) 518-6500

WALLACE EDGECOMBE

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL AND CULTURAL PROGRAMS OF THE HOSTOS CENTER FOR THE ARTS AND CULTURE.

$14,682

ARROYO

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FAIRPORT CENTRAL SCHOOL DISTRICT
38 WEST CHURCH STREET
FAIRPORT, NY  14450
(585) 421-2004

Name of Project Director:

BRUCE GILBERG, PHD.

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE AND EXPAND THE PARTNERSHIP BETWEEN FAIRPORT CENTRAL SCHOOL DISTRICT AND ROCHESTER CITY SCHOOL 36 TO BRING SENIOR CITIZENS AND FIRST GRADE CHILDREN TOGETHER.

Funded Amount:

$25,000

Requested By:

KOON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FALLSBURGH HIGH SCHOOL
115 BRICKMAN ROAD
FALLSBURG, NY 12733
(845) 434-5884 1214

Name of Project Director:

DR. IVAN KATZ

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY COSTS ASSOCIATED WITH THE STUDENT GOVERNMENT CONFERENCE.

Funded Amount:

$7,500

Requested By:

GUNTHER-A

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FARMINGDALE COMMUNITY SUMMIT COUNCIL, INC.
116 MERRITS ROAD
FARMINGDALE, NY 11735
(516) 454-6813

Name of Project Director:

KENNETH ULRIC

Purpose of Project:

FUNDS WILL BE USED FOR LITERACY PROGRAMS

Funded Amount:

$5,000

Requested By:

CONTE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FARMINGDALE LIBRARY  
116 MERITTS ROAD  
FARMINGDALE, NY 11735  
(516) 579-6000

Name of Project Director:

DEBRA PODOLSKI

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAM

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FARMINGDALE PUBLIC SCHOOLS  
50 VAN COTT AVENUE  
FARMINGDALE, NY 11735-3742  
(631) 752-6510

Name of Project Director:

JOHN LORENTZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE CALCULATORS FOR STUDENTS AND REPAIR/REPLACE PLAYGROUND EQUIPMENT.

Funded Amount:

$15,000

Requested By:

SWEENEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FIFTH AVENUE COMMITTEE, INC.
621 DEGRAW STREET
BROOKLYN, NY 11231
(718) 624-3475

Name of Project Director:

CHRISTINA CURRAN

Purpose of Project:

FUNDS WILL BE USED FOR THE "LET'S READ TOGETHER" PROGRAM IN FOUR LOCAL SCHOOLS. THE PROGRAM WORKS WITH LOW LITERACY PARENTS TO ASSIST THEM IN ACQUIRING THE SKILLS TO READ WITH THEIR CHILDREN AND BECOME ACTIVE PARTICIPANTS IN THEIR CHILDREN'S EDUCATION.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FINGER LAKES COMMUNITY COLLEGE
4355 LAKESHORE DRIVE
CANANDAIGUA, NY 14424
(585) 394-3522

Name of Project Director:

DAN HAYES

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE RADIO COMMUNICATIONS, VIDEO SYSTEMS, AND EMERGENCY RESPONSE EQUIPMENT

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FINGER LAKES WORKFORCE INVESTMENT BOARD
41 LEWIS STREET, SUITE 104
GENEVA, NY 14456
(315) 789-3131

Name of Project Director:

KAREN SPRINGMEIER

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM SUPPLIES TO WORK WITH INDIVIDUALS FOR CAREER DAYS FOCUSING ON EDUCATING STUDENTS FROM LOCAL SCHOOL DISTRICTS ON SKILLED TRADES

Funded Amount:

$10,000

Requested By:

KOLB

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FORT GEORGE COMMUNITY ENRICHMENT CENTER, INC.
1525 SAINT NICHOLAS AVENUE
NEW YORK, NY 10034
(212) 927-2210

Name of Project Director:

CAROLYN WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE AND ENCOURAGE PARENTAL PARTICIPATION IN PRE-SCHOOL AND HEAD-START PROGRAMS THROUGH EDUCATIONAL ORIENTATION, CULTURAL, AND PARENTAL SKILLS ENHANCEMENT.

Funded Amount:

$7,500

Requested By:

ESPAILLAT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FORT GREENE STRATEGIC NEIGHBORHOOD ACTION PARTNERSHIP
375 MYRTLE AVENUE, 1ST FLOOR
BROOKLYN, NY 11205
(718) 694-6957

Name of Project Director:

GEORGIANNA GLOSE

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE A PROGRAM ADDRESSING THE LITERACY NEEDS OF THE FORT GREENE COMMUNITY INCLUDING LITERACY OUTREACH, TUTORING, AND DISTRIBUTION OF MATERIALS.

Funded Amount:

$7,500

Requested By:

LENTOL

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FOUNDATION FOR AUTISM INFORMATION AND RESEARCH
367 VISCHER FERRY ROAD
CLIFTON PARK, NY  12065
(518) 466-9638

Name of Project Director:

MICHAEL SMITH

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY THE COST OF PREPARING MATERIAL TO EDUCATE PARENTS AND THE PUBLIC ABOUT AUTISM, ITS SYMPTOMS, TREATMENT AND EFFECTS.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FOUNDATION FOR ECOLOGICAL RESEARCH IN THE NORTHEAST
P.O. BOX 962
UPTON, NY  11973
(631) 344-5810

Name of Project Director:

KENNETH WHITE

Purpose of Project:

FUNDS WILL BE USED TO ENCOURAGE STUDENT INTEREST IN SCIENCE THROUGH SCIENTIFIC RESEARCH IN THE FIELD THROUGH A PARTNERSHIP WITH BROOKHAVEN NATIONAL LABORATORY AND COMMUNITY SCHOOL DISTRICTS. FUNDS WILL BE USED TO PROVIDE FIELD EQUIPMENT, CONSUMABLE MATERIALS, AND TRANSPORTATION SUPPORT.

Funded Amount:

$5,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FRANKLIN ELEMENTARY SCHOOL
335 SOUTH FRANKLIN STREET
HEMPESTAD, NY 11550
(516) 292-7111

Name of Project Director:

DINAE GREEN

Purpose of Project:

FUNDS WILL BE USED TO TAKE THE STUDENTS ON FIELD TRIPS TO: EAST MEADOW, NY; FARMINGDALE, NY; ALBANY, NY; MANHASSET, NY; MANHATTAN, NY; TO PAY FOR TRANSPORTATION FOR FRANKLIN ELEMENTARY SCHOOL AS ADMINISTERED BY FRANKLIN ELEMENTARY SCHOOL.

Funded Amount:

$5,000

Requested By:

HOOPER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FRANKLIN SQUARE SCHOOL DISTRICT
760 WASHINGTON STREET
FRANKLIN SQUARE, NY 11010
(516) 481-4100

Name of Project Director:

JULIE SOFFIENTINI

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS AND SERVICES IN THE FRANKLIN SQUARE SCHOOL DISTRICT

Funded Amount:

$20,000

Requested By:

ALFANO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FRIENDS OF ELIJAH SCHOOL
665 NORTH NEWBRIDGE ROAD
LEVITTOWN, NY 11756
(516) 433-4202

Name of Project Director:

DEBORA HARRIS

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM MATERIALS AND SUPPLIES

Funded Amount:

$4,000

Requested By:

WALKER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FRIENDS OF LIMSAT, INC.
71 CLIMER CIRCLE ROAD
WEST SAND LAKE, NY 12196
(518) 674-5766

Name of Project Director:

VINCENT STALLLONE, JR.

Purpose of Project:

FUNDS WILL BE USED FOR ADMINISTRATIVE SUPPORT

Funded Amount:

$5,000

Requested By:

MCKEVITT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FRIENDS OF PUBLIC SCHOOL 163, INC.
163 WEST 97TH STREET
NEW YORK, NY 10025
(212) 396-4401

Name of Project Director:

ALLISON DOWNING

Purpose of Project:

FUNDS WILL BE USED FOR LIBRARY BOOKS FOR PUBLIC SCHOOL 163 STUDENTS IN SPANISH AND DUAL LANGUAGES.

Funded Amount:

$4,500

Requested By:

O'DONNELL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FRIENDS OF PUBLIC SCHOOL 166, INC.
132 WEST 89TH STREET
NEW YORK, NY  10024
(212) 678-2829

Name of Project Director:

MARY KANE

Purpose of Project:

FUNDS WILL BE USED FOR NEW BLOOMINGDALE KEYBOARDING CLASSES FOR THE FIRST AND SECOND GRADE CLASSES AT PUBLIC SCHOOL 166.

Funded Amount:

$4,500

Requested By:

O’DONNELL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FRIENDS OF ROCHDALE VILLAGE ADULT LEARNING CENTER
169-09 137TH AVENUE
JAMAICA, NY 11434
(718) 723-7662

Name of Project Director:

CHRISTINE HUGHES

Purpose of Project:

THE FRIENDS OF ROCHDALE VILLAGE ADULT LEARNING CENTER OFFERS SERVICES TO HELP ADULTS IMPROVE READING, WRITING, AND MATHEMATIC SKILLS. FUNDS WILL HELP PURCHASE BOOKS, SOFTWARE, COPY MACHINE AND OR COMPUTERS TO SUPPORT THE ADULT LEARNING CENTER.

Funded Amount:

$5,000

Requested By:

COOK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FRIENDS OF THE NEW YORK NEWSPAPER PROJECT
P.O. BOX 2402, EMPIRE STATION
ALBANY, NY 12220
(518) 408-1891

Name of Project Director:

VICKI WEISS

Purpose of Project:

FUNDS WILL BE USED TO HELP PURCHASE NEWSPAPER MICROFILM WITH LIMITED AVAILABILITY AND INCORPORATE THE DATA INTO THE STATE LIBRARY INTER-LIBRARY LOAN COLLECTION.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FRIENDSHIP FREE LIBRARY
40 WEST MAIN STREET, P.O. BOX 37
FRIENDSHIP, NY 14739
(585) 973-7724

Name of Project Director:

PATRICIA A. SAWYER

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT MAINTENANCE/COPIER

Funded Amount:

$5,000

Requested By:

GIGLIO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

FULTON MONTGOMERY COMMUNITY COLLEGE  
2805 STATE HIGHWAY 67  
JOHNSTOWN, NY 12095  
(518) 762-4651  3700

Name of Project Director:

WILLIAM B. EASTERLY

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF (5) AED DEVICES AND TRAINING FOR 15 STAFF MEMBERS

Funded Amount:

$11,400

Requested By:

BUTLER-M

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GALWAY PUBLIC LIBRARY
P.O. BOX 207
GALWAY, NY 12074
(518) 882-6385

Name of Project Director:

ALISSA OAKLEY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL A SECURITY AND FIRE MONITORING SYSTEM IN THE LIBRARY

Funded Amount:

$2,580

Requested By:

TEDISCO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GENESEE COMMUNITY COLLEGE
R. STEPHEN HAWLEY DRIVE
BATAVIA, NY 14020
(585) 345-6812

Name of Project Director:

DR. STU STEINER

Purpose of Project:

FUNDS WILL BE USED TO INSTALL SMART CLASSROOM

Funded Amount:

$4,000

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GILLIAM GRANT COMMUNITY CENTER LIBRARY
6966 WEST BERGEN ROAD
BERGEN, NY 14416
(585) 494-1621

Name of Project Director:

DEBORAH RITTMeyer

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A "YOUTH BOOTH"

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GLEN COVE CITY SCHOOLS
DOSORIS LANE
GLEN COVE, NY  11542
(516) 759-7217

Name of Project Director:

LAURENCE W. ARONSTEIN

Purpose of Project:

FUNDS WILL BE USED TO REPAIR AND RENOVATE THE WUNSCH AUDITORIUM AT GLEN COVE MIDDLE SCHOOL.

Funded Amount:

$2,500

Requested By:

LAVINE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GLEN COVE PUBLIC LIBRARY
4 GLEN COVE AVENUE
GLEN COVE, NY 11542
(516) 676-2130

Name of Project Director:

ANTONIA PETRASH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CONCERTS AND LECTURES FOR THE COMMUNITY.

Funded Amount:

$2,000

Requested By:

LAVINE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GLENCLIFF ELEMENTARY SCHOOL
961 RIVERVIEW ROAD
REXFORD, NY  12148
(518) 399-2323

Name of Project Director:

LISA O’BRIEN

Purpose of Project:

FUNDS WILL BE USED FOR THE PLAYGROUND CONSTRUCTION PROJECT.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GOUVERNEUR READING ROOM
60 CHURCH STREET
GOUVERNEUR, NY 13642
(315) 287-0191

Name of Project Director:

CHARLOTTE GAROFALO

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN CONVERTING UNUSED SPACE TO USABLE AREA FOR PROGRAMS AND A QUIET AREA FOR READING AND STUDY

Funded Amount:

$7,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GRACE DODGE CAREER AND TECHNICAL EDUCATION HIGH SCHOOL
2474 CROTONA AVENUE
BRONX, NY  10458
(718) 584-2700

Name of Project Director:

MARILYN SOTO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BEAUTY SUPPLIES FOR COSMETOLOGY CLASSES.

Funded Amount:

$3,000

Requested By:

DIAZ-L

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GRAFTON ELEMENTARY SCHOOL
P.O. BOX 84
GRAFTON, NY 12082
(518) 279-1771

Name of Project Director:

MONICA BARON

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATION PROGRAMS

Funded Amount:

$4,000

Requested By:

MCDONALD

Name of Administering State Agency:

EDUCATION DEPARTMENT
GRAND STREET SETTLEMENT, INC.  
80 PITT STREET  
NEW YORK, NY 10002  
(646) 201-4271

MARGARITA ROSA

FUNDS WILL BE USED TO PREVENT DROPOUT, IMPROVE ATTENDANCE FOR STUDENTS AT LOUIS BRANDEIS HIGH SCHOOL.

$4,000

ROSENTHAL

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GREATER RIDGEWOOD YOUTH COUNCIL, INC.
64-01 MYRTLE AVENUE
RIDGEWOOD, NY 11385
(718) 456-5437

Name of Project Director:

ROBERT MONAHAN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST THE OPERATION OF THE AFTER SCHOOL COMPUTER LITERACY PROGRAM FOR AREA YOUTH.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GREEK-AMERICAN INSTITUTE OF NEW YORK, INC.
3573 BRUCKNER BOULEVARD
BRONX, NY  10461
(718) 823-2393

Name of Project Director:

ANNE PROKOP

Purpose of Project:

FUNDS WILL BE USED TO HELP PURCHASE NEW COMPUTERS AND LIBRARY BOOKS.

Funded Amount:

$5,000

Requested By:

BENEDETTO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GREEN CHIMNEY’S SCHOOL
400 DONESBURGH ROAD
BREWSTER, NY 10509
(845) 279-2995 102

Name of Project Director:

SAM ROSS

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF NEW HEALTH CENTER

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GROTON CENTRAL SCHOOL
P.O. BOX 99, 400 PERU ROAD
GROTON, NY 13073
(607) 898-5301

Name of Project Director:

DR. BRENDA MYERS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SIX STATION WIRELESS LABS FOR
TEACHER'S USE AND TRAINING.

Funded Amount:

$15,000

Requested By:

LIFTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

GUILD HALL OF EAST HAMPTON, INC.
158 MAIN STREET
EAST HAMPTON, NY 11937
(631) 324-0806

Name of Project Director:

RUTH APPELHOF

Purpose of Project:

FUNDS WILL BE USED FOR CULTURAL EDUCATION PROGRAMS

Funded Amount:

$5,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

H.R. JONES P.T.A.
302 HARTFORD PLACE
UTICA, NY  13502
(315) 790-9903

Name of Project Director:

DOREEN MURRAY

Purpose of Project:

FUNDS WILL BE USED TO REPLACE AN OLD PLAYGROUND AT THE H.R. JONES ELEMENTARY SCHOOL IN UTICA WITH EQUIPMENT THAT WILL CREATE TWO NEW PLAYGROUNDS - ONE FOR OLDER CHILDREN, AND THE OTHER FOR YOUNGER CHILDREN, AND SPECIAL NEEDS CHILDREN.

Funded Amount:

$17,500

Requested By:

DESTITO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HAGADORN LITTLE VILLAGE SCHOOL
750 HICKSVILLE ROAD
SEAFORD, NY 11783
(516) 520-6004

Name of Project Director:

CARLY BANK

Purpose of Project:

FUNDS WILL BE USED FOR HANDICAPPED COMMUNICATION DEVICES

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HAMLIN PUBLIC LIBRARY
422 HAMLIN CLARKSON TOWNLINE
HAMLIN, NY 14464
(585) 964-2320

Name of Project Director:

ADRIENNE LATTIN

Purpose of Project:

FUNDS WILL BE USED FOR A COPY MACHINE, PRINTER AND SCANNER

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HAMPTON BAYS PUBLIC LIBRARY
52 PONQUOGUE AVENUE
HAMPTON BAYS, NY 11946
(631) 728-6241

Name of Project Director:

MICHAEL FIRESTONE

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HAMPTON LIBRARY
P.O. BOX 3025
BRIDGEHAMPTON, NY 11932
(631) 537-0015

Name of Project Director:

SUSAN LAVISTA

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HAUPPAUGE PUBLIC LIBRARY
601 VETERANS MEMORIAL HIGHWAY
HAUPPAUGE, NY 11788
(631) 979-1600

Name of Project Director:

JUDITH BERRY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE LAP TOP COMPUTERS FOR A VARIETY OF FREE COMPUTER CLASSES

Funded Amount:

$5,000

Requested By:

FITZPATRICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HAXTON MEMORIAL LIBRARY
3 NORTH PEARL STREET
OAKFIELD, NY 14125
(585) 948-9900

Name of Project Director:

JEN MCGEE

Purpose of Project:

FUNDS WILL BE USED TO REFURBISH ENTRYWAY (TILE, LIGHTING, CARPET)

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HAZARD PUBLIC LIBRARY
2485 ROUTE 34B, P.O. BOX 2487
POPLAR RIDGE, NY 13139
(315) 364-7975

Name of Project Director:

SALLY OTIS

Purpose of Project:

FUNDS WILL BE USED FOR LIBRARY BUILDING EXPANSION PROJECT

Funded Amount:

$5,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HEBREW EDUCATIONAL SOCIETY
9502 SEA VIEW AVENUE
BROOKLYN, NY 11236
(718) 241-3000

Name of Project Director:

MARC ARJE

Purpose of Project:

FUNDS WILL BE USED FOR THE GENERAL OPERATING EXPENSES OF CHILDREN’S PROGRAMMING. PROGRAMS ARE OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HENRY STREET SETTLEMENT
265 HENRY STREET
NEW YORK, NY 10002
(212) 766-9200

Name of Project Director:

VEORONA JEETER

Purpose of Project:

FUNDS WILL BE USED TO ASSIST DISADVANTAGED YOUNG PEOPLE GET ON THE COLLEGE BOUND TRACK OR GAIN ADMISSION TO COLLEGE BY PROVIDING ACADEMIC COUNSELING, SAT PREP AND GUIDANCE THROUGH COLLEGE AND FINANCIAL AID APPLICATION PROCESSES. OPERATION ATHLETE INVOLVES YOUNG PEOPLE IN SUMMER AND AFTER-SCHOOL SPORT ACTIVITIES.

Funded Amount:

$196,000

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HEPBURN LIBRARY OF NORFOLK
HEPBURN STREET
NORFOLK, NY 13667
(315) 384-3052

Name of Project Director:

MALCOLM STARKS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HANDICAPPED ACCESS TO LIBRARY
AND ASSIST WITH THE CONSTRUCTION COSTS OF THE PROJECT

Funded Amount:

$5,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HERRICKS UNION FREE SCHOOL DISTRICT
999B SHELTER ROCK ROAD
NEW HYDE PARK, NY 11040
(516) 248-3121

Name of Project Director:

HELEN COSTIGAN

Purpose of Project:

FUNDS WILL BE USED FOR DENTON AVENUE SCHOOL 4TH GRADE CLASS TRIP TO ALBANY INCLUDING BUS TRANSPORT AND LUNCH

Funded Amount:

$3,500

Requested By:

MCKEVITT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HERSTORY WRITERS WORKSHOP
P.O. BOX 3242
SAG HARBOR, NY 11963
(631) 725-4697

Name of Project Director:

LENORE RINGER-PREZIOSO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT
HERSTORY WRITERS WORKSHOP PROVIDES

Funded Amount:

$1,500

Requested By:

BOYLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HICKSVILLE PUBLIC LIBRARY
169 JERUSALEM AVENUE
HICKSVILLE, NY 11801
(516) 931-1417

Name of Project Director:

CAROL AHRENS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN VARIOUS LIBRARY RELATED PROGRAMS, PURCHASE OF BOOKS, VIDEOS AND EQUIPMENT

Funded Amount:

$4,000

Requested By:

WALKER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HIGH MEADOW SCHOOL, INC.
P.O. BOX 552
STONE RIDGE, NY 12484
(845) 687-4855

Name of Project Director:

SARAH BORRIS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A VARIETY OF EQUIPMENT TO SUPPORT THE SENSORY NEEDS OF ASD YOUTH, TO INCLUDE STABILITY BALLS, WEIGHTED BLANKETS, FLOOR MATS, ROCKING READING CHAIR(S), FLUFF CHAIR(S), MUSIC THERAPY EQUIPMENT, ETC.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HIGHBRIDGE VOICES CORPORATION
1360 MERRIAM AVENUE, GROUND FLOOR
BRONX, NY 10452
(718) 293-8759

Name of Project Director:

JESSICA PUJIA

Purpose of Project:

FUNDS WILL BE USED TO HELP PARTICIPANTS WHO HAVE BEEN IDENTIFIED AS LOW ACADEMIC ACHIEVERS TO IMPROVE SCHOOL PERFORMANCE. THE PROGRAM HAS EXPANDED TO ASSIST COLLEGE BOUND PARTICIPANTS WITH SAT/ACT PREP, THE APPLICATION PROCESS AND FINANCIAL AID/SCHOLARSHIP SEARCH. THE PROGRAM SERVES UP TO 40 YOUTH BY OFFERING INDIVIDUALIZED ACADEMIC TUTORING, ADVOCACY WITH THEIR SCHOOLS AND FAMILIES, AND CAREER EDUCATION.

Funded Amount:

$5,000

Requested By:

GREENE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HOLOCAUST MEMORIAL COMMITTEE
60 WEST END AVENUE
BROOKLYN, NY 11235
(718) 743-3636

Name of Project Director:

PAULINE BILUS

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE TO EDUCATE THE COMMUNITY, PARTICULARLY THE YOUNG ON THE HOLOCAUST.

Funded Amount:

$5,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HOMER INTERMEDIATE SCHOOL
58 CLINTON STREET
HOMER, NY 13077
(607) 749-1240

Name of Project Director:

LEESA FERRIS

Purpose of Project:

FUNDS WILL BE USED FOR 4TH GRADE EDUCATIONAL FIELD TRIP TO ALBANY

Funded Amount:

$2,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HONEOYE CENTRAL SCHOOL
8528 MAIN STREET
HONEOYE, NY 14471
(585) 229-5171

Name of Project Director:

TIMOTHY D. WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF A MARQUEE SIGN TO
BE PLACED AT THE SCHOOL

Funded Amount:

$8,350

Requested By:

ERRIGO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HOSTOS COMMUNITY COLLEGE
475 GRAND CONCOURSE, ROOM 314
BRONX, NY 10451
(718) 518-4300

Name of Project Director:

ANA I. GARCIA REYES

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TRAINING FOR TEACHERS FOR FY 2007-2008.

Funded Amount:

$10,000

Requested By:

DIAZ-L

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HS 515
145 STANTON STREET
NEW YORK, NY  10002
(212) 289-7779

Name of Project Director:

RENE DANGER-JAMES

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING EXPENSES AND FOR EQUIPMENT PURCHASES.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HUDSON AREA ASSOCIATION LIBRARY
400 STATE STREET
HUDSON, NY 12534
(518) 828-1792

Name of Project Director:

GRETA BOERINGER

Purpose of Project:

FUNDS WILL BE USED TO BUY AN EARLY LITERACY WORKSTATION AND COMPUTER

Funded Amount:

$3,148

Requested By:

MOLINARO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HUNTER COLLEGE
695 PARK AVENUE
NEW YORK, NY 10021
(212) 772-5599

Name of Project Director:

ELAINE WALISH

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE PUBLIC SERVICE SCHOLAR PROGRAM. THIS PROGRAM ENCOURAGES UPPER LEVEL UNDERGRADS TO EXPLORE PUBLIC SERVICE CAREERS.

Funded Amount:

$2,000

Requested By:

TOWNS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

HUNTINGTON FREE LIBRARY AND READING ROOM
9 WESTCHESTER SQUARE
BRONX, NY 10461-3583
(718) 829-7770

Name of Project Director:

CAHTERINE MCCCHESNEY

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY COSTS OF THE ANNUAL FALL LECTURE SERIES.

Funded Amount:

$2,000

Requested By:

BENEDETTO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

IHS 51
350 FIFTH AVENUE
BROOKLYN, NY 11215
(718) 369-7603

Name of Project Director:

XAVIER CASTELLI

Purpose of Project:

FUNDS WILL BE USED FOR THE DEVELOPMENT OF LANGUAGE PROFICIENCY THROUGH TOTAL IMMERSION IN THAT LANGUAGE.

Funded Amount:

$2,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

INSTITUTE FOR STUDENT ACHIEVEMENT, INC.
ONE HOLLOW LANE, SUITE 100
LAKE SUCCESS, NY 11042
(516) 812-6700

Name of Project Director:

LILO & GERRY LEEDS

Purpose of Project:

FUNDS WILL BE USED FOR STUDENT LEARNING AND YOUTH DEVELOPMENT THROUGH HOLISTIC ACADEMIC REINFORCEMENT AND ENRICHMENT VIA COUNSELING, COMMUNITY SERVICES, AND FAMILY INVOLVEMENT.

Funded Amount:

$5,000

Requested By:

HOOPER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

INTERPRETER TRAINING PROJECT AT RIT
30 LOMB MEMORIAL DRIVE
ROCHESTER, NEW YORK 14623 – 5404
(585) 475 – 5040

Name of Project Director:

DEBBIE STENDARDI

Purpose of Project:

FUNDS ARE TO BE USED TO IDENTIFY THE GAPS IN TRAINING AND SKILLS OF INDIVIDUALS WHO SERVE OR WILL SERVE AS INTERPRETERS FOR THE DEAF AND TO DEVELOP STRATEGIES FOR FILLING THESE SKILL GAPS.

Funded Amount:

$100,000

Requested By:

JOHN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

IONA COLLEGE
715 NORTH AVENUE
NEW ROCHELLE, NY  10801-1890
(914) 633-2069

Name of Project Director:

JOANNE STEELE

Purpose of Project:

FUNDS WILL BE USED TOWARD THE EXPANSION AND UPGRADE OF IONA’S RYAN LIBRARY TO INCORPORATE THE LATEST AVAILABLE TECHNOLOGY, ENABLING INFORMATION RETRIEVAL, STORAGE AND PRESENTATION CAPABILITIES FOR STUDENTS AND FACULTY.

Funded Amount:

$5,000

Requested By:

LATIMER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

IS 201
8010 12TH AVENUE
BROOKLYN, NY 11228
(718) 833-9363

Name of Project Director:

MADELINE BRENNAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

IS 239
2401 NEPTUNE AVENUE
BROOKLYN, NY 11224
(718) 266-0814

Name of Project Director:

CAROL MOORE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

IS 278
1925 STUART STREET
BROOKLYN, NY  11234
(718) 375-3523

Name of Project Director:

DEBRA GARAFALO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SCHOOL LIBRARY BOOKS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

IS 303
501 WEST AVENUE
BROOKLYN, NY 11224
(718) 996-0100

Name of Project Director:

GARY INGRASIA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

IS 68
956 EAST 82ND STREET
BROOKLYN, NY  11236
(718) 241-4800

Name of Project Director:

ALEX FRALIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SCHOOL LIBRARY BOOKS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

IS 78
1420 EAST 68TH STREET
BROOKLYN, NY 11234
(718) 763-4701

Name of Project Director:

WILLIAM WOODS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE BOOKS FOR THE LIBRARY.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ISLAND TREES LIBRARY
38 FARMEDGE ROAD
ISLAND TREES, NY 11756
(516) 731-2211

Name of Project Director:

FRANK MCKENNA

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT UPGRADE

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

EDUCATION DEPARTMENT
ITALIC INSTITUTE OF AMERICA, INC.
P.O. BOX 818
FLORAL PARK, NY  11001
(516) 488-7400

JOHN MANCINI

FUNDS WILL BE USED TO SPONSOR SATURDAY ITALIAN LANGUAGE AND CULTURE COURSES TO LOCAL 5TH AND 6TH GRADERS.

$1,500

BENEDETTO

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ITHACA CHILDREN’S GARDEN, INC.
615 WILLOW AVENUE
ITHACA, NY 14850
(607) 272-2292

Name of Project Director:

KATHI COLEN PECK

Purpose of Project:

FUNDS WILL BE USED FOR AN EDUCATIONAL PROGRAM IN YOUTH DEVELOPMENT AND WORKFORCE PREPARATION FOR TEENS AGED 14-19. INTRODUCES YOUTH TO CAREER OPPORTUNITIES WITHIN THE HORTICULTURE INDUSTRY AND ACADEMIA.

Funded Amount:

$8,000

Requested By:

LIFTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

JACK AND JILL OF AMERICA FOUNDATION, INC.
725 JEFFERSON AVENUE
BROOKLYN, NY 11221
(718) 919-4781

Name of Project Director:

VIVIAN CASSABERRY-FURBY

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH A COLLEGE TOUR (WITHIN NYS) FOR STUDENTS. TOUR IS TO STIMULATE GROWTH AND DEVELOPMENT OF CHILDREN.

Funded Amount:

$9,000

Requested By:

BOYLAND

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JAMESTOWN COMMUNITY COLLEGE
525 FALCONER STREET
JAMESTOWN, NY  14701
(716) 665-5220

Name of Project Director:

ROBERT BARBER

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE AND ENHANCE THE EQUIPMENT FOR THE MANUFACTURING TECHNOLOGY INSTITUTE OF THE JAMESTOWN COMMUNITY CENTER.

Funded Amount:

$50,000

Requested By:

PARMENT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

JERICHO SCHOOL DISTRICT
99 CEDAR SWAMP ROAD
JERICHO, NY 11753
(516) 681-4100 3410

Name of Project Director:

HENRY L. GRISHMAN

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE, UPDATE AND ENHANCE COMPUTER HARDWARE/SOFTWARE FOR THE BENEFIT OF STUDENTS.

Funded Amount:

$5,000

Requested By:

LAVINE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY COUNCIL OF GREATER CONEY ISLAND INC.
3001 WEST 37TH STREET
BROOKLYN, NY  11224 – 1479
(718) 449 – 5000

Name of Project Director:

RABBI MOSHE WIENER

Purpose of Project:

FUNDS WILL BE USED FOR SERVICES & EXPENSES OF THE HIGH–JUMP PROGRAM AT THE MASORES BAIS YAakov SCHOOL. THIS PROGRAM WILL PROVIDE EDUCATIONAL ENRICHMENT OPPORTUNITIES AND AN AFTER SCHOOL PROGRAM WHICH WILL BE OPEN TO THE ENTIRE COMMUNITY ON A NON–SECTARIAN BASIS.

Funded Amount:

$25,000

Requested By:

ABBATE, BOYLAND, BRENnan, BROOK–KRASny, CAMARA, COHEN – A, COLTON, CYMBROWITZ – S, HIKIND, HYER – SPENCER, JACOBs, JEFFRIEs, LENTOL, LOPEZ – V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINson, TOWNS, WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

JHS 56
220 HENRY STREET
NEW YORK, NY  10002
(212) 962-7205

Name of Project Director:

MR. HUGH BOOKER, PRESIDENT PTA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A SERIES OF ACTIVITIES TO ENHANCE PARENTAL, YOUTH AND COMMUNITY INVOLVEMENT; COMPUTER WORKSHOPS; REPLENISH PTA LIBRARY; PTA SPONSORED PARENTAL ORIENTATIONS; COPY MACHINE FOR PTA ROOM.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

JOHN ADAMS HIGH SCHOOL  
101-01 ROCKAWAY BOULEVARD  
OZONE PARK, NY  11417  
(718) 322-0500

Name of Project Director:

GRACE ZWILLENBERG

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE ATTENDANCE INITIATIVE THROUGH POSITIVE REINFORCEMENT; I.E. AWARDS AND OTHER INCENTIVES.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JOHN F. KENNEDY MAGNET SCHOOL
40 OLIVIA STREET
PORT CHESTER, NY  10573
(914) 934-7991

Name of Project Director:

LOUIS P. CUGLIETTO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A 13 HOUR WORKSHOP SCHEDULE AND SUMMER TRAINING GIVEN BY FACILITATORS FROM THE NORTHEAST FOUNDATION FOR CHILDREN, WHICH WILL ALLOW ALL GRADE LEVEL TEACHERS TO BE INTRODUCED TO THE RESPONSIVE CLASSROOM APPROACH TO TEACHERS AND LEARNING.

Funded Amount:

$10,000

Requested By:

LATIMER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JOHN JERMAIN LIBRARY
201 MAIN STREET
SAG HARBOR, NY 11963
(631) 725-0049

Name of Project Director:

ALISON GRAY

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

JUST BUFFALO LITERARY CENTER, INC.
2495 MAIN STREET, SUITE 512
BUFFALO, NY 14214
(716) 832-5400

Name of Project Director:

LAURIE DEAN TORELL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT COSTS ASSOCIATED WITH THE CENTER’S LITERACY PROGRAMMING FOR COMMUNITIES THROUGHOUT WNY.

Funded Amount:

$5,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

JUST BUFFALO LITERARY CENTER, INC.
617 MAIN STREET, SUITE 202R
BUFFALO, NY  14203
(716) 832-5400

Name of Project Director:

LAURIE TORRELL

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF LITERACY PROGRAMS AND EVENTS.

Funded Amount:

$4,000

Requested By:

HOYT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

KELLOGG FREE LIBRARY
5681 TELEPHONE ROAD EXTENSION, BOX 150
CINCINNATUS, NY 13040
(607) 863-4300

Name of Project Director:

SUZANNE VETTER

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN’S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

KENMORE-TOWN OF TONAWANDA UNION FREE SCHOOL DISTRICT
1500 COLVIN BOULEVARD
BUFFALO, NY  14223
(716) 874-8400  7326

Name of Project Director:

DONALD SMYTON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PROFESSIONAL DEVELOPMENT PROGRAMS FOR STAFF IN PUBLIC AND NON-PUBLIC SCHOOLS LOCATED WITHIN THE SCHOOL DISTRICT.

Funded Amount:

$5,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

KIDS BASE & THE LITTLE SCHOOL
307 MAMARONECK ROAD
SCARSDALE, NY 10583
(914) 472-5409

Name of Project Director:

DEBORAH FINE

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE AN OUTDOOR PLAY AREA BY PURCHASING NEW PLAY EQUIPMENT.

Funded Amount:

$5,000

Requested By:

PAULIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

KINGSTON COMMUNITY RADIO, INC.
C/O WALTER MAXWELL, P.O. BOX 4364
KINGSTON, NY 12402-4364
(845) 331-1004

Name of Project Director:

WALTER MAXWELL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT WEB BASED BROADCASTING OF KINGSTON COMMUNITY RADIO, INC.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LABORATORY INSTITUTE OF MERCHANDISING-FASHION EDUCATION FOUNDATION
12 EAST 53RD STREET
NEW YORK, NY   10022
(212) 752-1530

Name of Project Director:

PAM LINTON

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF EQUIPMENT FOR A LAB ON CAMPUS.

Funded Amount:

$7,500

Requested By:

BING

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LAFAYETTE PUBLIC LIBRARY
BOX 379, 2577 RT. 11
LAFAYETTE, NY  13084
(315) 677-3782

Name of Project Director:

SCOTT KUSHNER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE INFORMATION LITERACY AND TRAINING BY PURCHASING A PROJECTOR WITH WIRELESS CAPABILITIES AND A LAPTOP. ADDITIONALLY, A SCREEN AND FURNITURE WILL ALSO BE PURCHASED.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

EDUCATION DEPARTMENT
LEGAL NAME, ADDRESS, AND TELEPHONE NUMBER:

LANGSTON HUGHES BLACK HERITAGE REFERENCE CENTER
100-01 NORTHERN BOULEVARD
CORONA, NY 11368
(718) 651-1100

NAME OF PROJECT DIRECTOR:

ANDREW P. JACKSON

PURPOSE OF PROJECT:

FUNDS WILL BE USED FOR MATERIALS, AFTER SCHOOL HOMEWORK ASSISTANCE PROGRAM, INCLUDING MATH CLINIC FOR GRADES 1-7.

FUNDED AMOUNT:

$1,000

REQUESTED BY:

NOLAN

NAME OF ADMINISTERING STATE AGENCY:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LAWRENCE UNION FREE SCHOOL DISTRICT
P.O. BOX 477
LAWRENCE, NY 11559
(516) 295-7030

Name of Project Director:

GARY SCHALL

Purpose of Project:

FUNDS WILL BE USED FOR AN INTERGENERATIONAL ORCHESTRA SPONSORED BY THE LAWRENCE PUBLIC SCHOOL, WHICH WILL EXPAND AESTHETIC AND MUSICAL PERFORMANCE AWARENESS.

Funded Amount:

$2,500

Requested By:

WEISENBERG

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LEARNING FOR LIFE CENTER
755 PARK AVENUE, SUITE 300
HUNTINGTON, NY 11743
(631) 367-1038

Name of Project Director:

RABBI MOSHE LABRIE

Purpose of Project:

FUNDS WILL BE USED FOR ONE SOUL PROJECT: HOLOCAUST EDUCATION WHICH IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

CONTE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LEARNING SUPPORT CENTER - REGION 4
28-11 QUEENS PLAZA NORTH - 5TH FLOOR
LONG ISLAND CITY, NY  11101
(718) 391-8178

Name of Project Director:

JEANNIE BAISINI

Purpose of Project:

FUNDS WILL BE USED FOR THE WPA ART PROGRAM AT PUBLIC SCHOOL 152 IN WOODSIDE, QUEENS.

Funded Amount:

$5,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LEE-WHEEDON MEMORIAL LIBRARY
620 WEST AVENUE
MEDINA, NY 14103
(585) 798-4398

Name of Project Director:

MARY ZANGERLE

Purpose of Project:

FUNDS WILL BE USED FOR A MICROFILM/MICROFICHE READER AND PRINTER

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
LEWIS H. LATIMER FUND, INC.
34-41 137TH STREET
FLUSHING, NY  11354
(718) 961-8585

KATRINA MILES

FUNDS WILL BE USED TO PREPARE AND PRESENT EDUCATIONAL AND HISTORICAL PROGRAMS FOR CHILDREN, AS WELL AS, OTHER COSTS ASSOCIATED WITH THE PROGRAM.

$5,000

YOUNG

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LIBRARY ACTION COMMITTEE
10001 NORTHERN BLVD.
CORONA, NY 11368
(718) 651-1100

Name of Project Director:

ANDREW JACKSON

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE AFTER-SCHOOL HOMEWORK ASSISTANCE PROGRAM, PRIMARILY TOWARD THE CONTINUATION OF THE MATH CLINIC FOR 1ST - 7TH GRADE STUDENTS.

Funded Amount:

$10,694

Requested By:

AUBRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LIBRARY ACTION COMMITTEE OF CORONA EAST ELMHURST INC.
10001 NORTHERN BLVD.
CORONA, NY  11368
(718) 651-1100

Name of Project Director:

JOSEPHINE BROWNE-EDWARDS

Purpose of Project:

FUNDS WILL BE USED TO ADMINISTER AN AFTER SCHOOL TUTORIAL PROGRAM FOR 1ST THROUGH 7TH GRADERS IN THE CORONA-EAST ELMHURST COMMUNITY, MONDAY THROUGH FRIDAY 3-6 P.M. THE PROGRAM PROVIDES ASSISTANCE WITH DAILY HOMEWORK ASSIGNMENTS AND REMEDIATION IN MATH AND READING.

Funded Amount:

$5,000

Requested By:

AUBRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LISLE FREE LIBRARY
8998 MAIN STREET, P.O. BOX 305
LISLE, NY 13797
(607) 692-3115

Name of Project Director:

DEBORAH STURDEVANT

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN'S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LITERACY ASSISTANCE CENTER
32 BROADWAY - 10TH FLOOR
NEW YORK, NY 10004
(212) 803-3300

Name of Project Director:

TONY PUPELLO

Purpose of Project:

FUNDS WILL BE USED TO DESIGN AND IMPLEMENT AN OUTREACH CAMPAIGN TO BETTER INFORM SCHOOLS AND COMMUNITY GROUPS ON MANHATTAN'S LOWER EAST SIDE ABOUT THE AVAILABILITY OF THE SERVICES AND PROGRAMS PROVIDED BY THE LITERACY ASSISTANCE CENTER. EFFORTS INCLUDE: 1) MAILING TO HUMAN SERVICES

Funded Amount:

$5,000

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LITERACY SUFFOLK, INC.
627 NORTH SUNRISE SERVICE ROAD, P.O. BOX 9000
BELLPORT, NY  11713
(631) 286-1649

Name of Project Director:

MAXINE JUROW

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE GENERAL EXPENSES ASSOCIATED WITH THE ADULT LITERACY PROGRAM.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LITERACY VOLUNTEERS OF ROCHESTER
249 HIGHLAND AVENUE
ROCHESTER, NY 14620
(585) 473-3030

Name of Project Director:

ROBERT MAHAR

Purpose of Project:

FUNDS WILL BE USED TO RECRUIT AND TRAIN ADDITIONAL VOLUNTEERS TO BE MATCHED WITH ADULT LEARNERS ON A WAITING LIST

Funded Amount:

$6,000

Requested By:

ERRIGO

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LITERACY VOLUNTEERS OF ROCHESTER, INC.
249 HIGHLAND AVENUE
ROCHESTER, NY  14620
(585) 473-3030

Name of Project Director:

ROBERT MAHAR

Purpose of Project:

FUNDS WILL BE USED FOR THE RECRUITMENT AND TRAINING OF VOLUNTEER TUTORS.

Funded Amount:

$10,000

Requested By:

MORELLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LOCUST VALLEY PUBLIC LIBRARY
170 BUCKRAM ROAD
LOCUST VALLEY, NY 11560
(516) 671-1837

Name of Project Director:

JANIS SCHOEN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN VARIOUS LIBRARY RELATED PROGRAMS, PURCHASE OF BOOKS, VIDEOS AND EQUIPMENT

Funded Amount:

$4,000

Requested By:

WALKER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LONG BEACH HIGH SCHOOL
322 LAGOON DRIVE WEST
LIDO BEACH, NY  11561
(516) 897-2104

Name of Project Director:

CHRISTOPHER BROWN

Purpose of Project:

FUNDS WILL BE USED TO PAIR STUDENTS WITH INTELLECTUAL DISABILITIES IN ONE-ON-ONE FRIENDSHIPS WITH OTHER HIGH SCHOOL STUDENTS OFFERING A NEW WAY OF LIFE AND INCLUSION.

Funded Amount:

$10,000

Requested By:

WEISENBERG

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LONG BEACH LATINO CIVIC ASSOCIATION, INC.
52 EAST PARK AVENUE, 2ND FLOOR
LONG BEACH, NY 11561
(516) 889-4912

Name of Project Director:

MIGUEL CRUZ

Purpose of Project:

FUNDS WILL BE USED TO BRING TOGETHER PARENTS, STUDENTS AND COMMUNITY ORGANIZERS IN ORDER TO CREATE A BRIDGE BETWEEN THE LONG BEACH SCHOOL SYSTEM AND THE SPANISH SPEAKING COMMUNITY.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LONG BEACH MARTIN LUTHER KING CENTER, INC.
615 RIVERSIDE BOULEVARD
LONG BEACH, NY 11561
(516) 889-6300

Name of Project Director:

THOMAS OWENS

Purpose of Project:

FUNDS WILL BE USED TO RESTRUCTURE, FORMALIZE AND EXPAND THE EXISTING AFTER SCHOOL PROGRAM TO BETTER MEET THE NEEDS OF THE COMMUNITY.

Funded Amount:

$5,500

Requested By:

WEISENBERG

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LONG BEACH PUBLIC LIBRARY
111 WEST PARK AVENUE
LONG BEACH, NY 11561
(516) 432-7201

Name of Project Director:

GEORGE TREPP

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LIVE DRAMATIC AND MUSICAL PERFORMANCES FOR ADULTS, CHILDREN AND FAMILIES. PROGRAMS ARE OPEN TO ALL COMMUNITY RESIDENTS.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LONG BEACH REACH, INC.
2-12 WEST PARK AVENUE - SUITE 200
LONG BEACH, NY  11561
(516) 889-2332

Name of Project Director:

JOSEPH SMITH, PH.D

Purpose of Project:

FUNDS WILL BE USED FOR A PROGRAM FOR PREGNANT AND/OR PARENTING ADOLESCENTS TO COMPLETE ACADEMIC REQUIREMENTS, RECEIVE CASE MANAGEMENT AND COUNSELING SUPPORT. CHILD CARE SERVICES ARE AVAILABLE. UPON COMPLETION, STUDENTS RECEIVE A REGULAR HIGH SCHOOL DIPLOMA.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LONG ISLAND LATINO TEACHERS ASSOCIATION, INC.
25 CEDAR STREET
ISLIP, NY 11751
(631) 224-7897

Name of Project Director:

DAFNY J. IRIZARRY

Purpose of Project:

FUNDS WILL BE USED TO OFFSET GENERAL COSTS TO RUN THE PROGRAM, AND TO PURCHASE EQUIPMENT.

Funded Amount:

$3,000

Requested By:

RAMOS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LONGWOOD CENTRAL SCHOOL DISTRICT
35 YAPHANK-MIDDLE ISLAND ROAD
MIDDLE ISLAND, NY 11953
(631) 345-2788

Name of Project Director:

ELIZABETH SCHMALE

Purpose of Project:

FUNDS WILL BE USED TO AID WITH OUTREACH EFFORTS TO EXPAND THE HIGH SCHOOL’S PARENTING PROGRAM.

Funded Amount:

$1,000

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LOWER EAST SIDE TENEMENT MUSEUM
66 ALLEN STREET
NEW YORK, NY 10002
(212) 431-0233

Name of Project Director:

RUTH J. ABRAM

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ONGOING SUPPORT FOR MUSEUM SERVICES.

Funded Amount:

$77,000

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LOWER HUDSON VALLEY CHALLENGER CENTER, INC.
225 ROUTE 59
SUFFERN, NY 10901
(845) 357-3416

Name of Project Director:

JOHN HUIBREGTSE

Purpose of Project:

FUNDS WILL BE USED FOR SOFTWARE SUPPORT FOR INCREASING AND UPDATING SCIENCE PROGRAMS FOR STUDENTS IN GRADES 5-8. THIS PROGRAM ENABLES 'FLIGHTS' TO THE MOON, MARS AND BEYOND.

Funded Amount:

$8,000

Requested By:

JAFFEE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LUTHERAN FAMILY HEALTH CENTERS
6025 6TH AVENUE, SUITE 221
BROOKLYN, NY  11220
(718) 630-7175

Name of Project Director:

HEIDI SABERS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BOOKS AND SUPPORT COMMUNITY LITERACY ACTIVITIES - REACH OUT AND READ PROGRAM.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

LYNBROOK UNION FREE SCHOOL DISTRICT
111 ATLANTIC AVENUE
LYNBROOK, NY 11563
(516) 887-0253

Name of Project Director:

PHILIP S. CICERO

Purpose of Project:

FUNDS WILL BE USED FOR COMPUTER PURCHASES

Funded Amount:

$10,000

Requested By:

BARRA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MADD
790 WATERVLIET-SHAKER ROAD
LATHAM, NY 12110
(518) 785-6233

Name of Project Director:

VINCENT BELLINO

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATION/PUBLIC AWARENESS

Funded Amount:

$500

Requested By:

MILLER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MADD, ERIE COUNTY CHAPTER
3959 NORTH BUFFALO ROAD
ORCHARD PARK, NY 14127
(716) 662-0642

Name of Project Director:

ELIZABETH OBAD

Purpose of Project:

FUNDS WILL BE USED TOWARDS TRAINING OF VOLUNTEERS,
SPONSORING OF MADD MULTI-MEDIA PREVENTION EDUCATION
PROGRAMS AND CREATE A PUBLIC AWARENESS CAMPAIGN

Funded Amount:

$2,500

Requested By:

QUINN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MALVERNE UNION FREE SCHOOL DISTRICT
301 WICKS LANE
MALVERNE, NY 11565
(516) 887-6405

Name of Project Director:

DR. MARY ELLEN FREELEY

Purpose of Project:

FUNDS WILL BE USED FOR PLAYGROUND EQUIPMENT

Funded Amount:

$30,000

Requested By:

BARRA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MAMARONECK PUBLIC LIBRARY
136 PROSPECT AVENUE
MAMARONECK, NY 10543
(914) 698-1250

Name of Project Director:

SUSAN BENTON

Purpose of Project:

FUNDS WILL BE USED TO OBTAIN LAPTOP AND PERIPHERALS TO UPGRADE INTERNAL LIBRARY WIRELESS ACCESS AND INTERNAL SYSTEM TROUBLESHOOTING.

Funded Amount:

$1,500

Requested By:

LATIMER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MANHATTAN BEACH SCHOOL (PUBLIC SCHOOL 195)
131 IRWIN STREET
BROOKLYN, NY 11235
(718) 648-9102

Name of Project Director:

ARTHUR FORMAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE LIBRARY RESOURCES SUCH AS CD-ROMS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MANHATTAN NEW SCHOOL PTA
311 EAST 82ND STREET
NEW YORK, NY   10028
(212) 734-7127

Name of Project Director:

ANDY LACHMAN AND LORI POLLAN

Purpose of Project:

FUNDS WILL BE USED TO OBTAIN AND UPDATE EDUCATIONAL MATERIALS FOR LIBRARY AND CLASSROOM USE.

Funded Amount:

$10,000

Requested By:

GRANNIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MAPLE EAST ELEMENTARY SCHOOL
14 KINGS TRAIL
WILLIAMSVILLE, NY 14221
(716) 689-2903

Name of Project Director:

COLLEEN AUGUST

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION OF A NEW PLAYGROUND

Funded Amount:

$20,000

Requested By:

TEDISCO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MARTE VALLE MODEL SCHOOL
145 STANTON STREET
NEW YORK, NY 10002
(212) 473-8154

Name of Project Director:

MR. ENRIQUE ARNAW, PRESIDENT PTA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE: UNIFORMS FOR BOYS AND GIRLS BASKETBALL; GYM EQUIPMENT; COMPUTERS AND PRINTERS (1 FOR STUDENT COUNCIL AND 1 FOR PTA ROOM); AIR CONDITIONERS.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MARTHA WATFORD EARLY LEARNING CENTER
1423 PROSPECT AVENUE
BRONX, NY 10459
(718) 542-1161

Name of Project Director:

MADELYN CENTENO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE EARLY CHILDHOOD LEARNING ACTIVITIES OCCURRING IN THE KENNEDY BENJAMIN ROOM.

Funded Amount:

$5,500

Requested By:

BENJAMIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MARTIN DEPORRES SCHOOL, INC.
136-25 21ST STREET
SPRINGFILED GARDENS, NY 11410
(718) 525-3414

Name of Project Director:

RAYMOND BLIXT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH WITH ACADEMIC ASSISTANCE. AFTER SCHOOL PROGRAMS ARE OFFERED TO COMMUNITY YOUTH ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

GIANARIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MARY WILCOX MEMORIAL LIBRARY
2630 MAIN STREET, P.O. BOX 748
WHITNEY POINT, NY 13862
(607) 692-3159

Name of Project Director:

JUANITA ALEBA

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN'S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MARYMOUNT MANHATTAN COLLEGE
221 EAST 71ST STREET
NEW YORK, NY 10021
(212) 517-0450

Name of Project Director:

SHIRAH DUNPHY

Purpose of Project:

FUNDS WILL BE USED FOR THE UPGRADING OF THE SECURITY SYSTEM. A NEW DIGITAL MONITORING SYSTEM WILL BE INSTALLED.

Funded Amount:

$7,500

Requested By:

BING

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MASSAPEQUA HIGH SCHOOL HALL OF FAME
4925 MERRICK ROAD
MASSAPEQUA, NY 11758
(516) 541-9123

Name of Project Director:

MICHAEL HANNA

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAM

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MASTIC MORICHES SHIRLEY LIBRARY
407 WILLIAM FLOYD PARKWAY
SHIRLEY, NY 11967
(631) 399-1511

Name of Project Director:

KERRI ROSALIA

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MECHANICVILLE CITY SCHOOL DISTRICT
25 KNISKERN AVENUE
MECHANICVILLE, NY 12118
(518) 664-9888

Name of Project Director:

G. MICHAEL APOSTOL

Purpose of Project:

FUNDS WILL BE USED TO CREATE A PARENT AUTOMATED CONTACT SYSTEM.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MENDON PUBLIC LIBRARY
15 MONROE STREET
HONEOYE FALLS, NY 14472
(585) 624-6067

Name of Project Director:

LAURIE GUENTHER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE WIRELESS EQUIPMENT/FILTERING SOFTWARE TO COMPLY WITH CIPA AND UPGRADE AND REPLACE 8 YEAR OLD SERVER

Funded Amount:

$7,500

Requested By:

ERRIGO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MERRICK LIBRARY
2279 MERRICK AVENUE
MERRICK, NY 11566
(516) 377-6112

Name of Project Director:

ELLEN FIRER

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATION OF MERRICK LIBRARY WING

Funded Amount:

$4,000

Requested By:

MCKEVIIT

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MERRICK LIBRARY
2279 MERRICK AVENUE
MERRICK, NY 11566
(516) 377-6112

Name of Project Director:

ELLEN FIRER

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF THE MERRICK LIBRARY WING

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MID HUDSON LIBRARY SYSTEM
103 MARKET STREET
POUGHKEEPSIE, NY 12601
(845) 471-6060

Name of Project Director:

JOSH COHEN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SUMMER READING PROGRAMS IN THE MID HUDSON AND RAMAPO/CATSKILLS LIBRARY SYSTEMS LIBRARIES.

Funded Amount:

$20,000

Requested By:

CAHILL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MIDDLE COUNTRY CENTRAL SCHOOL DISTRICT
8 43RD STREET
CENTEREACH, NY  11720
(631) 285-8005

Name of Project Director:

ROBERTA GEROLD

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AUTOMATIC WHITEBOARDS WHICH INTERFACE WITH THE COMPUTER TO BRING TO THE CLASSROOM A MULTI-MEDIA, INTERACTIVE CURRICULUM.

Funded Amount:

$23,000

Requested By:

INGLEBRIGHT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MIDDLE COUNTRY LIBRARY FOUNDATION, INC.
101 EASTWOOD BOULEVARD
CENTEREACH, NY  11720
(631) 585-9393 200

Name of Project Director:

SANDY FIENBERG

Purpose of Project:

FUNDS WILL BE USED FOR THE CREATION OF A TEEN LOUNGE WITHIN THE TEEN RESOURCE CENTER AT THE SELDEN LIBRARY.

Funded Amount:

$2,500

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MIDDLE COUNTRY LIBRARY FOUNDATION, INC.
101 EASTWOOD BOULEVARD
CENTEREACH, NY 11720
(631) 585-9393

Name of Project Director:

SHARON BREENE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES AND PROGRAMS FOR SENIOR CITIZENS AT MIDDLE COUNTRY LIBRARY.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MIDDLE COUNTRY LIBRARY FOUNDATION, INC.
101 EASTWOOD BOULEVARD
CENTEREACH, NY  11720
(631) 585-9393

Name of Project Director:

SANDRA FEINBERG

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE CENTER'S OUTREACH SERVICES TO FAMILIES WITH CHILDREN IN THE SERVICE-POOR MIDDLE COUNTRY AREA.

Funded Amount:

$5,000

Requested By:

INGLEBRIGHT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MIDORI FOUNDATION, INC.
352 7TH AVENUE, SUITE 201
NEW YORK, NY  10001
(212) 767-1300

Name of Project Director:

JUDI LINDEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MUSIC EDUCATION PROGRAMS IN ELEMENTARY SCHOOLS DESIGNATED IN BROOKLYN.

Funded Amount:

$5,000

Requested By:

JACOBS

Name of Administering State Agency:

EDUCATION DEPARTMENT
MIDORI FOUNDATION
352 7TH AVENUE, STE. 301
NEW YORK, NY  10001
(212) 767 – 1300

JUDI LINDEN

FUNDS WILL BE USED TO PROVIDE MUSIC EDUCATION TO NEW YORK CITY PUBLIC SCHOOLS. PROGRAMMING INCLUDES GENERAL MUSIC STUDIES, COMPREHENSIVE INSTRUMENT INSTRUCTION, AND ON-SITE MULTI-CULTURAL PERFORMANCES AND WORKSHOPS.

$15,000

NOLAN

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MID-YORK LIBRARY SYSTEM
1660 LINCOLN AVENUE
UTICA, NY 13502
(315) 735-8328

Name of Project Director:

MARY LOU CASKEY

Purpose of Project:

FUNDS WILL BE USED FOR BANDWIDTH FOR REGIONAL READ VIDEO CONFERENCING

Funded Amount:

$5,000

Requested By:

TOWNSEND

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MINEOLA UNION FREE SCHOOL DISTRICT
300 JACKSON AVENUE
MINEOLA, NY 11501
(516) 237-2300

Name of Project Director:

MATTHEW GAVEN

Purpose of Project:

FUNDS WILL BE USED FOR JACKSON AVENUE SCHOOL 5TH GRADE CLASS TRIP TO ALBANY INCLUDING BUS TRANSPORT AND LUNCH

Funded Amount:

$3,750

Requested By:

MCKEVITT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MOLLOY COLLEGE
1000 HEMPSTEAD AVENUE
ROCKVILLE CENTRE, NY  11572
(516) 678-5000

Name of Project Director:

CYNTHIA METZGER

Purpose of Project:

FUNDS WILL BE USED TO INCREASE COURSES AND LECTURES ON CAMPUS WHICH ACTIVELY SUPPORT DIVERSITY ISSUES. COURSES ARE NON-RELIGIOUS.

Funded Amount:

$7,000

Requested By:

HOOPER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MONTAUK LIBRARY
P.O. BOX 700
MONTAUK, NY 11954
(631) 668-3377

Name of Project Director:

KAREN RADE

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MONTAUK OBSERVATORY
P.O. BOX 3095
EAST HAMPTON, NY 11937
(631) 329-0456

Name of Project Director:

SUSAN HARDER

Purpose of Project:

FUNDS WILL BE USED FOR ASTRONOMICAL PROGRAM SUPPORT

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MONTESSORI LEARNING CENTER
155 WALDORF PARKWAY
SYRACUSE, NY 13224
(315) 449-9033

Name of Project Director:

MARY LAWYER O’CONNOR

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ACQUISITION OF A DATABASE WITH AT LEAST FIVE USER LICENSES.

Funded Amount:

$5,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MONTGOMERY COUNTY LITERACY PROJECT, INC.
28 CHURCH STREET
AMSTERDAM, NY  12010
(518) 842-4562

Name of Project Director:

MARGET BARNETT

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE INCREASED LITERACY IN MONTGOMERY COUNTY THROUGH VOLUNTEER TUTORING AND TO ENCOURAGE AND AID INDIVIDUALS DESIRING TO INCREASE LITERACY THROUGH VOLUNTEER PROGRAMS.

Funded Amount:

$4,000

Requested By:

TONKO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MORRISVILLE PUBLIC LIBRARY
87 EAST MAIN STREET
MORRISVILLE, NY 13408
(315) 684-9130

Name of Project Director:

MICHELLE FORWARD

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS AND RESTORATION OF THE LIBRARY BUILDING, TO ENHANCE USE OF LIBRARY SPACE.

Funded Amount:

$10,000

Requested By:

MAGEE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MOTHERS AGAINST DRUNK DRIVING  
199 CIRCULAR STREET  
SARATOGA SPRINGS, NY 12866  
(518) 584-7625

Name of Project Director:

KAREN PETTIGREW

Purpose of Project:

FUNDS WILL BE USED TO SEEK TO EDUCATE MIDDLE AND HIGH SCHOOL STUDENTS ABOUT THEIR ROLE IN CHOOSING TO BE ALCOHOL FREE AND THE CONSEQUENCES OF UNDERAGE DRINKING

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MOTHERS AGAINST DRUNK DRIVING (MADD)
790 WATERVLIET-SHAKER ROAD, SUITE #6
LATHAM, NY 12110
(518) 785-6233

Name of Project Director:

JOAN FLEURY

Purpose of Project:

FUNDS WILL BE USED TO SPONSOR PREVENTATIVE EDUCATION PROGRAM,
SPONSOR PUBLIC AWARENESS CAMPAIGN AND TRAIN VOLUNTEERS

Funded Amount:

$2,500

Requested By:

DUPREY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MOTHERS AGAINST DRUNK DRIVING-NYS CHARTER OFFICE
790 WATERVLIET-SHAKER ROAD
LATHAM, NY 12110
(518) 785-6233

Name of Project Director:

DENNA COHEN

Purpose of Project:

FUNDS WILL BE USED TO HELP FUND PREVENTION EDUCATION PROGRAMS IN LOCAL SCHOOLS AND A PUBLIC AWARENESS CAMPAIGN, TRAIN VOLUNTEERS TO HELP VICTIMS AND SURVIVORS, AND IMPLEMENT ALCOHOL EDU

Funded Amount:

$2,500

Requested By:

BOYLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MS 243, THE CENTER SCHOOL
270 WEST 70TH STREET
NEW YORK, NY 10023
(212) 678-2791

Name of Project Director:

ELAINE SCHWARTZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN EDUCATIONAL AFTERSCHOOL PROGRAM.

Funded Amount:

$3,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

EDUCATION DEPARTMENT
MT. VERNON EDUCATIONAL FOUNDATION
165 NORTH COLUMBUS AVENUE
MOUNT VERNON, NY  10553
(914) 667-0127

PAUL R. HERRICK

FUNDS WILL BE USED TO IMPROVE THE QUALITY OF EDUCATION IN
MOUNT VERNON BY SUPPORTING INNOVATIVE PROGRAMS AND
EDUCATORS.

$10,000

PRETLOW

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MUSEUM OF JEWISH HERITAGE
36 BATTERY PLACE
NEW YORK, NY 10280
(212) 968 – 1800

Name of Project Director:

RINA GOLDBERG

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT COLLECTION, CATALOGING,
PRESERVING, RESEARCHING, SECURING AND INTERPRETING HISTORICAL
MATERIALS THAT COMPRIZE THE MUSEUM’S COLLECTION.

Funded Amount:

$100,000

Requested By:

CYMBROWTIZ-S, FARRELL, SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MUSIC OUTREACH/LEARNING THROUGH MUSIC, INC.
677 WEST END
NEW YORK, NY  10025
(212) 316-2000

Name of Project Director:

EUGEN R. GAMIEL

Purpose of Project:

THE FUNDS WILL CONTINUE TO SUPPORT THE MUSIC OUTREACH PROGRAM IN VARIOUS SCHOOLS IN THE BRONX.

Funded Amount:

$1,800

Requested By:

DIAZ-L

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

MUSIC OUTREACH/LEARNING THROUGH MUSIC, INC.
677 WEST END AVENUE
NEW YORK, NY 10025
(212) 316-2000

Name of Project Director:

EUGENE R. GAMIEL

Purpose of Project:

FUNDS WILL BE USED FOR IN-SCHOOL MUSIC AND LITERACY WORKSHOP.

Funded Amount:

$2,500

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MYERS MEMORIAL LIBRARY
23 IVORY ROAD
FREWSBURG, NY 14738
(716) 569-5515

Name of Project Director:

CINDY SCHNEIZER

Purpose of Project:

FUNDS WILL BE USED TO EXPAND LARGE PRINT BOOK COLLECTION, COMPUTER UPGRADE AND NEW CIRCULATION DESK

Funded Amount:

$5,000

Requested By:

GIGLIO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NAACP WILLIAMSBRIDGE BRANCH
670-680 EAST 219TH STREET
BRONX, NY 10467
(718) 882-7100

Name of Project Director:

SHIRLEY FEARON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MATERIALS FOR THE MENTORING PROGRAM.

Funded Amount:

$4,000

Requested By:

HEASTIE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NAZARETH COLLEGE OF ROCHESTER
4245 EAST AVENUE
ROCHESTER, NY  14618
(585) 389-2412

Name of Project Director:

DR. LINDA JANEII

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HEALTH CARE SERVICES TO ELDERLY CLIENTS AT CENTRO DORO USING STUDENTS AND FACULTY FROM NAZARETH COLLEGE SCHOOL OF HEALTH AND HUMAN SERVICES.

Funded Amount:

$5,000

Requested By:

GANTT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEST + M
111 COLUMBIA STREET
NEW YORK, NEW YORK 10002
(212) 260-2433

Name of Project Director:

ANTHONY STARBUCK, PTA PRESIDENT

Purpose of Project:

FUNDS WILL BE USED TO: INSTALL A SOUND SYSTEM IN THE AUDITORIUM; PURCHASE SOUND EQUIPMENT TO IMPROVE PLAYBACK QUALITY IN CLASSROOMS; PURCHASE PORTABLE SOUND SYSTEM FOR USE IN COURTYARD AND LUNCHROOM; PURCHASE FURNITURE FIXTURES; AND PURCHASE AIR CONDITIONERS NEEDED (PTA ROOM, CLASSROOMS, ETC.).

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW HARTFORD CENTRAL SCHOOL DISTRICT
33 OXFORD ROAD
NEW HARTFORD, NY 13413
(315) 624-1211

Name of Project Director:

JENNIFER SPRING

Purpose of Project:

FUNDS WILL BE USED FOR SCOREBOARD FOR AQUA CENTER

Funded Amount:

$10,000

Requested By:

TOWNSEND

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW HYDE PARK-GARDEN CITY PARK UNION FREE SCHOOL DISTRICT
1950 HILLSIDE AVENUE
NEW HYDE PARK, NY 11040
(516) 352-2227

Name of Project Director:

DIANE WEISS

Purpose of Project:

FUNDS WILL BE USED FOR MANOR OAKS-WILLIAM R. BOWIE SCHOOL 5TH GRADE CLASS TRIP TO ALBANY INCLUDING BUS TRANSPORT AND LUNCH

Funded Amount:

$3,750

Requested By:

MCKEVIKT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW HYDE PARK-GARDEN CITY UNION FREE SCHOOL DISTRICT
1950 HILLSIDE AVENUE
NEW HYDE PARK, NY 11040
(516) 352-6257 221

Name of Project Director:

DR. REGINA COHN

Purpose of Project:

FUNDS WILL BE USED FOR SMART BOARDS

Funded Amount:

$5,000

Requested By:

MCKEVITT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW INTERDISCIPLINARY SCHOOL
430 SILLS ROAD
YAPHANK, NY 11980
(631) 924-5583

Name of Project Director:

HELEN WILDER

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH COSTS ASSOCIATED WITH ESTABLISHING A LIBRARY/MEDIA ROOM FOR PRESCHOOLERS.

Funded Amount:

$10,000

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW MEADOWS SCHOOL
100 MALTA COMMON
BALLSTON SPA, NY 12020
(518) 899-9235

Name of Project Director:

CARLA BANNICK

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY OUTREACH

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW ROCHELLE PUBLIC LIBRARY
1 LIBRARY PLAZA
NEW ROCHELLE, NY  10801
(914) 632-7878 12

Name of Project Director:

THOMAS GEOFFINO

Purpose of Project:

FUNDS WILL BE USED TO FUND A COMPUTER LAB THAT WILL SUPPORT COMPUTER EDUCATION PROGRAMS.

Funded Amount:

$5,000

Requested By:

PAULIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW ROCHELLE PUBLIC LIBRARY
1 LIBRARY PLAZA
NEW ROCHELLE, NY 10801
(914) 632-7878

Name of Project Director:

THOMAS GEOFFINO

Purpose of Project:

FUNDS WILL BE USED TOWARD A MODERN COMPUTER LAB AND COMPUTER EDUCATION PROGRAMS. THE LAB WILL SERVE UP TO 500 PATRONS WEEKLY, ENABLING PATRONS TO TAKE ADVANTAGE OF THE EDUCATIONAL, AS WELL AS, ECONOMIC TOOLS AND OPPORTUNITIES PRESENTED BY COMPUTER TECHNOLOGY.

Funded Amount:

$5,000

Requested By:

LATIMER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK ACADEMY OF MEDICINE
1216 5TH AVENUE
NEW YORK, NEW YORK  10029
(212) 822 – 7207

Name of Project Director:

PATRICIA J. VOLLAND

Purpose of Project:

FUNDS WILL BE USED TO ENSURE ON GOING PUBLIC ACCESS TO CURRENT HEALTH AND MEDICAL INFORMATION FOR PROFESSIONALS AND CITIZENS OF NEW YORK STATE.

Funded Amount:

$50,000

Requested By:

CANESTRARI, GLICK, SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK HALL OF SCIENCE
47-01 111TH STREET
CORONA, NY  11368
(718) 669-0005

Name of Project Director:

MARILYN HOYT

Purpose of Project:

FUNDS WILL BE USED TO RECRUIT MINORITY AND FEMALE STUDENTS INTO THE FIELD OF SCIENCE THROUGH THEIR WORK AS PAID EXHIBIT INTERPRETERS AT THE HALL OF SCIENCE.

Funded Amount:

$12,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK HALL OF SCIENCE
47-01 111 STREET
CORONA, NY 11368
(718) 699-0005

Name of Project Director:

DANIEL WEMPA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS ASSOCIATED WITH PROVIDING EDUCATIONAL PROGRAMS FOR SCHOOL AGE CHILDREN.

Funded Amount:

$2,000

Requested By:

CARROZZA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK HALL OF SCIENCE
47-01 111TH STREET
CORONA, NY 11368
(718) 699-0005

Name of Project Director:

DAN WEMPA

Purpose of Project:

FUNDS WILL BE USED FOR AN EDUCATION PROGRAM FOR YOUNG CHILDREN.

Funded Amount:

$2,000

Requested By:

YOUNG

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK HALL OF SCIENCE
47-01 111TH STREET
CORONA, NY  11368
(718) 699-0005

Name of Project Director:

MARILYN HOYT

Purpose of Project:

FUNDS WILL BE USED TO RECRUIT MINORITY AND FEMALE STUDENTS INTO THE FIELD OF SCIENCE, THROUGH UTILIZING THEM AS PAID EXHIBIT INTERPRETERS AT THE HALL OF SCIENCE.

Funded Amount:

$6,500

Requested By:

AUBRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK HALL OF SCIENCE
47-01 111TH STREET
CORONA, NY 11368
(718) 699-0005

Name of Project Director:

MARILYN HOYT

Purpose of Project:

FUNDS WILL BE USED TO RECRUIT MINORITY AND FEMALE STUDENTS INTO THE FIELD OF SCIENCE THROUGH THEIR WORK AS PAID EXHIBIT INTERPRETERS AT THE HALL OF SCIENCE.

Funded Amount:

$1,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK HALL OF SCIENCE
4701 111TH STREET
CORONA, NY  11368
(718) 699-0005

Name of Project Director:

DAN WEMPA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EARLY CHILDHOOD EXHIBITION PROGRAM AT THE HALL OF SCIENCE.

Funded Amount:

$2,000

Requested By:

NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK HALL OF SCIENCE
47-01 11TH STREET
QUEENS, NY  11368
(718) 699-0005

Name of Project Director:

DAN WEMPA

Purpose of Project:

FUNDS WILL BE USED TO CONNECT THE NY HALL OF SCIENCE WITH GRADE SCHOOL CHILDREN IN THE REGION 8, BROOKLYN SCHOOL DISTRICT BY SENDING EDUCATORS TO THE SCHOOLS AND BRINGING THE CHILDREN TO THE HALL OF SCIENCE. THIS PROGRAM WILL ENCOURAGE SCIENCE IN ELEMENTARY SCHOOL CHILDREN.

Funded Amount:

$10,000

Requested By:

LENTOL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK METROPOLITAN REFERENCE AND RESEARCH AGENCY
57 EAST 11TH STREET, 4TH FLOOR
NEW YORK, NY 10005
(212) 228-2320 10

Name of Project Director:

DOTTIE HIEBING

Purpose of Project:

FUNDS WILL BE USED FOR THE METRO DELIVERY SERVICE THAT ALLOWS NEW YORK LIBRARIES TO SEND AND RECEIVE BOOKS AND OTHER MATERIALS QUICKLY AND EFFICIENTLY AT NO CHARGE.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK PUBLIC LIBRARY, ASTOR LENOX AND TILDEN FOUNDATIONS
455 FIFTH AVENUE
NEW YORK, NY   10016
(212) 340-0910

Name of Project Director:

KAY CASSELL

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE COLLECTIONS OF BOTH PRINT
AND NON-PRINT MATERIALS FOR ALL AGES AT THE ROOSEVELT ISLAND,
WEBSTER AND 67TH STREET BRANCH LIBRARIES.

Funded Amount:

$21,000

Requested By:

GRANNIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK PUBLIC LIBRARY, ASTOR LENOX AND TILDEN FOUNDATIONS
FIFTH AVENUE AND 42ND STREET, ROOM 73
NEW YORK, NY 10018
(212) 930-0550

Name of Project Director:

ALEXA TALCIK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW MATERIALS FOR THE HUDSON PARK, JEFFERSON MARKET, NEW AMSTERDAM, AND OTTENDORFER BRANCH LIBRARIES.

Funded Amount:

$4,000

Requested By:

GLICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK PUBLIC LIBRARY, ASTOR LENOX AND TILDEN FOUNDATIONS  
5TH AVENUE AND 42ND STREET  
NEW YORK, NY 10018  
(212) 930-0051

Name of Project Director:

CATHY DENTE

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN SERVICES AT THE BLOOMINGDALE,  
GEORGE BRUCE, AND MORNINGSIDE HEIGHTS BRANCHES.

Funded Amount:

$7,500

Requested By:

O'DONNELL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK PUBLIC LIBRARY, ASTOR LENOX AND TILDEN FOUNDATIONS
455 FIFTH AVENUE
NEW YORK, NY  10016
(212) 340-0893

Name of Project Director:

KAY A. CASSELL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE PRINT AND NON-PRINT MATERIALS FOR A CHINESE HERITAGE COLLECTION AT THE CHATHAM SQUARE REGIONAL LIBRARY ($32,400), TO ADD GENERAL PRINT AND NON-PRINT MATERIAL FOR ALL GROUPS AT THE SEWARD PARK LIBRARY ($32,400), NEW AMSTERDAM LIBRARY ($15,600), AND HAMILTON FISH BRANCH LIBRARY ($39,600).

Funded Amount:

$120,000

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK PUBLIC LIBRARY, ASTOR LENOX AND TILDEN FOUNDATIONS
FIFTH AVENUE AND 42ND STREET
NEW YORK, NY 10018
(212) 930-0550

Name of Project Director:

ROBERT MCBRIEN

Purpose of Project:

FUNDS WILL BE USED FOR THE ACQUISITION AND ADDITION OF
MATERIALS FOR ADULT, YOUNG ADULT, AND CHILDREN'S COLLECTIONS
AT THE MORRIS PARK, ALLERTON, VAN CORTLAND, VAN NESE, AND
MOSHOLU BRANCHES.

Funded Amount:

$15,000

Requested By:

RIVERA-N

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEW YORK PUBLIC LIBRARY, ASTOR LENOX AND TILDEN FOUNDATIONS
455 5TH AVENUE
NEW YORK, NY 10016
(212) 340-0833

Name of Project Director:

CATHY DENTE

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE COLLECTIONS OF BOTH PRINT AND NON-PRINT MATERIALS FOR ALL AGES.

Funded Amount:

$6,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NEW YORK PUBLIC LIBRARY, ASTOR LENOX AND TILDEN FOUNDATIONS
FIFTH AVENUE AND 42ND STREET
NEW YORK, NY 10018
(212) 930-0051

Name of Project Director:

CATHY DENTE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BOOKS AND OTHER MATERIAL FOR THE EASTCHESTER, EDENWALD, AND WAKEFIELD BRANCH LIBRARIES.

Funded Amount:

$5,000

Requested By:

HEASTIE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NIAGARA COUNTY COMMUNITY COLLEGE
3111 SAUNDERS SETTLEMENT ROAD
SANBORN, NY  14132
(716) 614-6222

Name of Project Director:

DR. JAMES P. KLYCZEK

Purpose of Project:

FUNDS WILL BE USED TO SUPPLEMENT THE COLLEGE'S COMPUTER AIDED DRAFTING AND DESIGN PROGRAMS THAT SERVE STUDENTS FROM ALL OVER WNY.

Funded Amount:

$10,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NIAGARA UNIVERSITY
SENIOR DRIVE
NIAGARA UNIVERSITY, NY 14109
(716) 286-8287

Name of Project Director:

LAUREEN BUCKLEY

Purpose of Project:

FUNDS WILL BE USED TO HELP PRODUCE A NATIVE AMERICAN CHILDREN'S BOOKS ILLUSTRATIONS SHOW/EXHIBIT.

Funded Amount:

$5,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NIOGA LIBRARY SYSTEM
6575 WHEELER ROAD
LOCKPORT, NY 14094
(716) 434-6167

Name of Project Director:

THOMAS C. BINDEMAN

Purpose of Project:

FUNDS WILL BE USED THROUGHOUT THE VARIOUS LIBRARIES IN THE NIAGARA COMMUNITY TO PURCHASE MATERIALS, EQUIPMENT, SOFTWARE AS NEEDED.

Funded Amount:

$7,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NIOGA LIBRARY SYSTEM
6575 WHEELER ROAD
LOCKPORT, NY 14094
(716) 434-9253

Name of Project Director:

TOM BINDEMAN

Purpose of Project:

FUNDS WILL BE USED FOR ELECTRONIC REFERENCE WORKS

Funded Amount:

$1,500

Requested By:

HAWELEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NORTH BABYLON PUBLIC LIBRARY
815 DEER PARK AVENUE
NORTH BABYLON, NY 11703
(631) 669-4020

Name of Project Director:

MARC HOROWITZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE 5 LAPTOP COMPUTERS TO BE USED BY TAX VOLUNTEERS DURING TAX SEASON AND USED BY STAFF AND PATRONS DURING THE BALANCE OF THE YEAR

Funded Amount:

$7,200

Requested By:

BOYLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NORTH SHORE CENTRAL SCHOOL DISTRICT NO. 1
112 FRANKLIN AVENUE
SEA CLIFF, NY 11579
(516) 227-7801

Name of Project Director:

ED MALNICK

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE PROFESSIONAL DEVELOPMENT AND TO TEACH LITERACY.

Funded Amount:

$5,000

Requested By:

LAVINE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NORTH SHORE CHILD AND FAMILY GUIDANCE CENTER
480 OLD WESTBURY ROAD
ROSSLYN HEIGHTS, NY 11577
(516) 626 – 1971

Name of Project Director:

MARION LEVINE

Purpose of Project:

TO FUND THE INTENSIVE SUPPORT PROGRAM (ISP) WHICH WILL ENHANCE
THE SUPPORTIVE SERVICES PROVIDED TO AT – RISK – YOUTH.

Funded Amount:

$125,000

Requested By:

LAVINE, NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NORTH SYRACUSE SCHOOL DISTRICT - MAIN STREET EARLY EDUCATION
205 SOUTH MAIN STREET
NORTH SYRACUSE, NY  13212
(315) 218-2200

Name of Project Director:

KATHLEEN ESPOSITO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE DEVELOPMENTALLY APPROPRIATE
PHYSICAL THERAPY EQUIPMENT TO CHILDREN WITH SIGNIFICANT GROSS
MOTOR DELAYS.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - IS 14
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

ANNE TULLY

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE SCIENCE DEPARTMENT TO NEW SCIENCE AND TECHNOLOGY STANDARDS AT SHELLBANK IS 14.

Funded Amount:

$2,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - IS 285
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

EDWARD GENTILE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE INTERGENERATIONAL CONCERTS AND PLAYS AT MEYER LEVIN IS 285.

Funded Amount:

$2,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - JAMES MADISON HIGH SCHOOL
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

JODIE COHEN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE ADDITIONAL AIR CONDITIONERS FOR CLASSROOMS USED BY SUMMER SCHOOL STUDENTS AT MADISON HIGH SCHOOL.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - PUBLIC SCHOOL 109
5619 FLATLANDS AVENUE
BROOKLYN, NY 11234
(718) 693-3426

Name of Project Director:

DENISE TALLEY

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE EXTRACURRICULAR PROGRAMS FOR STUDENTS.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - PUBLIC SCHOOL 119
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

LISA FERNANDEZ

Purpose of Project:

FUNDS WILL BE USED FOR THE REPLACEMENT OF OBSOLETE COMPUTER HARDWARE AT PUBLIC SCHOOL 119.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - PUBLIC SCHOOL 194
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

MARY ZIISSLER-LYNCH

Purpose of Project:

FUNDS WILL BE USED FOR THE LITERATURE ENRICHMENT PROGRAM TO PURCHASE AUDIO BOOKS AND CORRESPONDING LITERATURE TO ENHANCE STUDENT'S ACADEMIC SUCCESS AT P.S. 194.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - PUBLIC SCHOOL 197
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

SALLY SAVEDOFF

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE EARLY LITERACY PROGRAM FOR K-2ND GRADES AT P.S. 197.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - PUBLIC SCHOOL 206
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

GEMINA CARLOTTA

Purpose of Project:

FUNDS WILL BE USED FOR THE REPLACEMENT OF OBSOLETE COMPUTER HARDWARE AT PUBLIC SCHOOL 206.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - PUBLIC SCHOOL 208
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

KRISTY PARRIS

Purpose of Project:

FUNDS WILL BE USED FOR AFTER SCHOOL ENRICHMENT ACTIVITIES AT PUBLIC SCHOOL 208.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - PUBLIC SCHOOL 244
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

GRACE ALESIA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT LITERACY PROGRAMS AND LANGUAGE ARTS PERFORMANCE IN GRADES K-5 AT PUBLIC SCHOOL 244.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - PUBLIC SCHOOL 251
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

STEVEN BOYER

Purpose of Project:

FUNDS WILL BE USED TO OPERATE AFTER SCHOOL ACTIVITIES AT PUBLIC SCHOOL 251.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - PUBLIC SCHOOL 52
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

ILENE ALTSCHUL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT LITERACY AND LANGUAGE ARTS PERFORMANCE IN GRADES K-5 AT PUBLIC SCHOOL 52.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - SAMUEL TILDEN HIGH SCHOOL
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

DIANE VARANO

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE EXTRACURRICULAR PROGRAMS FOR TILDEN HIGH SCHOOL STUDENTS AND THE COMMUNITY.

Funded Amount:

$2,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - SHEEPSHEAD BAY HIGH SCHOOL
5619 FLATLANDS AVENUE
BROOKLYN, NY  11234
(718) 968-6204

Name of Project Director:

REESA LEVY

Purpose of Project:

FUNDS WILL BE USED FOR THE TUTORING PROGRAM IN MATHEMATICS AND SCIENCE.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NYC DEPARTMENT OF EDUCATION - SOUTH SHORE HIGH SCHOOL
5619 FLATLANDS AVENUE
BROOKLYN, NY 11234
(718) 968-6204

Name of Project Director:

JUDY HENRY

Purpose of Project:

FUNDS WILL BE USED TO UPDATE MATH TECHNOLOGY THROUGH THE USE OF COMPUTERS.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

NYC LAB SCHOOL FOR COLLABORATIVE STUDIES
33 WEST 17TH STREET
NEW YORK, NY  10011
(212) 691-6119

Name of Project Director:

GARY EISINGER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FIVE INSTRUCTIONAL DESKTOP COMPUTERS WITH BUNDLED SOFTWARE, WHICH INCLUDES CPU, MONITOR, KEYBOARD, MOUSE, SOFTWARE - MICROSOFT OFFICE AND A SERVICE CONTRACT, CABLES FOR INTERNET HOOKUP, AND OTHER ADDITIONAL MATERIALS NECESSARY FOR NETWORKING THE FIVE COMPUTERS.

Funded Amount:

$5,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

EDUCATION DEPARTMENT
OCEANSIDE HIGH SCHOOL
3160 SKILLMAN AVENUE
OCEANSIDE, NY 11572
(516) 678-8594

PENNY ELLIS

FUNDS WILL BE USED TO PAIR STUDENTS WITH INTELLECTUAL DISABILITIES IN ONE-ON-ONE FRIENDSHIPS WITH OTHER HIGH SCHOOL STUDENTS OFFERING A NEW WAY OF LIFE AND INCLUSION.

$5,000

WEISENBERG

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

OCEANSIDE LIBRARY
30 DAVIDSON AVENUE
OCEANSIDE, NY 11572
(516) 766-2360

Name of Project Director:

EVELYN ROTHSCILD

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM ENHANCEMENT

Funded Amount:

$5,000

Requested By:

BARRA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

OCEANSIDE SCHOOL DISTRICT
145 MERLE AVENUE
OCEANSIDE, NY  11572
(516) 678-1215

Name of Project Director:

DR. HERB BROWN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A PROGRAM DESIGNED TO PREVENT STUDENTS FROM DROPPING OUT OF HIGH SCHOOL BY ESTABLISHING A MENTOR FOR EACH STUDENT, AND TO PROVIDE ADDITIONAL EDUCATION AND OTHER NEEDED SUPPORT.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

OCEANSIDE UNION FREE SCHOOL DISTRICT
145 MERLE AVENUE
OCEANSIDE, NY 11572
(516) 678-1215

Name of Project Director:

DR. HERB BROWN

Purpose of Project:

FUNDS WILL BE USED FOR SCIENCE AND COMPUTER PURCHASES

Funded Amount:

$17,500

Requested By:

BARRA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

OLD STONE HOUSE OF BROOKLYN
P.O. BOX 150613
BROOKLYN, NY 11215
(718) 768-3195

Name of Project Director:

KIMBERLY MAIER

Purpose of Project:

FUNDS WILL BE USED TO BUILD THE EDUCATION PROGRAM BY WORKING WITH SCHOOLS, PROVIDING IN-STATE FIELD TRIPS AND IN-CLASS PRESENTATIONS THAT CELEBRATE THE RICH HISTORY OF THE REVOLUTIONARY ERA, RAISES AWARENESS OF THE OLD STONE'S HOUSE UNIQUE PLACE IN AMERICAN REVOLUTION AND EVOLVING HISTORY OF BROOKLYN, NY AND THE UNITED STATES.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ONONDAGA CENTRAL SCHOOL DISTRICT
4466 SOUTH ONONDAGA ROAD
NEDROW, NY 13210
(315) 492-1701

Name of Project Director:

JOSEPH ROTELLA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A BUILDING LEVEL SAFETY AND SECURITY SYSTEM, AS WELL AS, TO PURCHASE EQUIPMENT.

Funded Amount:

$20,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ONONDAGA COUNTY PUBLIC LIBRARY
447 SOUTH SALINA STREET
SYRACUSE, NY  13202
(315) 435-1800

Name of Project Director:

JOYCE M. LATHAM

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE YOUNG ADULT INITIATIVE THROUGH THE PURCHASE OF BOOKS AND OTHER LIBRARY MATERIALS.

Funded Amount:

$4,500

Requested By:

CHRISTENSEN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ONONDAGA-CORTLAND MADISON BOCES SCHOOL LIBRARY SYSTEM
6075 EAST MOLLOY ROAD, RODAX 7
SYRACUSE, NY 13211
(315) 433-2665

Name of Project Director:

JUDITH DZIKOWSKI

Purpose of Project:

FUNDS WILL BE USED TO UNDERSTAND DATA DERIVED FROM ELA ASSESSMENTS TO IMPROVE LIBRARY INSTRUCTION, COLLECTIONS, AND COLLABORATION WITH CLASSROOM TEACHERS IN THE NORTH SYRACUSE, LIVERPOOL, EAST SYRACUSE-MINOA AND FABIUS-POMPEY SCHOOL DISTRICTS.

Funded Amount:

$20,000

Requested By:

STIRPE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

OPPENHEIM-EPHRATAH CENTRAL SCHOOL DISTRICT
6486 STATE HIGHWAY 29
ST. JOHNSVILLE, NY 13452
(518) 568-2014

Name of Project Director:

DAN M. RUSSOM

Purpose of Project:

FUNDS WILL BE USED FOR PURCHASE AND INSTALLATION OF SECURITY SYSTEM AND RECONFIGURING FRONT ENTRANCE OF SCHOOL

Funded Amount:

$5,000

Requested By:

BUTLER-M

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PARENTS ASSOCIATION OF PUBLIC SCHOOL 158M
1458 YORK AVENUE
NEW YORK, NY 10021
(212) 879-2181

Name of Project Director:

SHOLEH BRAHIMY

Purpose of Project:

FUNDS WILL BE USED TO OBTAIN AND UPDATE EDUCATIONAL MATERIALS FOR LIBRARY AND CLASSROOM USE.

Funded Amount:

$10,000

Requested By:

GRANNIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PARENT-TEACHER ASSOCIATION PUBLIC SCHOOL IS 217M, INC.
645 MAIN STREET
ROOSEVELT ISLAND, NY 10044
(212) 980-0294

Name of Project Director:

HALIMA AOUCHETTE AND SANDY NEWELL

Purpose of Project:

FUNDS WILL BE USED TO OBTAIN AND UPDATE EDUCATIONAL MATERIALS FOR LIBRARY AND CLASSROOM USE.

Funded Amount:

$10,000

Requested By:

GRANNIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PARMA PUBLIC LIBRARY
7 WEST AVENUE, P.O. BOX 785
HILTON, NY 14468
(585) 392-8350

Name of Project Director:

SALLY SNOW

Purpose of Project:

FUNDS WILL BE USED FOR DATABASE SUBSCRIPTIONS

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PARTNERS FOR ARTS EDUCATION, INC.
501 WEST FAYETTE STREET, DELAVAN STUDIO 221
SYRACUSE, NY 13204
(315) 234-9911

Name of Project Director:

LAURA REEDER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE COMMUNITY, CULTURE AND EDUCATION INITIATIVE IN SYRACUSE CITY SCHOOLS.

Funded Amount:

$10,000

Requested By:

CHRISTENSEN, MAGNARELLI

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PARTNERS FOR ARTS EDUCATION, INC.
P.O. BOX 6354
SYRACUSE, NY 13217-6354
(315) 234-9911

Name of Project Director:

LAURA REEDER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE OPERATING EXPENSES OF THE ORGANIZATION, INCLUDED BUT NOT LIMITED TO PROVIDING SERVICES FOR SCHOOL DISTRICTS.

Funded Amount:

$20,000

Requested By:

CHRISTENSEN, MAGNARELLI

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PARTNERSHIP WITH CHILDREN, INC.
299 BROADWAY – SUITE 1300
NEW YORK, NY 10007
(212) 689 – 9500

Name of Project Director:

MICHELLE SIDRANE

Purpose of Project:

FUNDING IS FOR THE OPEN HEART – OPEN MIND PROGRAM AT P.S. 111/SIGMA.

Funded Amount:

$75,000

Requested By:

NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PATCHOGUE MEDFORD LIBRARY
54-60 EAST MAIN STREET
PATCHOGUE, NY  11772
(631) 654-4700

Name of Project Director:

JUDY GIBBARA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF MATERIALS FOR THE CHILDREN’S DEPARTMENT.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PATCHOGUE MEDFORD SCHOOL DISTRICT
241 SOUTH OCEAN AVENUE
PATCHOGUE, NY  11772
(631) 687-6380

Name of Project Director:

MICHAEL MASTOW

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SURVEILLANCE CAMERAS FOR THE MIDDLE SCHOOL FOR PREVENTION PURPOSES.

Funded Amount:

$6,000

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PAT-KAM TRANSPORTATION SERVICES, INC.
705 NASSAU ROAD
UNIONDALE, NY 11553
(516) 486-7887

Name of Project Director:

RON CLAHAR

Purpose of Project:

FUNDS WILL BE USED FOR COSTS ASSOCIATED WITH THE TRANSPORTATION OF STUDENTS.

Funded Amount:

$15,000

Requested By:

HOOPER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PAVILION PUBLIC LIBRARY
P.O. BOX 422, 5 WOODROW DRIVE
PAVILION, NY 14525
(585) 344-0352

Name of Project Director:

WALTER WENHOLD

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT AND MATERIALS

Funded Amount:

$4,000

Requested By:

BURLING

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PAWLING FREE LIBRARY
11 BROAD STREET
PAWLING, NY 12564
(845) 855-3444

Name of Project Director:

JENNIFER SIMMONS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS AND OTHER TECHNOLOGICAL UPGRADES

Funded Amount:

$2,500

Requested By:

BALL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PECK MEMORIAL LIBRARY
24 EAST MAIN STREET, P.O. BOX 325
MARATHON, NY 13083
(607) 849-6135

Name of Project Director:

MARY FRANK

Purpose of Project:

FUNDS WILL BE USED FOR THE REPLACEMENT OF WINDOWS

Funded Amount:

$5,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PENCIL, INC.
30 WEST 26TH STREET, 5TH FLOOR
NEW YORK, NY 10010
(646) 638-0565

Name of Project Director:

MATTHEW GROSS

Purpose of Project:

FUNDS WILL BE USED TO INCREASE THE CAPACITY OF PRIVATE SECTOR/PUBLIC SCHOOL PARTNERSHIPS THROUGH OUTREACH TO NEW BUSINESSES AND EMPLOYEE RECRUITMENT AT PARTICIPATING BUSINESSES.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PENCIL, INC.
30 WEST 26TH STREET, 5TH FLOOR
NEW YORK, NY  10010
(646) 638-0565

Name of Project Director:

MICHAEL HABERMAN

Purpose of Project:

FUNDS WILL BE USED TO ADVANCE THE GOALS OF PENCIL TO BRING THE RESOURCES AND EXPERTISE OF THE PRIVATE SECTOR TO PUBLIC SCHOOLS.

Funded Amount:

$7,500

Requested By:

BING

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PENCIL, INC.
30 WEST 26TH STREET, 5TH FLOOR
NEW YORK, NY 10010
(646) 638-0565

Name of Project Director:

MICHAEL HABERMAN

Purpose of Project:

FUNDS WILL BE USED TO EXPAND DEVELOPING PRIVATE SECTOR PARTNERSHIPS WITH PUBLIC SCHOOLS IN A MEANINGFUL WAY THAT IMPROVES STUDENT ACHIEVEMENT.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PENINSULA PUBLIC LIBRARY
280 CENTRAL AVENUE
LAWRENCE, NY  11559
(516) 239-3262

Name of Project Director:

ARLEEN REO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND SUPPLIES FOR CHILDREN’S LIBRARY READING PROGRAM.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PHELPS CLIFTON SPRINGS SCHOOL DISTRICT
1490 ROUTE 488
CLIFTON SPRINGS, NY 14432
(315) 548-6495

Name of Project Director:

MIKE FORD

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF EQUIPMENT (SECURITY CAMERA AND ELECTRONIC ACCESS) TO PROVIDE SECURITY FOR STUDENTS AND FACULTY

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PHILLIPS FREE LIBRARY
37 SOUTH MAIN STREET, P.O. BOX 7
HOMER, NY 13077
(607) 749-4616

Name of Project Director:

KATHY HUGHES

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN’S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PINWHEEL PROJECT, INC.
P.O. BOX 504
BEDFORD, NY  10506
(914) 273-7330

Name of Project Director:

SANDEE MARTENSEN

Purpose of Project:

FUNDS WILL BE USED FOR A LITERACY PROGRAM IN WHICH CHILDREN ARE ENCOURAGED TO READ BY HEARING AUTHOR’S ENTHUSIASM AS THE AUTHORS READ THEIR BOOKS TO THE CHILDREN. SIGNED COPIES OF BOOKS WILL BE PROVIDED TO THE CHILDREN.

Funded Amount:

$4,000

Requested By:

BRADLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PLAINEDGE PUBLIC LIBRARY
1060 HICKVILLE ROAD
MASSAPEQUA, NY 11758
(516) 735-4133

Name of Project Director:

MARILYN KAPPENBERG

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT IMPROVEMENT

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PLAINVIEW-OLD BETHPAGE PUBLIC LIBRARY
999 OLD COUNTRY ROAD
PLAINVIEW, NY  11803
(516) 938-0077

Name of Project Director:

GRETCHEN BROWNE

Purpose of Project:

FUNDS WILL BE USED FOR THE "FRIENDS OF THE LIBRARY" PROGRAM, WHICH INCLUDES CONCERTS AND LECTURES FOR THE BENEFIT OF THE COMMUNITY.

Funded Amount:

$2,000

Requested By:

LAVINE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PRESTON HIGH SCHOOL
2780 SCHURZ AVENUE
BRONX, NY  10465
(718) 863-9134

Name of Project Director:

LUCIELLE COLDRICK

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE COMPUTER LAB AND LIBRARY.

Funded Amount:

$5,000

Requested By:

BENEDETTO

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PROGRESS HIGH SCHOOL
850 GRAND STREET
BROOKLYN, NY  11206
(718) 387-2800  233

Name of Project Director:

JUAN MARTINEZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TECHNICAL ASSISTANCE AND EDUCATIONAL MANAGEMENT SERVICES TO ENTITIES THROUGHOUT NORTH BROOKLYN.

Funded Amount:

$10,000

Requested By:

TOWNS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PROJECT GRD LONG ISLAND, INC.
290A BABYLON TURNPIKE
ROOSEVELT, NY 11575
(516) 223-5430

Name of Project Director:

ROBERT TROIANO

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS AIMED AT INCREASING HIGH SCHOOL GRADUATION RATES IN VARIOUS HIGH NEEDS SCHOOLS

Funded Amount:

$2,500

Requested By:

WALKER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PROSPECT PARK ALLIANCE, INC.
95 PROSPECT PARK WEST
BROOKLYN, NY  11215
(718) 965-8951

Name of Project Director:

TUPPER THOMAS

Purpose of Project:

FUNDS WILL BE USED TO TAKE CLASSES AT LOCAL SCHOOLS. PARTICIPANTS WILL VISIT THE AUDOBON CENTER AT PROSPECT PARK AS A WAY TO SUPPLEMENT THEIR SCIENCE CLASSES.

Funded Amount:

$5,000

Requested By:

LENTOL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PTA SCHOOL 19
550 MYRTLE AVENUE
ALBANY, NY  12208
(518) 605-7601

Name of Project Director:

RUTH SADINSKY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR THE PLAYGROUND AT ALBANY’S SCHOOL 19.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC POLICY AND EDUCATION FUND
94 CENTRAL AVENUE
ALBANY, NY 12206
(518) 465-4600 111

Name of Project Director:

NOELENE SMITH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN INTENSIVE COMMUNITY-BASED STUDENT/PARENT ADVOCACY PROGRAM THAT ENABLES PARENTS AND THEIR CHILDREN TO GAIN BETTER ACCESS TO EDUCATIONAL OPPORTUNITIES OFFERED AT THE ALBANY PUBLIC SCHOOL DISTRICT; HELPS PARENTS TO BECOME PROACTIVE AND EFFECTIVE ADVOCATES ON BEHALF OF THEIR CHILDREN; AND INCREASES STUDENTS ACADEMIC SUCCESS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC POLICY AND EDUCATION FUND
235 LIVINGSTON AVENUE
ALBANY, NY  12210
(518) 436-1279

Name of Project Director:

BARBARA SMITH

Purpose of Project:

FUNDS WILL BE USED FOR AN ADVOCACY PROGRAM DESIGNED TO INTEGRATE AND ORIENT INNER-CITY PARENTS AND STUDENTS TO THE PURPOSE, AS WELL AS THE IMPORTANCE, OF EDUCATION AND ACADEMIC ACHIEVEMENT.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 1
8 HENRY STREET
NEW YORK, NY  10038
(212) 587-5634

Name of Project Director:

MS. KERRY LI, PRESIDENT PTA

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL TRIPS WITHIN NYS; AND TO PURCHASE SPORTS EQUIPMENT FOR YEAR-ROUND USE.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 1  
309 47TH STREET  
BROOKLYN, NY  11220  
(718) 567-7661

Name of Project Director:

ZAIDA VEGA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE LIBRARY BOOKS AND COMPUTER SOFTWARE.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 1 CONTEMPORARY ART CENTER, INC.
22-25 JACKSON AVENUE
LONG ISLAND CITY, NY  11101
(718) 784-2084

Name of Project Director:

NICOLE GOLDBERG

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PS 1 CONTEMPORARY ART CENTER'S COMMUNITY AND EDUCATION PROGRAMS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 100
2951 WEST 3RD STREET
BROOKLYN, NY  11224
(718) 266-9477

Name of Project Director:

KATHERINE MALONEY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 104
9115 5TH AVENUE
BROOKLYN, NY  11209
(718) 836-4630

Name of Project Director:

MARIE DEBELLA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 107  
1301 8TH AVENUE  
BROOKLYN, NY 11215  
(718) 330-9340

Name of Project Director:

CYNTHIA HOLTON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE HARD GOODS FOR THE NEW LIBRARY, I.E., BOOKCASES, TABLES, ETC.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 110
285 DELANCEY STREET
NEW YORK, NY  10002
(212) 674-2951

Name of Project Director:

MS. DONNA GORDAN KAHME, PTA PRESIDENT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW COMPUTER, FURNITURE AND OFFICE SUPPLIES FOR PTA ROOM, SCIENCE CLUB SUPPLIES AND SCIENCE CLUSTER TEACHING EQUIPMENT, CERTIFICATES FOR STUDENT ACHIEVEMENTS, KINDERGARTEN AND 6TH GRADE GRADUATION CEREMONIES, ADDITIONAL BOOKS FOR "READING IS FUNDAMENTAL" PROGRAM, PLAQUES FOR PARENT VOLUNTEERS, CHILD CARE REIMBURSEMENT FOR MONTHLY PTA MEETINGS.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 114  
1077 REMSEN AVENUE  
BROOKLYN, NY  11236  
(718) 257-4428

Name of Project Director:

MARIA PENNAHERA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SCHOOL LIBRARY BOOKS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 115
1500 EAST 92ND STREET
BROOKLYN, NY 11234
(718) 241-1000

Name of Project Director:

MITCHELL PINSKY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SCHOOL LIBRARY BOOKS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 124
40 DIVISION STREET
NEW YORK, NY  10002
(212) 274-0263

Name of Project Director:

MS. PAMELA CHIN, CO-PRESIDENT OF PTA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE STAND ALONE COOLING SYSTEMS FOR WINDOWLESS ROOMS; TO PURCHASE WALL MATS (PADDING) FOR GYM.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 126
80 CATHERINE STREET
NEW YORK, NY  10038
(212) 962-2185

Name of Project Director:

MS. WANDA PEREZ, PRESIDENT PTA

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A COPIER MACHINE AND FAX MACHINE.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 128
69-26 65TH DRIVE
MIDDLE VILLAGE, NY  11379
(718) 416-3011

Name of Project Director:

ELEN MIGLIACCIO

Purpose of Project:

FUNDS WILL BE USED TO RUN PUBLIC SCHOOL 128’S AFTER SCHOOL PROGRAM TO TEACH BASIC MODERN DANCE. PROGRAM ENDS WITH A DANCE FESTIVAL.

Funded Amount:

$2,000

Requested By:

HEVESI-A

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 130
70 OCEAN PARKWAY
BROOKLYN, NY 11218
(718) 330-9350

Name of Project Director:

MARIA NUNZIATA

Purpose of Project:

FUNDS WILL BE USED TO UPDATE THE DATA PROCESSING SYSTEM TO IMPROVE AND MAINTAIN COMMUNICATION WITH PARENTS.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 130
143 BAXTER STREET
NEW YORK, NY  10013
(212) 226-8072

Name of Project Director:

MS. LILY DIN WOO, PRINCIPAL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SUPPLIES AND MATERIALS FOR SCHOOL’S LAMINATING AND COPY MACHINES USED FOR TEACHING LITERACY PROGRAM.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 134
293 EAST BROADWAY
NEW YORK, NY 10002
(212) 673-4470

Name of Project Director:

MS. ELIZABETH BONNER, PTA PRESIDENT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR PTA: BOOKS (CHINESE/ENGLISH), AUDIO BOOKS, AIR CONDITIONER, COPY MACHINE, UPGRADE COMPUTERS, ETC.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 134
4001 18TH AVENUE
BROOKLYN, NY 11218
(718) 436-7200

Name of Project Director:

BEVERLY LYNCH

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF A PORTABLE DIGITAL WHITEBOARD AND A DIGITAL PROJECTOR FOR USE IN INTERACTIVE TEACHING EFFORTS.

Funded Amount:

$2,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 137
327 CHERRY STREET
NEW YORK, NY  10002
(212) 602-9800

Name of Project Director:

MS. CARMEN TRIJILLO, PRESIDENT PTA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS FOR CLASSROOMS.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 139
330 RUGBY ROAD
BROOKLYN, NY 11226
(718) 282-5254

Name of Project Director:

MARY MCDONALD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN AFTER SCHOOL ARTS PROGRAM.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 140
123 RIDGE STREET
NEW YORK, NY  10002
(212) 677-4680

Name of Project Director:

MS. NEREIDA GONZALEZ, PRESIDENT PTA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTER AND PRINTER FOR PTA ROOM.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 142
100 ATTORNEY STREET
NEW YORK, NY  10002
(212) 598-3800

Name of Project Director:

MS. VIRGINIA LOPEZ, PRESIDENT PTA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS FOR THE PTA ROOM.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 149 - BEACON PROGRAM  
93-11 34TH AVENUE  
JACKSON HEIGHTS, NY  11372  
(718) 426-0888

Name of Project Director:

MARTHA APONTE

Purpose of Project:

FUNDS WILL BE USED FOR CULTURAL AND RECREATIONAL YOUTH PROGRAMS AT THE BEACON PROGRAM LOCATED AT PUBLIC SCHOOL 149 IN JACKSON HEIGHTS DURING THE AFTER SCHOOL HOURS AND SUMMER MONTHS.

Funded Amount:

$5,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 15, THE PATRICK F. DALY SCHOOL
71 SULLIVAN STREET
BROOKLYN, NY  11231
(718) 330-9280

Name of Project Director:

KATHLEEN LEONARD

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW PLAYGROUND EQUIPMENT FOR THE EARLY CHILDHOOD PLAY AREA.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 153, HOMECREST SCHOOL OF MUSIC
1970 HOMECREST AVENUE
BROOKLYN, NY 11229
(718) 375-4484

Name of Project Director:

MARIE BRINZER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BOOKS FOR THE LIBRARY

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 154
1625 11TH AVENUE
BROOKLYN, NY 11215
(718) 768-0057

Name of Project Director:

FRANCES RUIZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A MULTI-CULTURAL EDUCATION PROGRAM THROUGH READING MATERIALS.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 163
163 WEST 97TH STREET
NEW YORK, NY 10025
(212) 396-4401

Name of Project Director:

ALLISON DOWNING

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTERSCHOOL EDUCATION PROGRAM.

Funded Amount:

$3,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 166
132 WEST 89TH STREET
NEW YORK, NY 10024
(212) 678-2829

Name of Project Director:

TANJA WILLS

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTERSCHOOL EDUCATION PROGRAM GEARED TOWARDS ACADEMICS AND THE CREATIVE ARTS.

Funded Amount:

$3,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 169
4305 SEVENTH AVENUE
BROOKLYN, NY  11232
(718) 853-3224

Name of Project Director:

JOSEPHINE SANTIAGO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE VARIOUS EDUCATIONAL PROJECTS THROUGHOUT THE YEAR.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 172
825 4TH AVENUE
BROOKLYN, NY  11232
(718) 965-4200

Name of Project Director:

JACK SPATOLA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL PROJECTS THROUGHOUT THE YEAR INCLUDING PURCHASING LIBRARY BOOKS AND COMPUTER SOFTWARE.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 179
202 AVENUE C
BROOKLYN, NY 11218
(718) 438-4010

Name of Project Director:

VALERIE JOSEPH

Purpose of Project:

FUNDS WILL BE USED TOWARD THE ACQUISITION OF UPDATED SOFTWARE FOR COMPUTERS.

Funded Amount:

$2,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 183 PARENTS-TEACHERS ASSOCIATION, INC.
419 EAST 66TH STREET
NEW YORK, NY 10021
(212) 734-7719

Name of Project Director:

CLAIRE REILLY

Purpose of Project:

FUNDS WILL BE USED TO OBTAIN AND UPDATE EDUCATIONAL MATERIALS FOR LIBRARY AND CLASSROOM USE.

Funded Amount:

$10,000

Requested By:

GRANNIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 185
8601 RIDGE BOULEVARD
BROOKLYN, NY 11209
(718) 745-6610

Name of Project Director:

KENNETH LLIMAS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 188
3314 NEPTUNE AVENUE
BROOKLYN, NY 11224
(718) 266-6380

Name of Project Director:

FREDERICK TUDDA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 19
185 FIRST AVENUE
NEW YORK, NY 10003
(212) 533-5340

Name of Project Director:

IVAN KUSHNER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SMALL GROUP AND INDIVIDUALIZED SUPPORT IN LITERACY AND MATH. FUNDS WILL ALSO BE USED TO TRAIN 5TH GRADE STUDENTS TO SERVE AS TUTORS FOR 3RD GRADERS FOR THE ACADEMIC SUCCESS PROGRAM AND TO PURCHASE LIBRARY BOOKS.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 2  
122 HENRY STREET  
NEW YORK, NY 10002  
(212) 964-0350

Name of Project Director:

MS. SIU FUNG CHIN, PTA PRESIDENT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW AND REFURBISHED SCIENCE UNITS (ONE PER GRADE); AND TO PURCHASE PHYSICAL EDUCATION SUPPORT.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 20
166 ESSEX STREET
NEW YORK, NY  10002
(212) 254-9577

Name of Project Director:

DR. LEONARD H. GOLUBCHICK

Purpose of Project:

1,000+ CHILDREN, GRADES PRE-K THROUGH 6 WILL LEARN TECHNIQUES OF CONFLICT RESOLUTION AND WILL BE TRAINED (IN GRADES 4-6) TO BE PEER MEDIATORS. THERE WILL ALSO BE ONGOING STAFF DEVELOPMENT SEMINARS.

Funded Amount:

$24,000

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 203
5101 AVENUE M
BROOKLYN, NY  11234
(718) 241-8488

Name of Project Director:

LISA ESPOSITO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL BOOKS FOR THE SCHOOL LIBRARY.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 207
4011 FILLMORE AVENUE
BROOKLYN, NY  11234
(718) 645-8667

Name of Project Director:

MARY E. BOSCO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SCHOOL LIBRARY BOOKS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 209, MARGARET MEAD SCHOOL
2609 EAST 7TH STREET
BROOKLYN, NY 11235
(718) 743-1954

Name of Project Director:

MIRIAM SCHREIBER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BOOKS FOR THE LIBRARY

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 217
1100 NEWKIRK AVENUE
BROOKLYN, NY 11230
(718) 434-6960

Name of Project Director:

FRANCA CONTI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BOTH DURING AND AFTER SCHOOL ENRICHMENT PROGRAMS FOCUSING ON MENTALLY AND PHYSICALLY CHALLENGING TASKS.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 222
3301 QUENTIN ROAD
BROOKLYN, NY  11234
(718) 998-4298

Name of Project Director:

LOUISE B. LAKE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SCHOOL LIBRARY BOOKS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 225, EILEEN ZAGHLAN SCHOOL
1075 OCEANVIEW AVENUE
BROOKLYN, NY 11235
(718) 743-9793

Name of Project Director:

STEPHANIE ROSALIA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BOOKS FOR THE LIBRARY.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 229
1400 BENSON AVENUE
BROOKLYN, NY  11228
(718) 236-5447

Name of Project Director:

JAMES HARRIGAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 230
ONE ALBEMARLE ROAD
BROOKLYN, NY 11218
(718) 437-6135

Name of Project Director:

SHARON FIDEN

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF COMPUTER HARDWARE.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 236
6302 AVENUE U
BROOKLYN, NY  11234
(718) 444-6969

Name of Project Director:

MARY BARTON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SCHOOL LIBRARY BOOKS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 24 PARENT TEACHER ASSOCIATION
427 38TH STREET
BROOKLYN, NY  11232
(718) 832-9366

Name of Project Director:

THERESA LANTIGUA

Purpose of Project:

FUNDS WILL BE USED TO RENT EQUIPMENT FOR THE SCHOOL'S WINTER CARNIVAL.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 253
601 OCEANVIEW AVENUE
BROOKLYN, NY  11235
(718) 332-3331

Name of Project Director:

LISA SPERONI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 254, DAG HAMMARSKJOLD SCHOOL FUND
1801 AVENUE Y
BROOKLYN, NY 11235
(718) 743-0890

Name of Project Director:

LINDA ALHONTE

Purpose of Project:

FUNDS WILL BE USED TO MAKE IMPROVEMENTS TO AUDITORIUM AND CLASSROOM LIBRARIES.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 255
1866 EAST 17TH STREET
BROOKLYN, NY 11229
(718) 376-8494

Name of Project Director:

LINDA SINGER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A COMPUTER.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 272
101-24 SEAVIEW AVENUE
BROOKLYN, NY 11236
(718) 241-1300

Name of Project Director:

MARIANNE DIGANGI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SUPPORT FOR THE SCHOOL’S LIBRARY.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 276
1070 EAST 83RD STREET
BROOKLYN, NY  11236
(718) 241-5757

Name of Project Director:

JOHNATHON STRONG

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SCHOOL LIBRARY BOOKS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 277
2529 GERRITSEN AVENUE
BROOKLYN, NY 11229
(718) 743-6689

Name of Project Director:

JEAN FISH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SCHOOL LIBRARY BOOKS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 288
2950 WEST 25TH STREET
BROOKLYN, NY 11224
(718) 449-8000

Name of Project Director:

JOELLE-LYNETTE KINARD

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 3, THE JOHN MELSER CHARRETTE SCHOOL
490 HUDSON STREET
NEW YORK, NY 10014
(212) 647-1280

Name of Project Director:

LISA SIEGMAN

Purpose of Project:

FUNDS WILL BE USED TO BUILD THE COLLECTION IN THE PUBLIC SCHOOL 3 LIBRARY, WITH A FOCUS ON ACQUIRING MORE BOOKS TO SUPPORT STUDENTS WITH LEARNING DIFFICULTIES AND BOOKS TO SUPPORT THE SOCIAL STUDIES AND SCIENCE CURRICULA.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 312
7103 AVENUE T
BROOKLYN, NY  11234
(718) 763-4015

Name of Project Director:

LINDA BEAL-BENIGNO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADDITIONAL SCHOOL LIBRARY BOOKS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 321
180 SEVENTH AVENUE
BROOKLYN, NY 11215
(718) 499-2412

Name of Project Director:

ELIZABETH PHILIPS

Purpose of Project:

FUNDS WILL BE USED FOR A REMEDIAL READING PROGRAM FOR AT-RISK STUDENTS.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 329
2929 WEST 30TH STREET
BROOKLYN, NY  11224
(718) 996-3800

Name of Project Director:

ANITE GARCIA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 39
417 6TH AVENUE
BROOKLYN, NY 11215
(718) 330-9310

Name of Project Director:

ALEXANDER MATEO

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF COMPUTERS AND SOFTWARE RELATED TO THE SCIENCES.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 42
71 HESTER
NEW YORK, NY  10002
(212) 431-7384

Name of Project Director:

MS. SARA YIP, PTA PRESIDENT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OFFICE EQUIPMENT: XEROX MACHINE, COMPUTERS, AIR CONDITIONERS, ETC.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 48R
1055 TARGEE STREET
STATEN ISLAND, NY 10304
(718) 447-8323

Name of Project Director:
JACQUELINE MAMMOLITO

Purpose of Project:
FUNDS WILL BE USED FOR RESIDENCY PROGRAM AND PROFESSIONAL DEVELOPMENT FOR SECOND AND THIRD GRADE CLASSES AND FOR TEACHERS PARENT EVENING WORKSHOP.

Funded Amount:
$12,000

Requested By:
CUSICK

Name of Administering State Agency:
EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 63  
121 EAST 3RD STREET  
NEW YORK, NY  10009  
(212) 674-3180

Name of Project Director:

MS. LOURDES MANNERS, PTA PRESIDENT

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE COMPUTERS; TO PURCHASE A COPY MACHINE AND SUPPLIES.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 75
735 WEST END AVENUE
NEW YORK, NY 10025
(212) 866-3400

Name of Project Director:

BRITT DENNSMORE

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTERSCHOOL EDUCATIONAL PROGRAM.

Funded Amount:

$3,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 90
2840 WEST 12TH STREET
BROOKLYN, NY 11224
(718) 266-8090

Name of Project Director:

MADELINE CHAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MORE LIBRARY BOOKS AND MATERIALS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

PUBLIC SCHOOL 94 PARENT TEACHERS ASSOCIATION  
5010 SIXTH AVENUE  
BROOKLYN, NY  11220  
(718) 435-6034

Name of Project Director:

DIANA GONZALEZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE PLANTS, FLOWERS, SHRUBS, SEEDS, TO ENHANCE SCHOOL GROUNDS.

Funded Amount:

$2,000

Requested By:

ORTIZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUTNAM ASSOCIATED RESOURCE CENTER
31 INTERNATIONAL BOULEVARD
CARMEL, NY 10512
(845) 278-7272

Name of Project Director:

RAND OTTEN

Purpose of Project:

FUNDS WILL BE USED FOR THE PARC PRESCHOOL WHICH WILL HELP DEVELOPMENTALLY IMPAIRED YOUNGSTERS LEARN NECESSARY LIFE SKILLS

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QSAC, INC.
253 WEST 35TH STREET, 16TH FLOOR
NEW YORK, NY  10001
(718) 728-8476  2010

Name of Project Director:

DIRK MCCALL

Purpose of Project:

FUNDS WILL BE USED FOR, BUT ARE NOT LIMITED TO, ENHANCING EARLY INTERVENTION PROGRAMS WITHIN THE AUTISTIC COMMUNITY.

Funded Amount:

$3,000

Requested By:

MARKEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QSAC, INC.
253 WEST 35TH STREET, 16TH FLOOR
NEW YORK, NY 10001
(212) 244-5560 2016

Name of Project Director:

DIRK MCCALL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPORT AND SERVICES TO SIBLINGS OF CHILDREN WITH AUTISM.

Funded Amount:

$1,000

Requested By:

KAVANAGH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QSAC, INC.
253 W. 35ST STREET, 1ST FLOOR
NEW YORK, NY 10001
(212) 244-5560

Name of Project Director:

CORY POLSCHANSKY

Purpose of Project:

FUNDS WILL BE USED FOR AFTER SCHOOL YOUTH PROGRAMS IN ASTORIA.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QSAC, INC.
253 WEST 35TH STREET, 16TH FLOOR
NEW YORK, NY 10001
(718) 728-8476 2010

Name of Project Director:

DIRK MCCALL

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COSTS OF A GRAFFITI REMOVAL PROGRAM WHICH SERVES AS AN ALTERNATIVE TO EMPLOYMENT FOR ADULTS WITH AUTISM.

Funded Amount:

$10,000

Requested By:

BENEDETTO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QUAKER MARCHING BAND BOOSTERS OF ORCHARD PARK, INC.
4040 BAKER ROAD
ORCHARD PARK, NY 14127
(716) 209-6242

Name of Project Director:

CHRIS REVETT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW MARCHING BAND UNIFORMS.

Funded Amount:

$10,000

Requested By:

SCHROEDER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QUEENS BOROUGH PUBLIC LIBRARY
89-11 MERRICK BLVD.
JAMAICA, NY  11432
(718) 990-0705

Name of Project Director:

THOMAS GALANTE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BOOKS, VIDEOS, CD'S AND OTHER ITEMS FOR THE JACKSON HEIGHTS BRANCH OF THE PUBLIC LIBRARY SYSTEM. FUNDS WILL ALSO BE USED FOR CULTURAL PROGRAMS AT THAT BRANCH THROUGH THE FRIENDS OF JACKSON HEIGHTS LIBRARY.

Funded Amount:

$5,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS BOROUGH PUBLIC LIBRARY
89-11 MERRICK BOULEVARD
JAMAICA, NY 11432
(718) 990-0794

Name of Project Director:

TOM GALANTE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW BOOKS AND TO CONDUCT READING ENHANCEMENT PROGRAMS AT THE LIBRARY BRANCHES OF STEINWAY, ASTORIA BOULEVARD, AND BROADWAY.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QUEENS BOROUGH PUBLIC LIBRARY
89-11 MERRICK BLVD.
JAMAICA, NY  11432
(718) 990-0887

Name of Project Director:

KATHLEEN DEAYANSKY

Purpose of Project:

FUNDS WILL BE USED FOR THE LATCH-KEY ENRICHMENT PROGRAM, AN AFTER SCHOOL PROGRAM WHICH PROVIDES ENRICHMENT, AS WELL AS, SUPERVISION FOR MANY SCHOOL AGE CHILDREN WHILE THEIR PARENTS WORK. OF THE $5,000 TOTAL FUNDS, $2,500 IS TO BE ALLOCATED TO THE LEFRAK CITY BRANCH AND $2,500 ALLOCATED TO THE EAST ELMHURST BRANCH.

Funded Amount:

$5,000

Requested By:

AUBRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QUEENS BOROUGH PUBLIC LIBRARY
89-11 MERRICK BOULEVARD
JAMAICA, NY 11432
(718) 990-0794

Name of Project Director:

THOMAS W. GALANTE

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET RENOVATION OF THE PUBLIC LIBRARIES IN QUEENS.

Funded Amount:

$5,000

Requested By:

CARROZZA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QUEENS BOROUGH PUBLIC LIBRARY
89-11 MERRICK BOULEVARD
JAMAICA, NY  11432
(718) 990-0794

Name of Project Director:

VALERIE KILMARTIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPLY SEVERAL LOCAL LIBRARIES WITH MATERIALS. LIBRARIES TO BE FUNDED ARE THE RIDGEWOOD, SUNNYSIDE, QUEENSBRIDGE AND RAVENSWOOD BRANCHES.

Funded Amount:

$2,500

Requested By:

NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QUEENS COLLEGE, CITY UNIVERSITY OF NEW YORK
65-30 KISSENA BOULEVARD
FLUSHING, NY 11367
(718) 997-5550

Name of Project Director:

DR. RUTH FRISZ

Purpose of Project:

FUNDS WILL BE USED TO ENABLE STUDENTS TO ATTEND THE SERVICE-LEARNING WEEKEND WHICH PROVIDES A SIGNIFICANT LEARNING EXPERIENCE AND OFFERS AN OPPORTUNITY FOR ALL PEER COUNSELORS TO COME TOGETHER.

Funded Amount:

$15,000

Requested By:

PERALTA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

QUOGUE LIBRARY
90 QUOGUE STREET
QUOGUE, NY 11959
(631) 653-4224

Name of Project Director:

CHRISTINE CLIFFER

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RABBI MARC H. TANENBAUM FOUNDATION, INC.
350 FIFTH AVENUE, SUITE 3502
NEW YORK, NY   10118
(212) 967-7707

Name of Project Director:

JOYCE DUBENSKY

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE AND EXPAND THIS IMPORTANT LITERACY-BASED PROGRAM.

Funded Amount:

$5,000

Requested By:

BING

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

RAMAPO CATSKILL LIBRARY SYSTEM
619 ROUTE 17M
MIDDLETOWN, NY  10940-4395
(845) 343-1131  240

Name of Project Director:

RANDALL ENOS

Purpose of Project:

FUNDS WILL BE USED FOR THE SUMMER READING PROGRAM.

Funded Amount:

$5,500

Requested By:

GUNHER-A

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

RAMAPO CATSKILL LIBRARY SYSTEM
619 ROUTE 17M
MIDDLETOWN, NY 10940
(845) 343-1131

Name of Project Director:

RANDALL ENOS

Purpose of Project:

FUNDS WILL BE USED FOR A LIBRARY READING PROGRAM, $500 FOR EACH LIBRARY IN THE DISTRICT

Funded Amount:

$5,000

Requested By:

RABBITT

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RAMAPO CATSKILL LIBRARY SYSTEM
619 ROUTE 17M
MIDDLETOWN, NY 10940
(845) 343-1131

Name of Project Director:

ROBERT HUBSHER

Purpose of Project:

FUNDS WILL BE USED FOR A SUMMER READING PROGRAM

Funded Amount:

$5,000

Requested By:

CALHOUN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

REACH OUT AND READ COALITION OF GREATER NEW YORK, INC.
32 BROADWAY, 10TH FLOOR
NEW YORK, NY 10004
(212) 242-5339

Name of Project Director:

MS. TRACI LESTER

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF BOOKS FOR THE REACH OUT AND READ PROGRAM RUN BY THE CUMBERLAND DIAGNOSTIC AND TREATMENT CENTER AND THE GREENPOINT COMMUNITY HEALTH CENTER.

Funded Amount:

$2,000

Requested By:

LENTOL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

REDEMPTION, INC.
588 EAST 82ND STREET
BROOKLYN, NY  11236
(917) 440-1784

Name of Project Director:

TIFFANY TUCKER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT COLLEGE READINESS PROGRAM IN CANARSIE HIGH SCHOOL.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

REED MEMORIAL LIBRARY
1733 ROUTE SIX
CARMEL, NY 10512
(845) 225-2439

Name of Project Director:

JEAN BUCK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW COMPUTERS AND TECHNOLOGICAL UPGRADES

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

REGION #5/LIFEGUARD DEVELOPMENT PROGRAM
REGION #5 LEARNING SUPPORT CENTER - 82-01 ROCKAWAY BOULEVARD
OZONE PARK, NY 11416
(718) 642-5800

Name of Project Director:

KATHLEEN WALKER

Purpose of Project:

FUNDS WILL BE USED TO HELP PREPARE STUDENTS IN BOTH PUBLIC AND NON-PUBLIC SCHOOLS TO BECOME NYC LIFEGUARDS AT THE CITY’S POOLS AND BEACHES.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

REGION 6 - SCHOOL DISTRICT 22
715 OCEAN TERRACE, BLDG. A, RM 314
STATEN ISLAND, NY 10301
(718) 390-1541

Name of Project Director:

DEBBIE SACHS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ENVIRONMENTAL SCIENCE PROGRAM AT PUBLIC SCHOOL 152 IN BROOKLYN.

Funded Amount:

$8,000

Requested By:

JACOBS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

RENAISSANCE CHARTER SCHOOL
35-59 81ST STREET
JACKSON HEIGHTS, NY 11372
(718) 803-0060

Name of Project Director:

MONTE JOFFEE

Purpose of Project:

FUNDS WILL BE USED TO OFFER IN-STATE CLASS TRIPS AND OTHER CULTURAL ACTIVITIES FOR THE STUDENTS.

Funded Amount:

$1,500

Requested By:

LAFAYETTE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NEW YORK
695 PARK AVENUE, W1611
NEW YORK, NY   10021
(212) 772-5599

Name of Project Director:

ELAINE M. WALSH, PH.D.

Purpose of Project:

FUNDS WILL BE USED FOR A PUBLIC SERVICE SCHOLAR PROGRAM, WHICH TRAINS STUDENTS, ESPECIALLY WOMEN, MINORITY GROUP MEMBERS, AND IMMIGRANTS, FOR LEADERSHIP POSITIONS IN PUBLIC SERVICE.

Funded Amount:

$25,000

Requested By:

ESPAILLAT, FARRELL, GRANNIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NEW YORK
695 PARK AVENUE - W1611
NEW YORK, NY 10021
(212) 772-5595

Name of Project Director:

ELAINE M. WALSH, PH.D.

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A PROGRAM TO EDUCATE AND TRAIN STUDENTS FOR LEADERSHIP POSITIONS IN THE PUBLIC AND NON-PROFIT SECTORS.

Funded Amount:

$7,500

Requested By:

GRANNIS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NEW YORK
655 PARK AVENUE, ROOM W1611
NEW YORK, NY 10021
(212) 772-5599

Name of Project Director:

ELAIN M. WALSH

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE PUBLIC SERVICE SCHOLAR PROGRAM WHICH TRAINS STUDENTS, ESPECIALLY UNDERREPRESENTED GROUPS (WOMEN, MINORITY GROUPS AND IMMIGRANTS) FOR LEADERSHIP POSITIONS IN PUBLIC SERVICE.

Funded Amount:

$1,000

Requested By:

KAVALAGH

Name of Administering State Agency:

EDUCATION DEPARTMENT
RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NEW YORK
695 PARK AVENUE W 1611
NEW YORK, NY 10021
(212) 772-5595

ELAINE WALSH

FUNDS WILL BE USED TO TRAIN STUDENTS FOR PUBLIC SERVICE CAREERS, PARTICULARLY WOMEN.

$2,500

ESPAILLAT, FARRELL, GRANNIS

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

RICHMOND MEMORIAL LIBRARY
19 ROSS STREET
BATAVIA, NY 14020
(585) 343-9550

Name of Project Director:

DIANA WYRWA

Purpose of Project:

FUNDS WILL BE USED FOR NEW SIGNAGE

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RICHVILLE FREE LIBRARY
P.O. BOX 154
RICHVILLE, NY 13681
(315) 287-1481

Name of Project Director:

MARY HUSE

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A 12X16 OPEN-SIDED SHADE AND RAIN SHELTER ON THE PLAYGROUND FOR USE BY CHILDREN DURING SUMMER READING AND RECREATION PROGRAMS

Funded Amount:

$2,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

RIVER WATCH, INC.
1600 SEDGWICK AVENUE, SUITE 1A
BRONX, NY  10453
(718) 299-7117

Name of Project Director:

CATHERINE M. STROUD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE VARIOUS LEVELS OF COMPUTER TRAINING TO COMMUNITY RESIDENTS INCLUDING JOB READINESS FOR THE UNEMPLOYED AND UNDER-EMPLOYED TO DEVELOP MARKETABLE SKILLS, AND FOR HOMEWORK ASSISTANCE BY COMPUTER USE TO ENHANCE ACADEMIC SKILLS FOR CHILDREN. SENIOR CITIZENS WILL HAVE A LINK TO SERVICE PROVIDERS AND FAMILY MEMBERS WHO RESIDE OUTSIDE OF THEIR COMMUNITY.

Funded Amount:

$14,000

Requested By:

GREENE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ROCHESTER INSTITUTE OF TECHNOLOGY
30 LOMB MEMORIAL DRIVE
ROCHESTER, NY 14623
(585) 475-5040

Name of Project Director:

DEBORAH STENDARDI

Purpose of Project:

FUNDS WILL BE USED TO UPDATE AND MAINTAIN BUSINESS AND ECONOMIC DEVELOPMENT WEBSITE

Funded Amount:

$2,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROCHESTER INSTITUTE OF TECHNOLOGY
30 LOMB MEMORIAL DRIVE
ROCHESTER, NY 14623
(585) 475-5040

Name of Project Director:

DEBORAH M. STENDARDI

Purpose of Project:

FUNDS WILL BE USED FOR CONTINUING SUPPORT OF WEBSITE AND MAINTENANCE

Funded Amount:

$2,500

Requested By:

REILICH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ROCHESTER INSTITUTE OF TECHNOLOGY
30 LOMB MEMORIAL DRIVE
ROCHESTER, NY 14623
(585) 475-5040

Name of Project Director:

DEBORAH M. STENDARDI

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SITE MAINTENANCE AND MARKETING INITIATIVE FOR THE WEBSITE WWW.BIZ2EDU

Funded Amount:

$5,000

Requested By:

ERRIGO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ROCKAWAY PENINSULA CIVIC ASSOCIATION – DAVID DINKINS CENTER
18–48 CONNAGA AVENUE
FAR ROCKAWAY, NY 11691
(718) 471–4818

Name of Project Director:

HILDA GROSS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACADEMIC INSTRUCTION, SPORTS AND CULTURAL ACTIVITIES, REGULAR COUNSELING AND OTHER SERVICES FOR IN–SCHOOL CHILDREN AND YOUTH IN THE FAR ROCKAWAY COMMUNITY.

Funded Amount:

$75,000

Requested By:


Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ROCKLAND TEACHERS' CENTER INSTITUTE
65 CHAPEL STREET
GARNERVILLE, NY 10923
(845) 942-0354

Name of Project Director:

BILHA BERKOWITZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BACKPACKS, BOOKS, AND SCHOOL SUPPLIES FOR DISTRIBUTION TO NEEDY CHILDREN. FUNDS WILL ALSO BE USED FOR THE SPRING/FALL '07 PRINTING AND MAILING.

Funded Amount:

$2,900

Requested By:

ZEBROWSKI

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ROGERS MEMORIAL LIBRARY
91 COOPERS FARM ROAD
SOUTHAMPTON, NY 11968
(631) 283-0774

Name of Project Director:

DEBORAH ENGELHARDT

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROSCOE FREE LIBRARY
P.O. BOX 339
ROSCOE, NY 12776
(607) 498-5574

Name of Project Director:

JUDIE D.V. SMITH

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF FURNITURE AND EQUIPMENT.

Funded Amount:

$4,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ROSENDALE PARENT TEACHER ORGANIZATION  
2139 LYNNWOOD DRIVE  
NISKAYUNA, NY 12309  
(518) 248-4141

Name of Project Director:

SUZANNE WOLFF

Purpose of Project:

FUNDS WILL BE USED FOR REPLACEMENT OF THE PLAYGROUND

Funded Amount:

$20,000

Requested By:

TEDISCO

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RTPI OF NATURAL HISTORY
311 CURTIS STREET
JAMESTOWN, NY  14701
(716) 665-2473

Name of Project Director:

JIM BERRY

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE AN ARCHIVAL PROGRAM AT THE INSTITUTE.

Funded Amount:

$50,000

Requested By:

PARMENT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

RUGBY FAMILY SERVICES, INC.
49-05 SNYDER AVENUE
BROOKLYN, NY  11203
(718) 287-3335

Name of Project Director:

PETULIND BLAKE

Purpose of Project:

FUNDS WILL BE USED TO OFFER COMMUNITY RESIDENTS BASIC EDUCATIONAL SKILLS AND GED TRAINING. IT WILL ALSO PROVIDE FOR PARENT TRAINING, AFTER SCHOOL TUTORIALS AND HOME ECONOMIC PROGRAMS.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

RUSSELL PUBLIC LIBRARY  
9 PESTLE STREET  
RUSSELL, NY 13684  
(315) 347-2115

Name of Project Director:

TESS EELLS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN REFURBISHING LIBRARY, MAY INCLUDE LIGHTING, WINDOWS, TABLES, CHAIRS OR SHELVING

Funded Amount:

$5,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RYE FREE READING ROOM
1061 BOSTON POST ROAD
RYE, NY 10580
(914) 967-0481

Name of Project Director:

MARIA LAGONIA

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP AND CONDUCT A MINIMUM OF FOUR LITERATURE-BASED ADULT EDUCATION WORKSHOPS FOR GENERAL COMMUNITY PARTICIPATION.

Funded Amount:

$2,500

Requested By:

LATIMER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SAG HARBOR SCHOOL DISTRICT
200 JERMAIN AVENUE
SAG HARBOR, NY 11963
(631) 725-5302

Name of Project Director:

KATHRYN HOLDEN

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL PURPOSES

Funded Amount:

$5,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SAINT GREGORY’S SCHOOL FOR BOYS
121 OLD NISKAYUNA ROAD
LOUDONVILLE, NY  12211
(518) 785-6621

Name of Project Director:

FRANCIS X. FOLEY, JR.

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A TEACHER’S TRAINING PROGRAM OPEN TO ALL TEACHERS IN THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SALTZMAN EAST MEMORIAL ELEMENTARY SCHOOL
15 LEANORE DRIVE
FARMINGDALE, NY 11735
(516) 807-6320

Name of Project Director:

ELIZABETH MIGNONE

Purpose of Project:

FUNDS WILL BE USED FOR A NEW PLAYGROUND

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SAUGERTIES PUBLIC LIBRARY
91 WASHINGTON AVENUE
SAUGERTIES, NY 12477
(845) 246-4317

Name of Project Director:

STEPHANIE MCELritch

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH PROGRAM COSTS

Funded Amount:

$5,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SCHOMBURG CTR FOR RESEARCH IN BLACK CULTURE, NY PUB. LIBRARY
515 MALCOLM X BLVD.
NEW YORK, NY 10037 – 1801
(212) 491 – 2255

Name of Project Director:

HOWARD DODSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE GENERAL OPERATING SUPPORT FOR THE SCHOMBURG CENTER. THE SCHOMBURG CENTER FOR RESEARCH IN BLACK CULTURE PROVIDES RESEARCH, ACCESS AND PRESERVATION SERVICES FREE OF CHARGE, TO PERSONS INTERESTED IN THE CELEBRATION OF AFRICAN–AMERICANS, AFRICAN–DIASPORA AND AFRICAN HISTORIES AND CULTURES.

Funded Amount:

$150,000

Requested By:

WRIGHT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SCHOOL FOR LANGUAGE AND COMMUNICATION DEVELOPMENT
100 GLEN COVE AVENUE
GLEN COVE, NY  11542
(516) 609-2000

Name of Project Director:

ELLENMORRIS TIEGERMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACADEMIC, SOCIAL AND RECREATIONAL PROGRAMS FOR CHILDREN WITH LANGUAGE AND AUTISM SPECTRUM DISORDERS.

Funded Amount:

$1,875

Requested By:

LAVINE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SCOTIA GLENVILLE CENTRAL SCHOOL
774 SACANDAGA ROAD
SCOTIA, NY 12302
(518) 382-1201

Name of Project Director:

THOMAS EGAN

Purpose of Project:

FUNDS WILL BE USED TO REPLACE THE PLAYGROUND FOR SAFETY CONCERNS

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SCOTIA GLENVILLE CENTRAL SCHOOL DISTRICT  
1 TARTAN WAY  
SCOTIA, NY 12302  
(518) 382-9684

Name of Project Director:

DAVID VERSOCKI

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE SURVEILLANCE SYSTEM

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SCOTTSVILLE FREE LIBRARY
29 MAIN STREET
SCOTTSVILLE, NY  14546
(585) 889-2023

Name of Project Director:

LAURIE LEO

Purpose of Project:

FUNDS WILL BE USED TO REPLACE FOUR "FAN WINDOWS" WHICH INCLUDE NEW CUSTOM FRAMES, GLAZING, REMOVAL OF OLD WINDOWS, INSTALLATION OF NEW WINDOWS AND PAINT. TECHNOLOGY UPGRADES WILL INCLUDE THE PURCHASE OF TWO NEW COMPUTERS, REPLACE HEADPHONES AND MOUSE, REPLACE TWO PRINTERS AND REPLACE FOUR COMPUTER CHAIRS.

Funded Amount:

$13,000

Requested By:

JOHN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SEAFORD UNION FREE SCHOOL DISTRICT
1590 WASHINGTON AVENUE
SEAFORD, NY 11783
(516) 592-4099

Name of Project Director:

NANCY SALOMAN

Purpose of Project:

FUNDS WILL BE USED TO ERECT THE WAYNE JOHN SALOMAN MEMORIAL PLAYGROUND AT THE SEAFORD MANOR ELEMENTARY SCHOOL

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SEAFORD UNION FREE SCHOOL DISTRICT
1600 WASHINGTON AVENUE
SEAFORD, NY 11783
(516) 592-4002

Name of Project Director:

THOMAS J. MARKLE

Purpose of Project:

FUNDS WILL BE USED FOR MUSIC EQUIPMENT

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SEWANHAKA CENTRAL HIGH SCHOOL
500 TULIP AVENUE
FLORAL PARK, NY 11001
(516) 489-9800

Name of Project Director:

WARREN MEIERDIERCKS

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS AND SERVICES IN THE SEWANHAKA CENTRAL HIGH SCHOOL DISTRICT

Funded Amount:

$48,000

Requested By:

ALFANO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SHENENDEHOWA EDUCATIONAL FOUNDATION, INC.
5 CHELSEA PLACE
CLIFTON PARK, NY 12065
(518) 881-0600

Name of Project Director:

KEVIN M. DAILEY

Purpose of Project:

FUNDS WILL BE USED TOWARD THE CONSTRUCTION OF A NEW BELL TOWER ON THE CAMPUS OF SHENENDEHOWA HIGH SCHOOL.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SHERBURNES PUBLIC LIBRARY
2 EAST STREET
SHERBURNES, NY 13460
(607) 674-4242

Name of Project Director:

NANCY SIMERL

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN'S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SMITH COUNTRY LIBRARY
22 STATION ROAD
BELLPORT, NY  11713
(631) 286-0818

Name of Project Director:

MARY HAINES

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF MATERIALS FOR THE CHILDREN’S DEPARTMENT INCLUDING DECORATIONS AND PRIZES FOR SUMMER READING PROGRAM AND FOR ADAPTIVE TOYS FOR CHILDREN WITH SPECIAL NEEDS.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SMITHTOWN LIBRARY
1 NORTH COUNTRY ROAD
SMITHTOWN, NY 11787
(631) 265-2072

Name of Project Director:

ROBERT LUSAK

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE ADOLESCENT COLLECTIONS, CULTURAL ART PROGRAMS, COMPUTERS, SEATING AND EQUIPMENT

Funded Amount:

$5,000

Requested By:

FITZPATRICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SMITHTOWN SCHOOL DISTRICT
16 LONNI LANE
SMITHTOWN, NY 11787
(631) 361-9362

Name of Project Director:

ROBERT ROSSI

Purpose of Project:

FUNDS WILL BE USED FOR A DIGITAL INFORMATION SIGN

Funded Amount:

$25,000

Requested By:

FITZPATRICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SMYRNA PUBLIC LIBRARY
7 EAST MAIN STREET, P.O. BOX 202
SMYRNA, NY 13464
(607) 627-6271

Name of Project Director:

ARLENE MACKENZIE

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN'S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SOCIAL JUSTICE CENTER
SUNY STONY BROOK/SCHOOL OF SOCIAL WELFARE
STONY BROOK, NY  11794-8230
(631) 444-2139

Name of Project Director:

GEORGE RANAZZI

Purpose of Project:

FUNDS WILL BE USED TO HELP FINANCE THE SOCIAL JUSTICE CENTER'S ANNUAL CONFERENCE, INCLUDING BUT NOT LIMITED TO, PRINTING, POSTAGE, MEDIA, AND SPACE COSTS.

Funded Amount:

$2,500

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SOCIETY OF THE THIRD STREET MUSIC SETTLEMENT, INC.
235 EAST 11TH STREET
NEW YORK, NY 10003
(212) 777-3240 132

Name of Project Director:

KERRY GREENE

Purpose of Project:

FUNDS WILL BE USED TO SERVE APPROXIMATELY 75 - 125 UPPER ELEMENTARY AND MIDDLE SCHOOL CHILDREN IN TWO TO FIVE LOCAL PUBLIC SCHOOLS. FUNDS WILL ALSO BE USED TO HELP PARTNER SCHOOLS TO PROVIDE INSTRUMENTS.

Funded Amount:

$5,000

Requested By:

GLICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SOMERS EDUCATION FOUNDATION
2 MOORE DRIVE
YORKTOWN HEIGHTS, NY 10598
(914) 248-6684

Name of Project Director:

SARENA MEYER

Purpose of Project:

FUNDS WILL BE USED FOR A DIVERSITY LANGUAGE ARTS PROGRAM

Funded Amount:

$4,000

Requested By:

BALL

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SOPHIE DAVIS MEDICAL SCHOOL/QUEENS BRIDGE TO MEDICINE PROGRAM
YORK COLLEGE (CUNY), 94-50 159TH STREET, ROOM 1H14
JAMAICA, NY  11451
(718) 262-2000

Name of Project Director:

SANDRA POVMAN

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT CLASSES AND WORKSHOPS FOR
PROSPECTIVE STUDENTS (AND THEIR PARENTS) ENTERING THIS PROGRAM
WHICH LEADS TO A HEALTH PROFESSION.

Funded Amount:

$5,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SOUTH COUNTRY EDUCATION FOUNDATION, INC.
P.O. BOX 512
BELLPORT, NY 11713
(631) 325-8527

Name of Project Director:

EUGENE WESTOFF

Purpose of Project:

FUNDS WILL BE USED FOR OPERATING COSTS, INCLUDING PRINTING, POSTAGE AND OFFICE EXPENSES.

Funded Amount:

$1,000

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SOUTH COUNTRY SCHOOL DISTRICT
189 DUNTON AVENUE
EAST PATCHOGUE, NY  11772
(631) 730-1501

Name of Project Director:

GAIL GLOVER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SOFTWARE AND OTHER INSTRUCTIONAL MATERIALS FOR THE ADVANCED PLACEMENT COMPUTER PROGRAMMING COURSE AT BELLPORT HIGH SCHOOL.

Funded Amount:

$6,000

Requested By:

EDDINGTON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SOUTHGATE ELEMENTARY SCHOOL
30 SOUTHGATE ROAD
LOUDONVILLE, NY  12211
(518) 785-6607

Name of Project Director:

KATHLEEN MEANY

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PLAYGROUND CONSTRUCTION PROJECT.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SPENCER LIBRARY
41 NORTH MAIN STREET, P.O. BOX 305
SPENCER, NY 14883
(607) 589-4496

Name of Project Director:

BARBARA LESTER

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN'S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SPRINGPORT FREE LIBRARY
171 CAYUGA STREET, P.O. BOX 501
UNION SPRINGS, NY 13160
(315) 889-7766

Name of Project Director:

CARLA PIPERNO-JONES

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN'S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ST. BRIGID’S ROMAN CATHOLIC CHURCH
409 LINDEN STREET
BROOKLYN, NY 11237
(718) 821-1690

Name of Project Director:

DR. FRANK ARRACALI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE NATURALIZATION SERVICES TO LEGAL PERMANENT RESIDENTS. APPLICANTS ARE PROVIDED 25 HOURS OF INSTRUCTION ON PREPARATION FOR CITIZENSHIP EXAM INTERVIEWS. CLASSES WILL BE HELD TWICE A WEEK. SERVICES TO BE PROVIDED ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ST. FRANCIS COLLEGE
180 REMSEN STREET
BROOKLYN, NY  11201
(718) 489-5370

Name of Project Director:

LINDA WEIBELDASHEFSKY

Purpose of Project:

FUNDS WILL BE USED TOWARD PROJECT ACCESS FOR STUDENTS, AN EDUCATIONAL OPPORTUNITY PROGRAM.

Funded Amount:

$1,500

Requested By:

MAISEL

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ST. FRANCIS COLLEGE
180 REMSEN STREET
BROOKLYN, NY  11201
(718) 489-5370

Name of Project Director:

LINDA WERBEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MATH/ENGLISH SKILLS, SCIENCE TECH AND ONE ON ONE HELP WITH STUDENTS' STUDIES. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

TOWNS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ST. FRANCIS COLLEGE  
180 REMSEN STREET  
BROOKLYN, NY 11201  
(718) 489-5372

Name of Project Director:

CHRIS GIBBONS

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE AND EXPAND CULTURAL, RECREATIONAL AND EDUCATIONAL PROGRAMS THAT ST. FRANCIS COLLEGE OFFERS TO SENIOR CITIZENS IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,500

Requested By:

MILLMAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ST. JOHN FISHER COLLEGE
3690 EAST AVENUE
ROCHESTER, NY 14618
(585) 385 – 8010

Name of Project Director:

ARTHUR WALTON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE URBAN INSTITUTE, WHICH WILL DEVELOP AND IMPLEMENT PROGRAMS DESIGNED TO INCREASE THE RECRUITMENT AND RETENTION OF MINORITY ADMINISTRATORS IN URBAN EDUCATION IN NEW YORK STATE.

Funded Amount:

$10,000

Requested By:

GANTT

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

ST. JOSEPH’S SCHOOL FOR THE DEAF
1000 HUTCHINSON RV PARKWAY
BRONX, NY 10465
(718) 828-9000

Name of Project Director:

STEVE SARRAN

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE LITERACY ACROSS ALL GRADES UTILIZING LEVELED READERS.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

STANLEY D. SALTZMAN EAST MEMORIAL ELEMENTARY SCHOOL
25 MILL LANE
FARMINGDALE, NY 11735
(516) 807-6320

Name of Project Director:

ELIZABETH MIGNONE

Purpose of Project:

FUNDS WILL BE USED FOR PLAYGROUND IMPROVEMENTS

Funded Amount:

$2,500

Requested By:

CONTE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

STATEWIDE BLACK, PUERTO RICAN HISPANIC SUBSTANCE ABUSE TASK
2730 ATLANTIC AVENUE
BROOKLYN, NY 11207
(718) 647-7728

Name of Project Director:

MICHAEL OLMEDA

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE AND PROVIDE PREVENTATIVE SERVICES TO THE COMMUNITY.

Funded Amount:

$50,000

Requested By:

TOWNS

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

STEINWAY CHILDREN FAMILY SERVICES, INC.
41-36 27TH STREET
LONG ISLAND CITY, NY 11101
(718) 389-5100

Name of Project Director:

MARY D. REDD

Purpose of Project:

FUNDS WILL BE USED FOR A PROGRAM THAT WORKS IN A GROUP SETTING WITH CHILDREN 8-14 WHO ARE EXPERIENCING SOCIALIZATION PROBLEMS. FUNDS WOULD PERMIT AN OVERLAY OF AN ACADEMIC INSTRUCTION THAT WOULD TEACH SKILLS THROUGH TUTORIALS AND OTHER METHODS.

Funded Amount:

$2,250

Requested By:

NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

STEPHENTOWN ELEMENTARY SCHOOL
473 NY 43
STEPHENTOWN, NY 12168
(518) 658-3450

Name of Project Director:

MONICA BARON

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATION PROGRAMS

Funded Amount:

$4,000

Requested By:

MCDONALD

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

STUDENT ADVOCACY, INC.
3 WEST MAIN STREET
ELMSFORD, NY  10523
(914) 347-7039  101

Name of Project Director:

LISA SYRON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PROFESSIONAL DEVELOPMENT THROUGH STAFF ATTENDANCE AT KEY LEGAL AND EDUCATIONAL CONFERENCES; PURCHASE OF LEGAL AND EDUCATIONAL MATERIALS; STRATEGIC PLANNING AND WORK TO MAINTAIN SUCCESS IN HELPING CHILDREN GET ON TRACK TO SCHOOL SUCCESS.

Funded Amount:

$12,500

Requested By:

BRADLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SUFFOLK ASSOCIATION FOR JEWISH EDUCATIONAL SERVICES (SAJES)
777 LARKFIELD ROAD, SUITE 118
COMMACK, NY 11725
(631) 462-8600

Name of Project Director:

DEBORAH FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE WORK WITH SAJES TAP (TEEN ACTION PROJECT) EDUCATION AND CIVIC PROJECTS

Funded Amount:

$5,000

Requested By:

FITZPATRICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SULLIVAN COUNTY BOARD OF COOPERATIVE EDUCATIONAL SERVICES
6 WIERK AVENUE
LIBERTY, NY 12754
(845) 295 – 4000

Name of Project Director:

MICHAEL DOLLARD

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE SULLIVAN COUNTY EVEN START PROGRAM WHICH PROVIDES PARENT AND CHILD LITERACY ACTIVITIES TO LOW INCOME FAMILIES.

Funded Amount:

$160,000

Requested By:

GUNTHER – A

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SULLIVAN COUNTY HEAD START, INC.
P.O. BOX 215
WOODBOURNE, NY  12788
(845) 434-4164

Name of Project Director:

BERTHA G. WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AN AUDIOMETER FOR TESTING CHILDREN.

Funded Amount:

$4,000

Requested By:

GUNTER-A

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SUNY BROOKLYN EDUCATIONAL OPPORTUNITY CENTER
111 LIVINSTON STREET
BROOKLYN, NY 11201
(718) 802-3300

Name of Project Director:

LOIS BLADES-ROSACLO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OUTREACH TO BROOKLYN RESIDENTS.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SWAN LIBRARY
4 NORTH MAIN STREET
ALBION, NY 14411
(585) 589-4246

Name of Project Director:

SUSAN RUDNICKY

Purpose of Project:

FUNDS WILL BE USED FOR A DVD CABINET

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SYRACUSE CITY SCHOOL DISTRICT
725 HARRISON STREET
SYRACUSE, NY  13210
(315) 435-4164

Name of Project Director:

DANIEL LOWENGARD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE VIOLENCE PREVENTION TRAINING AT NOTTINGHAM HIGH SCHOOL, INCLUDING STUDENTS AND STAFF TRAINING VIA THE JENNA FOUNDATION, AND INITIATIVES INCLUDING PALM PDA STUDENT MANAGEMENT SYSTEM AND STUDENT IDENTIFICATION CARD SYSTEM.

Funded Amount:

$25,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SYRACUSE TEACHERS EDUCATION TRUST  
909 BUTTERNUT STREET  
SYRACUSE, NY  13208  
(315) 472-6374

Name of Project Director:

KATE MCKENNA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TRANSPORTATION AND ADMISSION FEES FOR SCHOOL DAY CULTURAL AND ARTS ACTIVITIES THAT THESE STUDENTS WOULD OTHERWISE NOT BE ABLE TO ATTEND.

Funded Amount:

$20,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

SYRACUSE UNIVERSITY
OFFICE OF THE CHANCELLOR, SUITE 600 CROUSE - HINDS
SYRACUSE, NY 13224
(315) 443-8108

Name of Project Director:

JOSEPH DIXON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FACILITY EQUIPMENT AND
FURNITURE TO ENABLE THE SMALL BUSINESS INCUBATOR TO EXPAND
AND ACCOMMODATE THE PIPELINE OF BUSINESSES THAT IT SERVES.

Funded Amount:

$20,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

TAPPAN SPAULDING MEMORIAL LIBRARY
ROCK STREET, P.O. BOX 397
NEWARK VALLEY, NY 13811
(607) 642-9960

Name of Project Director:

LUANN WHIRL

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN'S BOOKS PURCHASE

Funded Amount:

$1,000

Requested By:

FINCH

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

THE EDEN II PROGRAMS-THE GENESIS SCHOOL  
270 WASHINGTON AVENUE, SUITE 6  
PLAINVIEW, NY 11803  
(516) 937-1397

Name of Project Director:

JOANNE GERENSER

Purpose of Project:

FUNDS WILL BE USED FOR CLASSROOM EQUIPMENT, LEARNING MATERIALS
AND SCHOOL PROGRAMS FOR AUTISM CLASSROOMS

Funded Amount:

$4,000

Requested By:

WALKER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

THE LEARNING PROJECT ONE
420 EAST 12TH STREET
NEW YORK, NY 10009
(212) 673-9488

Name of Project Director:

MS. DENISE ECHEVARRIA, PTA PRESIDENT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND SUPPLIES FOR PTA ROOM, WHICH IS USED BY PTA STAFF, PARENTS AND GUARDIANS.

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

THE NEIGHBORHOOD SCHOOL
121 EAST 3RD STREET
NEW YORK, NY 10009
(212) 387-0195

Name of Project Director:

MS. LIZ HASTIE, PRESIDENT PTA

Purpose of Project:

FUNDS WILL BE USED TO STRENGTHEN PARENT INVOLVEMENT, PURCHASE IMAC AND COPY MACHINE, HOLD WORKSHOPS FOR PARENTS, AND TOWN MEETINGS (PARENTS AND TEACHERS).

Funded Amount:

$14,500

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

THEODORE ROOSEVELT SANCTUARY AND AUDUBON CENTER
134 COVE ROAD
OYSTER BAY, NY  11771
(516) 922-3200  29

Name of Project Director:

AARON VIRGIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ELEMENTARY SCHOOL STUDENTS WITH A MULTI-SESSION (7 WEEK) INTERDISCIPLINARY, HANDS ON EDUCATIONAL PROGRAM THAT COMPLEMENTS SCHOOL CURRICULUM, ENCOURAGES APPRECIATION OF NATURE AND ENVIRONMENT THROUGH STUDY OF BIRDS.

Funded Amount:

$1,000

Requested By:

LAVINE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

TONAWANDA/GRAND ISLAND TEACHER CENTER
202 BROAD STREET
TONAWANDA, NY  14150
(716) 695-6172

Name of Project Director:

MARY VACANTI

Purpose of Project:

FUNDS WILL BE USED TO ACQUIRE EDUCATIONAL MATERIALS TO ENHANCE LESSONS AND PROGRAMS.

Funded Amount:

$2,500

Requested By:

HOYT, SCHIMMINGER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

TONAWANDA/GRAND ISLAND TEACHER CENTER
202 BROAD STREET
TONAWANDA, NY  14150
(716) 695-6172

Name of Project Director:

MARY VACANTI

Purpose of Project:

FUNDS WILL BE USED TO ACQUIRE EDUCATIONAL MATERIALS TO ENHANCE LESSONS AND PROGRAMS.

Funded Amount:

$2,500

Requested By:

HOYT, SCHIMMINGER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TUCKAHOE UNION FREE SCHOOL DISTRICT
29 ELM STREET
TUCKAHOE, NY  10707
(914) 337-6600  251

Name of Project Director:

MICHAEL YAZURLO

Purpose of Project:

FUNDS WILL BE USED FOR SUMMER-SCHOOL BUS TRANSPORTATION FOR STUDENTS FROM EASTCHESTER, PELHAM, AND TUCKAHOE.

Funded Amount:

$9,000

Requested By:

PAULIN

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

TURNING POINT
5220 4TH AVENUE
BROOKLYN, NY  11220-1812
(718) 439-0077

Name of Project Director:

BRUCE CARMEL

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE "GED AND BEYOND" PROGRAM, INCLUDING BUT NOT LIMITED TO EQUIPMENT AND SUPPLIES. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

ORTIZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

TWENTY FIRST CENTURY SAVE OUR KIDS TASK FORCE, INC.
P.O. BOX 888
PLAINVIEW, NY 11803
(516) 433-9444

Name of Project Director:

GINGER LIEBERMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COURSES ON VIOLENCE PREVENTION AND BULLYING IN SCHOOLS.

Funded Amount:

$5,000

Requested By:

LAVINE

Name of Administering State Agency:

EDUCATION DEPARTMENT
ULSTER COUNTY BOCES
175 RT. 32 NORTH
NEW PALTZ, NY 12561
(845) 255-1402

MAUREEN CHAISSON

FUNDS WILL BE USED TO ENHANCE STUDENTS (AGES 6 THROUGH 14) MATH, SCIENCE, AND TECHNOLOGY SKILLS THROUGH THE PURCHASE OF FIRST LEGO LEAGUE START-UP SETS FOR AREA SCHOOLS.

$5,000

CAHILL

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

UNITED METHODIST CITY SOCIETY
36-49 11TH STREET, 2ND FLOOR-ROOM 11
LONG ISLAND CITY, NY 11101
(718) 937-2216

Name of Project Director:

MAMIE ANGUIANO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES OF THE HEADSTART PROGRAM.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNIVERSITY HEIGHTS HIGH SCHOOL
WEST 181ST AND UNIVERSITY AVENUE
BRONX, NY  10453
(718) 289-5302

Name of Project Director:

BRENDA BRAVO

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE COMPUTER LAB.

Funded Amount:

$10,000

Requested By:

DIAZ-L

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UPSTATE NEW YORK FAMILIES FOR EFFECTIVE AUTISM TREATMENT, INC.
383 LAURELTON ROAD
ROCHESTER, NY 14609
(585) 704-1896

Name of Project Director:

GIA CARROLL

Purpose of Project:

FUNDS WILL BE USED TO HELP ESTABLISH A SUMMER RECREATIONAL PROGRAM FOR CHILDREN WITH AUTISM SPECTRUM DISORDER.

Funded Amount:

$10,000

Requested By:

MORELLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

VALLEY STREAM 13 SCHOOL DISTRICT
CENTRAL AVENUE
NORTH VALLEY STREAM, NY 11580
(516) 568-6100

Name of Project Director:

DR. LIZ LISON

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS AND SERVICES IN THE VALLEY STREAM 13 SCHOOL DISTRICT

Funded Amount:

$15,000

Requested By:

ALFANO

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

VARIETY CHILD LEARNING CENTER
47 HUMPHREY DRIVE
SYOSSET, NY 11791
(516) 921-7171

Name of Project Director:

JUDITH BLOCH

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE A KINDERGARTEN CLASSROOM

Funded Amount:

$2,000

Requested By:

WALKER

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VICTORIAN HANDS FOUNDATION
251 MONTGOMERY STREET
BROOKLYN, NY  11225
(718) 735-7471

Name of Project Director:

NADIA CAMPBELL

Purpose of Project:

FUNDS WILL BE USED TOWARD AN INTERGENERATIONAL LITERACY PROGRAM IN WHICH MIDDLE, HIGH SCHOOL AND COLLEGE STUDENTS ARE PARTNERED WITH SENIORS TO COLLECT AND DOCUMENT PERSONAL AND CULTURAL HISTORIES.

Funded Amount:

$4,000

Requested By:

CAMARA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

VILLAGE OF CASTLETON
70 GREEN AVENUE
CASTLETON, NY 12033
(518) 732−2738

Name of Project Director:

SCOTT MOCERINE

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION PROJECT AT CASTLETON ELEMENTARY SCHOOL. FUNDS WILL ALSO BE USED TO EXPAND THE EXISTING CHILD CARE PROGRAM.

Funded Amount:

$70,000

Requested By:

GORDON−T

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

VOORHEESVILLE PUBLIC LIBRARY
51 SCHOOL ROAD
VOORHEESVILLE, NY  12186
(518) 765-2791

Name of Project Director:

GAIL SACCO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE LIBRARY FURNISHINGS AND HELP WITH THE COST OF RENOVATIONS TO THE LIBRARY BUILDING.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WAPPINGERS CENTRAL SCHOOL DISTRICT DEPARTMENT OF TRANSPORTATION
55 MAJOR MAC DONALD WAY
WAPPPINGERS FALLS, NY 12590
(845) 298-5225

Name of Project Director:

WILLIAM CROSSON

Purpose of Project:

FUNDS WILL BE USED FOR ELECTRICAL SYSTEM UPGRADE

Funded Amount:

$35,000

Requested By:

MILLER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WATERVILLE CENTRAL SCHOOL FOUNDATION, INC.
381 MADISON STREET
WATERVILLE, NY  13480
(315) 841-3900

Name of Project Director:

TIMOTHY PEACH

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FIVE NEW PIECES OF EQUIPMENT TO MEET THE GROWING DEMAND FROM THE COMMUNITY. FUNDS WILL ALSO BE USED TO UPDATE CURRENT EQUIPMENT.

Funded Amount:

$12,000

Requested By:

MAGEE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WATERVLIET PUBLIC LIBRARY
1501 BROADWAY
WATERVLIET, NY  12189
(518) 271-0667

Name of Project Director:

GINGER HEWITT

Purpose of Project:

FUNDS WILL BE USED TO EXPAND AND ENHANCE THE CHILDREN'S AREA BY PURCHASING COMPUTERS AND COMPUTER FURNITURE, SHELVING AND BOOKS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WAVE HILL, INC.
675 WEST 252ND STREET
BRONX, NY  10471
(718) 549-3200

Name of Project Director:

KATE FRENCH

Purpose of Project:

FUNDS WILL BE USED TOWARD PROFESSIONAL DEVELOPMENT FOR TEACHERS, ACTIVE TEACHING SUPPORT, ENGLISH LANGUAGE ASSISTANCE AND SPECIAL NEEDS CLASSES, AND PARENT INVOLVEMENT OPPORTUNITIES.

Funded Amount:

$7,000

Requested By:

DINOWITZ

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WEST HEMPSTEAD UNION FREE SCHOOL DISTRICT
252 CHESTNUT STREET
WEST HEMPSTEAD, NY 11552
(516) 390-3107

Name of Project Director:

DR. CAROL EISENBERG

Purpose of Project:

FUNDS WILL BE USED FOR MENTORS AND LEADERS PROGRAM

Funded Amount:

$4,000

Requested By:

BARRA

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WEST IRONDEQUOIT CENTRAL SCHOOL DISTRICT
321 LIST AVENUE
ROCHESTER, NY 14617
(585) 336-2993

Name of Project Director:

WILLIAM DOMM

Purpose of Project:

FUNDS WILL BE USED FOR AN EDUCATIONAL PROGRAM THAT PROMOTES BRINGING ELECTRICAL VEHICLES INTO CURRENT USAGE.

Funded Amount:

$10,000

Requested By:

MORELLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WEST IRONDEQUOIT CENTRAL SCHOOL DISTRICT
321 LIST AVENUE
ROCHESTER, NY  14617
(585) 336-2993

Name of Project Director:

WILLIAM DOMM

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE "SENIOR PARTY" AND "JUNIOR AFTER HOURS PARTY".

Funded Amount:

$5,000

Requested By:

MORELLE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WESTBURY MEMORIAL PUBLIC LIBRARY
445 JEFFERSON STREET
WESTBURY, NY 11590
(516) 333-0176

Name of Project Director:

CATHLEEN TOWEY

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN VARIOUS LIBRARY RELATED PROGRAMS, PURCHASE OF BOOKS, VIDEOS AND EQUIPMENT

Funded Amount:

$3,500

Requested By:

WALKER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WESTHAMPTON FREE LIBRARY
7 LIBRARY AVENUE
WESTHAMPTON BEACH, NY 11978
(631) 288-3335

Name of Project Director:

MATTHEW BOLLERMAN

Purpose of Project:

FUNDS WILL BE USED FOR INCREASED LIBRARY PROGRAMMING

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WHITEHALL BOCES
104 BROADWAY
WHITEHALL, NY 12887
(518) 499-2906

Name of Project Director:

GILLETTE NASH

Purpose of Project:

FUNDS WILL BE USED FOR GED PROGRAM

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WOODWARD MEMORIAL LIBRARY
7 WOLCOTT STREET
LEROY, NY 14482
(585) 768-8300

Name of Project Director:

SUE BORDER

Purpose of Project:

FUNDS WILL BE USED FOR A COMPUTER WORK STATION

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

WYOMING FREE CIRCULATING LIBRARY
15 SOUTH ACADEMY STREET
WYOMING, NY 14591
(585) 495-6840

Name of Project Director:

JANE RADOMSKI

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING RENOVATIONS

Funded Amount:

$4,000

Requested By:

BURLING

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

YATES COMMUNITY LIBRARY
15 NORTH STREET, P.O. BOX 485
LYNDONVILLE, NY 14098
(585) 765-9041

Name of Project Director:

JEAN BOGUE

Purpose of Project:

FUNDS WILL BE USED FOR SHELVING AND DISPLAY RACKS

Funded Amount:

$1,500

Requested By:

HAWLEY

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

YESHIVA OF MANHATTAN BEACH
60 WEST END AVENUE
BROOKLYN, NY 11235
(718) 743-5511

Name of Project Director:

ANNE LIEB

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COST OF PUBLICIZING THE HOLOCAUST LIBRARY. INFORMATION ON THE HOLOCAUST WILL BE SHARED WITH THE COMMUNITY.

Funded Amount:

$1,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

YIVO INSTITUTE FOR JEWISH RESEARCH, INC.
15 WEST 16TH STREET
NEW YORK, NY 10011
(212) 294-6137

Name of Project Director:

MICHAEL GLICKMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MOSTLY FREE, NON-SECTARIAN EDUCATIONAL PROGRAMS THAT REFLECT THE MULTI-ETHNIC FABRIC OF NEW YORK AND REACH OUT TO A BROAD CONSTITUENCY.

Funded Amount:

$5,500

Requested By:

GLICK

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

YOUNG PEOPLE'S CHORUS OF NEW YORK CITY, INC.
1395 LEXINGTON AVENUE
NEW YORK, NY  10128
(212) 289-7779

Name of Project Director:

RENEE DANGER-JAMES

Purpose of Project:

FUNDS WILL BE USED TO OFFSET GENERAL OPERATING EXPENSES, WHICH INCLUDE BUT ARE NOT LIMITED TO PROVIDING CHILDREN OF DIVERSE ABILITIES AND BACKGROUNDS A COMPREHENSIVE KNOWLEDGE OF MUSIC THROUGH TEACHING VOCAL TECHNIQUES, MUSIC READING AND WRITING, PERFORMANCE EXPERIENCE, EXPOSURE TO PROFESSIONAL ARTISTS, ETC.

Funded Amount:

$27,000

Requested By:

SILVER

Name of Administering State Agency:

EDUCATION DEPARTMENT
Legal Name, Address, and Telephone Number:

YOUTH ADVOCACY & RESOURCE DEVELOPMENT
200 JERMAIN AVENUE
SAG HARBOR, NY 11963
(631) 725-5302

Name of Project Director:

JANET GROSSMAN

Purpose of Project:

FUNDS WILL BE USED FOR FUNDING FOR YOUTH ACTIVITIES

Funded Amount:

$5,000

Requested By:

THIELE

Name of Administering State Agency:

EDUCATION DEPARTMENT
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AARP CHAPTER #603
1121 THROGMORTON AVENUE
BRONX, NY 10465
(718) 792-5076

Name of Project Director:

JERRY GERARDI

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COSTS OF AARP SPONSORED TRIPS WITHIN NEW YORK STATE.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

AARP CHAPTER 3630
560-80 STREET
BROOKLYN, NY 11209
(718) 748-3581

Name of Project Director:

EDMUND J. MODERACKI

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE OVERALL QUALITY OF LIFE FOR COMMUNITY SENIORS. PROGRAM PROVIDES SCHEDULED MEETINGS, INFORMATION, AND DISTRIBUTION OF MATERIALS REGARDING HEALTH CARE, POLICE OFFICERS, LAWYERS, COMMUNITY ORGANIZATION, ETC.

Funded Amount:

$2,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

AARP PEACHTREE CHAPTER #0997
177 DREISER LOOP, ROOM O
BRONX, NY  10475
(718) 548-5335

Name of Project Director:

JOSEPHINE COLLINS

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COSTS OF AARP SPONSORED TRIPS WITHIN NEW YORK STATE.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ABE STARK SENIOR CENTER
103-15 FARRAGUT ROAD
BROOKLYN, NY  11236
(718) 272-9515

Name of Project Director:

HAZEL CYRUS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A STOVE, CONVECTION OVEN, AND FREEZER.

Funded Amount:

$10,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ABRAHAM RESIDENCES I AND II
3811 SURF AVENUE
BROOKLYN, NY 11224
(718) 266-3666

Name of Project Director:

MALKA BERNSTEIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE SENIORS WITH A TELEVISION, VCR AND T.V. STAND.

Funded Amount:

$3,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

AGING IN AMERICA COMMUNITY SERVICES, INC.
1500 PELHAM PARKWAY SOUTH
BRONX, NY 10461
(718) 409-7970

Name of Project Director:

MOLLY DANIELS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE IN-STATE TRANSPORTATION AND SUPPLIES FOR COMMUNITY ACTIVITIES.

Funded Amount:

$10,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ALLERTON AVENUE HOMEOWNERS ASSOCIATION, INC.
1415 ALLEN AVENUE
BRONX, NY 10469
(718) 652-0414

Name of Project Director:

NICK CONCIATORI

Purpose of Project:

FUNDS WILL BE USED FOR EXPENSES OF A SMALL SENIOR CENTER RUN BY ALLERTON AVENUE HOMEOWNERS ASSOCIATION OFFERING EDUCATIONAL, RECREATIONAL, REFERRAL AND IN-STATE TRANSPORTATION SERVICES FOR SENIORS IN THE SURROUNDING COMMUNITY.

Funded Amount:

$3,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ALZHEIMER'S ASSOCIATION
435 EAST HENRIETTA ROAD
ROCHESTER, NY 14620
(585) 760-5400

Name of Project Director:

SHARON BOYD

Purpose of Project:

FUNDS WILL BE USED FOR CAREGIVERS SUPPORT SERVICES

Funded Amount:

$4,000

Requested By:

HAWLEY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ALZHEIMER'S ASSOCIATION
435 EAST HENRIETTA ROAD
ROCHESTER, NY 14620
(585) 760-5420

Name of Project Director:

SHARON BOYD

Purpose of Project:

FUNDS WILL BE USED FOR CAREGIVER SUPPORT SERVICES WHICH IS SUPPORT FOR FAMILY CAREGIVERS WHO CARE FOR LOVED ONES AT HOME

Funded Amount:

$5,000

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION
ROCHESTER CHAPTER, INC.
435 EAST HENRIETTA ROAD
ROCHESTER, NY 14620
(585) 760-5400

Name of Project Director:

SHARON BOYD

Purpose of Project:

FUNDS WILL BE USED TO CONNECT 20 WAYNE COUNTY FAMILIES CARING FOR A LOVED ONE WITH ALZHEIMER’S DISEASE TO SUPPORTIVE SERVICES IN THE COMMUNITY

Funded Amount:

$5,000

Requested By:

OAKS

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

   AMERICAN ITALIAN COALITION OF AMICO, INC., AMICO EXTENDED
   SERVICE PROGRAM
   138 BAY 20TH STREET
   BROOKLYN, NY   11214
   (718) 256-3445

Name of Project Director:

   JERRY CHIAPPETTA

Purpose of Project:

   FUNDS WILL BE USED TO WORK WITH AREA SENIORS - TO ENHANCE A
   PROGRAM THAT SERVES OVER 250 SENIOR CITIZENS PER DAY WITH MEALS
   AND OTHER SERVICES.

Funded Amount:

   $11,000

Requested By:

   ABBATE

Name of Administering State Agency:

   OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

AMHERST SENIOR CENTER
370 JOHN JAMES AUDUBON PARKWAY
AMHERST, NY 14228
(716) 636-3050

Name of Project Director:

MARY ELLEN WALSH

Purpose of Project:

FUNDS WILL BE USED FOR THE SUPPORT OF PROGRAMS THAT THE SENIOR CENTER PROVIDES

Funded Amount:

$2,500

Requested By:

HAYES

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

AQUINAS HOUSING CORPORATION
1945 VYSE AVENUE
BRONX, NY 10460
(718) 842-6440

Name of Project Director:

YOLANDA NEGRON

Purpose of Project:

FUNDS WILL BE USED FOR SOCIAL, CULTURAL AND RECREATIONAL ACTIVITIES AND CLASSES HELD AT THREE SENIOR CITIZEN BUILDINGS IN THE BRONX.

Funded Amount:

$3,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ARC XVI FORT WASHINGTON, INC.
4111 BROADWAY
NEW YORK, NY 10033
(212) 781-5701

Name of Project Director:

FRAN HERTZBERG

Purpose of Project:

FUNDS WILL BE USED FOR AN ADULT DAY CARE CENTER, IN-STATE TRANSPORTATION PROGRAM, AND TO ORGANIZE SENIOR DAY.

Funded Amount:

$5,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ATLANTIC TERMINAL SENIOR CENTER
501 CARLTON AVENUE
BROOKLYN, NY 11238
(718) 638-6910

Name of Project Director:

CLAUDETTE MACEY

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL AND EDUCATIONAL PROGRAMMING FOR SENIOR CITIZENS.

Funded Amount:

$5,000

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AURORA ADULT DAY CARE CENTER
101 KING STREET
EAST AURORA, NY 14052
(716) 652-4269

Name of Project Director:

RUTHIE HUNT

Purpose of Project:

FUNDS WILL BE USED FOR THE CREATION, DEVELOPMENT AND MAINTENANCE OF AN INTERNET WEBSITE

Funded Amount:

$10,000

Requested By:

COLE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BALL HOGGS SPORTS AND RECREATION PROGRAM
23-36 101ST STREET
EAST ELMHURST, NY 11369
(646) 261-3080

Name of Project Director:

DARNELL CHILDS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BASKETBALLS, BASEBALLS, BATS AND GLOVES FOR THE GAME, AS WELL AS A COMMUNITY AWARENESS BASEBALL LEAGUE.

Funded Amount:

$4,306

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BAY RIDGE CENTER FOR OLDER ADULTS
411 OVINGTON AVENUE
BROOKLYN, NY 11209
(718) 748-0873

Name of Project Director:

ELLEN LAUER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH EDUCATIONAL AND RECREATIONAL SERVICES FOR THE SENIOR CITIZENS.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BAY RIDGE COMMUNITY SERVICE CENTER
411 OVINGTON AVENUE
BROOKLYN, NY 11209
(718) 748-0873

Name of Project Director:

ELLEN LAUER

Purpose of Project:

FUNDS WILL BE USED TO REPLACE THE UNREPAIRABLE UNTIL THAT THE CENTER HAS HAD FOR OVER 15 YEARS. THE SYSTEM ENSURES THAT THE SENIORS AND STAFF ARE SAFE. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BAYSIDE OUTREACH DEVELOPMENT, INC.
460 DUMONT AVENUE
BROOKLYN, NY 11212
(718) 345-5665

Name of Project Director:

HARVEY STONE

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH SENIOR
ACTIVITIES, INCLUDING THE PURCHASE OF EQUIPMENT, MEALS FOR
SENIORS, THE INTERGENERATIONAL FESTIVAL, AND STAFFING.

Funded Amount:

$70,000

Requested By:

BOYLAND

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BEDFORD PARK MULTI-SERVICE CENTER FOR SENIOR CITIZENS, INC.
243 EAST 204TH STREET
BRONX, NY  10458
(718) 365-3725

Name of Project Director:

PAT BURLACE

Purpose of Project:

FUNDS WILL BE USED TO ALLEVIATE HUNGER BY ANNUALLY SERVING APPROXIMATELY 35,000 NUTRITIOUS MEALS TO FRAIL AND LOW-INCOME ELDERLY IN THE BRONX.

Funded Amount:

$6,000

Requested By:

RIVERA-J

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BERGEN BASIN COMMUNITY DEVELOPMENT CORPORATION, INC.
P.O. BOX 340-265
BROOKLYN, NY  11234
(718) 444-0101

Name of Project Director:

PAUL CURALIE

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL AND RECREATIONAL PROGRAMS FOR SENIORS AT MIDWOOD ($2,520), SHELLBANK LEISURE LEAGUE ($1,660), GOOD SHEPHERD SENIOR ($1,660) AND MARINE PARK ACTIVE ADULTS ($1,660) PROGRAMS.

Funded Amount:

$7,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BFFY CATHERINE SHERIDAN SENIOR CENTER
35-25 83RD STREET
JACKSON HEIGHTS, NY  11372
(718) 458-4600

Name of Project Director:

LAWRENCE KARFMAN

Purpose of Project:

FUNDS WILL BE USED FOR CULTURAL ACTIVITIES FOR SENIORS, INCLUDING EXERCISE, PAINTING, MUSIC PROGRAMS, IN-STATE TRIPS AND ANY OTHER CULTURAL ACTIVITIES AND EVENTS. PROGRAMS ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BRIARWOOD SENIOR PROGRAM
139-30 QUEENS BOULEVARD
BRIARWOOD, NY  11435
(718) 805-2550

Name of Project Director:

NAOMI ALTMAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE BRIARWOOD SENIOR PROGRAM, INCLUDING THE PURCHASE OF SUPPLIES AND FOOD, AS WELL AS EXPENSES RELATED TO CLASSES AND LECTURES.

Funded Amount:

$3,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKLYN-WIDE INTER-AGENCY COUNCIL OF THE AGING, INC.
5901 13TH AVENUE
BROOKLYN, NY 11219
(718) 686-1333

Name of Project Director:

KATHLEEN MEYERS

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN AND IMPROVE SUPPORT OF SENIOR SERVICES.

Funded Amount:

$1,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKLYN-WIDE INTER-AGENCY COUNCIL OF THE AGING, INC.
5901 13TH AVENUE
BROOKLYN, NY 11219
(718) 686-1333

Name of Project Director:

KATHLEEN MYERS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SOCIAL, RECREATIONAL, AND EDUCATIONAL PROGRAMS FOR SENIOR CITIZENS.

Funded Amount:

$2,600

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BROOKS SENIOR CENTER
143-22 109TH AVENUE
JAMAICA, NY  11435
(718) 291-3935

Name of Project Director:

JOHN MCRAE

Purpose of Project:

FUNDS WILL BE USED TO HELP PROVIDE A VARIETY OF SOCIAL SERVICES AND PROGRAMS AS WELL AS RECREATION ACTIVITIES TO SENIORS.

Funded Amount:

$5,000

Requested By:

COOK

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BRULENE, NORTHRIDGE, SOUTH RIDGE NORC PROGRAM
34-10 94TH STREET
JACKSON HEIGHTS, NY 11372
(718) 396-5426

Name of Project Director:

SHARON SHERMAN

Purpose of Project:

FUNDS WILL BE USED FOR CULTURAL AND RECREATIONAL PROGRAMS AND ACTIVITIES INCLUDING IN-STATE TRIPS FOR THE SENIORS OF THE NORC PROGRAM IN JACKSON HEIGHTS - BRULENE, NORTHRIDGE 1,2 & 3 AND SOUTH RIDGE 1,2 ONLY.

Funded Amount:

$7,500

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BUILDERS FOR THE FAMILY AND YOUTH THE DIOCESE OF BROOKLYN, INC.
191 JORALEMON STREET
BROOKLYN, NY 11201
(718) 722-6000

Name of Project Director:

JUDY KLEVE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TRANSPORTATION TO THE 60+ FRAIL, HOMEBOUND ELDERLY OF COMMUNITY BOARDS 8, 11, NORTH 13, AND THROUGHOUT THE BOROUGH OF QUEENS. PROGRAMS ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$15,000

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE FOR THE AGING
BUILDERS FOR THE FAMILY AND YOUTH THE DIOCESE OF BROOKLYN, INC.
191 JORALEMON STREET
BROOKLYN, NY 11201
(718) 722-6123

PEGGY KELLEHER

FUNDS WILL BE USED TO OFFSET THE COST OF IN-STATE TRANSPORTATION SERVICES FOR SENIORS AT THE GLENWOOD AND BAY SENIOR CENTERS. THIS PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

$5,000
WEINSTEIN

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BUILDERS FOR THE FAMILY AND YOUTH THE DIOCESE OF BROOKLYN, INC.
45-50 19TH STREET
FLUSHING, NY 11358
(718) 357-4903

Name of Project Director:

JUDITH KLEVE

Purpose of Project:

FUNDS WILL BE USED FOR SENIOR PROGRAMS THAT PROVIDE
RECREATIONAL, CULTURAL, AND EDUCATIONAL ACTIVITIES FOR SENIORS
AT THE DELLARONICA AND STEINWAY SENIOR CENTERS. PROGRAMS ARE
OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BUILDERS FOR THE FAMILY AND YOUTH THE DIOCESE OF BROOKLYN, INC.
715 LEONARD STREET
BROOKLYN, NY  11222
(718) 722-6024

Name of Project Director:

JADWIGA SYR

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE AND IMPROVE THE SENIOR CENTER'S CULTURAL AND HEALTH PROGRAMS. PROGRAMS ARE OPEN TO ALL SENIORS IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BUILDERS FOR THE FAMILY AND YOUTH THE DIOCESE OF BROOKLYN, INC.
179 NORTH 6TH STREET
BROOKLYN, NY  11211
(718) 387-2316

Name of Project Director:

ROBIN APPARCIO

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE SENIOR CITIZEN CENTER’S HEALTH AND CULTURAL PROGRAMS. PROGRAMS ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BUILDERS FOR THE FAMILY AND YOUTH THE DIOCESE OF BROOKLYN, INC.
DIOCESE OF BROOKLYN, 157-16 65TH AVENUE
FLUSHING, NY 11365
(718) 358-3541

Name of Project Director:

FRAN STAPLES

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MUSIC THERAPY FOR THE PARTICIPANTS IN THE CENTER. THE PROGRAM PROVIDES A MUSIC INSTRUCTOR ONCE A MONTH, AS WELL AS, ONGOING THERAPEUTIC CLASSES. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

BURDEN CENTER FOR THE AGING, INC.
1484 FIRST AVENUE
NEW YORK, NY   10021
(212) 879-7400

Name of Project Director:

WILLIAM J. DIONNE

Purpose of Project:

FUNDS WILL BE USED TO EXPAND SERVICES AND PROVIDE SPECIAL PROGRAMS TO THE SENIORS WHO ATTEND THE CENTER’S PROGRAMS.

Funded Amount:

$15,000

Requested By:

GRANNIS

Name of Administering State Agency:

OFFICE FOR THE AGING
BWICA EDUCATIONAL FUND, INC.
5901 13TH AVENUE
BROOKLYN, NY 11219
(718) 686-1333

KATHLEEN MYERS

FUNDS WILL BE USED TO PLAN, COORDINATE, AND CONDUCT EDUCATIONAL SEMINARS AND WORKSHOPS AT SENIOR CENTERS, INTERAGENCY COUNCILS, AS WELL AS, BROOKLYN COMMUNITY GROUPS ON SENIOR ENTITLEMENTS, SERVICES AND RESOURCES AVAILABLE IN NYS.

$1,500

MILLMAN

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BWICA EDUCATIONAL FUND, INC.
5901 13TH AVENUE
BROOKLYN, NY 11219
(718) 686-1333

Name of Project Director:

KATHLEEN MEYERS

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT EDUCATIONAL LEADERSHIP TRAINING AND NETWORK ACTIVITIES TO SUPPORT BWIAC’S 17 LOCAL INTERAGENCY COUNCILS AND IMPROVE SERVICE DELIVERY TO SENIORS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CATHOLIC CHARITIES CAREGIVERS SUPPORT SERVICES
100 SLINGERLAND STREET
ALBANY, NY 12202
(518) 449-2110

Name of Project Director:

RENEE G. BENSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RESPITE SERVICES FOR FAMILY MEMBERS
OF ELDERLY PEOPLE LIVING IN THE COMMUNITY AND NURSING HOMES.

Funded Amount:

$7,500

Requested By:

GORDON-T

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CATHOLIC CHARITIES OF DIOCESE OF ALBANY
40 NORTH MAIN AVENUE
ALBANY, NY 12203
(518) 453-6655 6448

Name of Project Director:

SISTER ANNE TRANELLI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES THAT BREAK CULTURAL BARRIERS, IDENTIFIES HISPANIC SENIORS AND PROVIDE THEM WITH SERVICES THAT WOULD MEET THEIR HEALTH NEEDS.

Funded Amount:

$5,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTRAL HARLEM SENIOR CITIZENS COALITION, INC.
34 WEST 134TH STREET
NEW YORK, NY  10037
(212) 926-4871

Name of Project Director:

RITA L. CARRINTON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES FOR SENIORS IN CENTRAL HARLEM.

Funded Amount:

$7,500

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE FOR THE AGING
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:

ALLEN COHEN

Purpose of Project:

FUNDS WILL BE USED FOR A PROGRAM ASSISTANT THAT WILL PERFORM ADMINISTRATIVE SERVICES AS WELL AS LENDING SERVICES TO CLIENTS.

Funded Amount:

$30,000

Requested By:

SILVER, YOUNG

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CHINESE-AMERICAN PLANNING COUNCIL, INC.
133-12 41ST AVENUE
FLUSHING, NY 11355
(718) 358-3030

Name of Project Director:

JENNIFER LO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACTIVITIES AND EVENTS FOR SENIORS OF ALL ETHNICITIES AND TO PROVIDE WARM MEALS.

Funded Amount:

$14,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CHRISTOPHER BLENMAN SENIOR CENTER
720 EAST NEW YORK AVENUE
BROOKLYN, NY  11203
(718) 773-7400

Name of Project Director:

CLAUDETTE MACEY

Purpose of Project:

FUNDS WILL BE USED FOR THE EDUCATION AND RECREATION OF SENIORS, INCLUDING COMPUTER CLASSES, BOWLING AND IN-STATE TRIPS.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CHURCH OF ST. SEBASTIAN
39-63 57TH STREET
WOODSIDE, NY  11377
(718) 429-4442

Name of Project Director:

REV. MONSIGNOR MICHAEL HARDIMAN

Purpose of Project:

FUNDS WILL BE USED FOR, BUT NOT LIMITED TO, THE ENHANCEMENT OF PROGRAMS FOR SENIOR CITIZENS, WHICH ARE OPEN TO ALL MEMBERS OF THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CITY OF LONG BEACH
1 WEST CHESTER STREET
LONG BEACH, NY 11561
(516) 431-1000 306

Name of Project Director:

LAURIE BUSCEMI

Purpose of Project:

FUNDS WILL BE USED FOR SPECIALISTS THAT WILL LEAD DAILY, WEEKLY AND MONTHLY WORKSHOPS AND/OR RECREATIONAL GROUPS. THE BOARD WILL ADVISE AND ASSIST THE CITY COUNCIL ON QUALITY OF LIFE ISSUES FOR SENIORS IN LONG BEACH.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CITY OF LONG BEACH
1 WEST CHESTER STREET
LONG BEACH, NY 11561
(516) 431-1000 306

Name of Project Director:

LAURIE BUSCEMI

Purpose of Project:

FUNDS WILL BE USED FOR STAFFING OF A PROGRAM THAT PROVIDES DANCE THERAPY AND MOVEMENT FOR SENIOR CITIZENS IN THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CLAREMONT HOMEOWNERS AND TENANT CIVIC IMPROVEMENT
1325 TELLER AVENUE
BRONX, NY  10456-1604
(718) 538-6881

Name of Project Director:

D. LEE EZELL

Purpose of Project:

FUNDS WILL BE USED TO ADMINISTER AND OPERATE A TELEPHONE REASSURANCE PROGRAM FOR HOMEBOUND SENIORS AND INFORMATIONAL SEMINARS FOR INDEPENDENT SENIORS.

Funded Amount:

$31,000

Requested By:

GREENE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CLEARVIEW ASSISTANCE PROGRAM
163-59 17 AVENUE
WHITESTONE, NY 11357
(718) 352-4157

Name of Project Director:

GARY BABAD

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET EXPENSES THAT PROVIDE VARIOUS EDUCATIONAL AND RECREATIONAL SERVICES TO SENIORS IN THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

COHOES MULTI-SERVICE SENIOR CITIZENS CENTER
10 CAYUGA PLAZA
COHOES, NY  12047
(518) 235-2420

Name of Project Director:

MICHAEL COOLEY

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE RECREATION AND SOCIALIZATION OPPORTUNITIES AVAILABLE TO THE OLDER ADULTS IN COHOES AND THE SURROUNDING AREA.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

COMMUNITY ADVOCACY CENTER, INC.
657 FAIRVIEW AVENUE
RIDGEWOOD, NY 11385
(718) 760-8558

Name of Project Director:

JAMES LISA

Purpose of Project:

FUNDS WILL BE USED TO HELP AVOID LEGAL PROBLEMS BY IDENTIFYING LEGAL OPPORTUNITIES AND ESTABLISHING COMMUNITY LEGAL EDUCATION PROGRAMS IN SENIOR CENTERS SO THAT OLDER QUEENS RESIDENTS ARE AWARE OF THEIR RIGHTS AND ENTITLEMENTS.

Funded Amount:

$1,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

COMMUNITY ADVOCACY CENTER, INC.
48-08 111TH STREET
CORONA, NY  11368
(718) 760-8558

Name of Project Director:

JAMES LISA

Purpose of Project:

FUNDS WILL BE USED TO HELP AVOID LEGAL PROBLEMS BY IDENTIFYING LEGAL OPPORTUNITIES AND ESTABLISHING COMMUNITY LEGAL EDUCATION PROGRAMS IN SENIOR CENTERS TO MAKE OLDER QUEENS RESIDENTS AWARE OF THEIR RIGHTS AND ENTITLEMENTS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

COMMUNITY BAPTIST CHURCH
111-08 141ST STREET
SOUTH OZONE PARK, NY 11435
(718) 659-5754

Name of Project Director:

DOCK JOHNSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIAL SERVICE PROGRAMS TO SENIORS, INCLUDING WORKSHOPS, SEMINARS, QUILTING, VIDEOS, AND OTHER SPECIAL ACTIVITIES, INCLUDING THE NECESSARY MATERIALS AND EQUIPMENT. LUNCH WILL ALSO BE PROVIDED. PROGRAMS ARE OFFERED TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

COOK

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

COMMUNITY BAPTIST CHURCH SEASONED SAINTS
46-19 206 STREET
BAYSIDE, NY 11361
(718) 229-0675

Name of Project Director:

REVERAND PHILLIP CHARLES JOUBERT

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF THE SOCIAL AND RECREATIONAL PROGRAMS FOR OLDER ADULTS. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

COMMUNITY FOOD RESOURCE CENTER, INC.
39 BROADWAY, 10TH FLOOR
NEW YORK, NY 10006
(212) 344-0195

Name of Project Director:

PATRICIA CALDWELL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUCH ACTIVITIES AS DANCE AND TAI CHI CLASSES AND OTHER EDUCATIONAL AND RECREATIONAL ACTIVITIES (INCLUDING THE COST OF A DANCE INSTRUCTOR AND NUTRITIONIST) IN ORDER TO ENHANCE THE HEALTHY MOBILITY OF THE MULTI-ETHNIC AND MULTI-CULTURAL GROUP OF SENIOR CITIZENS AT THE DINNER PROGRAM AT PS 134.

Funded Amount:

$10,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

RABBI JACOB HOROWITZ

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A COMMUNITY SAFETY PATROL.

Funded Amount:

$10,000

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

COMMUNITY PROGRAMS CENTER OF LONG ISLAND
141 RODEO DRIVE
EDGEWOOD, NY 11717
(631) 586-4644

Name of Project Director:

ELIZABETH GEARY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE ACTIVITY EQUIPMENT FOR CPC'S ADULT DAYCARE PROGRAM FOR PERSONS WITH ADVANCED ALZHEIMER'S DISEASE, WHICH WOULD HELP WITH STIMULATING BOTH THE SENSES AND MENTAL ACTIVITY.

Funded Amount:

$2,300

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

COMMUNITY SENIOR CENTER OF FLUSHING, INC.
133-35 ROOSEVELT AVENUE, 2ND FLOOR
FLUSHING, NY 11354
(718) 886-2873

Name of Project Director:

HYUNG BIN IM

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE WARM MEALS TO FLUSHING SENIORS.
FUNDS WILL ALSO BE USED FOR OFFICE SUPPLIES AND IN-STATE TRIPS.

Funded Amount:

$6,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CONCOURSE VILLAGE SPECIAL ADULTS, INC.
779 CONCOURSE VILLAGE EAST
BRONX, NY  10451
(718) 293-6552

Name of Project Director:

LENARD JONES

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND RECREATIONAL PROGRAMS FOR SENIORS IN THE COMMUNITY.

Funded Amount:

$3,500

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CONEY ISLAND CATHEDRAL OF DELIVERANCE CHRISTIAN CHURCH, INC.
2815 MERMAID AVENUE
BROOKLYN, NY 11224
(718) 946-5913

Name of Project Director:

WAYLYN HOBBS

Purpose of Project:

FUNDS WILL BE USED TOWARDS EXPANDING THE CURRENT SENIOR CITIZEN PROGRAM, INCLUDING RECREATIONAL AND EDUCATIONAL ACTIVITIES. PROGRAMS ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CONSELYEA STREET BLOCK ASSOCIATION, INC.
211 AINSLIE STREET
BROOKLYN, NY 11211
(718) 963-3793

Name of Project Director:

TILLIE TARANTINO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE TELEPHONE COMMUNICATION PROGRAM FOR HOMEBOUND SENIORS.

Funded Amount:

$3,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CONTELLO SENIOR SOCIAL CLUB
2740 CROPSEY AVENUE, APT. 2F
BROOKLYN, NY 11214
(718) 266-7924

Name of Project Director:

LEONARD IMMERMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A PLACE FOR SENIORS TO MEET TO HAVE SOCIAL GATHERINGS, DISCUSSION GROUPS, ENTERTAINMENT, AND REFRESHMENT.

Funded Amount:

$1,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

CO-OP VILLAGE SENIOR CARE  
197 EAST BROADWAY  
NEW YORK, NY  10002  
(212) 979-5592

Name of Project Director:

MARION LAGER

Purpose of Project:

FUNDS WILL BE USED TOWARD OPERATIONAL EXPENSES, ASSISTING IN THE ADMINISTRATION OF VARIOUS PROGRAMS, INCLUDING BUT NOT LIMITED TO RECREATIONAL PROGRAMS, SOCIAL SERVICES, NURSING SERVICES, TRANSPORTATION, GROUP AND VOLUNTEER SERVICES, TO SENIORS AGED 60+ IN CO-OP VILLAGE.

Funded Amount:

$76,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

DAVIDSON SENIOR CENTER
950 UNION AVENUE
BRONX, NY 10459
(718) 328-2811

Name of Project Director:

DAVID S. TAYLOR

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROJECTS AT THE SENIOR CENTER, INCLUDING, BUT NOT LIMITED TO, EDUCATIONAL AND RECREATIONAL ACTIVITIES.

Funded Amount:

$5,000

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

DORCHESTER SENIOR CITIZENS CENTER, INC.
1419 DORCHESTER ROAD
BROOKLYN, NY 11226
(718) 941-6700

Name of Project Director:

JANET SCHOR

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE COST OF ESL INSTRUCTORS.

Funded Amount:

$3,000

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

DOROT, INC.
171 WEST 85TH STREET
NEW YORK, NY 10024
(212) 769-2850

Name of Project Director:

VIVIAN FENSTER EHRLICH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A TRANSITIONAL HOUSING PROGRAM FOR SENIORS.

Funded Amount:

$5,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

DOUBLEDAY BABCOCK SENIOR CENTER, INC.
45 EAST MAIN STREET
OYSTER BAY, NY  11771
(516) 922-1770  308

Name of Project Director:

GAIL SPERANZA

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE QUALITY OF LIFE FOR SENIORS THROUGH SOCIAL FUNCTIONS.

Funded Amount:

$5,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

DUTCHESS COUNTY OFFICE FOR THE AGING
27 HIGH STREET
POUGHKEEPSIE, NY 12601
(845) 486-2555

Name of Project Director:

JOHN BEALE

Purpose of Project:

FUNDS WILL BE USED TOWARDS FUNDING OF ANNUAL BARDAVON SENIOR MATINEE PROGRAM

Funded Amount:

$2,500

Requested By:

KIRWAN

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

DYKER HEIGHTS AUTUMN AGE CLUB
1305 86TH STREET
BROOKLYN, NY  11228
(718) 259-8524

Name of Project Director:

JOE LOFORTE

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR THE SENIORS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

EAST 233RD ST. SENIOR CENTER, INC.
P.O. BOX 291
BRONX, NY 10466
(718) 653-2326

Name of Project Director:

RACHEL MCNEIL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MATERIALS FOR SENIOR PROGRAMS AND RECREATIONAL ACTIVITIES.

Funded Amount:

$7,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

EAST HARLEM COMMITTEE ON AGING, INC.
312 EAST 109TH STREET, 3RD FLOOR
NEW YORK, NY 10029
(212) 369-0878

Name of Project Director:

ROBERTA ROBLEDA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL AND EDUCATIONAL SERVICES TO THE SENIOR POPULATION IN EAST HARLEM.

Funded Amount:

$6,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

EAST NEW YORK COUNCIL FOR THE AGING, INC.
2702 LINDEN AVENUE
BROOKLYN, NY  11208
(718) 647-2494

Name of Project Director:

ELIZABETH SANDERS

Purpose of Project:

FUNDS WILL BE USED FOR IN-STATE TRIPS FOR SENIORS, ARTS AND CRAFTS. FUNDS WILL ALSO BE USED TO PROVIDE REFRESHMENTS.

Funded Amount:

$11,312

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

EAST SIDE COMMUNITY GROUP FOR SENIOR CITIZENS, INC.
340 EAST 24TH STREET
NEW YORK, NY  10010
(212) 585-6137

Name of Project Director:

PRISCILLA MAXSONET

Purpose of Project:

FUNDS WILL BE USED TO ASSIST SENIORS WITH RECREATIONAL AND EDUCATIONAL ACTIVITIES, EVENTS AND SERVICES.

Funded Amount:

$7,000

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

EILEEN DUGAN SENIOR CITIZENS CENTER  
380 COURT STREET  
BROOKLYN, NY  11231  
(718) 596-1956

Name of Project Director:  
CAROL RIED

Purpose of Project:  
FUNDS WILL BE USED FOR A SOCIAL DANCE PROGRAM, A NUTRITION PROGRAM, AND EXERCISE PROGRAM.

Funded Amount:  
$5,000

Requested By:  
MILLMAN

Name of Administering State Agency:  
OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ELMCOR YOUTH AND ADULT ACTIVITIES, INC.
33-16 108TH STREET
CORONA, NY  11368
(718) 651-0096

Name of Project Director:

ANN HENDERSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL, EDUCATIONAL, CULTURAL AND HEALTH PROMOTION ACTIVITIES FOR THE SENIOR POPULATION OF THIS COMMUNITY. FUNDS SHOULD BE SPLIT EVENLY BETWEEN LEFRAK SENIOR CENTER AND THE ELMCOR YOUTH AND ADULT ACTIVITIES, INC.

Funded Amount:

$10,000

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ERICKSON PLACE AARP #5174
3279 RADIO DRIVE
BRONX, NY  10465
(718) 828-2309

Name of Project Director:

ANN JACK

Purpose of Project:

FUND WILL BE USED TO SUBSIDIZE VARIOUS IN-STATE TRIPS THAT THE GROUP SPONSORS.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

EVANGELICAL LUTHERAN CHURCH
68-59 60TH LANE
RIDGEWOOD, NY  11385
(718) 821-0233

Name of Project Director:

REVEREND MICHAEL T. ROSS

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTER SCHOOL PROGRAM ON WEEKDAYS TO HELP STUDENTS WITH THEIR HOMEWORK AND ACADEMIC STUDIES, PROVIDE ORGANIZED RECREATIONAL ACTIVITIES AND PROVIDE MENTORS. SERVICES TO BE PROVIDED TO STUDENTS ON A NON-SECTARIAN BASIS.

Funded Amount:

$7,500

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

FAATZ-CROFUT HOME FOR THE ELDERLY
46 GRANT AVENUE
AUBURN, NY 13021
(315) 253-6141

Name of Project Director:

CHRISTINA CUMMINGS

Purpose of Project:

FUNDS WILL BE USED FOR BATHROOM REFURBISHMENTS FOR RESIDENTS

Funded Amount:

$2,000

Requested By:

FINCH

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

FAITH BAPTIST CHURCH OF CORAM YOUTH AWARENESS, INC.
P.O. BOX 151
CORAM, NY 11727
(631) 732-1133

Name of Project Director:

BERESFORD ADAMS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FOOD NEEDED FOR THE SNAP PROGRAM.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

FEDERATION OF ORGANIZATIONS FOR THE NY STATE MENTALLY DISABLED, INC.
ONE FARMINGDALE ROAD
WEST BABYLON, NY 11704
(631) 669-5355

Name of Project Director:

RUTH DEL COL

Purpose of Project:

FUNDS WILL BE USED FOR OPERATING EXPENSES FOR THE SENIOR SUPPORT SERVICES PROGRAM.

Funded Amount:

$5,000

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

FENIMORE SENIOR CENTER, INC.
266 FENIMORE STREET
BROOKLYN, NY  11225
(718) 462-6756

Name of Project Director:

MATTIE ROBERSON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF STAFFING, FOOD PURCHASES, INSURANCE FEES AND GENERAL UPKEEP OF THE FACILITY.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

FILIAL PIETY SOCIETY, INC.
43 – 16 43RD AVENUE
LONG ISLAND CITY, NY  11104
(718) 784 – 2897

Name of Project Director:

DAVID SHIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FAMILY SUPPORT SERVICES TO SENIOR CITIZENS AND CHILDREN.

Funded Amount:

$10,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

FIVE TOWNS SENIOR CENTER, INC.
124 FRANKLIN PLACE
WOODMERE, NY 11598
(516) 374-4747

Name of Project Director:

GEORGIANA WOLSSON

Purpose of Project:

FUNDS WILL BE USED TO PARTIALLY SUPPORT THE COSTS ASSOCIATED WITH A PROGRAM COORDINATOR WHO PLANS, ORGANIZES AND IMPLEMENTS ALL PROGRAMS TO BENEFIT SENIOR CITIZENS.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FOREST HILLS COMMUNITY HOUSE, INC.
108-25 62 DRIVE
FOREST HILLS, NY  11375
(718) 592-5757

Name of Project Director:

NAOMI ALTMAN

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE PROGRAMS AT BOTH THE FOREST HILLS COMMUNITY HOUSE SENIOR CENTER AND THE FHCH AT POMONOK SENIOR CENTER. IN ADDITION, FUNDS WILL BE USED TO SUPPORT THE VAN SERVICE FOR THE HANDICAPPED AND DISABLED ELDERLY SUPPORT PROGRAM.

Funded Amount:

$16,500

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

FOREST PARK SENIOR CITIZENS CENTER, INC.
86-22 85TH STREET
WOODHAVEN, NY  11421
(718) 849-2222

Name of Project Director:

DONNA CALTABIANO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PEOPLE OVER THE AGE OF 60 WITH HOT NUTRITIOUS MEALS. ALSO, PROVIDES SEMINARS ON HEALTH AND NUTRITION, RECREATIONAL/SOCIAL ACTIVITIES, AND REFERRALS FOR ENRICHMENT PROGRAMS.

Funded Amount:

$30,000

Requested By:

SEMINERIO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

FORT GREENE GRANT SQUARE SENIOR CENTER
19 ROGERS AVENUE
BROOKLYN, NY 11216
(718) 638-6910

Name of Project Director:
CLAUDETTE MACEY

Purpose of Project:
FUNDS WILL BE USED FOR RECREATIONAL AND EDUCATIONAL PROGRAMMING FOR SENIOR CITIZENS.

Funded Amount:
$5,000

Requested By:
JEFFRIES

Name of Administering State Agency:
OFFICE FOR THE AGING
FORT PLAIN SENIOR CENTER, INC.
204 CANAL STREET
FORT PLAIN, NY 13339
(518) 993-3432

TAMMY MOYNIHAN

FUNDS WILL BE USED TOWARD REPAIRS NEEDED AT THE FORT PLAIN SENIOR CENTER, INCLUDING FLOORING, AND FOR SENIOR MEAL ASSISTANCE.

$7,000

TONKO

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

FRIENDS AND RELATIVES OF INSTITUTIONALIZED AGED, INC.
18 JOHN STREET - SUITE 905
NEW YORK, NY  10038
(212) 732-4455

Name of Project Director:

AMY PAUL

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF PRINTING AND POSTAGE FOR EDUCATIONAL MATERIALS.

Funded Amount:

$9,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

FRIENDS OF THE RETIRED AND SENIOR VOLUNTEER PROGRAM OF
SUFFOLK COUNTY
ONE WEST MAIN STREET
SMITHTOWN, NY 11787
(631) 979-9490

Name of Project Director:

PEGI ORSINI

Purpose of Project:

Funds will be used to offset operating expenses for the Senior Citizen Volunteer Service Program.

Funded Amount:

$1,500

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GLEN COVE ADULT DAY PROGRAM
130 GLEN STREET
GLEN COVE, NY 11542
(516) 759-2345

Name of Project Director:

STEPHANIE LAKE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIORS WITH SOCIAL AND RECREATIONAL ACTIVITIES AND GENERAL DAY CARE.

Funded Amount:

$5,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GLEN COVE SENIOR CENTER
130 GLEN STREET
GLEN COVE, NY 11542
(516) 759-9610

Name of Project Director:

CAROL WALDMAN

Purpose of Project:

FUNDS WILL BE USED FOR SERVICES WHICH WILL IMPROVE THE QUALITY OF LIFE FOR SENIOR CITIZENS BY PROVIDING SOCIAL FUNCTIONS.

Funded Amount:

$5,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GLENRIDGE SENIOR CITIZENS MULTISERVICE AND ADVISORY CENTER, INC.
59-03 SUMMERFILED STREET
RIDGEWOOD, NY 11385
(718) 386-3131

Name of Project Director:

LARRY HOFFMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CONTINUING OPERATING ASSISTANCE FOR THE SENIOR CENTER WITH A PART-TIME BOOKKEEPER AND A PART-TIME FRONT DOOR RECEPTIONIST.

Funded Amount:

$5,000

Requested By:

SEMINERIO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GLENRIDGE SENIOR CITIZENS MULTISERVICE AND ADVISORY CENTER, INC.
59-03 SUMMERFIELD STREET
RIDGEWOOD, NY 11385
(718) 386-5136

Name of Project Director:

SUSAN SIMONETTI

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE RECREATIONAL AND EDUCATIONAL PROGRAMS PROVIDED TO SENIOR CITIZENS IN THE COMMUNITY.

Funded Amount:

$4,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GOLDEN AGE CLUB ICCJ  
167-11 73RD AVENUE  
FLUSHING, NY  11366  
(718) 591-5353

Name of Project Director:

HERTA KOVACH

Purpose of Project:

FUNDS WILL BE USED FOR BUS IN-STATE TRANSPORTATION FOR SENIORS. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GOLDEN AGE CLUB OF ST. MARY’S CHURCH
70-31 48TH AVENUE
WOODSIDE, NY 11377
(718) 672-4848

Name of Project Director:

MARILYN THOMAS

Purpose of Project:

FUNDS WILL BE USED FOR CULTURAL ACTIVITIES AND FOR RECREATIONAL ACTIVITIES FOR THE SENIORS. PROGRAMS ARE OPEN TO ALL SENIORS OF THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GOLDEN AGES OF MESSIAH LUTHERAN CHURCH
42-15 165TH STREET
FLUSHING, NY 11358
(718) 358-6738

Name of Project Director:

ANNA J. TOMECAK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE DAILY RECREATIONAL ACTIVITIES FOR SENIOR CITIZENS. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GOLDEN RING CLUB
69-10 164TH STREET
FLUSHING, NY  11365
(718) 591-0403

Name of Project Director:

NAOMI ALTMAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE PROGRAMS OF THE GOLDEN RING CLUB, INCLUDING THE PURCHASE OF SUPPLIES, EQUIPMENT AND FOOD, AS WELL AS OTHER ACTIVITIES AND SPECIAL TRIPS WITHIN NEW YORK STATE.

Funded Amount:

$2,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

   GRACE AGARD SENIOR CENTER
   966 FULTON STREET
   BROOKLYN, NY  11238
   (718) 638-6910

Name of Project Director:

   CLAUDETTE MACEY

Purpose of Project:

   FUNDS WILL BE USED FOR RECREATIONAL AND EDUCATIONAL
   PROGRAMMING FOR SENIOR CITIZENS.

Funded Amount:

   $5,000

Requested By:

   JEFFRIES

Name of Administering State Agency:

   OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GRAND STREET SETTLEMENT, INC.
80 PITT STREET
NEW YORK, NY 10002
(212) 674-1740 202

Name of Project Director:

MIRIAM COLON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BARUCH SENIOR RESIDENTS WITH COMPREHENSIVE HEALTH CARE AND SOCIAL SERVICES INCLUDING HOUSING REFERRAL, BENEFITS ASSISTANCE, AND CASE MANAGEMENT.

Funded Amount:

$5,000

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE FOR THE AGING
GREATER WHITESTONE TAXPAYERS COMMUNITY CENTER, INC.
150-74 6TH AVENUE
WHITESTONE, NY 11357
(718) 746-1767

HELEN MANDRAS

FUNDS WILL BE USED TO OFFSET THE COST OF OPERATING A COMMUNITY CENTER FOR SENIOR CITIZENS.

$5,000

CARROZZA

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GREENWICH HOUSE, INC.
27 BARROW STREET
NEW YORK, NY 10014
(212) 242-4140 281

Name of Project Director:

GERRI MATUSEWITCH

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PAINTING, POETRY, CHAIR EXERCISE CLASSES, AND IF POSSIBLE, ANOTHER CLASS BASED ON WHAT MEMBERS THINK IS IMPORTANT.

Funded Amount:

$5,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GUIDANCE CENTER, INC.
70 GRAND STREET
NEW ROCHELLE, NY 10801
(914) 636-4440 265

Name of Project Director:

AMY GELLES

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS AND SOFTWARE FOR USE BY SENIORS IN THE SENIOR PROGRAM.

Funded Amount:

$5,000

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

GURWIN JEWISH GERIATRIC CENTER
68 HAUPPAUGE ROAD
COMMACK, NY 11725
(631) 715-2000

Name of Project Director:

MARC SUNTUP

Purpose of Project:

FUNDS WILL BE USED TO HELP FUND THE CENTER'S RESIDENT ENHANCEMENT PROGRAM

Funded Amount:

$10,000

Requested By:

BOYLE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HABER HOUSE SENIOR CENTER
3024 WEST 24TH STREET
BROOKLYN, NY 11224
(718) 372-5775

Name of Project Director:

ETTY FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR THE SENIORS. OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HAMILTON GRANGE CENTER FOR SENIOR CITIZENS, INC.
420 WEST 145TH STREET
NEW YORK, NY  10031
(212) 862-4181

Name of Project Director:

REVEREND ROBERT JOHNSON

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL AND EDUCATIONAL PROGRAMS FOR THE ELDERLY COMMUNITY.

Funded Amount:

$7,500

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HAMILTON MADISON HOUSE, INC.
50 MADISON STREET
NEW YORK, NY  10038
(212) 349-3724

Name of Project Director:

FLOYD COHEN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING EXPENSES, INCLUDING PERSONNEL, IN ORDER TO SUPPORT THE MANY PROGRAMS OFFERED TO THE MULTI-ETHNIC SENIOR CITIZENS OF THE COMMUNITY.

Funded Amount:

$26,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HANAC, INC.
29-19 24TH AVENUE
ASTORIA, NY  11102
(718) 267-6910

Name of Project Director:

CHRIS AMENDOLA

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET THE OPERATIONAL EXPENSES OF PROVIDING SENIOR TRANSPORTATION SERVICES IN COMMUNITY BOARD #7.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HANAC, INC.
31-14 30TH VENUE
ASTORIA, NY 11102
(718) 276-6910

Name of Project Director:

CHRIS ARENDOLA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE SENIOR PARA TRANSIT PROGRAM.

Funded Amount:

$8,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HANAC, INC.
45 JOHN STREET, SUITE 1000
NEW YORK, NY  10038
(212) 964-9815

Name of Project Director:

MARIA RIVERA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE ARTS AND CRAFTS, MISCELLANEOUS SUPPLIES AND FOOD/REFRESHMENTS FOR PARTICIPANTS. FUNDS WILL ALSO BE USED FOR GENERAL OPERATIONS.

Funded Amount:

$2,000

Requested By:

MAYERSON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HANAC, INC.
49 W. 45TH STREET
NEW YORK, NY 10036
(718) 728-3586

Name of Project Director:

NICO NICOLAIDES

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS FOR SENIORS INCLUDING CULTURAL TRIPS (WITHIN NYS), ARTS AND CRAFTS, EXERCISE PROGRAMS OPERATED AT ST. DEMITRIOS OF ASTORIA. PROGRAMS ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HARLEM INTERAGENCY COUNCIL FOR THE AGED, INC.
50 WEST 13TH STREET
NEW YORK, NY  10037
(212) 234-1060

Name of Project Director:

HOWARD FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES TO THE SENIOR POPULATION IN CENTRAL HARLEM. THESE SERVICES INCLUDE ENTERTAINMENT AND EDUCATIONAL PROGRAMS.

Funded Amount:

$5,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HARLEM INTERAGENCY COUNCIL FOR THE AGED, INC.
50 WEST 139TH STREET
NEW YORK, NY 10037
(212) 234-1060

Name of Project Director:

HOWARD FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TOWARD ADVOCACY FOR SENIOR CITIZENS, INCLUDING THE NEEDS, ISSUES AND CONCERNS OF OLDER ADULTS. ADDITIONALLY, FUNDS WILL BE USED FOR THE PREVENTION OF ISOLATION OF SENIORS IN NEW YORK STATE.

Funded Amount:

$10,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HEALTH ADVOCATES FOR OLDER PEOPLE, INC.
1844 SECOND AVENUE
NEW YORK, NY   10128
(212) 360-2227

Name of Project Director:

NANCY HOUGHTON

Purpose of Project:

FUNDS WILL BE USED FOR OPERATING THE CARNEGIE EAST HOUSE, A
NON-PROFIT ASSISTED LIVING RESIDENCE AT SECOND AVENUE AND 95TH
STREET FOR MODERATE-INCOME FRAIL ELDERLY.

Funded Amount:

$10,000

Requested By:

BING

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HEIGHTS AND HILL COMMUNITY COUNCIL, INC.
160 MONTAGUE STREET
BROOKLYN, NY 11201
(718) 596-8789

Name of Project Director:

JUDY WILLIG

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH, SPEAKERS, ACTIVITIES AND EVENTS FOR SENIORS AND THEIR FAMILIES.

Funded Amount:

$4,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HENRY STREET SETTLEMENT
265 HENRY STREET
NEW YORK, NY 10002
(212) 766-9200

Name of Project Director:

VEORONA JEETER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROVIDING A LUNCH PROGRAM TO SENIORS IN THE COMMUNITY.

Funded Amount:

$53,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HOLY FAMILY ROMAN CATHOLIC CHURCH
175-20 74TH AVENUE
FLUSHING, NY  11366
(718) 479-4354

Name of Project Director:

LILLIAN PISCIOTTA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL, EDUCATIONAL, SOCIAL ACTIVITIES FOR SENIORS. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HOMECREST COMMUNITY SERVICES, INC.
1413 AVENUE T
BROOKLYN, NY 11229
(718) 376-4036

Name of Project Director:

TIPHAINE TSANG

Purpose of Project:

FUNDS WILL BE USED FOR LIGHT REFRESHMENTS, EQUIPMENT, ETC.

Funded Amount:

$4,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HORACE J. INMAN SENIOR CENTER, INC.
53 GUY PARK AVENUE
AMSTERDAM, NY 12010
(518) 842-3815

Name of Project Director:

JEANNETTE STEVENS-DAURY

Purpose of Project:

FUNDS WILL BE USED TO REPLACE AIR CONDITIONING AND UPGRADE FURNACE TO AN ENERGY EFFICIENT SYSTEM. FUNDS WILL ALSO BE USED TO REPLACE FANS AND INSULATE THE BUILDING IN ORDER TO REDUCE UTILITY COSTS.

Funded Amount:

$7,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HUDSON GUILD
441 WEST 26TH STREET
NEW YORK, NY  10001
(212) 760-9804

Name of Project Director:

BRIAN SABER

Purpose of Project:

FUNDS WILL BE USED FOR THE FULTON SENIOR CENTERS, PROVIDING OUTREACH SERVICES TO THE ELDERLY IN CHELSEA, AS WELL AS FOR PROVIDING SOCIAL SERVICES.

Funded Amount:

$8,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

HUNTS POINT MULTI SERVICE CENTER, INC.
754 EAST 151TH STREET
BRONX, NY 10455
(718) 401-5444

Name of Project Director:

MANUEL ROSA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MEALS TO SENIOR CITIZENS.

Funded Amount:

$60,000

Requested By:

ARROYO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

INSTITUTE FOR PUERTO RICAN HISPANIC ELDERLY, INC.
105 EAST 22ND STREET SUITE #615
NEW YORK, NY 10010
(212) 677-4181

Name of Project Director:

SULEIKA CABRERA DRINAME

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE MANAGING PROGRAMS TO PROVIDE ACCESS TO INFORMATION FOR SENIORS.

Funded Amount:

$3,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

INSTITUTE FOR THE PUERTO RICAN HISPANIC ELDERLY, INC.
105 E. 22ND STREET, ROOM 615
NEW YORK, NY 10010
(718) 677-4181

Name of Project Director:

SULEIKA CABRERA DRINANE

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN PROVIDING SERVICES AT THE JACKSON HEIGHTES/ELMHURST SENIOR CENTER IN SUNNYSIDE, LONG ISLAND CITY AND ASTORIA.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

INSTITUTE FOR THE PUERTO RICAN HISPANIC ELDERLY, INC.
105 EAST 22ND STREET
NEW YORK, NY 10010
(212) 677-4181

Name of Project Director:

SULEIKA CABRERA DRINANE

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE INSTITUTE’S ABILITY TO PROVIDE MULTI-RANGE SERVICES TO THE HISPANIC AND MINORITY COMMUNITIES AND TO PROVIDE TECHNICAL ASSISTANCE TO OTHER AGENCIES THAT PROVIDE A WIDE VARIETY OF SERVICES TO SENIOR CITIZENS (I.E., BILINGUAL CASE MANAGEMENT, MEDICAID REFERRALS, IMMIGRATION, ETC.).

Funded Amount:

$12,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

INSTITUTE FOR THE PUERTO RICAN/HISPANIC ELDERLY, INC.
105 EAST 22ND STREET – ROOM 615
NEW YORK, NY  10010
(212) 677 – 4181

Name of Project Director:

MS. SULEIKA CARBRERA DRINANE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PUERTO RICAN/HISPANIC SENIORS THE TOOLS TO ALLOW THEM TO OVERCOME SERIOUS EDUCATIONAL, COMMUNICATION AND SERVICE GAPS IN SOCIETY THAT ARE FORMIDABLE BARRIERS TO ACCESS AND ADVANCEMENT.

Funded Amount:

$50,000

Requested By:

AUBRY, RIVERA – P

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JACKSON HEIGHTS-ELMHURST KEHILLAH
33-47 91ST STREET
JACKSON HEIGHTS, NY  11372
(718) 457-4591

Name of Project Director:

BEN AXELROD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE WORKSHOPS AND FORUMS WITHIN THE COMMUNITY. FUNDS CAN ALSO BE USED FOR SENIOR ENTITLEMENT WORKSHOPS AND CULTURAL ACTIVITIES. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$27,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JACOB RIIS HOUSES SENIOR CENTER
809 EAST 6TH STREET
NEW YORK, NY 10009
(212) 260-8669

Name of Project Director:

NANCY BOSCH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIORS WITH MEALS AND EDUCATIONAL/RECREATIONAL ACTIVITIES.

Funded Amount:

$5,000

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JACOB RIIS NEIGHBORHOOD SETTLEMENT
10-25 41ST STREET
LONG ISLAND CITY, NY  11101
(718) 784-7447

Name of Project Director:

WILLIAM NEWLIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FOR MAINTENANCE AND COST OF A VAN USED TO TRANSPORT SENIORS TO AND FROM THE CENTER, IN-STATE TRIPS AND OTHER ACTIVITIES. FUNDS WILL ALSO BE USED TO ENHANCE SERVICES PROVIDED FOR SENIORS AT THE SENIOR CENTER, INCLUDING PURCHASE OF EQUIPMENT.

Funded Amount:

$15,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JAMAICA SERVICE PROGRAM FOR OLDER ADULTS, INC.
162-04 JAMAICA AVENUE
JAMAICA, NY 11432
(718) 657-6500

Name of Project Director:

CAROL HUNT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES TO SENIOR CITIZENS.

Funded Amount:

$5,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JASA SCHEUER HOUSE OF BRIGHTON
3061 BRIGHTON 6TH STREET
BROOKLYN, NY 11235
(718) 743-5007

Name of Project Director:

MARIELLA WONG-LEFF

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF A TELEVISION AND VIDEO CAMERA FOR SENIOR EDUCATIONAL AND RECREATIONAL PROGRAMS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JASA SCHEUER HOUSES  
3601 SURF AVENUE  
BROOKLYN, NY 11224  
(718) 373-3954

Name of Project Director:

SVETLANA MARMER

Purpose of Project:

FUNDING WILL BE USED TO PROVIDE EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR THE SENIORS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JASA SENIOR CENTER LUNA PARK
2880 WEST 12TH STREET
BROOKLYN, NY 11224
(718) 996-6666

Name of Project Director:

ADRIENNE SLOMIN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A TELEVISION AND A TELEVISION STAND ON WHEELS AS WELL AS SENIOR ARTS AND CRAFTS PROGRAMS. OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JASA WARBASSE CARES FOR SENIORS
2844 OCEAN PARKWAY
BROOKLYN, NY  11235
(718) 996-5200

Name of Project Director:

KARIN STIEBER

Purpose of Project:

FUNDING WILL BE USED TOWARDS EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR THE SENIORS. OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JASA WEST SIDE SERVICE CENTER
120 WEST 76TH STREET
NEW YORK, NY 10023
(212) 712-0170

Name of Project Director:

PHYLLIS ROTH

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATION AND RECREATION PROGRAMS FOR SENIORS.

Funded Amount:

$4,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JASA WHITESTONE
12-45 CLINTONVILLE STREET
WHITESTONE, NY 11357
(718) 286-1500

Name of Project Director:

JOANNE BISWAKARMA

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET OPERATING EXPENSES. JASA PROVIDES PROGRAMS THAT ARE OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JAY-HARAMA SENIOR CENTER  
2600 OCEAN AVENUE  
BROOKLYN, NY 11229  
(718) 891-1110

Name of Project Director:

RISA ERPS

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE EDUCATIONAL AND RECREATIONAL PROGRAMS FOR SENIORS.

Funded Amount:

$3,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JCC OF THE GREATER FIVE TOWNS, INC.
207 GROVE AVENUE
CEDARHURST, NY  11516
(516) 569-6733

Name of Project Director:

CATHY BYRNE

Purpose of Project:

FUNDS WILL BE USED TO OPERATE A DAY CARE PROGRAM FOR ADULTS WHO ARE FRAIL AND ELDERLY AND REQUIRE A SOCIAL/RECREATION PROFESSIONAL PROGRAM TO MONITOR THEIR MENTAL AND PHYSICAL HEALTH. PROGRAMS ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JEWISH ASSOCIATION FOR SERVICES FOR THE AGED
1540 VAN SICLEN AVENUE
BROOKLYN, NY  11239
(718) 642-1010

Name of Project Director:

ZINA BOBROVSKY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE IN-STATE FIELD TRIPS, DANCE LESSONS, AND ARTS AND CRAFTS.

Funded Amount:

$5,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JEWISH ASSOCIATION FOR SERVICES FOR THE AGED
9502 SEAVIEW AVENUE
BROOKLYN, NY  11236
(718) 251-3700

Name of Project Director:

SUE ANN PARTNOW

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE CULTURAL APPRECIATION BY SPONSORING TRIPS TO MUSEUMS, THEATER AND CONCERTS WITHIN NEW YORK STATE.

Funded Amount:

$5,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEISH ASSOCIATION FOR SERVICES FOR THE AGED
132 WEST 31ST STREET
NEW YORK, NY 10001
(718) 273-5250

Name of Project Director:

BOB WEBER

Purpose of Project:

FUNDS WILL BE USED FOR IN-STATE TRIPS, ARTS AND CRAFTS, DANCING AND OTHER CULTURAL PROGRAMS FOR THE SENIORS OF JASA AT CONGREGATION TIFERETH ISRAEL IN JACKSON HEIGHTS. PROGRAMS ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JEWISH ASSOCIATION FOR SERVICES FOR THE AGED
132 WEST 31ST STREET, 15TH FLOOR
NEW YORK, NY  10001
(212) 273-5208

Name of Project Director:

GERI WRIGHT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THERAPEUTIC ACTIVITIES AND
SOCIALIZATION THAT BENEFITS ALZHEIMER’S DISEASE AND DEMENTIA
CLIENTS. ALSO, TO PROVIDE RESPITE AND SUPPORT FOR THEIR
CAREGIVERS AND/OR FAMILIES.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWISH ASSOCIATION FOR SERVICES FOR THE AGED
132 WEST 31ST STREET, 13TH FLOOR
NEW YORK, NY 10001
(212) 273-5200

Name of Project Director:

ROBERT WEBER

Purpose of Project:

FUNDS WILL BE USED AS FOLLOWS: $5,000 FOR IN-STATE TRANSPORTATION FOR THE CENTERS; $2,000 FOR THE PURCHASE OF SERVICES, INSTRUCTION AND/OR EQUIPMENT FOR EACH OF THE FOLLOWING; JASA/ROCKAWAY PARK SR. CENTER, JASA/ROY REUTHER SENIOR CENTER AND FOR THE JASA/BROOKDALE SENIOR CENTER.

Funded Amount:

$11,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWISH ASSOCIATION FOR SERVICES FOR THE AGED
132 WEST 31ST STREET
NEW YORK, NY 10001
(212) 273-5200

Name of Project Director:

SHEILA GALVEZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND RECREATIONAL PROGRAMS FOR ALL SENIORS IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWISH ASSOCIATION FOR SERVICES FOR THE AGED
132 W. 31ST STREET, 1ST FLOOR
NEW YORK, NY 10001
(212) 273-5200

Name of Project Director:

BOB WEBBER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF INSTRUCTORS FOR CLASSES IN TAI-CHI, EXERCISE, LINE DANCING, AND MUSIC. SERVICES ARE AVAILABLE ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWISH ASSOCIATION FOR SERVICES FOR THE AGED
NASSAU/SUFFOLK SERVICE CENTER - 158 THIRD STREET
MINEOLA, NY 11501
(516) 742-2050

Name of Project Director:

SUSAN MEHLMAN-MCCARTHY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CULTURAL/EDUCATIONAL PROGRAMS CONSISTING OF COURSES, LECTURES, WORKSHOPS AND CONCERTS TO PROVIDE INTELLECTUAL STIMULATION, AS WELL AS, OPPORTUNITIES TO SOCIALIZE. GEARED TOWARD THE "YOUNG-OLD".

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWISH ASSOCIATION FOR SERVICES FOR THE AGED
60 WEST END AVENUE
BROOKLYN, NY 11235
(718) 646-1118

Name of Project Director:

ANNA BELLA

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE PHYSICAL FITNESS TO THE MEMBERS OF THE SENIOR CENTER AND DEFRAY OPERATING EXPENSES. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWSIH COMMUNITY CENTER OF STARRETT CITY, INC.
1305 DELMAR LOOP, 17C
BROOKLYN, NY 11239
(718) 642-7525

Name of Project Director:

MALKA BUDILIVSKAYA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMPUTERS, CHAIRS, TABLES, AND OFFICE EQUIPMENT.

Funded Amount:

$10,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY CENTER OF STATEN ISLAND, INC.
475 VICTORY BOULEVARD
STATEN ISLAND, NY 10301
(718) 981-1500

Name of Project Director:

SHEILA LIPTON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT COSTS FOR A DRIVER TO TRANSPORT SENIORS TO AND FROM THE SENIOR CENTER. THE CENTER IS OPEN TO ALL SENIORS IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY CENTER ON THE HUDSON, INC.
371 SOUTH BROADWAY
TARRYTOWN, NY  10591
(914) 366-7898

Name of Project Director:

FRANK HASSID

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A LCD PROJECTOR; FOR PRODUCTION AND PRINTING OF BROCHURES; AND FOR EDUCATIONAL MATERIALS FOR THE ACTIVE RETIREMENT PROGRAM FOR LOCAL SENIORS.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY COUNCIL OF CANARSIE, INC.
1170 PENNSYLVANIA AVENUE, SUITE 1B
BROOKLYN, NY  11239-1214
(718) 495-6210

Name of Project Director:

AVROHOM HECHT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ASSISTANCE TO THE ELDERLY LIVING IN CANARSIE WHO ARE DEALING WITH POVERTY, HOMELESSNESS, DOMESTIC VIOLENCE, ETC. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$8,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWSH COMMUNITY COUNCIL OF CANARSIE, INC.
1170 PENNSYLVANIA AVENUE
BROOKLYN, NY  11239
(718) 495-6210

Name of Project Director:

AVROHOM HECHT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HOME VISITS TO THE ELDERLY, PROVIDE MEALS TO HOMEBOUND ELDERLY, PROVIDE IN-STATE TRANSPORTATION AND TRAVEL. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY COUNCIL OF GREATER CONEY ISLAND, INC.
3001 WEST 37TH STREET
BROOKLYN, NY  11224
(718) 449-5000  220

Name of Project Director:

RABBI MOSHE WIENER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE IN-STATE TRANSPORTATION FOR THE FRAIL ELDERLY IN THE COMMUNITY, TO AND FROM LOCAL SENIOR CENTERS. THIS PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEwISH COnnullTY COUNCIL OF GREATER CONEY ISLAND, INC.
3001 WEST 37TH STREET
BROOKLYN, NY 11224-1479
(718) 449-5000

Name of Project Director:

RABBI MOSHE WIENER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HOUSEKEEPING SERVICES AND VARIOUS EDUCATIONAL AND RECREATIONAL SERVICES TO FRAIL, LOW-INCOME AND FUNCTIONALLY DISABLED SENIOR CITIZEN POPULATION OF SOUTHERN BROOKLYN.

Funded Amount:

$40,000

Requested By:

BROOK-KRASNY, CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWSH COMMUNITY COUNCIL OF GREATER CONEY ISLAND, INC.
3001 WEST 37 STREET
BROOKLYN, NY 11224
(718) 449-5000 220

Name of Project Director:

RABBI MOSHE WIENER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE NUTRITIONAL, EDUCATIONAL AND RECREATIONAL SERVICES FOR THIS SENIOR CENTER. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY COUNCIL OF GREATER CONEY ISLAND, INC.
3001 WEST 37TH STREET
BROOKLYN, NY 11224
(718) 449-5000

Name of Project Director:

RABBI MOSHE WIENER

Purpose of Project:

Funds will be used to provide educational and recreational services for seniors at Ocean Parkway Senior Center and Jay Harama Senior Center on a non-sectarian basis.

Funded Amount:

$5,252

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWSH COMMUNITY COUNCIL OF KINGS BAY, INC.
3495 NOSTRAND AVENUE
BROOKLYN, NY 11229
(718) 934-5775

Name of Project Director:

ALEKSANDRA ANTANOVSKAY

Purpose of Project:

FUNDS WILL BE USED FOR A SENIOR ESCORT WHICH TRANSPORTS SENIORS WITHIN NY TO MEDICAL APPOINTMENTS WHO ARE UNABLE TO TAKE MASS TRANSPORTATION AND CANNOT AFFORD CAR SERVICES. FUNDS WILL ALSO BE USED FOR POSCE WHICH TRANSPORTS ELDERLY TO SENIOR CENTERS TWO DAYS A WEEK. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$8,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JEWISH FAMILY SERVICE OF ORANGE COUNTY, INC.
720 ROUTE 17M
MIDDLETOWN, NY 10940
(845) 341-1173 302

Name of Project Director:

ELIZABETH KADESH

Purpose of Project:

FUNDS WILL BE USED FOR THE FRIENDLY VISITOR PROGRAM IN ORANGE COUNTY FOR THE FRAIL ELDERLY. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

GUNThER-A

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

JOHNSON CITY SENIOR CITIZENS CENTER, INC.
30 BROCTON STREET
JOHNSON CITY, NY 13790
(607) 797-3145

Name of Project Director:

KATHY GREENBLOTT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE 50" TV WITH A WALL MOUNT, MONITOR, PRINTER, TONER, SIX COMPUTER CHAIRS, INSTITUTIONAL STRENGTH DISHES AND TABLE CLOTHS. FUNDS WILL ALSO BE USED TO RELINE PARKING LOT.

Funded Amount:

$5,000

Requested By:

LUPARDO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

KENMORE TOWN OF TONAWANDA MEALS ON WHEELS, INC.
KEN TON MEALS ON WHEELS
169 SHERIDAN PARKSIDE DRIVE
TONAWANDA, NY 14150
(716) 874-3595

Name of Project Director:

JEAN BENNETT

Purpose of Project:

FUNDS WILL BE USED TO ACQUIRE KITCHEN EQUIPMENT AND UPDATED TECHNOLOGY.

Funded Amount:

$10,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

OFFICE FOR THE AGING
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 PROVIDE IN-STATE TRANSPORATION AND A SUPERVISED PROGRAM FOR ALZHEIMER’S PATIENTS TO RELIEVE CAREGIVERS.

Funded Amount:

$6,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE FOR THE AGING
KINGSBRIDGE HEIGHTS COMMUNITY CENTER, INC.
3101 KINGSBRIDGE TERRACE
BRONX, NY  10463
(718) 884-0700

PAUL WALZER

FUNDS WILL BE USED TO PROVIDE SERVICES TO THE SENIORS OF THE
KINGSBRIDGE HEIGHTS COMMUNITY, INCLUDING ESCORT SERVICES,
CRIME VICTIM ASSISTANCE, COMPUTERS, RECREATION AND NUTRITION.

$10,000

RIVERA-J

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

KNICKERBOCKER PLAZA SENIOR CENTER
1751-63 SECOND AVENUE
NEW YORK, NY 10128
(212) 427-5397

Name of Project Director:

CAROL MCCABE

Purpose of Project:

FUNDS WILL BE USED FOR THE IMPLEMENTATION OF A LECTURE SERIES AND ACTIVITY PROGRAMMING.

Funded Amount:

$5,000

Requested By:

BING

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

LADIES BIKUR CHOLIM DSATMOR
545 BEDFORD AVENUE
BROOKLYN, NY  11211
(718) 387-7749

Name of Project Director:

SARA STERN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A LUNCH AND SOCIAL PROGRAM FOR SENIOR CITIZENS WITHIN THE COMMUNITY ON A NON-SECTARIAN BASIS, PROVIDING FOR THOSE WHO ARE NORMALLY SHUT-INS.

Funded Amount:

$7,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

LEISURE GROUP - YOUNG ISRAEL OF HILLCREST
169-07 JEWEL AVENUE
FLUSHING, NY 11365
(718) 969-2990

Name of Project Director:

JULLIUS M. COHN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HOT LUNCHES FOR SENIORS, LECTURES (BASICALLY FROM THE MEDICAL PROFESSION), AEROBIC EXERCISE, ENTERTAINERS AND BROADWAY SHOWS. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
LEXINGTON HEARING AND SPEECH CENTER, INC.
30TH AVENUE & 75TH STREET
JACKSON HEIGHTS, NY  11370
(718) 899-9846

GINA CARROLL

FUNDS WILL BE USED TO EXPAND THE PROGRAM TO SERVE ELDERLY BY PROVIDING ACCESS TO QUALITY, AFFORDABLE HEARING EXAMS AND APPROPRIATE FOLLOW-UP.

$1,000

PHEFFER

OFFICE FOR THE AGING
LEXINGTON HEARING AND SPEECH CENTER, INC.
30TH AVENUE AND 75TH STREET
JACKSON HEIGHTS, NY  11370
(718) 899-9846

GINA CARROLL

FUNDS WILL BE USED TO EXPAND THE PROGRAM TO SERVE THE ELDERLY BY PROVIDING ACCESS TO QUALITY AFFORDABLE HEARING EXAMS AND FOLLOW UP.

$1,000

NOLAN

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

LEXINGTON SCHOOL FOR THE DEAF FOUNDATION
30TH AVENUE AND 75TH STREET
JACKSON HEIGHTS, NY  11370
(718) 899-9846

Name of Project Director:

GINA CARROLL

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE PROGRAM TO SERVE ELDERLY BY PROVIDING ACCESS TO QUALITY, AFFORDABLE HEARING EXAMS AND APPROPRIATE FOLLOW-UP.

Funded Amount:

$1,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LILLIAN WALD SENIOR CENTER
12 AVENUE D
NEW YORK, NY 10009
(212) 673-9328

Name of Project Director:

BETSY JACOBSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MEALS AND ACTIVITIES FOR THE SENIOR RESIDENTS OF WALD HOUSES.

Funded Amount:

$5,000

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

LINCOLN HOUSE OUTREACH, INC.
303 WEST 66TH STREET
NEW YORK, NY 10023
(212) 875-8958

Name of Project Director:

EVELYN RICH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIORS WITH QUALITY OF LIFE SERVICES.

Funded Amount:

$4,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

LONG BEACH PUBLIC LIBRARY
111 WEST PARK AVENUE
LONG BEACH, NY  11561
(516) 432-7201

Name of Project Director:

GEORGE TREPP

Purpose of Project:

FUNDS WILL BE USED TO OPERATE EXERCISE PROGRAMS AND LECTURES ON PHYSICAL FITNESS AND POSITIVE IMAGING FOR SENIOR CITIZENS.

Funded Amount:

$3,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MARLBORO SENIOR CENTER
2298 WEST 8TH STREET
BROOKLYN, NY  11223
(718) 373-6161

Name of Project Director:

ROSEANNE DEGENNARO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR THE SENIORS. OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MARLBORO SENIOR CENTER
2298 WEST 8TH STREET
BROOKLYN, NY 11223
(718) 373-6161

Name of Project Director:

ROSANNE DEGENNARO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL PROGRAMS FOR SENIORS, I.E., ARTS AND CRAFTS, DANCING, DISCUSSION GROUPS, TO ENRICH THE LIVES OF ALL THOSE PARTICIPATING. THIS PROGRAM IS OPEN TO ANY SENIOR ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MASSAPEQUA AARP
P.O. BOX 49
MASSAPEQUA, NY 11758
(516) 541-4333

Name of Project Director:

VICKI OPHALS

Purpose of Project:

FUNDS WILL BE USED FOR SENIOR CITIZENS ORGANIZATION

Funded Amount:

$1,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MASSAPEQUA SENIOR CITIZENS CENTER
210 SPRUCE STREET
MASSAPEQUA PARK, NY 11762
(516) 797-6028

Name of Project Director:

CAROLE MCELWEE

Purpose of Project:

FUNDS WILL BE USED FOR THE SUPPLEMENTATION OF COSTS OF VARIOUS ACTIVITIES

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MEALS ON WHEELS PROGRAMS & SERVICES OF ROCKLAND, INC.
121 W. NYACK ROAD
NANUET, NY 10954
(845) 624-6325

Name of Project Director:

ANTHONY J. VERONICO

Purpose of Project:

FUNDS WILL BE USED TO REPLACE COMPUTERS USED IN THE ADMINISTRATIVE OFFICES, SENIOR CENTERS, AND THE COMPUTER LEARNING CENTER FOR SENIORS.

Funded Amount:

$5,000

Requested By:

ZEBROWSKI

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MEDICARE RIGHTS CENTER, INC.
520 EIGHTH AVENUE, NORTH WING
NEW YORK, NY 10036
(212) 204-6219

Name of Project Director:

DEANE BEEBE

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE AND COUNSEL OLDER, DISABLED NEW YORKERS, THEIR CAREGIVERS AND THE PROFESSIONALS SERVING THEM.

Funded Amount:

$5,000

Requested By:

TOWNS

Name of Administering State Agency:

OFFICE FOR THE AGING
LEGAL NAME, ADDRESS, AND TELEPHONE NUMBER:

MERRILL PARK CIVIC ASSOCIATION OF SPRINGFIELD GARDENS, INC.
137-57 FARMERS BOULEVARD
SPRINGFIELD GARDENS, NY 11434
(718) 978-8352

NAME OF PROJECT DIRECTOR:

ELEANOR KELLY

PURPOSE OF PROJECT:

FUNDS WILL BE USED TO PROVIDE ACTIVITIES AND SERVICES FOR SENIOR CITIZENS.

FUNDED AMOUNT:

$5,000

REQUESTED BY:

SCARBOROUGH

NAME OF ADMINISTERING STATE AGENCY:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MILLER AVE. COMMUNITY SENIOR PROGRAM
2482 PITKIN AVENUE
BROOKLYN, NY 11208
(718) 235-6177

Name of Project Director:

WINFORD BISHOP

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE IN-STATE TRANSPORTATION FOR SENIORS TO THE CENTER, AS WELL AS, TO MEDICAL APPOINTMENTS. FUNDS WILL ALSO BE USED FOR OVERHEAD COSTS.

Funded Amount:

$9,500

Requested By:

TOWNS

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MITCHELL-LINDEN SENIOR CITIZENS CLUB, INC.
27-05 PARSONS BOULEVARD
FLUSHING, NY  11354
(718) 539-7783

Name of Project Director:

THELMA NOWVE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE WEEKLY REFRESHMENTS, INCLUDING HOLIDAYS AND MONTHLY BIRTHDAYS AND ANNIVERSARY CELEBRATIONS.

Funded Amount:

$5,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MONTICELLO SENIORS
21 FRAISER ROAD
MONTICELLO, NY  12701
(845) 794-8115

Name of Project Director:

ROSLYN SHAROFF

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL AND EDUCATIONAL PROGRAMS FOR SENIORS.

Funded Amount:

$2,000

Requested By:

GUNThER-A

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MORNINGSIDE RETIREMENT & HEALTH SERVICES, INC.
100 LASALLE STREET, #MC
NEW YORK, NY 10027
(212) 666-4000

Name of Project Director:

RONALD BRUNO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ACTIVITIES FOR THE MRHS NORC PROGRAM.

Funded Amount:

$4,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MORRIS SENIOR CENTER
80 EAST 181ST STREET
BRONX, NY  10453
(718) 933-5300

Name of Project Director:

ESTER SANCHEZ POLANCO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SENIOR PROGRAMS AND ACTIVITIES.

Funded Amount:

$5,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MORRISANIA AIR RIGHTS SENIOR CITIZENS ASSOCIATION, INC.
3135 PARK AVENUE
BRONX, NY  10451
(718) 992-2528

Name of Project Director:

SULEIKA CABRERA DRINANE

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL AND RECREATIONAL ACTIVITIES.

Funded Amount:

$2,500

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

RITA SANTELIA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIALIZATION OPPORTUNITIES FOR TRACEY TOWER SENIORS THROUGH EDUCATIONAL AND RECREATIONAL SERVICES.

Funded Amount:

$3,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MOST PRECIOUS BLOOD CHURCH
70 BAY 47TH STREET
BROOKLYN, NY  11214
(718) 372-8022

Name of Project Director:

MARIO CALDERERA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL AND SOCIAL PROGRAMS FOR ALL SENIOR CITIZENS ON A NON-SECTARIAN BASIS, WHICH INCLUDES PROVIDING REFRESHMENTS, GAMES, AND CRAFTS.

Funded Amount:

$2,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

MOUNT KISCO SENIOR GROUP
104 MAIN STREET
MOUNT KISCO, NY 10549
(914) 666-8766

Name of Project Director:

ELIZABETH DIETOR

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE EXISTING RECREATIONAL PROGRAM; THIS INCLUDES INSTRUCTIONAL PROGRAMS, CULTURAL PROGRAMS AND IN-STATE TRIPS.

Funded Amount:

$7,000

Requested By:

BRADLEY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

NATIONAL COUNCIL OF JEWISH WOMEN, INC.
820 SECOND AVENUE
NEW YORK, NY 10017-4504
(212) 687-5030

Name of Project Director:

LAURIE LUDMER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIORS QUALITY OF LIFE PROGRAMMING FOR SUFFERERS OF ALZHEIMERS.

Funded Amount:

$3,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

NATIONAL COUNCIL OF YOUNG ISRAEL
27-16 HEALY AVENUE
FAR ROCKAWAY, NY  11691
(718) 327-0297

Name of Project Director:

FAYE GROSS

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE RECREATION, HEALTH AND EDUCATION PROGRAMS UTILIZED BY SENIORS AT THE LEAGUE. PROGRAMS ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

NEIGHBORHOOD SELF-HELP BY OLDER PERSONS PROJECT, INC.
953 SOUTHERN BOULEVARD
BRONX, NY  10459
(718) 542-0006

Name of Project Director:

EVELYN LAURENO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CASE WORK SERVICES, HEALTH
MANAGEMENT SERVICES AND ACCESS TO BENEFITS FOR THE ELDERLY.

Funded Amount:

$10,500

Requested By:

DIAZ-R

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

NEW YORK CITY HOUSING AUTHORITY
90 CHURCH STREET, 6TH FLOOR
NEW YORK, NY 10007
(212) 306-6501

Name of Project Director:

JOSE MERCADO

Purpose of Project:

FUNDS WILL BE USED TO SUPPLEMENT THE BROWNSVILLE SENIORS' MEALS AND ACTIVITIES.

Funded Amount:

$21,000

Requested By:

BOYLAND

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

NEW YORK FOUNDATION FOR SENIOR CITIZENS, INC.
11 PARK PLACE, SUITE 1416
NEW YORK, NY 10007
(212) 962-7559

Name of Project Director:

LINDA HOFFMAN

Purpose of Project:

FUNDS WILL BE USED FOR THE RESPITE PROGRAMS.

Funded Amount:

$5,000

Requested By:

BING

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

NORTH BUFFALO COMMUNITY DEVELOPMENT CORPORATION
203 SANDERS ROAD
BUFFALO, NY 14216
(716) 874-6133

Name of Project Director:

DEBORAH CIELENCKI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES ASSOCIATED WITH THE SENIOR CITIZEN FRAIL AND ELDERLY PROGRAM.

Funded Amount:

$12,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

NORTH FLUSHING SENIOR CENTER, INC.
29-09 137 STREET
FLUSHING, NY 11354
(718) 358-9193

Name of Project Director:

ROBERTA GOLD

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET EXPENSES ASSOCIATED WITH OPERATING, RECREATIONAL AND FOOD/MEAL PROGRAMS.

Funded Amount:

$5,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NORTH FLUSHING SENIOR CENTER, INC.
29-09 137 STREET
FLUSHING, NY 11354
(718) 358-9193

Name of Project Director:

ROBERTA GOLDENBERG

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR SENIORS LIVING IN THE COLLEGE POINT AND SURROUNDING COMMUNITIES.

Funded Amount:

$3,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

NORTHEAST QUEENS SENIOR SERVICES  
45-50 195 STREET  
FLUSHING, NY 11358  
(718) 357-4903

Name of Project Director:

JUDY CLEVE

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING EXPENSES ASSOCIATED WITH PROVIDING SENIOR TRANSPORTATION SERVICES.

Funded Amount:

$5,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

OCEAN PARKWAY COMMUNITY DEVELOPMENT CORPORATION
4520 18TH AVENUE
BROOKLYN, NY 11204
(718) 435-1300

Name of Project Director:

RABBI YAACOV LEBOVITZ

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF INSTRUCTORS AND A PROGRAM SUPERVISOR IN PROVIDING SENIOR SERVICES CONCENTRATING ON ESL AND EXERCISE/HEALTH PROGRAMS.

Funded Amount:

$7,000

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ONE STOP SENIOR SERVICES
747 AMSTERDAM AVENUE, 3RD FLOOR
NEW YORK, NY 10025
(212) 864-7900

Name of Project Director:

RUTH ELLEN SIMMONDS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIORS WITH SUPPORT TO ADDRESS ISSUES SUCH AS HOUSING PROBLEMS, MEDICAID, SOCIAL SECURITY, MEDICAL AND PSYCHIATRIC REFERRALS, ETC.

Funded Amount:

$4,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ONE STOP SENIOR SERVICES
747 AMSTERDAM AVENUE, 3RD FLOOR
NEW YORK, NY 10025
(212) 864-7900

Name of Project Director:

RUTH-ELLEN SIMMONDS

Purpose of Project:

FUNDS WILL BE USED FOR VARIED PROGRAMS THAT HELP SENIORS WITH RESOLVING HOUSING PROBLEMS, OBTAINING FOOD STAMPS, APPLYING FOR MEDICAID AND OTHER SOCIAL SERVICE BENEFITS.

Funded Amount:

$4,500

Requested By:

O’DONNELL

Name of Administering State Agency:

OFFICE FOR THE AGING
OPTIONS FOR INDEPENDENCE  
75 GENESEE STREET  
AUBURN, NY 13021  
(315) 255-3447

GUY COSENTINO

FUNDS WILL BE USED FOR "A.M.P." THE ASSEMBLY MOBILITY PROGRAM  
WHEELCHAIRS AND PORTABLE RAMP

$4,000

FINCH

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ORLEANS COUNTY OFFICE FOR THE AGING
14016 ROUTE 31 WEST
ALBION, NY 14411
(585) 589-3299

Name of Project Director:

PAM CANHAM

Purpose of Project:

FUNDS WILL BE USED FOR NEW SIDEWALKS FOR "OLD GRAMMAR SCHOOL" SENIOR HOUSING PROJECTS

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

OUR LADY OF GRACE ROMAN CATHOLIC CHURCH
430 AVENUE W
BROOKLYN, NY  11223
(718) 627-2020

Name of Project Director:

ANN SPADARO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIAL AND RECREATIONAL ACTIVITIES FOR SENIORS ON A NON-SECTARIAN BASIS. THESE PROGRAMS PROVIDE A PLACE WHERE SENIORS CAN INTERACT SOCIALLY.

Funded Amount:

$1,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

OUR LADY OF GRACE SENIOR CENTER
430 AVENUE W
BROOKLYN, NY 11223
(718) 336-4916

Name of Project Director:

ANNA SPADARO

Purpose of Project:

FUNDS WILL BE USED FOR SUPPLIES FOR THE SENIOR CENTER. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

OUR LADY OF THE BLESSED SACRAMENT LEISURE CLUB  
34-24 203 STREET  
BAYSIDE, NY 11361  
(718) 424-8848

Name of Project Director:

LOU TIRELLA

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH PROGRAMS FOR SENIOR CITIZENS. PROGRAMS ARE OFFERED TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

PARK SLOPE GERIATRIC DAY CENTER, INC.
199 14TH STREET
BROOKLYN, NY 11215
(718) 499-7701

Name of Project Director:

CHRISTOPHER NADEAU

Purpose of Project:

FUNDS WILL BE USED TO COVER ANY AND ALL COSTS RELATED TO PROVIDING TRANSPORTATION TO SENIOR CITIZENS AND CONTINUED GERIATRIC SERVICES.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
PARK SLOPE GERIATRIC DAY CENTER, INC.
199 14TH STREET
BROOKLYN, NY 11215
(718) 499-7701

MARYANN NICOLOSI

FUNDS WILL BE USED TO PROVIDE ELDERLY AND DISABLED SENIORS WITH DAYCARE AND NECESSARY TRANSPORTATION.

$4,000

BRENNAN

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

PARK SLOPE GERIATRIC DAY CENTER, INC.
1 PROSPECT PARK WEST
BROOKLYN, NY 11215
(718) 499-7701

Name of Project Director:

MARIANNE NICOLOSI

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE CENTER’S TRANSPORTATION PROGRAM WHICH PROVIDES SENIORS WITH TRANSPORTATION TO DOCTOR’S APPOINTMENTS AND SHOPPING TRIPS.

Funded Amount:

$4,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

PARK SLOPE SENIOR CITIZEN CENTER
463A 7TH STREET
BROOKLYN, NY 11215
(718) 832-3726

Name of Project Director:

DENISE JOHNSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMPUTER CLASSES FOR SENIORS, AND FOR GARDEN SUPPLIES AND ACTIVITIES.

Funded Amount:

$4,000

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

PENN SOUTH SOCIAL SERVICES, INC.
321 EIGHT AVENUE
NEW YORK, NY 10001
(646) 638-0611

Name of Project Director:

NAT YALOWITZ

Purpose of Project:

FUNDS WILL BE USED FOR A COMPREHENSIVE SOCIAL HEALTH SERVICE PROGRAM FOR SENIORS AT PENN SOUTH COOP SITE.

Funded Amount:

$8,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

PLAINEDGE SENIOR CITIZENS  
P.O. BOX 152  
FARMINGDALE, NY 11735  
(516) 694-6431

Name of Project Director:

GERI BOROS

Purpose of Project:

FUNDS WILL BE USED FOR THE SUPPLEMENTATION OF COSTS OF VARIOUS ACTIVITIES

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

PLAINVIEW OLD BETHPAGE SENIORS CLUB
85 JAMAICA AVENUE
PLAINVIEW, NY  11803
(516) 937-6424

Name of Project Director:

RACHEL STOIANO

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE QUALITY OF LIFE FOR SENIORS BY PROVIDING SOCIAL FUNCTIONS.

Funded Amount:

$10,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

PLAINVIEW-OLD BETHPAGE CARES
45 MANETTO HILL ROAD
PLAINVIEW, NY  11803
(516) 822-3535

Name of Project Director:
ELISSA FRIEDMAN

Purpose of Project:
FUNDS WILL BE USED TO PROVIDE A WIDE RANGE OF SERVICES TO OLDER ADULTS (AGE 60+) TO ENABLE THEM TO REMAIN IN THEIR OWN HOMES.

Funded Amount:
$3,500

Requested By:
LAVINE

Name of Administering State Agency:
OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

POMONOK SENIOR SOCIAL CLUB
67-09 KISSENA BOULEVARD
FLUSHING, NY 11365
(718) 591-3377

Name of Project Director:

NAOMI ALTMAN

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE PROGRAMS OF THE SENIOR SOCIAL CLUB, INCLUDING THE PURCHASE OF SUPPLIES AND FOOD AND SPECIAL ACTIVITIES.

Funded Amount:

$2,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

PRESBYTERIAN SENIOR SERVICES
PSS PARKSIDE SENIOR CENTER, 644 ADEE AVENUE
BRONX, NY 10467
(718) 881-7780

Name of Project Director:

DAVID TAYLOR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIOR CITIZENS SOCIALIZATION OPPORTUNITIES THROUGH RECREATIONAL AND EDUCATION SERVICES.

Funded Amount:

$3,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

PROJECT OPEN, INC.
180 WEST END AVENUE, APT. 1G
NEW YORK, NY 10023
(212) 721-8708

Name of Project Director:

JANICE MOHENSTEIN

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN ESCORT SERVICES FOR SENIORS (I.E. FOR SHOPPING, APPOINTMENTS, ETC.).

Funded Amount:

$4,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

PUTNAM COUNTY OFFICE FOR THE AGING
110 OLD ROUTE SIX, BUILDING 1
CARMEL, NY 10512
(845) 225-1034

Name of Project Director:

WILLIAM HUESTIS

Purpose of Project:

FUNDS WILL BE USED FOR TECHNOLOGY UPGRADES FOR OFFICE, COMPUTERS, ETC.

Funded Amount:

$2,000

Requested By:

BALL

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS INTERAGENCY COUNCIL ON THE AGING, INC.
80-02 KEW GARDENS ROAD, SUITE 202
KEW GARDENS, NY  11415
(718) 268-5954

Name of Project Director:

BRUCE CUNNINGHAM

Purpose of Project:

FUNDS WILL BE USED FOR MONTHLY EDUCATIONAL AND TRAINING PROGRAMS, YEARLY CONFERENCES AND OTHER ACTIVITIES SERVING SENIOR CENTERS IN THE COMMUNITY AND THROUGHOUT QUEENS.

Funded Amount:

$1,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

QUEENS INTERAGENCY COUNCIL ON THE AGING, INC.
80-02 KEW GARDENS ROAD
KEW GARDENS, NY  11415
(718) 268-5954

Name of Project Director:

BRUCE CUNNINGHAM

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH PROGRAMS FOR SENIOR CITIZENS.

Funded Amount:

$2,500

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS INTERAGENCY COUNCIL ON THE AGING, INC.
80-02 KEW GARDENS ROAD, SUITE 202
KEW GARDENS, NY  11415
(718) 268-5954

Name of Project Director:

BRUCE CUNNINGHAM

Purpose of Project:

FUNDS WILL BE USED TO SERVE SENIOR CITIZENS OF QUEENS THROUGH EDUCATION, TRAINING/ADVOCACY INITIATIVES THAT SUPPORT SENIOR CENTERS AND SOCIAL SERVICES FOR THE ELDERLY.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS JEWISH COMMUNITY COUNCIL, INC.
119-45 UNION TURNPIKE
FOREST HILLS, NY 11375
(718) 544-9033

Name of Project Director:

CYNTHIA ZALINSKY

Purpose of Project:

FUNDS WILL BE USED TO SERVE THE NEEDS OF SENIORS, INCLUDING MEALS ON WHEELS, LEGAL SERVICES, NEW IMMIGRANT SERVICES, SOCIAL OUTREACH, AND OTHER CONGREGATE SERVICES, AS WELL AS COUNSELLING FOR SENIORS IN NEED. SERVICES ARE OPEN TO ALL SENIORS IN THE COMMUNITY.

Funded Amount:

$1,000

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

QUEENS JEWISH COMMUNITY COUNCIL, INC.
119-45 UNION TURNPIKE
FOREST HILLS, NY 11375
(718) 544-9033

Name of Project Director:

CYNTHIA ZALISKY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE COUNCIL’S SERVICES TO SENIOR CITIZENS, INCLUDING MEALS ON WHEELS, LEGAL SERVICES, NEW IMMIGRANT SERVICES, AS WELL AS, COUNSELING FOR SENIORS IN NEED. SERVICES ARE OPEN TO ALL SENIORS IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

QUEENS JEWISH COMMUNITY COUNCIL, INC.
119-45 UNION TURNPIKE
FOREST HILLS, NY 11375
(718) 544-9033

Name of Project Director:

CYNTHIA ZALISKY

Purpose of Project:

FUNDS WILL BE USED FOR SERVING THE NEEDS OF SENIORS, INCLUDING MEALS ON WHEELS, LEGAL SERVICES, NEW IMMIGRANT SERVICES, SOCIAL OUTREACH AND OTHER CONGREGATE SERVICES, AS WELL AS COUNSELING FOR SENIORS IN NEED. NON-SECTARIAN.

Funded Amount:

$3,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

QUEENS JEWISH COMMUNITY COUNCIL, INC.
119-45 UNION TURNPIKE
FOREST HILLS, NY 11375
(718) 544-9033

Name of Project Director:

CYNTHIA ZALISKY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIOR PROGRAMMING AND SERVICES.

Funded Amount:

$7,500

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

QUEENS MULTI-SERVICE CENTER
76-01 MYRTLE AVENUE
GLENDALE, NY   11385
(718) 366-0200

Name of Project Director:

ROSEANN ROSADO

Purpose of Project:

FUNDS WILL BE USED FOR OPERATING AND OVERHEAD EXPENSES TO IMPLEMENT SENIOR SERVICES, CRIME VICTIM ASSISTANCE, ELDER ABUSE SERVICES, SOCIAL SERVICE COUNSELING, BASIC HEALTH SERVICES, A FOOD PANTRY AND THE SATURDAY SENIOR CENTER.

Funded Amount:

$2,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RABBI ISRAEL MEYER RABBINICAL SEMINARY OF AMERICA
69-10 75TH STREET
MIDDLE VILLAGE, NY 11379
(718) 894-3441

Name of Project Director:

RABBI RICHARD LEVY

Purpose of Project:

FUNDS WILL BE USED TO INSTRUCT SENIORS IN THE USE OF COMPUTERS. THE PROGRAM IS NON-RELIGIOUS AND OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$6,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE FOR THE AGING
RAVENSWOOD SENIOR CENTER
34-35A 12TH STREET
LONG ISLAND CITY, NY  11106
(718) 786-1550

JOHN KAITHERIS

FUNDS WILL BE USED TO FOSTER SOCIALIZING AMONG SENIORS BY PROVIDING EDUCATIONAL, RECREATIONAL AND IN-STATE TRANSPORTATION SERVICES.

$9,500

NOLAN

OFFICE FOR THE AGING
REGINA PACIS SENIOR CITIZENS ORGANIZATION, INC.
2424 CROPSEY AVENUE
BROOKLYN, NY  11214
(718) 372-6020

IDA SCIORTINO

FUNDS WILL BE USED TO PROMOTE RECREATIONAL AND SOCIAL
PROGRAMS FOR ALL SENIOR CITIZENS IN THE COMMUNITY, INCLUDING
GAMES, ARTS AND CRAFTS, LECTURES, ETC.

$2,000

COLTON

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RETIRED & SENIOR VOLUNTEER PROGRAM
ONE WEST MAIN STREET
SMITHTOWN, NY 11787
(631) 979-9490

Name of Project Director:

PEGI ORSINO

Purpose of Project:

FUNDS WILL BE USED FOR EXPENSES RELATED TO VOLUNTEER SERVICES

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RETIRED/SENIOR VOLUNTEER PROGRAM
1 WEST MAIN STREET
SMITHTOWN, NY 11787
(631) 979-9490

Name of Project Director:

PEGI ORSINO

Purpose of Project:

FUNDS WILL BE USED FOR VOLUNTEER TRAVEL REIMBURSEMENT

Funded Amount:

$1,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC.
319 STANHOPE STREET
BROOKLYN, NY  11237
(718) 366-3038

Name of Project Director:

JEANIE LAINO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIORS WITH AN IN-STATE OUTING. THE PICNIC INCLUDES TWO FREE MEALS.

Funded Amount:

$20,000

Requested By:

LOPEZ-V

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC.
280 WYCKOFF AVENUE
BROOKLYN, NY 11237
(718) 366-3038 3040

Name of Project Director:

CHRISTIANA M. FISHER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIOR CITIZENS WITH AN ANNUAL PICNIC.

Funded Amount:

$1,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC.
555 BUSHWICK AVENUE
BROOKLYN, NY 11206
(718) 821-0254 110

Name of Project Director:

CHRISTIANA FISHER

Purpose of Project:

FUNDS WILL BE USED TO CREATE AN INFORMATION SHARING NETWORK AMONG LATINOS AND OTHER MINORITIES TO EMPOWER, EDUCATE AND DEVELOP LEADERSHIP. THIS IS ACCOMPLISHED THROUGH MONTHLY MEETINGS AND EDUCATIONAL CONFERENCES.

Funded Amount:

$50,000

Requested By:

LOPEZ-V

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC.
59-04 DECATUR STREET
RIDGEWOOD, NY 11385
(718) 366-5591

Name of Project Director:

ANN MICHTISCH

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE RESPITE CARE CENTER DESIGNATED TO PROVIDE RELIEF TO INFORMAL, PRIMARY CAREGIVERS OF DEPENDENT, FRAIL ELDERLY WHO LIVE AT HOME.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RIDGEOO WOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC.
319 STANHOPE STREET
BROOKLYN, NY  11237
(718) 366-3038

Name of Project Director:

JEANNIE LAINO

Purpose of Project:

FUNDS WILL BE USED TO PAR TIALL Y OFFSET THE COST OF THE ANNUAL SENIOR CITIZEN PICNIC, WHICH INCLUDES TWO FREE MEALS. THESE FUNDS WILL PROVIDE FOR BUSES TO THE ANNUAL PICNIC FOR 30 MONTROSE AVENUE AND 25 BOERUM STREET, AS WELL AS SENIORS FROM OTHER CENTERS.

Funded Amount:

$4,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RIDGEWOOD OLDER ADULTS SENIOR CENTER AND SERVICES, INC.
59-14 70TH AVENUE
RIDGEWOOD, NY  11385
(718) 456-2000

Name of Project Director:

JACQUELYN ERADICI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF INSURANCE FOR THE SENIOR CENTER 12 PASSENGER VAN WHICH IS USED AS A SUBSTITUTE VEHICLE FOR THE DELIVERY OF MEALS AND TO TRANSPORT MEMBERS TO EVENTS AND ACTIVITIES.

Funded Amount:

$6,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RIDGEWOOD SENIORS COMMUNITY CORPORATION
68-52 FRESH POND ROAD
RIDGEWOOD, NY  11385
(718) 497-3209

Name of Project Director:

BARBARA TOSCANO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AN OUTREACH PROGRAM FOR SENIORS WITH SPECIAL NEEDS, SPECIFICALLY FOR THE MENTALLY AND MOBILITY CHALLENGED SENIORS INCLUDING MEALS, IN-STATE TRANSPORTATION, RECREATION, AND SOCIAL SERVICES.

Funded Amount:

$20,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RIDGECWOOD SENIORS COMMUNITY CORPORATION
68-52 FRESH POND ROAD
RIDGEWOOD, NY 11385
(718) 497-2908

Name of Project Director:

BARBARA TOSCANO

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE OPERATIONAL ASSISTANCE TO HELP PAY FOR STAFF, UTILITIES AND THE CONTINUATION OF MEALS ON WHEELS PROGRAM FOR THE SENIORS.

Funded Amount:

$10,000

Requested By:

SEMINERIO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RIDGWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC.
555 BUSHWICK AVENUE
BROOKLYN, NY 11206
(718) 821-0254

Name of Project Director:

CHRISTIANA FISHER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACTIVITIES FOR SENIORS INCLUDING CULTURAL PROGRAMS, CRAFTS AND IN-STATE TRIPS. FUNDING WILL COVER THE COSTS OF THE CRAFTS, IN-STATE TRANSPORTATION AND ADMISSIONS.

Funded Amount:

$45,000

Requested By:

LOPEZ-V

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

RIVERDALE NEIGHBORHOOD HOUSE, INC.
5521 MOSHOLU AVENUE
BRONX, NY  10471-1645
(718) 549-8100

Name of Project Director:

DANIEL EUDENE

Purpose of Project:

FUNDS WILL BE USED FOR THE TRP, A PROGRAM WHERE THE HOMEBOUND ELDERLY RECEIVE A DAILY TELEPHONE CALL TO AVOID ISOLATION AND LONELINESS WHILE CONFIRMING THEIR HEALTH AND WELL BEING TO MEMBERS OF THEIR FAMILY.

Funded Amount:

$10,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE FOR THE AGING
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 PROMOTE THE HEALTH OF SENIORS THROUGH COUNSELING AND EDUCATION AND TO HELP THEM MAINTAIN THEIR INDEPENDENCE IN THE COMMUNITY BY USING VOLUNTEERS TO ASSIST IN THIS AND OTHER ASPECTS OF THE CENTER'S PROGRAM.

Funded Amount:

$10,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ROOSEVELT ISLAND SENIORS ASSOC., INC.
546 MAIN STREET
ROOSEVELT ISLAND, NY 10044
(212) 980-1888

Name of Project Director:

REMA TOWNSEND

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND RECREATIONAL ACTIVITIES AND TRIPS WITHIN NEW YORK STATE TO THE SENIORS WHO RESIDE ON ROOSEVELT ISLAND, WHICH HAS A VERY DIVERSE POPULATION. THIS PROGRAM WILL PROVIDE UNITY AND SOCIALIZATION FOR THE SENIOR POPULATION.

Funded Amount:

$8,000

Requested By:

GRANNIS

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ROSETTA GASTON SENIOR CENTER
460 DUMONT AVENUE
BROOKLYN, NY  11212
(718) 345-5665

Name of Project Director:

RICHARD CLEMENT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TWO POOL TABLES AND ACCESSORIES FOR USE IN THE SENIOR CENTER.

Funded Amount:

$5,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SACRED HEART LEISURE CLUB
215-35 38 AVENUE
BAYSIDE, NY  11361
(718) 428-2200

Name of Project Director:

SISTER KATHLEEN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS INVOLVED WITH PROVIDING RECREATIONAL SERVICES AND MEALS FOR SENIORS. PROGRAMS ARE OFFERED ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SALVATION ARMY
120 WEST 14TH STREET
NEW YORK, NY  10011
(718) 337-7340

Name of Project Director:

CARRIE SCHINDELE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CULTURAL AND RECREATIONAL TRIPS WITHIN NEW YORK STATE, RENTAL OF BUSES, IF NEEDED, AND OTHER CULTURAL ACTIVITIES FOR THE SENIORS ATTENDING THE PROGRAMS AT THE QUEENS TEMPLE IN JACKSON HEIGHTS, QUEENS. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

MATTHEW ANCONA

Purpose of Project:

FUNDS WILL BE USED TO ENRICH THE QUALITY OF LIFE FOR SENIOR MEMBERS OF THE COMMUNITY, INCLUDING, BUT NOT LIMITED TO, EDUCATIONAL AND RECREATIONAL ACTIVITIES.

Funded Amount:

$6,500

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE FOR THE AGING
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:

KAREN SCHWAB

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN INTERNAL SUPPORTIVE NETWORK OF SERVICES FOR ANYONE OVER THE AGE OF 65 WHO RESIDES IN THE NORTHEAST QUEENS AREA WITHIN A FAMILIAR AND NON-THREATENING PLACE. SERVICES INCLUDE IN-STATE TRANSPORTATION, COUNSELLING, ADVOCACY, EDUCATION, SOCIALIZATION, INCLUDING LINKAGES AND REFERRALS.

Funded Amount:

$20,000

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SAN GENNARO SENIOR CITIZEN CLUB, INC.
1558 WILLIAMSBRIDGE ROAD
BRONX, NY 10461
(718) 931-4440

Name of Project Director:

GEORGE MOFFA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIALIZATION OPPORTUNITIES FOR SENIOR CITIZENS IN THE COMMUNITY THROUGH EDUCATION AND RECREATIONAL SERVICES.

Funded Amount:

$3,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SARANAC LAKE ADULT CENTER, INC.
P.O. BOX 864
SARANAC LAKE, NY 12983
(518) 891-2980

Name of Project Director:

ELIZABETH KOCKAR

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS OF BASEMENT LEVEL TO INCREASE DELIVERY OF SERVICES TO SENIORS AND DISABLED PERSONS

Fund Amount:

$10,000

Requested By:

DUPREY

Name of Administering State Agency:

OFFICE FOR THE AGING
SEARCH AND CARE, INC.
1844 SECOND AVENUE
NEW YORK, NY  10128
(212) 289-5300

BRIAN KRAVITZ

FUNDS WILL BE USED TO PROVIDE DAILY MONEY MANAGEMENT SERVICES (BILL PAYING AND HANDLING CASH FOR DAILY NEEDS) TO 75 FRAIL, HOMEBOUND ELDERLY RESIDENTS. THIS SERVICE IS AN IMPORTANT COMPONENT OF THE AGENCY'S CARE MANAGEMENT PROGRAM THAT SERVES 350 PEOPLE ANNUALLY.

$10,000

GRANNIS

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SELFHELP AUSTIN STREET CENTER
106-06 QUEENS BLVD.
FOREST HILLS, NY   11375
(718) 359-0860

Name of Project Director:

RACHAEL EPSTEIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LUNCH, ACTIVITIES, LECTURES, HEALTH TALKS AND CASE ASSISTANCE FOR SENIORS.

Funded Amount:

$4,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SELFHELP BIG SIX TOWERS  
NORC COMMUNITY ROOM - 59-55 47TH AVENUE  
WOODSIDE, NY 11377  
(718) 458-8579

Name of Project Director:

JENNIFER CINELLI

Purpose of Project:

FUNDS WILL BE USED FOR THE NORC VAN INCLUDING, BUT NOT LIMITED TO, THE OPERATION OF THE VAN ENABLING SENIORS TO GO SHOPPING, PARTICIPATE IN COMMUNITY PROGRAMS AND ACCESS TO MEDICAL CARE.

Funded Amount:

$5,000

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SELFHELP COMMUNITY SERVICES, INC.
208-11 26 AVENUE
BAYSIDE, NY 11360
(718) 224-7888

Name of Project Director:

ERIN BRENNAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A CLASS, ENGLISH AS A SECOND LANGUAGE, FOR MEMBERS OF THE SENIOR CENTER.

Funded Amount:

$5,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SELFHELP COMMUNITY SERVICES, INC.
137-47 45TH AVENUE
FLUSHING, NY 11355
(718) 762-6803

Name of Project Director:

JENNIFER CINELLI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BUS TRANSPORTATION TO SENIOR CITIZENS FOR TRAVEL WITHIN THE AREA TO ATTEND ENRICHMENT PROGRAMS.

Funded Amount:

$3,500

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SELFHELP COMMUNITY SERVICES, INC.
419 CHURCH AVENUE
BROOKLYN, NY 11218
(718) 633-1300

Name of Project Director:

TOVA KLEIN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF A CASE MANAGER WHO WILL PROVIDE DIRECT SERVICES TO THE SENIORS IN THE COMMUNITY.

Funded Amount:

$3,000

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SELFHELP COMMUNITY SERVICES, INC.
33-68 21ST STREET
LONG ISLAND CITY, NY 11106
(718) 278-5439

Name of Project Director:

MARY HAYES

Purpose of Project:

FUNDS WILL BE USED TO ENABLE SENIORS TO AGE COMFORTABLY IN THEIR HOMES WITH DIGNITY AND INDEPENDENCE BY PROVIDING SOCIAL SERVICES AND ASSISTING SENIORS WITH TRANSPORTATION TO AND FROM MEDICAL APPOINTMENTS.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SELFHELP MASPETH SENIOR CENTER
69-61 GRAND AVENUE
MASPETH, NY 11378
(718) 429-3636

Name of Project Director:

DONNA DECIELO

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE SENIORS IN CARE FOR THEIR HEALTH INCLUDING, BUT NOT LIMITED TO, PROVIDING FOR A COMMUNITY NURSE TO ASSESS AND MANAGE HEALTH CARE AND HEALTH SCREENINGS, CREATE A WELLNESS MODULE, REVIEWS OF MEDICATIONS AND LECTURES ON HEALTH RELATED TOPICS.

Funded Amount:

$8,500

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SELFHELP PRINCE STREET CENTER
36-12 PRINCE STREET
FLUSHING, NY 11354
(718) 961-4550

Name of Project Director:

GRACE S. NIERENBERG

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS WHICH ENHANCE THE LIVES OF SENIORS IN THE FLUSHING COMMUNITY. PROGRAMS INCLUDE CONGREGATE MEALS, MULTI-CULTURAL PROGRAMS, ESL CLASSES, ETC.

Funded Amount:

$5,500

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SELFHELP ROSENTHAL SENIOR CENTER  
45-25 KISSENA BOULEVARD  
FLUSHING, NY 11355  
(718) 886-5777

Name of Project Director:

GRACE S. NIERENBERG

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS THAT WILL ENHANCE THE LIVES OF SENIORS IN THE FLUSHING COMMUNITY. PROGRAMS INCLUDE CONGREGATE MEALS, MULTI-CULTURAL PROGRAMS, ESL CLASSES, ETC.

Funded Amount:

$5,500

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR ACTION IN A GAY ENVIRONMENT, INC.
305 SEVENTH AVENUE, 16TH FLOOR.
NEW YORK, NY 10001
(212) 741-2247  228

Name of Project Director:

MICHAEL ADAMS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL, SOCIAL, AND RECREATIONAL PROGRAMS FOR LGBT SENIORS THROUGH SAGE AT THE CENTER.

Funded Amount:

$5,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR ACTION IN A GAY ENVIRONMENT, INC.
305 7TH AVENUE, 16TH FLOOR
NEW YORK, NY  10001
(212) 741-2247

Name of Project Director:

MICHAEL ADAMS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIAL AND SUPPORTIVE SERVICES FOR GAY, LESBIAN, BISEXUAL AND TRANSGENDER ELDERS.

Funded Amount:

$4,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR ACTION IN A GAY ENVIRONMENT, INC.
305 SEVENTH AVENUE, 16TH FLOOR
NEW YORK, NY 10001
(212) 741-2247

Name of Project Director:

TERRY KADBER

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF SUPPORTIVE SERVICES, CONGREGATE ACTIVITIES, PEER SUPPORT PROGRAMS AND ASSISTANCE IN AGING IN PLACE FOR THE GLBT COMMUNITY.

Funded Amount:

$5,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR CARE CONNECTION DBA EDDY SENIORCARE
504 STATE STREET
SCHENECTADY, NY 12305
(518) 837-6349

Name of Project Director:

BERNADETTE HALLAM

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE ENVIRONMENTAL AND FURNISHINGS IN ONE OF THE APARTMENTS AT SCHAFFER HEIGHTS TO SUPPORT FRAIL SENIORS WHO ARE NURSING HOME ELIGIBLE, BUT HAVE STRONG DESIRE TO REMAIN IN THE COMMUNITY

Funded Amount:

$3,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR CENTER OF SAINT DEMETRIOS
83-12A PARSONS BOULEVARD
JAMAICA, NY 11432
(718) 739-0549

Name of Project Director:

DOROTHY KATOPIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL ACTIVITIES FOR SENIOR CITIZENS IN THE COMMUNITY.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR CITIZEN LEAGUE OF FLATBUSH, INC.
1625 OCEAN AVENUE
BROOKLYN, NY 11230
(718) 253-0508

Name of Project Director:

LENORE FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN EDUCATIONAL PROGRAM FOR SENIORS BY PROVIDING LECTURERS AND FORMING DISCUSSION GROUPS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR CITIZENS COUNCIL OF CLINTON COUNTY
5139 NORTH CATHERINE STREET
PLATTSBURGH, NY 12901
(518) 563-6180

Name of Project Director:

KATHLEEN HAZEL

Purpose of Project:

FUNDS WILL BE USED FOR FURNISHINGS AND OFFICE EQUIPMENT FOR SENIOR CENTER

Funded Amount:

$9,500

Requested By:

DUPREY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR CITIZENS COUNCIL OF ROME, NEW YORK, INC.
305 EAST LOCUST STREET
ROME, NY 13440
(315) 337-8230

Name of Project Director:

MARGARET CAMPANIE

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE AND EXPAND A HEALTH AND WELLNESS CENTER FOR SENIOR CITIZENS AT THE AVA DORFMAN SENIOR CENTER IN ROME, NEW YORK, INCLUDING THE PURCHASE OF FITNESS EQUIPMENT, AND SUPPLIES FOR OTHER WELLNESS PROGRAMS.

Funded Amount:

$15,000

Requested By:

DESTITO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR CITIZENS LEAGUE OF FLATBUSH, INC.
550 OCEAN PARKWAY
BROOKLYN, NY 11218
(718) 438-7441

Name of Project Director:

LENORE FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED FOR VARIOUS EDUCATION PROGRAMS (YOGA, DANCE, ARTS, AND CRAFTS), LECTURERS AND DISCUSSION GROUPS. FUNDS WILL BE USED TO OFFSET COSTS OF INSTRUCTORS.

Funded Amount:

$5,000

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR CITIZENS OF WESTBURY, INC.
360 POST AVENUE
WESTBURY, NY 11590
(516) 334-5886

Name of Project Director:

JEAN SILVERMAN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE SENIOR CITIZENS OF WESTBURY PROVIDES

Funded Amount:

$4,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR CLUB AT ST. KEVIN'S PARISH
45-50 195 STREET
FLUSHING, NY  11358
(718) 631-1964

Name of Project Director:

JOHN SULLIVAN

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET OPERATING EXPENSES, WHICH INCLUDE BUT ARE NOT LIMITED TO COSTS ASSOCIATED WITH RECREATIONAL AND EDUCATIONAL PROGRAMS FOR SENIORS, SUPPLIES AND EQUIPMENT. PROGRAMS ARE OPEN TO THE PUBLIC AND OFFERED ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR LEAGUE OF YOUNG ISRAEL
141-55 77TH AVENUE
FLUSHING, NY 11367
(718) 263-6995

Name of Project Director:

ALAN GOMBO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND SOCIAL ACTIVITIES FOR THE SENIOR CITIZENS OF THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIOR LEGISLATIVE ACTION COMMITTEE
P.O. BOX 553
FERNDALE, NY  12734
(845) 292-7965

Name of Project Director:

JOSEPHINE CAMPANARO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL AND EDUCATIONAL PROGRAMS FOR SENIORS.

Funded Amount:

$2,000

Requested By:

GUNHER-A

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SENIORS HELPING SENIORS, INC.
600 WEST 168TH STREET
NEW YORK, NY 10032
(212) 543-9383

Name of Project Director:

ROBERTA TOURNOUR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CARE AND ASSISTANCE TO ELDERLY CLIENTS OVER AGE 85.

Funded Amount:

$7,000

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SEPHARDIC MULTI-SERVICES SENIOR CITIZEN CENTER
485 KINGS HIGHWAY
BROOKLYN, NY 11223
(718) 336-1300

Name of Project Director:

MARIA NIGIDO

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL AND EDUCATIONAL PROGRAMS. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
SERVICES NOW FOR ADULT PERSONS, INC.
80-45 WINCHESTER BOULEVARD, BLDG. # 4, CBU # 29
QUEENS VILLAGE, NY 11427
(718) 454-2100

DR. LINDA LEEST

FUNDS WILL BE USED TO SUPPORT AND COORDINATE THE SERVICE PROGRAM WHICH CONSISTS OF IN-STATE TRANSPORTATION, CONGREGATE MEALS, CASE MANAGEMENT ASSISTANCE, HOME DELIVERED MEALS, EDUCATION/ADVOCACY, AND INFORMATION.

$22,000

WEPRIN

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SERVICES NOW FOR ADULT PERSONS, INC.
80-45 WINCHESTER BOULEVARD, BUILDING 4
QUEENS VILLAGE, NY 11427
(718) 454-2100

Name of Project Director:

LINDA LEEST

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET THE COSTS ASSOCIATED WITH THE SENIOR NUTRITION ASSISTANCE PROGRAM.

Funded Amount:

$12,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SHENENDEHOWA SENIOR CITIZENS, INC.
6 CLIFTON COMMON COURT
CLIFTON PARK, NY 12065
(518) 383-1343

Name of Project Director:

MAIA NEWMAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE LAPTOP AND COMPUTER PROJECTOR.

Funded Amount:

$3,200

Requested By:

REILLY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SHORE PARKWAY JEWISH CENTER FOR SENIOR CITIZENS, INC.
8885 26TH AVENUE
BROOKLYN, NY  11214
(718) 449-6530

Name of Project Director:

BARRY MOMTROSE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATION FOR SENIORS. SENIORS
WILL HAVE A PLACE TO MEET AND INTERACT ON A SOCIAL AND PERSONAL
LEVEL, AS WELL AS, TO ENJOY ACTIVITIES SUCH AS DANCING AND
DISCUSSION GROUPS, ETC. THE PROGRAM IS OPEN TO ALL SENIORS ON A
NON-SECTARIAN BASIS.

Funded Amount:

$1,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SHORE RIDGE CARES, NORC
P.O. BOX 090001 FORT HAMILTON STATION
BROOKLYN, NY 11209
(718) 745-5360

Name of Project Director:

JOSEFINA BLACKBURN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EMERGENCY PREPAREDNESS "GO BAGS" FOR THE ELDERLY AND FRAIL RESIDENTS IN CASE OF AN EMERGENCY.

Funded Amount:

$2,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SHOREFRONT JEWISH COMMUNITY COUNCIL, INC.
3049 BRIGHTON 6TH STREET
BROOKLYN, NY 11235
(718) 743-0575

Name of Project Director:

RABBI MOSHE WIENER

Purpose of Project:

FUNDS WILL BE USED FOR COMPUTERIZED PROGRAM THAT WILL SCREEN SENIOR CITIZENS' ELIGIBILITY IN 31 ENTITLEMENT BENEFIT PROGRAMS. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SHOW’S FROM THE HEART, INC.
6938 66TH ROAD
MIDDLE VILLAGE, NY 11379
(718) 894-7580

Name of Project Director:

PATRICIA CLUNE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ENTERTAINMENT TO SENIOR CITIZENS. IT INCLUDES AT LEAST THREE PERFORMERS, AND PROVIDES A GREAT VARIETY OF ENTERTAINMENT-POPULAR SONGS THROUGH THE AGES, FROM 1920S; SHOW TUNES; COUNTRY SONGS AND COMEDY. EACH SHOW INCLUDES A SING-A-LONG AND OTHER FORMS OF AUDIENCE INTERACTION.

Funded Amount:

$8,000

Requested By:

SEMINERIO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SIKH SENIOR CENTER
113-10 101 AVENUE
RICHMOND HILL, NY 11419

Name of Project Director:

CYNTHIA ZALISKY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACTIVITIES FOR THE SENIORS AT THE CENTER. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SONS OF ITALY TENANTS ASSOCIATION
2629 CROPSEY AVENUE
BROOKLYN, NY 11214
(718) 372-8740

Name of Project Director:

STEVEN CHUNG

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL PROGRAMS FOR APPROXIMATELY 100 SENIOR CITIZENS. PROGRAMS ARE OPEN TO ALL SENIORS.

Funded Amount:

$1,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SOUTH BRIDGE ADULT AND SENIOR CITIZEN ACTIVITIES CENTER, INC.  
90 BEEKMAN STREET  
NEW YORK, NY  10038  
(212) 267-6190

Name of Project Director:

LOUIS KRIEGER

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET COSTS OF PART-TIME PROJECT DIRECTOR, TELEPHONE REASSURANCE PROGRAM, NEWSLETTER, IN-STATE TRIPS, CLASSES, ETC.

Funded Amount:

$42,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SOUTH QUEENS SENIORS, INC.
C/O SOUTH QUEENS BOYS & GIRLS CLUB, 110-04 ATLANTIC AVENUE
RICHMOND HILL, NY  11418
(718) 441-6050

Name of Project Director:

CAROL SIMON

Purpose of Project:

FUNDS WILL BE USED FOR THE SUPPORT AND MAINTENANCE OF THE PROGRAM. $1,000 WILL BE GIVEN TO THE SOUTH QUEENS BOYS & GIRLS CLUB AS RENT FOR THE SPACE AND THE BALANCE WILL BE USED TO OFFSET THE COST OF INSURANCE.

Funded Amount:

$2,694

Requested By:

SEMINERIO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SOUTHEAST QUEENS MULTI-SERVICE SENIOR CITIZEN CENTER, INC.
156-45 84TH STREET
HOWARD BEACH, NY 11414
(718) 738-8100

Name of Project Director:

ISAAC ALBALA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TRANSPORTATION TO DISABLED AND FRAIL SENIORS WHO WOULD OTHERWISE BE UNABLE TO ATTEND THE SENIOR CENTER. ADDITIONALLY, FUNDS WILL GO TOWARDS THE PURCHASE OF SUPPLIES TO ENHANCE PROGRAMS AT THE CENTER.

Funded Amount:

$6,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SOUTHWEST QUEENS SENIOR SERVICES, INC.
87-04 88TH AVENUE
WOODHAVEN, NY  11421
(718) 847-9200

Name of Project Director:

JUDY KLEVE

Purpose of Project:

FUNDS WILL BE USED FOR SERVICES AND OPERATIONAL EXPENSES, AS WELL AS, TRANSPORTATION FOR RECREATIONAL OUTINGS, MEDICAL APPOINTMENTS, DAYCARE, AND TO ATTEND SENIOR CENTERS FOR OVER 100 RESIDENTS.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SPANISH SPEAKING ELDERLY COUNCIL OF BROOKLYN, INC. (RAICES)
30 3RD AVENUE, ROOM 617
BROOKLYN, NY 11217
(718) 643-0232

Name of Project Director:

JOSE ORTIZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIOR ACTIVITIES, INCLUDING ARTS AND CRAFTS, CERAMICS, DANCE CLASSES AND FOR IN-STATE BUS TRIPS. FUNDS MAY ALSO BE USED TO PURCHASE EQUIPMENT FOR THE SENIOR CENTER.

Funded Amount:

$4,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. ANDREW AVELLINO FRIENDSHIP CLUB
35-60 158TH STREET
FLUSHING, NY  11358
(718) 359-0417

Name of Project Director:

CONSTANCE BENNETT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CULTURAL AND RECREATIONAL ACTIVITIES FOR SENIOR CITIZENS. OPEN TO ALL ON NON-SECTARIAN BASIS.

Funded Amount:

$4,500

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. ATHANASIUS ROMAN CATHOLIC CHURCH
2154 61ST STREET
BROOKLYN, NY 11204
(718) 256-9862

Name of Project Director:

LAURA TARAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL AND SOCIAL INTERACTION FOR SENIORS SUCH AS DANCING, ARTS AND CRAFTS, AND DISCUSSION GROUPS AND RELATED HEALTH ACTIVITIES FOR SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. BERNADETTE GOLDEN AGE CLUB
8201 13TH AVENUE
BROOKLYN, NY  11228
(718) 232-7036

Name of Project Director:

ANN TRIPOLDI

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR THE SENIORS. OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. BRENDAN’S LEISURE TIME CLUB
1525 EAST 12 STREET
BROOKLYN, NY 11230
(718) 339-2828

Name of Project Director:

BARBARA LATERZA

Purpose of Project:

FUNDS WILL BE USED FOR SENIOR RECREATION. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. CHARLES JUBILEE SENIOR CENTER
55 PIERREPONT STREET
BROOKLYN, NY  11201
(718) 855-0326

Name of Project Director:

SHEILA FLAUCHER

Purpose of Project:

FUNDS WILL BE USED TO INCREASE ACCESSIBILITY TO SENIOR CENTER BATHROOMS, INCLUDING THE INSTALLATION OF HANDICAP RAILS AND HIGHER TOILET SEATS.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. DOMINICS ROMAN CATHOLIC CHURCH
2001 BAY RIDGE PARKWAY
BROOKLYN, NY  11204
(718) 259-4636

Name of Project Director:

FRAN DEPACE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL ACTIVITIES FOR APPROXIMATELY 300 SENIOR CITIZENS, INCLUDING SOCIAL AND INTERACTIVE ACTIVITIES SUCH AS DANCING, DISCUSSION GROUPS, ETC. OPEN TO ALL SENIORS IN THE NEIGHBORHOOD ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. EDMUND GOLDEN AGE
1902 AVENUE T
BROOKLYN, NY 11229
(718) 743-0102

Name of Project Director:

ANNA KRAUS

Purpose of Project:

FUNDS WILL BE USED FOR OPERATIONAL EXPENSES AND MISCELLANEOUS ITEMS FOR THE SENIOR CENTER. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. GABRIEL'S SENIOR CENTER
331 HAWTHORNE STREET
BROOKLYN, NY 11225
(718) 773-4049

Name of Project Director:

JUDITH VILLAROEL

Purpose of Project:

FUNDS WILL BE USED FOR THE MAINTENANCE OF THE CENTER, TOWARD OUTINGS WITHIN NYS, AND FOR RECREATIONAL AND EDUCATIONAL PROGRAMS FOR SENIORS. PROGRAMS ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ST. KEVIN'S SENIOR CLUB
45-21 194TH STREET
FLUSHING, NY  11358
(718) 224-0478

Name of Project Director:

PATRICIA BENSON

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS AND ACTIVITIES FOR SENIORS.

Funded Amount:

$1,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. LEO CHURCH
104-05 49TH AVENUE
CORONA, NY  11368
(718) 592-7569

Name of Project Director:

ANN MELCHIORRE

Purpose of Project:

FUNDS WILL BE USED TO SUBSIDIZE THE ACTIVITIES OF ST. LEO CHURCH GOLDEN AGE CLUBS, TRIPS TO BROADWAY SHOWS AND THE QUEENS THEATRE IN THE PARK. THE PROGRAM IS OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. LOUIS SENIOR CENTER
230 KINGSTON AVENUE
BROOKLYN, NY 11213
(718) 771-7945

Name of Project Director:

ROSE LAWRENCE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CONGREGATE LUNCH, EDUCATION, RECREATION AND SOCIAL SERVICES FOR ALL SENIORS IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. LUKE'S GOLDEN AGE CLUB
16-34 CLINTONVILLE STREET
WHITESTONE, NY  11357
(718) 746-8102

Name of Project Director:

MONSIGNOR JOHN TOSI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COST OF THE GOLDEN AGE SENIOR CLUB. PROGRAMS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. MARGARET MARY CHURCH
9-18 27TH AVENUE
ASTORIA, NY 11102
(718) 721-9020

Name of Project Director:

DENISE DOLLARD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A SENIOR SOCIAL ONCE A WEEK. BREAKFAST OR LUNCH WILL BE SERVED ALONG WITH LECTURES AND PHYSICAL EXERCISE PROGRAMS ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ST. MARGARET’S SENIOR CENTER
66-05 79TH PLACE
MIDDLE VILLAGE, NY  11379
(718) 326-1911

Name of Project Director:

ANGELINA FERZOLA

Purpose of Project:

FUNDS WILL BE USED TO FACILITATE SENIOR AND CULTURAL ACTIVITIES. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. MARK GOLDEN AGE CLUB
2609 EAST 19TH STREET
BROOKLYN, NY 11235
(718) 891-3101

Name of Project Director:

ELIZABETH MATHEW

Purpose of Project:

FUNDS WILL BE USED FOR A PROGRAM TO ENHANCE THE HEALTH OF SENIOR CITIZENS. PROGRAM OPEN TO ALL ON A NON-SECTORIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. MARY MOTHER OF JESUS ROMAN CATHOLIC CHURCH
2326 84TH STREET
BROOKLYN, NY  11214
(718) 372-4000

Name of Project Director:

ANNA MAGARACI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL AND EDUCATIONAL ACTIVITIES FOR SENIOR CITIZENS INCLUDING GAMES, PARTIES, LECTURES, ETC. TO ENRICH THE LIVES OF ALL SENIORS. PROGRAMS ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. MARY'S GOLDEN AGE CLUB
70-31 48TH AVENUE
WOODWIDE, NY  11377
(718) 672-4848

Name of Project Director:

MARILYN THOMAS

Purpose of Project:

FUNDS WILL BE USED TO INCLUDE, BUT ARE NOT LIMITED TO, RECREATIONAL PROGRAMS FOR SENIOR CITIZENS WHICH ARE OPEN TO ALL MEMBERS OF THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,500

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. MARY'S SENIOR CENTER  
10-15 49TH STREET  
LONG ISLAND CITY, NY  11101  
(718) 729-2688

Name of Project Director:

RENEE HARTWELL

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE PROGRAMS PROVIDED TO SENIORS SUCH AS DANCE CLASSES AND OTHER PROGRAMS, WHICH ARE OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. MEL'S LEISURE CLUB
28-20 154TH STREET
FLUSHING, NY 11354
(718) 886-0201

Name of Project Director:

CHARLES GRAZIANO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL ACTIVITIES FOR SENIOR CITIZENS IN THE COMMUNITY. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. NICHOLAS OF TOLENTINE GOLDEN AGE CLUB
150-75 GOETHAL AVENUE
JAMAICA, NY 11432
(718) 969-3226

Name of Project Director:

CATHERINE M. O'NEILL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL ACTIVITIES FOR SENIOR CITIZENS IN THE COMMUNITY. OPEN TO EVERYONE ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

   ST. PATRICK’S CHURCH
   39-38 29TH STREET
   LONG ISLAND CITY, NY  11101
   (718) 729-2660

Name of Project Director:

   FRANCIS MCINERNY

Purpose of Project:

   FUNDS WILL BE USED TO SUPPLEMENT THE HOLIDAY MEAL PROGRAM. THIS PROGRAM PROVIDES MEALS DURING THE HOLIDAYS TO SENIOR CITIZENS ON A NON-SECTARIAN BASIS.

Funded Amount:

   $1,250

Requested By:

   NOLAN

Name of Administering State Agency:

   OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. RITA'S CHURCH
36-25 11TH STREET
LONG ISLAND CITY, NY  11101
(718) 361-1884

Name of Project Director:

MARY PLATIA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A MEAL PROGRAM FOR SENIOR CITIZENS DURING THE HOLIDAYS ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. ROCCO’S SENIOR CENTER
216 27TH STREET
BROOKLYN, NY  11232
(718) 768-9798

Name of Project Director:

ANDREW DIORIO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF SENIOR ACTIVITIES INCLUDING ARTS, CRAFTS, CERAMICS, ETC. ACTIVITIES ARE OFFERED TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

ST. ROSALIA-REGINA PACIS NEIGHBORHOOD IMPROVEMENT ASSOC.
SENIOR PROGRAM
1258 65TH STREET
BROOKLYN, NY  11219
(718) 236-5266

Name of Project Director:

ROSA CASELLA

Purpose of Project:

FUNDS WILL BE USED TO WORK WITH AREA SENIOR CENTERS TO ASSESS THE NEEDS OF PARTICULAR CENTERS AND THE NEEDS OF AREA SENIORS. PROVIDES RECREATIONAL PROGRAMS, NECESSARY EQUIPMENT AND REFRESHMENTS FOR SENIOR PROGRAMS AND MEETINGS.

Funded Amount:

$28,000

Requested By:

ABBATE

Name of Administering State Agency:

OFFICE FOR THE AGING
SAF 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

STANLEY M. ISAACS NEIGHBORHOOD CENTER
415 EAST 93RD STREET
NEW YORK, NY  10128
(212) 360-7620

Name of Project Director:

WANDA WOOTEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CONTACT, EDUCATION AND INFORMATION TO HOME BOUND SENIORS WHO ARE PART OF THE MEALS ON WHEELS PROGRAM.

Funded Amount:

$5,000

Requested By:

BING, GRANNIS

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

STANLEY M. ISAACS NEIGHBORHOOD CENTER
415 EAST 93RD STREET
NEW YORK, NY   10128
(212) 360-7620

Name of Project Director:

WANDA WOOTEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIAL CONTACT, EDUCATION AND INFORMATION TO HOMEBOUND SENIORS WHO ARE PART OF ITS MEALS ON WHEELS PROGRAM.

Funded Amount:

$2,500

Requested By:

BING, GRANNIS

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

STEPHANIE JOYCE KAHN FOUNDATION, INC.
2-12 WEST PARK AVENUE, SUITE 210
LONG BEACH, NY 11561
(516) 889-5105

Name of Project Director:

STEPHANIE JOYCE KAHN

Purpose of Project:

FUNDS WILL BE USED TO SERVE HOME BOUND INDIVIDUALS, THE FRAIL ELDERLY, CHRONICALLY ILL, ETC. TRAINED VOLUNTEERS VISIT RECIPIENTS, BRINGING CASSETTE PLAYERS AND RECORDED MATERIALS. THEREAFTER, PERSONS OBTAIN RECORDINGS THROUGH THE MAIL AT NO COST.

Funded Amount:

$14,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

STEUBEN COUNTY OFFICE FOR THE AGING
3 EAST PULTENEY SQUARE
BATH, NY 14810
(607) 664-2298

Name of Project Director:

VICKI GRACE

Purpose of Project:

FUNDS WILL BE USED FOR VOLUNTEERS TO PROVIDE SERVICES TO FRAIL SENIORS WHO LIVE IN THEIR OWN HOMES SO THEY CAN CONTINUE TO LIVE INDEPENDENTLY

Funded Amount:

$7,800

Requested By:

BACALLES

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

STEUBEN COUNTY OFFICE FOR THE AGING
3 EAST PULTENNEY SQUARE
BATH, NY 14810
(607) 776-7813

Name of Project Director:

LINDA M. TEDOR

Purpose of Project:

FUNDS WILL BE USED TO ASSIST SENIORS IN HELPING THEM UNDERSTAND AND COMPLETE PAPERWORK IN A TIMELY MANNER FOR VARIOUS BENEFITS AND PROGRAMS THEY ARE ELIGIBLE FOR

Funded Amount:

$11,092

Requested By:

BACALLES

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

STS. SIMON AND JUDE ROMAN CATHOLIC CHURCH
185 VAN SICKLEN STREET
BROOKLYN, NY  11223
(718) 376-7814

Name of Project Director:

SADIE FAVARA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL PROGRAMS FOR SENIORS (I.E., ARTS AND CRAFTS, DANCING, AND DISCUSSION GROUPS, TO ENRICH THE LIVES OF ALL THOSE PARTICIPATING). THIS PROGRAM IS OPEN TO ANY SENIOR ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SUFFOLK INDEPENDENT LIVING ORGANIZATION (SILO)
13680 ROUTE 112, SUITE A
CORAM, NY 11727
(631) 880-7929

Name of Project Director:

EDWARD J. AHERN

Purpose of Project:

FUNDS WILL BE USED FOR DESIGN AND PRINTING OF AGENCY BROCHURES, REDESIGN AGENCY WEBSITE AND AS AN OUTREACH TO THE COMMUNITY IN THE FORM OF PSA'S AND OPEDS, AS WELL AS FOR ADVERTISEMENT

Funded Amount:

$5,000

Requested By:

FITZPATRICK

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SUNNYSIDE COMMUNITY SERVICES, INC.
43-31 39TH STREET
SUNNYSIDE, NY 11104
(718) 784-6173

Name of Project Director:

JUDY ZANGWILL

Purpose of Project:

FUNDS WILL BE USED FOR SERVICES SUCH AS IN-STATE TRANSPORTATION TO AND FROM SENIOR CENTERS, A CASE AID, A VOLUNTEER COORDINATOR TO RECRUIT AND SUPPORT VOLUNTEERS, AND A COMPUTER INSTRUCTOR TO PROVIDE TECHNICAL ASSISTANCE FOR THE BENEFITS PROGRAM.

Funded Amount:

$22,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SUNSET BAY COMMUNITY SERVICES, INC.
150 55TH STREET
BROOKLYN, NY 11220
(718) 492-9370

Name of Project Director:

MARIA CARDONA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SENIOR ACTIVITIES, INCLUDING ARTS AND CRAFTS, CERAMICS, DANCE AND IN-STATE BUS TRIPS.

Funded Amount:

$4,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

SURF SOLOMON SENIOR CENTER
3001 WEST 37TH STREET
BROOKLYN, NY 11224
(718) 449-6363

Name of Project Director:

GRACE BRAND

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR THE SENIORS. OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SWEDEN SENIOR CENTER
133 STATE STREET
BROCKPORT, NY 14420
(585) 637-8161

Name of Project Director:

NANCY DUFF

Purpose of Project:

FUNDS WILL BE USED FOR SPONSORING TRANSPORTATION TO AND FROM LUNCHEON AND FESTIVITIES TO ROCHESTER'S HISTORIC LILAC FESTIVAL FOR SENIORS FROM THE 134TH DISTRICT WITH CAMERA EQUIPMENT TO DOCUMENT SUCH EVENTS

Funded Amount:

$1,136

Requested By:

REILICH

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TAIWAN CENTER, INC.
137-44 NORTHERN BOULEVARD
FLUSHING, NY 11354
(718) 445-7007

Name of Project Director:

YI-MIAO HUANG

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A LUNCH PROGRAM, ACTIVITIES, SOCIAL SERVICES AND EDUCATIONAL SEMINARS FOR ALL SENIORS IN THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

THREE HIERARCHS SENIOR CENTER
1724 AVENUE P
BROOKLYN, NY 11223
(718) 339-0280

Name of Project Director:

TED PAVLOUNIS

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL PURPOSES FOR SENIOR CITIZENS. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TILDEN TOWERS II SENIOR CENTER
801 TILDEN STREET
BRONX, NY 10467
(718) 515-0185

Name of Project Director:

IRA BUTLER

Purpose of Project:

FUNDS WILL BE USED FOR A PROGRAM DIRECTOR TO RUN PROGRAMS DEDICATED TO IMPROVE THE QUALITY OF LIFE FOR LOCAL SENIORS.

Funded Amount:

$10,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TOWN OF NEW HARTFORD, DEPARTMENT OF SENIOR SERVICES
1 SHERMAN STREET
NEW HARTFORD, NY 13413
(315) 724-8968

Name of Project Director:

EILEEN SPELLMAN

Purpose of Project:

FUNDS WILL BE USED FOR DEFIBRILLATOR/TRAINING EQUIPMENT

Funded Amount:

$5,000

Requested By:

TOWNSEND

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TRANSPORTATION ALTERNATIVES, INC.
127 WEST 26TH STREET, #1002
NEW YORK, NY 10001
(212) 629-8080

Name of Project Director:

AMY PFEIFFER

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT PEDESTRIAN SAFETY FOR SENIORS STUDY ON THE UPPER WEST SIDE IN MANHATTAN.

Funded Amount:

$10,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TREMONT COMMUNITY SENIOR CITIZENS SERVICE CENTER, INC.
2070 CLINTON AVENUE
BRONX, NY 10457
(718) 933-3716

Name of Project Director:

THOMAS L. GUESS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A NUTRITION EDUCATION PROGRAM.

Funded Amount:

$10,000

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TRINITY SENIOR SERVICES, INC.
107-10 SHOREFRONT PARKWAY, #9-H
ROCKAWAY PARK, NY  11694
(718) 474-5993

Name of Project Director:

DR. GERALDINE M. CHAPEY

Purpose of Project:

FUNDS WILL BE USED TO OFFER OVER 1,000 UNDERSERVED SENIORS, WHO ARE GEOGRAPHICALLY ISOLATED, IN-STATE BUS TRIPS, CULTURAL EVENTS, INTERGENERATIONAL ACTIVITIES AND SOCIALIZATION EVENTS FOR SENIORS WHO DO NOT OTHERWISE HAVE ACCESS TO THESE SERVICES.

Funded Amount:

$5,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TRUMP 4 US
2942 WEST 5TH STREET
BROOKLYN, NY  11224
(718) 946-7973

Name of Project Director:

ELEN HALPERN

Purpose of Project:

FUNDS WILL BE USED FOR PHOTOGRAPHY AND ARTS AND CRAFTS SUPPLIES FOR THE SENIORS. OPEN TO ALL SENIORS ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TRUMP OUTREACH PROGRAM FOR SENIORS
464 NEPTUNE AVENUE, BUILDING 4, SECT. B RM3
BROOKLYN, NY 11224
(718) 946-7573

Name of Project Director:

ALLA PLISS

Purpose of Project:

FUNDS WILL BE USED FOR PHOTOGRAPHY AND ARTS AND CRAFTS SUPPLIES FOR THE SENIORS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TUPPER LAKE ADULT CENTER
179 DEMARS BOULEVARD
TUPPER LAKE, NY 12986
(518) 359-9070

Name of Project Director:

DARLENE LAFAVE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF KITCHEN EQUIPMENT AND MILEAGE REIMBURSEMENT FOR DELIVERY OF MEALS TO HOMEBOUND SENIORS

Funded Amount:

$10,000

Requested By:

DUPREY

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TUXEDO SENIOR CENTER
1 TEMPLE DRIVE
TUXEDO, NY 10987
(845) 351-2265

Name of Project Director:

PETER DOLAN

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATION AND/OR FURNISHINGS FOR THE
TUXEDO RAILROAD STATION TO BENEFIT THE TUXEDO SILVER DOLLARS

Funded Amount:

$4,524

Requested By:

RABBITT

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

TWO BRIDGES NEIGHBORHOOD COUNCIL, INC.
80 RUTGER'S SLIP
NEW YORK, NY  10002
(212) 349-9869

Name of Project Director:

BEN SILBER

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS AND SERVICES PROVIDED FOR MULTI-ETHNIC SENIOR CITIZENS AT THE COUNCIL'S HELEN HARRIS BUILDING SENIOR CENTER.

Funded Amount:

$9,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

UBA/MARY MCLEOD BETHUNE SENIOR CENTER
1970 AMSTERDAM AVENUE
NEW YORK, NY  10032
(212) 928-6607

Name of Project Director:

YOLANDA MAYRANT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIORS WITH HEALTH EQUIPMENT.

Funded Amount:

$10,000

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

UMBRELLA OF THE CAPITAL DISTRICT, INC.
509A UNION STREET
SCHENECTADY, NY 12305
(518) 346-5249

Name of Project Director:

ELAINE SANTORE

Purpose of Project:

FUNDS WILL BE USED TO ASSIST SENIORS AT HOME WITH HANDYMAN SERVICES, LOW COST MAINTENANCE AND FACILITATE A SAFE RELIABLE ALTERNATIVE TO SENIORS

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

UNITED HINDU CULTURAL COUNCIL OF USA NORTH AMERICA
118-09 SUTTER AVENUE
RICHMOND HILL, NY  11419
(718) 323-8900

Name of Project Director:

CHAN JAMOONA

Purpose of Project:

FUNDS WILL BE USED TO ENRICH THE LIVES OF SENIOR CITIZENS, PROVIDING NUTRITIONAL SERVICES, WORKSHOPS, CULTURAL IN-STATE TRIPS AND EDUCATIONAL PROGRAMS. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

UNITED JEWISH COUNCIL OF THE EAST SIDE, INC.
235 BROADWAY
NEW YORK, NY 10002
(212) 233-6037

Name of Project Director:

JOEL KAPLAN

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE DELIVERY OF SERVICES TO THE ELDERLY WITH PARTICULAR EMPHASIS ON OUTREACH TO THE HOMEBOUND. PROGRAMS ARE OFFERED TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,500

Requested By:

SILVER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

UNITED NEIGHBORS OF EAST MIDTOWN, INC.
310 EAST 42ND STREET
NEW YORK, NY 10017
(212) 682-1830

Name of Project Director:

JOAN MINTZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIAL SERVICES TO THE SENIORS OF EAST MIDTOWN.

Funded Amount:

$5,000

Requested By:

BING

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

UNITED PRESBYTERIAN & REFORMED ADULT MINISTRIES, INC.
38-20 BOWNE STREET
FLUSHING, NY  11354
(347) 532-3025

Name of Project Director:

ROBERT SALANT

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE AUDIO/VISUAL MEDIA RESOURCES THAT ARE PART OF THE COMPUTER LEARNING/MULTI-MEDIA CENTER BY PURCHASING A DVD PLAYER, TWO COMPUTERS, ETC. THE PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNITED SENIOR CITIZENS OF SUNSET PARK, INC.
475 53RD STREET
BROOKLYN, NY 11220
(718) 439-8646

Name of Project Director:

GRISEL ARMADOR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIOR ACTIVITIES, INCLUDING ARTS AND CRAFTS, CERAMICS, DANCE CLASSES AND TO PURCHASE EQUIPMENT FOR THE SENIOR CENTER.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE FOR THE AGING
UNIVERSITY SETTLEMENT SOCIETY OF NEW YORK
184 ELDRIDGE STREET
NEW YORK, NY 10002
(212) 674-9120

MICHAEL ZISSER

FUNDS WILL BE USED FOR EXERCISE CLASSES AT THE SETTLEMENT’S SENIOR CENTER, LOCATED IN NYCHA’S RAPHAEL HERNANDEZ BUILDING.

$12,000

GLICK, SILVER

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

UPPER MIDTOWN CHABAD-LUBAVITCH, INC.
308 EAST 51ST STREET, FIRST FLOOR
NEW YORK, NY  10022
(212) 319-1770

Name of Project Director:

RABBI SHMUEL METZGER

Purpose of Project:

FUNDS WILL BE USED FOR THE BEEKMAN SENIORS PROGRAM WHICH PROVIDES A FORUM FOR SENIORS TO PARTICIPATE IN LECTURES, FORUMS AND OTHER ACTIVITIES. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

BING

Name of Administering State Agency:

OFFICE FOR THE AGING
VANDALIA SENIOR CENTER
47 VANDALIA AVENUE
BROOKLYN, NY 11239
(718) 444-0101

PAUL CURIALE

FUNDS WILL BE USED FOR IN-STATE FIELD TRIPS, ARTS AND CRAFTS, REFRESHMENTS, AND GAMES. FUNDS WILL ALSO BE USED TO PURCHASE PRINTERS.

$6,188

GORDON-D

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

VILLAGE OF DEPEW
VILLAGE HALL, 85 MANITOU STREET
DEPEW, NY 14043
(716) 681-4396

Name of Project Director:

BOB KUCEWICZ

Purpose of Project:

FUNDS WILL BE USED FOR A NEW GENERATOR FOR THE DEPEW SENIOR CENTER.

Funded Amount:

$2,500

Requested By:

GABRYSZAK

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

VILLAGE OF RYE BROOK
32 GARIBALDI PLACE
RYE BROOK, NY 10573
(914) 939-7904

Name of Project Director:

JEAN GESOFF

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A SENIOR ACTING WORKSHOP, ENABLING SENIORS TO EXPRESS THEMSELVES THROUGH PERFORMANCE.

Funded Amount:

$2,000

Requested By:

LATIMER

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

VILLAGE OF SPRING VALLEY
200 NORTH MAIN STREET
SPRING VALLEY, NY 10977
(845) 573-5825

Name of Project Director:

RITA GRAYSON

Purpose of Project:

FUNDS WILL BE USED FOR THE SPRING VALLEY JITNEY BUS SERVICE WHICH ENABLES RESIDENTS WITH NO OTHER ACCESS TO TRANSPORTATION TO TRAVEL TO SHOPPING CENTERS, MEDICAL AND EDUCATIONAL FACILITIES AND OTHER NEEDED SERVICES.

Funded Amount:

$7,500

Requested By:

JAEFFEE

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

VISITING NEIGHBORS, INC.
611 BROADWAY, SUITE 510
NEW YORK, NY 10012
(212) 260-6200

Name of Project Director:

LAURA SCHARF

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PROJECT SENIOR ACCESS, WHICH ENABLES FRAIL ELDERLY TO LIVE INDEPENDENTLY BY PROVIDING COMPANIONSHIP, ASSISTANCE WITH ERRANDS AND MEDICAL APPOINTMENTS.

Funded Amount:

$6,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

VISITING NEIGHBORS, INC.
611 BROADWAY, SUITE 510
NEW YORK, NY 10012
(212) 260-6200

Name of Project Director:

LAURA SCHARF

Purpose of Project:

FUNDS WILL BE USED TO ENABLE FRAIL SENIORS TO REMAIN SAFE AND INDEPENDENT BY PROVIDING HELP WITH ERRANDS AND SHOPPING AND ESCORTS TO MEDICAL APPOINTMENTS, AS WELL AS, VOLUNTEER VISITORS TO RELIEVE SOCIAL ISOLATION.

Funded Amount:

$4,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

WASHINGTON HEIGHTS AND INWOOD COUNCIL ON AGING, INC.  
4111 BROADWAY  
NEW YORK, NY 10033  
(212) 781-5700

Name of Project Director:

FERN HERTZBERG

Purpose of Project:

FUNDS WILL BE USED FOR SENIORS’ EXERCISE EQUIPMENT TO INITIATE A  
WALKING PROGRAM FOR NEIGHBORHOOD SENIORS.

Funded Amount:

$4,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

WASHINGTON HEIGHTS INWOOD PRESERVATION AND RESTORATION CORPORATION
121 BENNET AVENUE, ROOM 11-A
NEW YORK, NY 10033
(212) 568-5450

Name of Project Director:

ELIZABETH WURSBURGER

Purpose of Project:

FUNDS WILL BE USED FOR THE SOCIAL ADULT DAY CARE (SADC) PROGRAM FOR SENIORS WITH COGNITIVE DEFICIENCIES. THIS PROGRAM OFFERS THERAPEUTIC MENTAL AND PHYSICAL STIMULATION FOR THE PARTICIPANTS.

Funded Amount:

$2,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

WATERVIEW TOWERS SOCIAL CLUB
1935 SHORE PARKWAY, APT. 9K
BROOKLYN, NY  11214
(718) 266-7620

Name of Project Director:

SEYMOUR WEINER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A PLACE FOR SENIORS TO MEET AND HAVE SOCIAL GATHERINGS, DISCUSSION GROUPS, ENTERTAINMENT, REFRESHMENTS AND IN-STATE TRIPS.

Funded Amount:

$1,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

WESTCHESTER PUBLIC PRIVATE PARTNERSHIP FOR AGING SERVICE
9 SOUTH FIRST AVENUE, 10TH FLOOR
MT. VERNON, NY 10550
(914) 813-6435

Name of Project Director:

MARTHA MARZANO

Purpose of Project:

FUNDS WILL BE USED FOR SENIOR CITIZEN CONCERT SERIES

Funded Amount:

$10,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

WILLIAM HUDSON COMMUNITY CENTER, INC.
1320 WEBSTER AVENUE
BRONX, NY  10456
(718) 538-1515

Name of Project Director:

ROSIE MILLS

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROJECTS AT THE SENIOR CENTER, INCLUDING EDUCATIONAL AND RECREATIONAL CLASSES.

Funded Amount:

$10,000

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

YOUNG ISRAEL OF BEDFORD BAY SENIOR CENTER
2114 BROWN STREET
BROOKLYN, NY 11229
(718) 769-2649

Name of Project Director:

MYRNA NEWMAN

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE EDUCATIONAL AND RECREATIONAL PROGRAMS FOR SENIORS. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

YOUNG ISRAEL OF FOREST HILLS SENIOR LEAGUE
68-07 BURNS STREET
FOREST HILLS, NY 11375
(718) 258-2218

Name of Project Director:

SUSAN RABINOWICZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATION, IN-STATE TRIPS, AND SPEAKERS FOR SENIOR CITIZENS. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE FOR THE AGING
Legal Name, Address, and Telephone Number:

YOUNG ISRAEL SENIOR SERVICES, INC.
1694 OCEAN AVENUE
BROOKLYN, NY 11230
(718) 253-7800

Name of Project Director:

SARAH KLEIN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF MUSIC/ENTERTAINMENT AT THE SENIOR CENTER. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE FOR THE AGING
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ACCESS
655 MAIN STREET
ISLIP, NY 11751
(631) 224-5500

Name of Project Director:

PHIL NOLAN

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE AND ADVERTISE ANTI-DRUG AND ALCOHOL INFORMATION AS WELL AS OPERATE A DRUG AND ALCOHOL PREVENTION PROGRAM.

Funded Amount:

$5,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

ALCOHOLISM COUNCIL OF HAMILTON, FULTON AND MONTGOMERY COUNTIES, INC.
40 NORTH MAIN STREET, SUITE 12
GLOVERSVILLE, NY 12078
(518) 725-8464

Name of Project Director:

ANN RHODES

Purpose of Project:

FUNDS WILL BE USED TO INCREASE COMPUTER EQUIPMENT PROVIDING PREVENTION PROGRAMS IN ALL AREAS OF MONTGOMERY COUNTY.

Funded Amount:

$5,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

ALTAMONT PROGRAM, INC.
40 EAGLE STREET
ALBANY, NY  12207
(518) 377-2448  202

Name of Project Director:

JACKIE GENTILE

Purpose of Project:

FUNDS WILL BE USED FOR CLIENT TRANSPORTATION COSTS ASSOCIATED WITH THE ORGANIZATION’S VARIOUS EDUCATION AND REHABILITATION PROGRAMS IN NEW YORK STATE.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

    ARCHDIOCESE DRUG ABUSE PREVENTION PROGRAM
    2789 SCHURZ AVENUE
    BRONX, NY  10465
    (718) 904-1333

Name of Project Director:

    FRANCES MATURO

Purpose of Project:

    FUNDS WILL BE USED TO ALERT CHILDREN/TEENAGERS ABOUT THE
    DANGERS OF UNDERAGE DRINKING.

Funded Amount:

    $1,000

Requested By:

    BENEDETTO

Name of Administering State Agency:

    OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CATTARAUGUS COUNTY COUNCIL ON ALCOHOLISM AND SUBSTANCE ABUSE
P.O. BOX 567
OLEAN, NY 14760
(716) 373-4303

Name of Project Director:

LAURA ELLIOT-ENGEL

Purpose of Project:

FUNDS WILL BE USED FOR CONTINUATION OF CHEMICAL DEPENDENCY SERVICES IN THE CATTARAUGUS COUNTY JAIL

Funded Amount:

$7,000

Requested By:

GIGLIO

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

DEPARTMENT OF EDUCATION - DIOCESE OF BROOKLYN
85-18 61ST ROAD
REGO PARK, NY 11374
(718) 565-2200

Name of Project Director:

EILEEN DWYER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ALCOHOL, TOBACCO AND DRUG PREVENTION SERVICES TO THE 157 ELEMENTARY AND 20 HIGH SCHOOLS IN BROOKLYN AND QUEENS.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
LEGAL INITIATIVE FORM

FAMILY & COMMUNITY SERVICES, INC.  
C/O ANDRUS CHILDREN’S CENTER - 1156 NORTH BROADWAY  
YONKERS, NY  10701  
(914) 961-4773

Name of Project Director:

MARION ANDERSON

Purpose of Project:

FUNDS WILL BE USED TO REDUCE FAMILIAL SUBSTANCE ABUSE AMONG AT-RISK FAMILIES.

Funded Amount:

$5,000

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

INSIGHT HOUSE CHEMICAL DEPENDENCY SERVICES, INC.
500 WHITESBORO STREET
UTICA, NY 13502
(315) 724-5168

Name of Project Director:

DONNA VITAGLIANO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A PASSENGER VAN TO BE USED TO TRANSPORT FEMALE CLIENTS OF AN ALCOHOL AND SUBSTANCE ABUSE TREATMENT CENTER TO COUNSELING SESSIONS AND OTHER SERVICES.

Funded Amount:

$15,000

Requested By:

DESTITO

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

INSTITUTE FOR PROFESSIONAL DEVELOPMENT IN THE ADDICTIONS
1 PINE WEST PLAZA, SUITE 105
ALBANY, NY  12205
(518) 690−0660

Name of Project Director:

MICHELLE N. CLEARY

Purpose of Project:

FUNDS WILL BE USED TO HELP PROVIDE CAREER SERVICES FOR PERSONS SUFFERING FROM ADDICTIONS.

Funded Amount:

$50,000

Requested By:

FARRELL, KIRWAN, PHEFFER, SCHROEDER

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

JEWISH BOARD OF FAMILY AND CHILDREN’S SERVICES, INC.
2020 CONEY ISLAND AVENUE
BROOKLYN, NY 11223
(718) 676-4280

Name of Project Director:

ARNOLD MARKOWITZ

Purpose of Project:

FUNDS WILL BE USED TO HELP TEENS AT RISK OF SUBSTANCE ABUSE, PROBLEMS AT SCHOOL, THOSE INVOLVED IN FAMILY CONFLICTS AND OTHER STRESSES OF TEENAGE LIFE BY OFFERING SUBSTANCE ABUSE PREVENTION AND EARLY INTERVENTION SERVICES. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

JEWISH FAMILY SERVICE COMPULSIVE GAMBLING PROGRAM
70 BARKER STREET
BUFFALO, NEW YORK  14209
(716) 883 – 1914

Name of Project Director:

MARLENE SCHILLINGER

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING SERVICES THROUGHOUT THE CITY OF BUFFALO AND ERIE COUNTY, INCLUDING OUTREACH, COUNSELING, AND RECOVERY FOR COMPULSIVE GAMBLERS.

Funded Amount:

$35,000

Requested By:

DINOWITZ, HOYT

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

LONG BEACH REACH, INC.
2–12 WEST PARK AVENUE, SUITE 200
LONG BEACH, NY  11561
(516) 889–2332

Name of Project Director:

JOSEPH SMITH, PH.D.

Purpose of Project:

TO ENHANCE THE SERVICES AVAILABLE IN THE OUTPATIENT CHEMICAL DEPENDENCY PROGRAM, INCLUDING CASE MANAGEMENT AND OTHER ANCILLARY SERVICES TO A POPULATION OF CLIENTS THAT HAVE CHRONIC, LONGSTANDING CHEMICAL ABUSE HISTORIES.

Funded Amount:

$50,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

LONG ISLAND COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE  
207 HILLSIDE AVENUE  
WILLISTON PARK, NY 11596  
(516) 747-2606

Name of Project Director:

JACK JERDAN

Purpose of Project:

FUNDS WILL BE USED FOR ALCOHOL/OTHER CHEMICAL DEPENDENCY PROGRAM

Funded Amount:

$2,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

LONG ISLAND COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE
800 VETERANS MEMORIAL HIGHWAY, LL2
HAUPPAUGE, NY 11788
(631) 979-1700

Name of Project Director:

GERALD ROUCOULET

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT A VITAL ALCOHOL AND OTHER CHEMICAL DEPENDENCY PREVENTION PROGRAM FOR CHILDREN

Funded Amount:

$5,000

Requested By:

BOYLE

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

NEXT STEP, INC.
276 SHERMAN STREET
ALBANY, NY 12206
(518) 465-5249

Name of Project Director:

MARSHA PENROSE

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COST OF CLIENT TRANSPORTATION TO AND FROM CENTER PROGRAMS WITHIN NEW YORK STATE.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

OCEANSIDE COUNSELING CENTER, INC.
71 HOMECREST COURT
OCEANSIDE, NY 11572
(516) 766-6283

Name of Project Director:

WILLIAM TERENZI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE DRUG AND ALCOHOL ABUSE PREVENTION AND TREATMENT PROGRAMS ON A YEAR-ROUND BASIS.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

OUTREACH DEVELOPMENT CORPORATION
117-11 MYRTLE AVENUE
RICHMOND HILL, NY  11418
(718) 847-9233

Name of Project Director:

KATHLEEN RIDDLE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ALCOHOL AND SUBSTANCE ABUSE EDUCATION AND TRAINING SERVICES TO COMMUNITY, PROFESSIONAL AND BUSINESS GROUPS SO THEY MAY BETTER RESPOND TO SUBSTANCE ABUSE PROBLEMS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PECONIC COMMUNITY COUNCIL, INC.
554 EAST MAIN STREET, SUITE 303
RIVERHEAD, NY  11901
(631) 727-6831

Name of Project Director:

PETER FAROS

Purpose of Project:

FUNDS WILL BE USED FOR SUBSTANCE ABUSE TREATMENT AND MENTAL HEALTH SERVICES AT MAUREEN'S HAVEN.

Funded Amount:

$8,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

PROGRAM FOR THE DEVELOPMENT OF HUMAN POTENTIAL  
85-18 61ST ROAD  
REGO PARK, NY 11374  
(718) 565-2200

Name of Project Director:

EILEEN DWYER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT DRUG PREVENTION PROGRAMS INCLUDING, BUT NOT LIMITED TO, THE PURCHASE OF PREVENTION CURRICULA, BOOKS AND VIDEOS, DEVELOPMENT TRAINING FOR STAFF.

Funded Amount:

$2,000

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

SAMARITAN VILLAGE INC.
88-83 VAN WYCK EXPRESSWAY
JAMAICA, NY  11432
(718) 657-6195

Name of Project Director:

NANCY GIAGNACORA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SUBSTANCE ABUSE TREATMENT,
MENTAL HEALTH AND PROGRAMS FOR THE HANDICAPPED.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

ST. JOHN'S UNIVERSITY  
8000 UTOPIA PARKWAY  
JAMAICA, NY 11439  
(212) 284-7005

Name of Project Director:

DR. KATHRYN T. HUTCHINSON

Purpose of Project:

FUNDS WILL BE USED TO EXPAND OUTREACH OF THE STUDENT WELLNESS PROGRAM TO CREATE INNOVATIVE WAYS TO CURB UNDERAGE DRINKING. PROGRAM WILL PROVIDE TRAINING, OUTREACH, AND A PUBLIC RELATIONS CAMPAIGN TO ENCOURAGE ALTERNATIVES TO UNDERAGE DRINKING ON CAMPUS AND OFF-CAMPUS IN THE LOCAL COMMUNITY.

Funded Amount:

$3,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

SUBSTANCE ABUSE MOBILIZATION PROJECT
P.O. BOX 5011
SOUTHAMPTON, NY 11969
(631) 680-3326

Name of Project Director:

REV. MICHAEL SMITH

Purpose of Project:

FUNDS WILL BE USED FOR RECOVERY SERVICES

Funded Amount:

$2,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

THE ALTAMONT PROGRAM, INC.
134 FRANKLIN ST.
ALBANY, NY 12202
(518) 465 – 8034

Name of Project Director:

JACQUELYN GENTILE

Purpose of Project:

FOR THE EXPANSION OF THE ALTAMONT PROGRAM FOR THE PURPOSE OF PROVIDING RESIDENTIAL HOUSING, ALCOHOL, SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES IN BROOKLYN.

Funded Amount:

$300,000

Requested By:

BOYLAND, CAMARA, TOWNS

Name of Administering State Agency:

OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
Legal Name, Address, and Telephone Number:

107TH PRECINCT COMMUNITY COUNCIL, INC.
71-01 PARSONS BOULEVARD
FLUSHING, NY 11365
(718) 969-5973

Name of Project Director:

SUSAN MATLOFF

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ACTIVITIES OF THE COMMUNITY COUNCIL, INCLUDING SUPPLIES AND POSTAGE. IN ADDITION, FUNDS WILL BE USED TO SUPPORT THE ANNUAL CHILDREN'S HALLOWEEN AND HOLIDAY PARTIES, AS WELL AS THE ANNUAL NATIONAL NIGHT OUT AGAINST CRIME.

Funded Amount:

$3,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

107TH PRECINCT COMMUNITY COUNCIL, INC.
71-01 PARSONS BOULEVARD
FLUSHING, NY 11365
(718) 969-5974

Name of Project Director:

CYNTHIA ZALISKY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SAFE HOLIDAY ACTIVITIES FOR THE YOUTH IN THE COMMUNITY.

Funded Amount:

$1,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

111TH STREET BOYS - OLD TIMERS, INC.
413 EAST 120TH STREET, SUITE 303
NEW YORK, NY 10035
(718) 671-8594

Name of Project Director:

CHARLIE CANDELARIO

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH ACTIVITIES.

Funded Amount:

$10,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

1200 DEAN STREET BLOCK ASSOCIATION, INC.
1236 DEAN STREET
BROOKLYN, NY 11216
(718) 774-9067

Name of Project Director:

GAIL B. MUHAMMAD

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT COMMUNITY EDUCATIONAL IMPROVEMENT PROJECTS RELATED TO REDUCING DRUG ACTIVITY AND GANG VIOLENCE.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

69TH PRECINCT COMMUNITY COUNCIL, INC.
9720 FOSTER AVENUE
BROOKLYN, NY 11236
(917) 362-1584

Name of Project Director:

JOHN SALOGUB

Purpose of Project:

FUNDS WILL BE USED FOR PUBLICIZING THE ACTIVITIES OF THE PRECINCT COMMUNITY COUNCIL AND TO SUPPORT ITS YOUTH PROGRAM AND OTHER COMMUNITY PROGRAMS.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

84TH PRECINCT COMMUNITY COUNCIL
301 GOLD STREET
BROOKLYN, NY 11201
(718) 802-3857

Name of Project Director:

LESLIE LEWIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACTIVITIES INCLUDING IN-STATE YOUTH TRIPS, POLICE AWARDS, SENIOR TRIPS WITHIN NYS AND COUNCIL MEETINGS.

Funded Amount:

$2,500

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

88TH PRECINCT COMMUNITY COUNCIL
298 CLASSON AVENUE
BROOKLYN, NY 11205
(718) 636-6569

Name of Project Director:

DELIA HUNLEY-ADOSSA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUMMER YOUTH ACTIVITIES AND ENRICHMENT PROGRAMS.

Funded Amount:

$5,000

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

A.S.U. OF NEW YORK, INC.
1986 WEST 6TH STREET, 2ND FLOOR
BROOKLYN, NY  11223
(718) 339-8380

Name of Project Director:

ANGELO SICILIANO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT COMMUNITY OUTREACH AND REFERRALS FOR SOCIAL SERVICES, SERVICES FOR IMMIGRANTS AND SUPPORT FOR YOUTH CULTURAL PROGRAMS FOR ALL MEMBERS OF THE COMMUNITY. THIS PROGRAM IS OPEN TO ALL INDIVIDUALS ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

A.S.U. OF NEW YORK, INC.
1986 WEST 6TH STREET, 2ND FLOOR
BROOLYN, NY  11223
(718) 339-8380

Name of Project Director:

ANGELO SICILIANO

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY OUTREACH AND REFERRAL FOR SOCIAL SERVICE SUPPORT, PROGRAMS FOR YOUTH, CULTURAL PROGRAMS FOR ALL MEMBERS OF THE COMMUNITY AND SERVICES FOR IMMIGRANTS.

Funded Amount:

$10,000

Requested By:

ABBATE, COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ABYSSINIAN DEVELOPMENT CORPORATION
4 WEST 125TH STREET
NEW YORK, NY  10027
(212) 368-4471

Name of Project Director:

SHEENA WRIGHT

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL AND JOB TRAINING SERVICES, LEADERSHIP TRAINING, COUNSELING AND SUPPORT ACTIVITIES FOR YOUTH.

Funded Amount:

$10,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ACTION CENTER FOR EDUCATION & COMMUNITY DEVELOPMENT INC.
1612 CENTRAL AVENUE
FAR ROCKAWAY, NY  11691
(718) 337-5040

Name of Project Director:

ARIA DOLE

Purpose of Project:

FUNDS WILL BE USED TO EXPAND COMMUNITY PROGRAMS AT OCEAN VILLAGE AND 1612 CENTRAL TO INCLUDE A COMPONENT FOR MENTORING WITH THE SENIOR/YOUTH COMPUTER CLASS, BOOK CLUB, WRITING ETC.

Funded Amount:

$10,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ADELANTE OF SUFFOLK COUNTY, INC.
10 THIRD AVENUE
BRENTWOOD, NY 11717
(631) 434-3481

Name of Project Director:

MIRIAM GARCIA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS FOR THE SENIOR AND YOUTH PROGRAMS (I.E., SENIOR NUTRITION PROGRAM, SENIOR TRANSPORTATION INSURANCE, YOUTH PROGRAM OPERATING COSTS).

Funded Amount:

$15,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

AD-HOC COMMITTEE FOR SELDEN CENTEREACH YOUTH ASSOCIATION, INC.
P.O. BOX 439
SELDEN, NY  11784
(631) 732-2186

Name of Project Director:

SAL BUSH

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES ASSOCIATED WITH THE TEEN TUTORING PROGRAM WHERE MIDDLE COUNTRY HIGH SCHOOL STUDENTS VOLUNTEER THEIR TIME TO ASSIST YOUNGER STUDENTS WITH THEIR STUDIES.

Funded Amount:

$2,500

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ADOPT-A-FRIEND, INC.
2000 WESTCHESTER AVENUE, P.O. BOX 129
BRONX, NY  10462
(718) 239-8134

Name of Project Director:

SHEIKH MOUSSA DRAMMEN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL PRESENTATIONS THROUGHOUT THE COMMUNITY.

Funded Amount:

$3,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AFRICAN AMERICAN MEN OF WESTCHESTER, INC.
333 MAMARONECK AVENUE, PMB 293
WHITE PLAINS, NY  10605
(914) 736-3540

Name of Project Director:

MELVIN BURRUSS

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET THE COSTS OF PRINTING AND DESIGN OF PROGRAMS, AND AUDIO VISUAL EQUIPMENT FOR THE DR. MARTIN LUTHER KING LEGACY LUNCHEON.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

AFRICAN CENTER FOR COMMUNITY EMPOWERMENT, INC.
111-20A FARMERS BOULEVARD
ST. ALBANS, NY  11412
(718) 264-9638

Name of Project Director:

SAYWALAH KESSELLY

Purpose of Project:

FUNDS WILL BE USED TO ADDRESS THE ACHIEVEMENT GAP AND TO PROVIDE TECHNOLOGICAL OPPORTUNITIES FOR OUR YOUTH TO BE BETTER PREPARED. THIS WILL BE PROVIDED THROUGH THE MENTAL MATH AND TECHNOLOGY PROGRAMS.

Funded Amount:

$10,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

AFRICAN CULTURAL CENTER OF BUFFALO, INC.
350 MASTEN AVENUE
BUFFALO, NY 14209
(716) 884-2013

Name of Project Director:

AGNES M. BAIN

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL AND EDUCATIONAL SERVICES FOR YOUTH, AFTER SCHOOL AND DURING THE SUMMER.

Funded Amount:

$40,000

Requested By:

PEOPLES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

AGING IN AMERICA COMMUNITY SERVICES, INC.
1500 PELHAM PARKWAY SOUTH
BRONX, NY 10461
(718) 409-7970

Name of Project Director:

MARIA UZOVICH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPLIES FOR THE FOOD PROGRAM.

Funded Amount:

$17,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

AGING IN AMERICA COMMUNITY SERVICES, INC.
1500 PELHAM PARKWAY SOUTH
BRONX, NY 10461
(718) 824-4004

Name of Project Director:

WILLIAM AGUADO

Purpose of Project:

FUNDS WILL BE USED TO OFFER A FREE SUMMER CAMP FOR LOW-INCOME AND DISADVANTAGED CHILDREN, WHICH PROVIDES MENTORING AND GUIDANCE FROM LOCAL SENIOR CITIZENS. FUNDS WILL ALSO BE USED TO OFFSET COST ASSOCIATED WITH OPERATIONS.

Funded Amount:

$8,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ALBANY JEWISH FAMILY SERVICES
811 MADISON AVENUE
ALBANY, NY  12208
(518) 482-8856

Name of Project Director:

MIRIAM R. ADLER

Purpose of Project:

FUNDS WILL BE USED FOR THE NNORC PROGRAM THAT WOULD HELP RESIDENTS REMAIN IN THEIR HOMES AND LIVE INDEPENDENTLY AS LONG AS POSSIBLE WITH A RANGE OF SUPPORT SERVICES.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
ALL SAINTS CHURCH
43-12 46TH STREET
SUNNYSIDE, NY 11104
(718) 784-8031

JOSEPH JEROME

FUNDS WILL BE USED TO PROVIDE A COMPUTER LITERACY PROGRAM FOR RESIDENTS ON A NON-SECTARIAN BASIS, ENABLING BETTER OUTREACH EFFORTS FOR ORGANIZATION PROGRAMS.

$1,250

NOLAN

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ALLERTON AVENUE HOMEOWNERS AND TENANTS ASSOCIATION
1415 ALLERTON AVENUE
BRONX, NY 10469
(718) 652-0414

Name of Project Director:

NICK CONCIATORE

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COSTS OF COMMUNITY PROJECTS AND FOR OPERATING EXPENSES.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ALLIANCE FOR COMMUNITY SERVICES, INC.
110 EAST BURNSIDE AVENUE
BRONX, NY 10453
(718) 583-1900

Name of Project Director:

LEO MARTINEZ

Purpose of Project:

FUNDS WILL BE USED FOR THE BRONX CITIZENSHIP DAY CELEBRATION, SUCH AS PURCHASING REFRESHMENTS, PROVIDING ENTERTAINMENT, A VOTER REGISTRATION DRIVE, ETC. FUNDS WILL ALSO BE USED TO PRINT PAMPHLETS AND/OR BROCHURES.

Funded Amount:

$9,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

AMERICAN ASSOCIATION OF JEWS FROM THE FORMER USSR, 
NEW YORK CHAPTER 
100 CHURCH STREET, SUITE 1608 
NEW YORK, NY 10007 
(212) 964-1946

Name of Project Director:

INNA AROLOVICH

Purpose of Project:

FUNDS WILL BE USED TO ENCOURAGE INTEGRATION AND INVOLVEMENT IN CIVIC AND SOCIAL AFFAIRS. THE PROGRAM IS OPEN TO ANY INDIVIDUAL OR FAMILY IN THE COMMUNITY.

Funded Amount:

$2,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

AMERICAN LEGION/THEODORE KORONY POST #253
241 LONGSTREET AVENUE
BRONX, NY  10465
(718) 863-8194

Name of Project Director:

JOSEPH MAZZARIELLO

Purpose of Project:

FUNDS WILL BE USED TO HELP WITH THE GATHERING AND BUYING OF HOLIDAY TOYS FOR LOCAL NEEDY CHILDREN.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

AMITY LITTLE LEAGUE, INC.
2920 AVENUE R, PMB #38
BROOKLYN, NY 11229
(718) 648-8135

Name of Project Director:

SAL CHIACCHERE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF SPORTS EQUIPMENT.

Funded Amount:

$2,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

AMSTERDAM YOUTH SOCCER CLUB, INC.
P.O. BOX 582
AMSTERDAM, NY 12010
(518) 632-4499

Name of Project Director:

GREG KNACK

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF SOCCER EQUIPMENT AND TO ASSIST WITH FIELD MAINTENANCE NEEDS.

Funded Amount:

$4,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ANDREW GLOVER YOUTH PROGRAM, INC.
100 CENTRE STREET, ROOM 1541
NEW YORK, NY  10013
(212) 349-6381

Name of Project Director:

ANGEL RODRIGUEZ

Purpose of Project:

FUNDS WILL BE USED FOR ALTERNATIVE TO INCARCERATION AND CRIME PREVENTION PROGRAMS FOR YOUTH OFFENDERS AND AT RISK YOUTH FROM THE LOWER EAST SIDE.

Funded Amount:

$2,000

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AREA FUND OF DUTCHESS COUNTY, D.B.A ULSTER COUNTY COMMUNITY FOUNDATION
80 WASINGTON STREET, SUITE 201
POUGHKEEPSIE, NY 12601
845-452-3077

Name of Project Director:

ANDREA REYNOLDS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ESTABLISHMENT OF AN ULSTER COUNTY COMMUNITY FOUNDATION TO BENEFIT ULSTER COUNTY RESIDENTS MODELLED AFTER THE SUCCESSFUL COMMUNITY FOUNDATION OF DUTCHESS COUNTY.

Funded Amount:

$10,000

Requested By:

CAHILL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ARTURO BENITEZ BASEBALL LITTLE LEAGUE, INC.
760 BRYANT AVENUE
BRONX, NY 10474
(718) 328-1188

Name of Project Director:

MARGARITA VILLEGAS

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL ACTIVITY FOR YOUNGSTERS OF THE SOUTH BRONX.

Funded Amount:

$3,000

Requested By:

ARROYO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ASIAN AMERICANS FOR EQUALITY, INC.
277 GRAND STREET
NEW YORK, NY 10002
(212) 680-1374

Name of Project Director:

CHRISTOPHER KUI

Purpose of Project:

FUNDS WILL BE USED FOR HOUSING AND ASSISTANCE TO SENIORS AND FAMILIES IN QUEENS.

Funded Amount:

$3,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ASPHALT GREEN, INC.
555 EAST 90TH STREET
NEW YORK, NY 10128
(212) 369-8890

Name of Project Director:

CAROL TWEEDY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE OPPORTUNITY FOR YOUNG PEOPLE TO BE INVOLVED IN TEAM SPORTS AFTER SCHOOL AND ON WEEKENDS. ACTIVITIES INCLUDE SOCCER, BASKETBALL, FOOTBALL AND SOFTBALL.

Funded Amount:

$10,000

Requested By:

GRANNIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ASPHALT GREEN, INC.
555 EAST 90TH STREET
NEW YORK, NY   10128
(212) 369-8890

Name of Project Director:

CAROL TWEEDY

Purpose of Project:

FUNDS WILL BE USED FOR SPORTS PROGRAMS FOR LOW-INCOME CHILDREN IN THE COMMUNITY.

Funded Amount:

$2,500

Requested By:

BING, GRANNIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ASSOCIATION OF HOLOCAUST SURVIVORS FROM THE FORMER
SOVIET UNION
AVENUE Z JEWISH CENTER, 875 AVENUE Z
BROOKLYN, NY  11235
(718) 454-2046

Name of Project Director:

IZEA KATZAP

Purpose of Project:

FUNDS WILL BE USED TO HELP HOLOCAUST SURVIVORS COPE WITH LIFE IN
THE UNITED STATES AND ASSIST THEM THROUGH COUNSELING OR
EDUCATING THEM ABOUT THE SOCIETY IN WHICH THEY LIVE.

Funded Amount:

$2,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ASSOCIATION OF INFORMED VOICES, INC.
7201 15TH AVENUE
BROOKLYN, NY 11228
(718) 877-9100

Name of Project Director:

WANDA IHRIG

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT YOUTH PROGRAMS, IN-STATE TRAVEL, AND THE PURCHASE OF EQUIPMENT PROGRAM SUPPLIES.

Funded Amount:

$5,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ASTOR LITTLE LEAGUE, INC.
2701 BRUNER AVENUE
BRONX, NY 10469
(718) 324-2880

Name of Project Director:

PETER ZOCCHI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE UNIFORMS AND EQUIPMENT.

Funded Amount:

$2,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ASTOR LITTLE LEAGUE, INC.
2542 WESTERVELT AVENUE
BRONX, NY  10469
(718) 324-2880

Name of Project Director:

PETE ZOCHII

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF EQUIPMENT.

Funded Amount:

$2,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ASTORIA PERFORMING ARTS CENTER, INC.
P.O. BOX 195 - 34-23 STEINWAY STREET
ASTORIA, NY 11101
(718) 393-7505

Name of Project Director:

TARYN DRONGOWSKI

Purpose of Project:

FUNDS WILL BE USED FOR, BUT ARE NOT LIMITED TO, THE PRODUCTION OF QUALITY THEATRE AND ENTERTAINMENT AT AFFORDABLE PRICES TO COMMUNITY RESIDENTS WHILE PROVIDING FREE PROGRAMS TO YOUTH AND SENIOR CITIZENS ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ASTORIA RESTORATION ASSOCIATION
31-28 DITMARS BOULEVARD
ASTORIA, NY 11105
(718) 726-0034

Name of Project Director:

CATHERINE PIECORA

Purpose of Project:

FUNDS WILL BE USED TO BEAUTIFY THE QUEENS COMMUNITY COMMERCIAL STRIPS AND TO ASSIST RESIDENTS WITH APPLICATIONS FOR STATE AND FEDERAL ASSISTANCE.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ASTORIA-LONG ISLAND CITY NAACP
4-05 ASTORIA BOULEVARD, P.O. BOX 6234
LONG ISLAND CITY, NY  11102
(718) 278-5400

Name of Project Director:

MARION JEFFERS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT YOUTH PROJECTS SUCH AS THE PURCHASE OF EQUIPMENT, BUS TRIPS TO ALBANY, AND LITERACY SUPPLIES FOR LITERACY PROGRAMS.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

AUBURNDALE SOCCER CLUB, INC.
46-20 HOLLIS COURT BOULEVARD
FLUSHING, NY 11351
(718) 961-2582

Name of Project Director:

THOMAS DEBONIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A SOCCER PROGRAM FOR YOUTH.

Funded Amount:

$5,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
BAILEY HOUSE, INC.
275 7TH AVENUE, 12TH FLOOR
NEW YORK, NY 10001
(212) 633-2500

REGINA QUATTROCHI

FUNDS WILL BE USED FOR COPE, A PROGRAM TO TRAIN AND USE PEERS AS ROLE MODELS IN PROMOTING HIV RISK EDUCATION AND PREVENTION.

$2,500

O’DONNELL

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BAILEY HOUSE, INC.
275 7TH AVENUE, 12TH
NEW YORK, NY 10001
(212) 633-2500 209

Name of Project Director:

REGINA R. QUATTROCHI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SUPPORT MATERIALS FOR THE COMMUNITY OUTREACH PEER EDUCATION PROGRAM.

Funded Amount:

$2,500

Requested By:

GOTTfried

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BALLSTON AREA COMMUNITY CENTER, INC.
9 SCOTT STREET
BALLSTON SPA, NY 12020
(518) 885-3261

Name of Project Director:

KATI LEIGH

Purpose of Project:

FUNDS WILL BE USED TO EMBARK ON A CAMPAIGN TO INCREASE THE PHYSICAL ACTIVITY LEVEL OF BALLSTON AREA COMMUNITY CENTER YOUTH TO STOP OBESITY

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BARRY & FLORENCE FRIEDBERG JEWISH COMMUNITY CENTER
15 NEIL COURT
OCEANSIDE, NY 11572
(516) 766-4341

Name of Project Director:

FRED RICHMAN

Purpose of Project:

FUNDS WILL BE USED FOR PRE-SCHOOL PROGRAM

Funded Amount:

$10,000

Requested By:

BARRA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BARRY AND FLORENCE FRIEDBERG JEWISH COMMUNITY CENTER
15 NEIL COURT
OCEANSIDE, NY 11572
(516) 766-4341

Name of Project Director:

FRED RICHMAN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THEIR EARLY CHILDHOOD PROGRAMS

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BARRY AND FLORENCE FRIEDBERG JEWISH COMMUNITY CENTER, INC.
15 NEIL COURT
OCEANSIDE, NY 11572
(516) 766-4341

Name of Project Director:

ARNIE PREMINGER

Purpose of Project:

FUNDS WILL BE USED TO OPERATE EDUCATIONAL, SOCIAL AND RECREATIONAL PROGRAMS AND EVENTS DESIGNED TO MEET THE NEEDS OF "LATCHKEY" CHILDREN RESIDING IN LONG BEACH, LIDO BEACH, ATLANTIC BEACH, ISLAND PARK AND POINT LOOKOUT.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BAY RIDGE CHILD CARE CENTER
314-322 44TH STREET
BROOKLYN, NY 11220
(718) 768-5030

Name of Project Director:

HAYLEY FELICIANO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FLOORING FOR THE BACKYARD AND CHILDREN’S PLAYGROUND.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BAY RIDGE COMMUNITY COUNCIL, INC.
P.O. BOX 090001 FORT HAMILTON STATION
BROOKLYN, NY 11209
(718) 745-5360

Name of Project Director:

BARBARA VELUCCI

Purpose of Project:

FUNDS WILL BE USED TO BUY THE EQUIPMENT NEEDED FOR THE ART WINDOW PROJECT: PAINTS, BRUSHES, DROP CLOTHES, TAPE, AND COST OF MEDALS, AWARDS, AND PRINTING FOR STUDENTS.

Funded Amount:

$3,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BAY RIDGE ST. PATRICK'S PARADE, INC.
7304 5TH AVENUE
BROOKLYN, NY 11209
(718) 339-9344

Name of Project Director:

KATHY REILLY

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF RUNNING THE PARADE.

Funded Amount:

$1,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BAY RIDGE ST. PATRICK'S PARADE, INC.
P.O. BOX 233, 7304 FIFTH AVENUE
BROOKLYN, NY 11209
(718) 440-5775

Name of Project Director:

JACK MALONE

Purpose of Project:

FUNDS WILL BE USED FOR EXPENSES ASSOCIATED WITH BANDS, INSURANCE, PRINTING, REPRODUCTION, ADVERTISING, ETC.

Funded Amount:

$5,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BAY TERRACE COUNTRY CLUB
217-14 24 AVENUE
BAY TERRACE, NY 11360
(718) 428-0100

Name of Project Director:

FRANK DI GIOVANNI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES ASSOCIATED WITH REFURBISHING THE POOL FOR THE GENERAL PUBLIC.

Funded Amount:

$2,500

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BAYSIDE LITTLE LEAGUE, INC.
P.O. BOX 610054
BAYSIDE, NY 11361
(718) 225-0178

Name of Project Director:

ROBERT REID

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND HELP OFFSET OPERATING EXPENSES.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BE PROUD, INC.
247 PROSPECT AVENUE
BROOKLYN, NY  11215
(718) 788-7773

Name of Project Director:

RAISA CHERNINA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE IMMIGRANT COMMUNITY WITH EDUCATIONAL PROGRAMS RELATING TO CIVICS AND AMERICAN LAW.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BE PROUD, INC.
2805 EAST 26 STREET, ROOM 2D
BROOKLYN, NY 11235
(718) 788-7773

Name of Project Director:

RAISA CHERNINA

Purpose of Project:

FUNDS WILL BE USED TO UNITE AND EDUCATE THE PARENTS WHO HAVE ADOPTED CHILDREN FROM THE FORMER SOVIET UNION.

Funded Amount:

$2,500

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BEDFORD CENTRAL COMMUNITY DEVELOPMENT CORPORATION, INC.
1200 DEAN STREET
BROOKLYN, NY  11216
(718) 467-0740

Name of Project Director:

WAYNE DEVONISH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADEQUATE TRAINING AND GUIDANCE TO HELP PEOPLE IMPROVE THEIR FINANCIAL LIVES.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BEDFORD STUYVESANT RESTORATION CORPORATION
1368 FULTON STREET
BROOKLYN, NY 11216
(718) 230-0693

Name of Project Director:

PEGGY ALSTON

Purpose of Project:

FUNDS WILL BE USED TO ENCOURAGE YOUTH THROUGH CULTURAL AWARENESS, ARTISTIC EXPRESSION AND ACADEMIC SUPPORT, THUS ENHANCING THE QUALITY OF COMMUNITY LIFE.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BELLPORT HAGERMAN, EAST PATCHOGUE ALLIANCE, INC.
1492 MONTAUK HIGHWAY
BELLPORT, NY 11713
(631) 286-9236

Name of Project Director:

HELEN MARTIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AMUSEMENT ATTRACTIONS FOR NATIONAL NIGHT OUT EVENT HELD FOR AT RISK YOUTH.

Funded Amount:

$1,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BENSONHURST COUNCIL OF JEWISH ORGANIZATIONS, INC.
8635 21ST AVENUE, SUITE 1-B
BROOKLYN, NY 11214
(718) 333-1834

Name of Project Director:

SHIRLEY FINEMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES TO THE COMMUNITY IN THE AREAS OF EDUCATION AND SOCIAL SERVICES. SERVICES ARE OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

ABBATE, COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BERGEN BASIN COMMUNITY DEVELOPMENT CORPORATION, INC.
P.O. BOX 340265
BROOKLYN, NY  11234
(718) 444-0101

Name of Project Director:

PAUL CURIALE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FOR STAFFING AND ONGOING SUPPORT TO EXPAND EFFORTS IN PROVIDING HUMAN SERVICES, ECONOMIC DEVELOPMENT AND HOUSING SUPPORT.

Funded Amount:

$26,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BERGEN BEACH YOUTH ORGANIZATION, INC.
P.O. BOX 340167
BROOKLYN, NY  11234
(718) 531-6600

Name of Project Director:

PAT SOLAMITA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL ACTIVITIES FOR AREA YOUTH, I.E. BASEBALL, FOOTBALL LEAGUES, AS WELL AS, TRIPS TO CULTURAL INSTITUTIONS AND SPORTING EVENTS WITHIN NEW YORK STATE.

Funded Amount:

$8,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BETHLEHEM TOMBOYS, INC.
P.O. BOX 221
DELMAR, NY 12054
(518) 475-0312

Name of Project Director:

LANCE RAFFE

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT A MAJOR RENOVATION PROJECT TO IMPROVE PLAYING CONDITIONS FOR THE CHILDREN. THESE FUNDS WILL BE PART OF IMPROVEMENTS MADE TO THE FIELDS TO ELIMINATE THE DRAINAGE PROBLEMS.

Funded Amount:

$10,000

Requested By:

GORDON-T

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BIG BROTHERS AND BIG SISTERS OF ROCKLAND COUNTY, INC.
65 N. MAIN STREET
NEW CITY, NY 10956
(845) 634-2199

Name of Project Director:

GILLIAN E. BALLARD

Purpose of Project:

FUNDS WILL BE USED FOR A PROFESSIONALLY TRAINED GANG PREVENTION COUNSELOR.

Funded Amount:

$5,000

Requested By:

ZEBROWSKI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BIG BROTHERS BIG SISTERS OF THE CAPITAL REGION, INC.
1492 CENTRAL AVENUE
ALBANY, NY  12205
(518) 862-1250

Name of Project Director:

KAREN BROWN

Purpose of Project:

FUNDS WILL BE USED TO HELP LOCAL AREA CHILDREN THROUGH MENTORING.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BLACK ROCK RIVERSIDE GOOD NEIGHBOR PLANNING ALLIANCE
364 ROESCH AVENUE
BUFFALO, NY  15207
(716) 851-5035

Name of Project Director:

DAVID SPINDA

Purpose of Project:

FUNDS WILL BE USED TO OPERATE AFTER SCHOOL PROGRAMS AND CRIME PREVENTION.

Funded Amount:

$5,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BLACK ROCK-RIVERSIDE LITTLE LEAGUE FOOTBALL, INC.
46 NEWFIELD STREET
BUFFALO, NY  14207
(716) 875-4630

Name of Project Director:

JIM ROGAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FOOTBALL AND CHEERLEADER EQUIPMENT.

Funded Amount:

$4,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BOY SCOUT TROOP #182
395 PENNYFIELD AVENUE
BRONX, NY 10465
(718) 892-8284

Name of Project Director:

NANCY HERBERT

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COSTS OF VARIOUS SCOUTING ACTIVITIES.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BOY SCOUT TROOP 182 OF ST. AGATHA R.C. CHURCH
702 48TH STREET
BROOKLYN, NY  11220
(718) 854-1733

Name of Project Director:

RAYMOND LEESHA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE CAMPING EQUIPMENT, AND FOR CAMPING FEES AND TRANSPORTATION TO CAMPING FACILITIES IN THE STATE.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BOY SCOUTS OF AMERICA - GREATER NEW YORK COUNCILS
350 FIFTH AVENUE, SUITE 530
NEW YORK, NY  10118
(212) 242-1100  2877

Name of Project Director:

JULIO GARCIA

Purpose of Project:

FUNDS WILL BE USED FOR TWO SUMMER CAMP STAFF,
WHICH WILL BENEFIT 150 YOUTH ATTENDING CUB SCOUT AND BOY
SCOUT RESIDENT SUMMER CAMP.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
BOY SCOUTS OF AMERICA OTETIANA COUNCIL #397
474 EAST AVENUE
ROCHESTER, NY 14607
(585) 241-8558

SHANNON DAVIS

FUNDS WILL BE USED TO OFFSET COSTS OF PROGRAMS THAT THE BOY SCOUTS OF AMERICA PROVIDE

$6,500

REILICH

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BOYS & GIRLS CLUB OF EDEN
8284 NORTH MAIN STREET
EDEN, NY 14057
(716) 992-2702

Name of Project Director:

RODNEY PIERCE

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM DEVELOPMENT AND IMPLEMENTATION IN THE BOYS AND GIRLS CLUB

Funded Amount:

$5,500

Requested By:

QUINN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BOYS & GIRLS CLUB OF GENEVA, INC.
1 GOODMAN STREET
GENEVA, NY 14456
(315) 781-2345

Name of Project Director:

ARLENE FRANCIS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT CONSTRUCTION OF A FACILITY

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BOYS & GIRLS CLUB OF GENEVA, INC.
1 GOODMAN STREET
GENEVA, NY 14456
(315) 781-2345

Name of Project Director:

ARLENE FRANCIS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT CONSTRUCTION OF FACILITY

Funded Amount:

$20,000

Requested By:

KOLB

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BOYS AND GIRLS CLUB OF NEW ROCHELLE, INC.
P.O. BOX 713
NEW ROCHELLE, NY 10802
(914) 235-3736

Name of Project Director:

LYNNE MARIE BIELECKI

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF NEW COMPUTERS FOR COMPUTER LEARNING LAB.

Funded Amount:

$10,000

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BOYS AND GIRLS CLUB OF ORCHARD PARK
25 SOUTH LINCOLN STREET, P.O. BOX 181
ORCHARD PARK, NY 14127
(716) 667-0841

Name of Project Director:

BILL GEHEN, JR.

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACTIVITIES AND PROGRAMS DESIGNED FOR YOUTH.

Funded Amount:

$5,000

Requested By:

SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BOYS AND GIRLS CLUB OF WESTERN BROOME, INC.
ONE CLUBHOUSE ROAD
ENDICOTT, NY 13760
(607) 754-0225

Name of Project Director:

LARRY COMSTOCK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MOBILE HANDICAP LIFT, WEIGHTS AND FLOTATION DEVICES TO MAKE THE POOL ACCESSIBLE TO HANDICAPPED PUBLIC.

Funded Amount:

$7,500

Requested By:

LUPARDO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BOYS AND GIRLS CLUBS OF ALBANY, INC.
21 DELAWARE AVENUE
ALBANY, NY  12210
(518) 462-5528  12

Name of Project Director:

DORETHA "PENNY" HOLMES

Purpose of Project:

FUNDS WILL BE USED FOR SUMMER CAMP PROGRAMMING FOR YOUNG ALBANY RESIDENTS.

Funded Amount:

$4,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BOYS AND GIRLS CLUBS OF ALBANY, INC.
21 DELAWARE AVENUE
ALBANY, NY 12210
(518) 462-5528

Name of Project Director:

DORETHA PENNY HOLMES

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE OPERATIONS OF CAMP OPPORTUNITIES FOR INNER-CITY CHILDREN.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
BOYS AND GIRLS REPUBLIC
888 EAST 6TH STREET
NEW YORK, NY  10009
(212) 686-8888

VEORONA JEETER

FUNDS WILL BE USED FOR THE ONGOING SUPPORT OF YOUTH PROGRAMS.

$45,000

KAVANAGH

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BOYS CLUB OF MOUNT KISCO, INC.
351 MAIN STREET
MOUNT KISCO, NY  10549
(914) 666-8069

Name of Project Director:

BRIAN SKANES

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE KITCHEN FACILITIES TO SUPPORT A KIDS CAFÉ PROGRAM, WHICH WILL ENABLE THE BOYS AND GIRLS CLUB TO PROVIDE HOT HEALTHY MEALS.

Funded Amount:

$10,000

Requested By:

BRADLEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
BOYS CLUB OF MT. VERNON, NY, INC.
350 SOUTH 6TH AVENUE
MOUNT VERNON, NY 10550
(914) 774-6659

LOWES MOORE

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL AND RECREATIONAL PROGRAMS.

$10,000

PRETLOW

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BRENTWOOD ALUMNI STUDENT ASSOCIATION, INC.
32 SOUTH FIFTH AVENUE
BRENTWOOD, NY 11717
(631) 245-3957

Name of Project Director:

WILLIAM MOSS, III

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MENTORING, RECRUITMENT, MAILERS, MEETING SPACE, INSURANCE, AND GENERAL COST OF THE PROGRAM.

Funded Amount:

$2,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BRENTWOOD SUMMIT COUNCIL
P.O. BOX 709
BRENTWOOD, NY 11717
(631) 930-6260

Name of Project Director:

MIKE MILAZZO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET FINANCIAL COST INCURRED TO MAINTAIN AND PROMOTE EVENTS AND FOR BASIC OFFICE EXPENSES.

Funded Amount:

$2,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BRENTWOOD TRAVEL BASEBALL, INC.
P.O. BOX 38
BRENTWOOD, NY 11717
(631) 273-2739

Name of Project Director:

TOM O'HARA

Purpose of Project:

FUNDS WILL BE USED FOR ADMINISTRATIVE EXPENSES AND OPERATING COST OF THE TEAMS.

Funded Amount:

$1,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BRIARWOOD COMMUNITY CIVIC ASSOC.
139-15 PERSHING CRESCENT
BRIARWOOD, NY  11435
(718) 297-4542

Name of Project Director:

SEYMOUR SCHWARTZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACTIVITIES FOR THE YOUTH IN THE COMMUNITY, AS WELL AS TO PROVIDE AND TEACH YOUTH ABOUT TECHNOLOGY UPGRADES, AND FOR THE PURCHASE OF LIBRARY BOOKS.

Funded Amount:

$3,500

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BRIDGE BACK TO LIFE
2857 WEST 8TH STREET
BROOKLYN, NY  11224
(718) 996-5551

Name of Project Director:

KAMY ROBERTS

Purpose of Project:

FUNDS WILL BE USED TO EXPAND ON THE CURRENT EDUCATIONAL PROGRAMS AT THE CENTER.

Funded Amount:

$3,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BRIDGEFIELD CIVIC LEAGUE, INC.
3551 LACONIA AVENUE
BRONX, NY 10469
(718) 654-6413

Name of Project Director:

ELLA THORNE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MATERIALS AND SUPPLIES FOR SUMMER DAY CAMP ACTIVITIES.

Funded Amount:

$7,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BRIDGEMANPTON CHILD CARE & RECREATION CENTER
P.O. BOX 1197
BRIDGEMANPTON, NY 11932
(631) 537-0616

Name of Project Director:

SYLVIA FRIDIE

Purpose of Project:

FUNDS WILL BE USED FOR AFTER SCHOOL PROGRAMS

Funded Amount:

$10,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BROAD CHANNEL ATHLETIC CLUB, INC.
P.O. BOX 1
BROAD CHANNEL, NY 11693
(718) 318-2096

Name of Project Director:

MARGARET WAGNER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SPORTING EQUIPMENT AND UNIFORMS FOR THE BENEFIT OF YOUTH IN THE COMMUNITY.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SPY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BRONX CLERGY TASK FORCE
127 DREISER LOOP
BRONX, NY 10475
(718) 790-9120

Name of Project Director:

ANGELO M. ROSARIO

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY THE COSTS OF AFTER SCHOOL PROGRAMS WHICH ARE OPEN TO ALL CHILDREN ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BRONX HOUSE, INC.
990 PELHAM PARKWAY SOUTH
BRONX, NY 10461
(718) 792-1800

Name of Project Director:

HOWARD MARTIN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH OPERATIONS OF A SUMMER CAMP FOR LOW-INCOME AND DISADVANTAGED CHILDREN.

Funded Amount:

$5,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BRONX YOUTH UPTOWN DEVELOPERS COALITION, INC.
P.O. BOX 690221
BRONX, NY 10469
(718) 231-4201

Name of Project Director:

ADRIAN ARMSTRONG

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR A SUMMER BASKETBALL PROGRAM.

Funded Amount:

$10,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BREUKELEN TENANTS ASSOC., INC.
254 STANLEY AVENUE, SUITE #1D
BROOKLYN, NY  11236
(347) 439-1247

Name of Project Director:

GLORIA GUY

Purpose of Project:

FUNDS WILL BE USED FOR FAMILY DAY OUTING, REFRESHMENTS, SPORTS EQUIPMENT AND AWARDS.

Funded Amount:

$2,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKLYN CHINESE-AMERICAN ASSOCIATION, INC.
5002 8TH AVENUE
BROOKLYN, NY 11220
(718) 438-0008

Name of Project Director:

PAUL MAK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SUPPLIES AND MATERIALS FOR THE AFTER SCHOOL PROGRAM.

Funded Amount:

$4,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BROOKLYN PARENTS FOR PEACE, INC.
41 SCHERMERHORN STREET, PMB 106
BROOKLYN, NY 11201
(718) 624-5921

Name of Project Director:

NORA GORDON

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE THE ANNUAL PEACE FAIR WHICH PROVIDES THE OPPORTUNITY FOR CHILDREN AND ADULTS TO LEARN ABOUT SOCIAL ISSUES AND PARTICIPATE IN WORKSHOPS, PERFORMANCES AND ARTS ACTIVITIES.

Funded Amount:

$2,500

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BROOME COUNTY COUNCIL OF CHURCHES, INC.
3 OTSENINGO STREET
BINGHAMTON, NY  13903
(607) 724-9130

Name of Project Director:

ED BLAINE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE WHOLESALE FOOD TO REPLENISH WAREHOUSE STOCK. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$7,000

Requested By:

LUPARDO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BROWN COMMUNITY DEVELOPMENT CORPORATION
484 WASHINGTON AVENUE
BROOKLYN, NY  11238
(718) 638-6121

Name of Project Director:

RENA HOLMES

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL AND RECREATIONAL PROGRAMMING FOR YOUTH.

Funded Amount:

$5,000

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

BUILDING BLOCS FOUNDATION, INC.
305 BROADWAY, 9TH FLOOR
NEW YORK, NY 10007
(212) 202-3811

Name of Project Director:

DALE BRYANT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BROOKLYN TEENAGERS PROGRAMS ON HOW TO BE FISCALLY RESPONSIBLE ADULTS — THROUGH LECTURE AND CLASSROOM INTERACTION ON PERSONAL BANKING, BUDGETING, DEBT MANAGEMENT, INVESTING, AND CONSUMER RIGHTS.

Funded Amount:

$1,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BULLDOG LACROSSE CORPORATION
936 S. 4TH STREET
LINDENHURST, NY 11757
(631) 226-2547

Name of Project Director:

EMILE CAIAZZA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR A YOUTH LACROSSE LEAGUE.

Funded Amount:

$1,500

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CAMP FRIENDSHIP
339 8TH STREET
BROOKLYN, NY  11215
(718) 965-3695

Name of Project Director:

WILLIAM SOLOMON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL PROGRAMS FOR CHILDREN INCLUDING RECREATION, ACADEMIC SUPPORT AND SPORTS, FOR 1ST TO 8TH GRADES.

Funded Amount:

$2,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CANARSIE ADOLESCENT RECREATIONAL PROGRAM, INC.
1310 PAERDERGAT AVENUE NORTH
BROOKLYN, NY  11236
(718) 531-7930

Name of Project Director:

JOSEPH BETANCOURT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BOATING SAFETY EQUIPMENT.

Funded Amount:

$3,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CAPITAL AREA COUNCIL OF CHURCHES, INC.
646 STATE STREET
ALBANY, NY  12203
(518) 462-5450

Name of Project Director:

REVEREND VERNON A. VICTORSON

Purpose of Project:

FUNDS WILL BE USED TO OPERATE A 19 BED SHELTER FOR THE HOMELESS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CAPITAL DISTRICT SENIOR SOFTBALL ASSOCIATION
15 CHEVY CHASE LANE
CLIFTON PARK, NY  12065
(518) 756-6427

Name of Project Director:

WALLY LOZANO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND FOR MAINTENANCE OF FIELDS IN CLIFTON PARK.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

    CAPITAL DISTRICT YMCA
    465 NEW KARNER ROAD
    ALBANY, NY 12205
    (518) 869-3500

Name of Project Director:

    REGINA LAGATTA

Purpose of Project:

    FUNDS WILL BE USED TO PURCHASE YOUTH FITNESS EQUIPMENT AT THE
    GREATER GLENEVILLE FACILITY

Funded Amount:

    $12,000

Requested By:

    TEDISCO

Name of Administering State Agency:

    OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CAPITAL DISTRICT YMCA
465 NEW KARNER ROAD
ALBANY, NY 12205
(518) 869-3500

Name of Project Director:

REGINA LAGATTA

Purpose of Project:

FUNDS WILL BE USED FOR TEEN BASKETBALL PROGRAM AT THE SCHENECTADY FACILITY

Funded Amount:

$21,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CAPITAL DISTRICT YMCA
ADMINISTRATIVE OFFICE - 465 NEW KARNER ROAD
ALBANY, NY 12205
(518) 869-3350

Name of Project Director:

REGINA M. LAGATTA

Purpose of Project:

FUNDS WILL BE USED TOWARD THE YMCA NATIONAL BLACK AND LATINO ACHIEVERS PROGRAM.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CARLIE'S CRUSADE FOUNDATION, INC.
157 MT. ZION ROAD
MARLBORO, NY 12542
(845) 236-4984

Name of Project Director:

DOMONICK MAGISTRO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE CD'S AND LITERATURE TO DISSEMINATE TO PARENTS AND TEACHERS TO COMBAT CHILD MOLESTATION

Funded Amount:

$5,000

Requested By:

KIRWAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CAROUSEL SOCIETY OF THE NIAGARA FRONTIER
P.O BOX 672, 180 THOMPSON STREET
NORTH TONAWANDA, NY  14120
(716) 693-1885

Name of Project Director:

TERESA A. GALLAGHER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EDUCATIONAL OBJECTIVES SUCH AS NEW EXHIBITS AND LEARNING BOXES, AS WELL AS, EDUCATIONAL EVENTS.

Funded Amount:

$10,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CASA CULTURAL DOMINICANA DEL BRONX
1883 BATHGATE AVENUE
BRONX, NY 10457
(718) 993-4463

Name of Project Director:

FELIPE FEBLES

Purpose of Project:

FUNDS WILL BE USED TO OFFER CULTURAL PROGRAMS FOR THE NEW EMERGING DOMINICAN POPULATION.

Funded Amount:

$5,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CASTLE HILL LITTLE LEAGUE, INC.
2200 POWELL AVENUE
BRONX, NY  10462-5100
(917) 846-4550

Name of Project Director:

HENRY PALAYO

Purpose of Project:

FUNDS WILL BE USED TO HELP WITH THE OPERATIONAL FUNCTIONS OF PROVIDING LITTLE LEAGUE BASEBALL IN THE CASTLE HILL COMMUNITY.

Funded Amount:

$2,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CATALPA-YMCA
69-02 64TH STREET
RIDGEWOOD, NY  11385
(718) 821-6271

Name of Project Director:

MICHAEL KELLER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COMPUTER PROGRAM COSTS, INCLUDING STAFF AND SUPPLIES.

Funded Amount:

$2,500

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CATHOLIC CHARITIES OF BROOME COUNTY, INC.
232 MAIN STREET
BINGHAMTON, NY 13905
(607) 729-9166

Name of Project Director:

DAN YEAGER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE FOOD ITEMS FOR FOOD PANTRY. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$7,000

Requested By:

LUPARDO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CATHOLIC CHARITIES OF DIOCESE OF ALBANY
40 NORTH MAIN AVENUE
ALBANY, NY  12203
(518) 453-6650

Name of Project Director:

ANGELA KELLER

Purpose of Project:

FUNDS WILL BE USED TO ENABLE CAMP SCULLY TO REBUILD ITS FACILITY, EXPAND ITS PROGRAM TO SERVE MORE CHILDREN AND THE COMMUNITY, AND SET A FOUNDATION FOR THE FUTURE.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CATHOLIC CHARITIES OF DIOCESE OF ALBANY
100 SLINGERLAND STREET
ALBANY, NY  12202
(518) 449-2001

Name of Project Director:

RENEE G. BENSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RESPITE SERVICES FOR CAREGIVERS WHO WORK TO KEEP FAMILY MEMBERS IN THE COMMUNITY. THE PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CATHOLIC CHARITIES OF SCHOHARIE COUNTY
489 WEST MAIN STREET
COBLESKILL, NY 12043
(518) 234-3581

Name of Project Director:

TOM MAYER

Purpose of Project:

FUNDS WILL BE USED FOR EMERSON HOUSE OPERATING AID

Funded Amount:

$2,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CATHOLIC CHARITIES OF STEUBEN COUNTY
23 LIBERTY STREET
BATH, NY 14810
(607) 776-8085  212

Name of Project Director:

LAURA OPELT

Purpose of Project:

FUNDS TO BE USED TO OFFSET COSTS OF PROGRAMS THAT CATHOLIC CHARITIES PROVIDES

Funded Amount:

$10,000

Requested By:

BACALLES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CATSKILL COMMUNITY CENTER
MAIN STREET
CATSKILL, NY 12414
(518) 719-8244

Name of Project Director:

MATT HITCHCOCK

Purpose of Project:

FUNDS WILL BE USED FOR FACILITY IMPROVEMENTS

Funded Amount:

$10,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
CELEBRATING REAL FAMILY LIFE
83 HIGHVIEW AVENUE
STATEN ISLAND, NY 10301

TAMMY GREER-BROWN

FUNDS WILL BE USED TO PROVIDE WORKSHOPS AND INITIATIVES AIMED AT STRENGTHENING FAMILY RELATIONSHIPS BETWEEN CHILDREN AND PARENTS, AND BETWEEN THE PARENTS THEMSELVES, IN SOUTHEAST QUEENS.

$15,000

SCARBOROUGH

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CENTER CITY COMMITTEE, INC.
433 STATE STREET
SCHENECTADY, NY  12305
(518) 393-8676

Name of Project Director:

ANDY GILPIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A VIOLENCE, DRUG AND CRIME PREVENTION SPORTS PROGRAM FOR INNER-CITY YOUTH.

Funded Amount:

$2,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CENTER FOR BATTERED WOMEN’S LEGAL SERVICES
PO BOX 1406, WALL STREET STATION
NEW YORK, NEW YORK 10268 – 1406
(212) 349 – 6009

Name of Project Director:

LAUREL W. EISNER

Purpose of Project:

FUNDS SHALL BE USED TO SUPPORT VICTIMS OF DOMESTIC VIOLENCE BY PROVIDING FOR LEGAL ASSISTANCE, COUNSELING, ADVOCACY, AND SHELTER SERVICES.

Funded Amount:

$265,000

Requested By:

WEINSTEIN, SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTER FOR FAMILY LIFE
345 43RD STREET
BROOKLYN, NY  11232
(718) 788-3500

Name of Project Director:

ERIKA LEA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE COMPREHENSIVE FAMILY-CENTERED SERVICES ON BEHALF OF CHILDREN AND YOUTH.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CENTER FOR JOY, INC.
1117 MICHIGAN AVENUE
NIAGARA FALLS, NY 14305
(716) 282-7588

Name of Project Director:

SISTER BETH NIEDERPRUEM

Purpose of Project:

FUNDS WILL BE USED FOR A SIGN, WINDOWS AND DRAPES FOR A NEW FACILITY FOR CHILDREN AND TEENS.

Funded Amount:

$7,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTER FOR THE PREVENTION OF CHILD ABUSE
249 HOOKER AVENUE
POUGHKEEPSIE, NY 12601
(845) 454-0595

Name of Project Director:

SUZANNE GOULD

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE 10 "BABY THINK IT OVER" DOLLS AS WELL AS A COLOR LASER JET PRINTER AND CARTRIDGES

Funded Amount:

$5,000

Requested By:

MOLINARO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTER FOR THE WOMEN OF NEW YORK
120-55 QUEENS BOULEVARD
KEW GARDENS, NY  11424
(718) 793-0627

Name of Project Director:

ANN JULIANO JAWIN

Purpose of Project:

FUNDS WILL BE USED FOR A COMPREHENSIVE PROGRAM OF PREVENTION, TRAINING AND EDUCATION FOR WOMEN AT RISK OF DOMESTIC VIOLENCE, TEENAGE PREGNANCY AND SUBSTANCE ABUSE. THE CENTER PROVIDES COUNSELING, JOB TRAINING AND A RANGE OF OTHER SERVICES FOR WOMEN, ADOLESCENTS AND THEIR FAMILIES.

Funded Amount:

$1,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTER FOR THE WOMEN OF NEW YORK
12-55 QUEENS BOULEVARD
KEW GARDENS, NY  11424
(718) 793-0627

Name of Project Director:

ANN JULIANO JAWIR

Purpose of Project:

FUNDS WILL BE USED FOR A PROGRAM OF PREVENTION, TRAINING, AND EDUCATION FOR WOMEN AT RISK OF DOMESTIC VIOLENCE, TEENAGE PREGNANCY AND SUBSTANCE ABUSE. THE CENTER PROVIDES COUNSELING, JOB TRAINING AND OTHER SERVICES TO WOMEN, TEENS AND THEIR FAMILIES.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CENTER FOR THE WOMEN OF NEW YORK
120-55 QUEENS BOULEVARD
KEW GARDENS, NY 11424
(718) 793-0672

Name of Project Director:

ANN JAWIN

Purpose of Project:

FUNDS WILL BE USED FOR AT-RISK WOMEN, TEENS AND CHILDREN. THIS PROGRAM HELPS WITH TRAINING AND COUNSELING.

Funded Amount:

$2,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CENTRAL ISLIP CIVIC COUNCIL, INC.
P.O. BOX 219
CENTRAL ISLIP, NY 11722
(631) 348-0669

Name of Project Director:

NANCY MANFREDONIA

Purpose of Project:

FUNDS WILL BE USED FOR THE MAINTENANCE AND OPERATION OF PROVIDING FOOD FOR THE NEEDY.

Funded Amount:

$10,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTRAL NASSAU GUIDANCE & COUNSELING SERVICES
950 SOUTH OYSTER BAY ROAD
HICKSVILLE, NY 11801
(516) 822-6111

Name of Project Director:

PAULE PACHTER

Purpose of Project:

FUNDS WILL BE USED TO EXPAND TRAINING PROGRAMS FOR STAFF AND CLIENTS

Funded Amount:

$4,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CENTRAL NASSAU GUIDANCE & COUNSELING SERVICES, INC.
950 SOUTH OYSTER BAY ROAD
HICKSVILLE, NY  11801
(516) 822-6111

Name of Project Director:

PAULE T. PACTHER

Purpose of Project:

FUNDS WILL BE USED TO HELP THE DEVELOPMENT OF THE LENNOX HILL CONFERENCE CENTER.

Funded Amount:

$4,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CENTRO JUVENIL RAFAEL TONY FERNANDEZ, INC.
504 WEST 139TH STREET, SUITE #2
NEW YORK, NY 10031
(212) 491-7701

Name of Project Director:

RAFAEL "TONY" FERNANDEZ

Purpose of Project:

FUNDS WILL BE USED TO ENABLE THE SOFTBALL YOUTH LEAGUE TO MAINTAIN CURRENT LEVELS OF MEMBERSHIP AND ACTIVITY.

Funded Amount:

$10,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHABAD LUBAVITCH OF WEST BRIGHTON-MANHATTAN BEACH
P.O. BOX 245491
BROOKLYN, NY  11224
(718) 946-9833

Name of Project Director:

RABBI WINNER

Purpose of Project:

FUNDING WILL BE USED TO EXPAND THE YOUTH LEADERSHIP MENTORING PROGRAM, WHICH IS OPEN TO ALL YOUTH IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHABAD OF COLONIE, INC.
7 LONGWOOD DRIVE
LOUDONVILLE, NY  12211
(518) 526-1770

Name of Project Director:

ROSA WEISS

Purpose of Project:

FUNDS WILL BE USED TO START A CHILDREN'S RESOURCE CENTER, WHICH WILL BE OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHALLENGE CENTER OUTREACH, INC.
543 LEONARD STREET
BROOKLYN, NY 11222
(718) 599-2801

Name of Project Director:

MONSIE FELICIER

Purpose of Project:

FUNDS WILL BE USED FOR AFTER-SCHOOL PROGRAMS.

Funded Amount:

$2,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHANCES & CHANGES, INC.
P.O. BOX 326
GENESEO, NY 14454
(585) 658-3940

Name of Project Director:

KAREN TREMER

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS AND REPAIRS

Funded Amount:

$5,000

Requested By:

BURLING

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHANCES & CHANGES, INC.
P.O. BOX 326
GENESEO, NY 14454
(585) 658-3940

Name of Project Director:

KAREN TREMER

Purpose of Project:

FUNDS WILL BE USED FOR INTERNAL/EXTERNAL REPAIRS ON THE EMERGENCY SHELTER AS WELL AS RENOVATE A PORTION OF THE GARAGE FOR OFFICE NEEDS

Funded Amount:

$5,000

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHARLES EDWARD COOK CENTER FOR HUMAN SERVICES, INC.
747-749 HENDRIX STREET
BROOKLYN, NY  11207
(646) 401-6754

Name of Project Director:

JACQUELYN WIDEMAN

Purpose of Project:

FUNDS WILL BE USED FOR A FOOD PANTRY.

Funded Amount:

$15,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CHARLOTTE YOUTH ATHLETIC ASSOCIATION
P.O. BOX 12524
ROCHESTER, NY 14612
(585) 663-0030

Name of Project Director:

BRIAN LABIGAN

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE BASEBALL FIELDS AT ONTARIO BEACH PARK.

Funded Amount:

$7,500

Requested By:

MORELLE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHESTER CIVIC IMPROVEMENT ASSOCIATION
1589 WARING AVENUE
BRONX, NY 10469
(917) 295-5916

Name of Project Director:

GENE TOTURO

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY THE COSTS OF TEENAGERS IN NEED IN THE UPCOMING SCHOOL YEAR.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILD ABUSE PREVENTION SERVICES
P.O. BOX 176
ROSLYN, NY 11576
(516) 621-0552

Name of Project Director:

ALANE FAGIN

Purpose of Project:

FUNDS WILL BE USED FOR THE EXPANSION OF CHILD SAFETY AND CHILD ABUSE PROGRAMS AND SERVICES TO STUDENTS

Funded Amount:

$3,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CHILD ABUSE PREVENTION SERVICES
P.O. BOX 176
ROSLYN, NY 11576
(516) 621-0552

Name of Project Director:

ALANE FAGIN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THEIR PROGRAMS AND SERVICES PROVIDED BY CHILD ABUSE PREVENTION SERVICES

Funded Amount:

$4,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILD ABUSE PREVENTION SERVICES-CAPS  
P.O. BOX 176  
ROSLYN, NY 11576  
(516) 621-0552

Name of Project Director:  

ALANE FAGIN

Purpose of Project:  
FUNDS WILL BE USED FOR CHILD ABUSE PREVENTION PROGRAMS

Funded Amount:  
$3,000

Requested By:  
CONTE

Name of Administering State Agency:  
OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILD AND ADOLESCENT TREATMENT SERVICES, INC.
301 CAYUGA ROAD
CHEEKTOWAGA, NY  14225
(716) 819-3420

Name of Project Director:

ROBERT HAVAS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE LEE GROSS ANTHONE CHILD ADVOCACY CENTER.

Funded Amount:

$2,500

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILD AND ADOLESCENT TREATMENT SERVICES, INC.
CHILD ADVOCACY CENTER - 556 FRANKLIN STREET
BUFFALO, NY 14202
(716) 886-5437

Name of Project Director:

BONNIE GLAZER

Purpose of Project:

FUNDS WILL BE USED TOWARD COSTS ASSOCIATED WITH CHILD ABUSE PREVENTION AND THE CHILD ADVOCACY CENTER SERVING THE WNY AREA.

Funded Amount:

$2,500

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILD CARE COUNCIL OF NASSAU, INC.
925 HEMPSTEAD TURNPIKE, SUITE 400
FRANKLIN SQUARE, NY 11010
(516) 358-9250

Name of Project Director:

JAN BARBIERI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE
CHILD CARE COUNCIL OF NASSAU PROVIDES

Funded Amount:

$2,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILD CARE COUNCIL OF SUFFOLK, INC.
60 CALVERT AVENUE
COMMACK, NY  11725
(631) 462-0444

Name of Project Director:

JANET WALERSTEIN

Purpose of Project:

FUNDS WILL BE USED FOR EXPANDING WEB-BASED PROGRAMS AND OUTREACH.

Funded Amount:

$1,500

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CHILD CARE COUNCIL OF SUFFOLK, INC.
60 CALVERT AVENUE
COMMACK, NY 11725
(631) 462-0303

Name of Project Director:

JANET WALLERSTEIN

Purpose of Project:

FUNDS WILL BE USED TO PREPARE FOR LEADERSHIP ROLES IN THEIR COMMUNITIES.

Funded Amount:

$7,500

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILD CARE COUNCIL OF WESTCHESTER, INC.
470 MAMARONECK AVENUE
WHITE PLAINS, NY 10605
(914) 761-3456

Name of Project Director:

KATHY HALAS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE ADMINISTRATION OF THE COUNCIL'S SCHOLARSHIP PROGRAM, INCLUDING THE DEVELOPMENT OF A DATABASE AND MAILINGS.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILD CARE RESOURCES OF ROCKLAND, INC.
235 N. MAIN STREET, SUITE 11
SPRING VALLEY, NY 10977
(845) 429-0009

Name of Project Director:

JANE BROWN

Purpose of Project:

FUNDS WILL BE USED FOR COMPUTERS, SOFTWARE UPGRADES, AND THE INSTALLATION OF NINE NEW COMPUTERS.

Funded Amount:

$3,100

Requested By:

ZEBROWSKI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILD CARE SOLUTIONS, INC.
6724 THOMPSON ROAD
SYRACUSE, NY  13211
(315) 446-1220

Name of Project Director:

GRETCHEN KINNEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPORT FOR THE EARLY CHILDHOOD CAREER ADVANCEMENT LADDER PROGRAM RUN BY CHILD CARE SOLUTIONS.

Funded Amount:

$8,500

Requested By:

CHRISTENSEN, MAGNARELLI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILD CARE COUNCIL OF THE FINGER LAKES, INC.
202 GRANT AVENUE
AUBURN, NY 13021
(315) 255-6994

Name of Project Director:

CINDY SMITH

Purpose of Project:

FUNDS WILL BE USED FOR LENDING LIBRARY

Funded Amount:

$3,500

Requested By:

FINCH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILDREN’S AID SOCIETY
105 EAST 22ND STREET
NEW YORK, NY  10010
(212) 949-4921

Name of Project Director:

SANDY GUTIEREZ AND LORENA JIMINEZ

Purpose of Project:

FUNDS WILL BE USED FOR THE BRONX YOUTH COUNCIL, A PROGRAM OF CHILDREN’S AID SOCIETY, WHICH UNITES AND EMPOWERS SOUTH BRONX MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS TO EDUCATE COMMUNITIES, RAISE THE CIVIC AWARENESS OF PEERS AND SERVE AS ADVOCATES FOR YOUTH ON COMMUNITY ISSUES.

Funded Amount:

$9,500

Requested By:

DIAZ-R

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILDREN’S AID SOCIETY
885 COLUMBUS AVENUE
NEW YORK, NY 10025
(212) 865-6337

Name of Project Director:

TRACY HAGG

Purpose of Project:

FUNDS WILL BE USED FOR A GIRL’S BASKETBALL TEAM, WHICH CONSISTS OF 60 GIRLS AND FOCUSES ON PERSONAL DEVELOPMENT AND EDUCATION.

Funded Amount:

$25,000

Requested By:

O’DONNELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILDREN’S AID SOCIETY
105 E. 22ND STREET, SUITE 908
NEW YORK, NY 10010
(212) 284-4587

Name of Project Director:

RICHARD NEGRON

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE POSITIVE RECREATIONAL ACTIVITIES FOR PARENTS AND SCHOOLS AND TO ASSIST PARENTS IN ORGANIZING THEMSELVES.

Funded Amount:

$10,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILDREN’S AID SOCIETY
105 E. 22ND STREET, SUITE 908
NEW YORK, NY 10010
(212) 284-4587

Name of Project Director:

RICHARD NEGRON

Purpose of Project:

FUNDS WILL BE USED FOR THE DEVELOPMENT OF A PARENT ENGAGEMENT STRATEGY FOR IMMIGRANT FAMILIES. THE PROGRAM WILL FOCUS ON THREE CORE COMPONENTS; ACCESSING SERVICES, EDUCATION/LEADERSHIP, AND COUNSELLING.

Funded Amount:

$30,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHILDREN’S CORNER AT ROME, INC.
730 NORTH JAY STREET
ROME, NY  13440
(315) 339-0981

Name of Project Director:

LINDA WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES ASSOCIATED WITH THE START-UP OF AN AFTER SCHOOL PROGRAM AT THE CHILDREN’S CORNER AT ROME, A DAY CARE PROVIDER.

Funded Amount:

$10,000

Requested By:

DESTITO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
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:

ALLEN COHEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL, RECREATIONAL, HEALTH, WELLNESS, AND SOCIAL SERVICE PROGRAMS FOR CHILDREN AND TEENS IN CHINATOWN AND LITTLE ITALY.

Funded Amount:

$117,500

Requested By:

SILVER, YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHINESE-AMERICAN PLANNING COUNCIL, INC.
6022 7TH AVENUE
BROOKLYN, NY  11220
(718) 492-0409

Name of Project Director:

CHANG XIE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES TO THE YOUTH OF THE COMMUNITY. SERVICES INCLUDE YOUTH COUNSELING, JOB READINESS PROGRAM, YOUTH ADVISORY COUNCIL AND YOUTH VOLUNTEER PROGRAM.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHRISTIAN COMMUNITY BENEVOLENT ASSOCIATION, INC.
910 E. 172ND STREET, 4TH FLOOR
BRONX, NY  10460
(718) 617-1010

Name of Project Director:

DOMINGO RODRIGUEZ

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE POSITIVE RECREATIONAL ACTIVITIES FOR YOUTH AND YOUNG ADULTS THROUGH THE DIRECT FUNDING OF EDUCATIONAL ANTI-CRIME AND IN-STATE CULTURAL TRIPS AND PROGRAMS, INCLUDING THE COST OF ADMISSIONS WHERE APPLICABLE.

Funded Amount:

$95,000

Requested By:

DIAZ-R

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CHURCH OF THE HOLY APOSTLES
296 NINTH AVENUE
NEW YORK, NY  10001
(212) 807-6799

Name of Project Director:

JANET GRACEY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE NUTRITIOUS HOT MEALS TO HOMELESS AND HUNGRY PEOPLE IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$16,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CHURCH OF THE SAVIOR
120 CO-OP CITY BOULEVARD, SUITE 6 C
BRONX, NY 10475
(718) 379-4572

Name of Project Director:

REVEREND DOCTOR ROBERT A. SMITH, JR.

Purpose of Project:

FUNDS WILL BE USED TO FOSTER A GREATER SENSE OF SELF-ESTEEM IN CHILDREN THROUGH AWARENESS OF THEIR CULTURES AND FOR THE PURCHASE OF VIDEOS AND INSTRUCTIONAL MATERIALS. PROGRAMS ARE OFFERED TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

   CICERO FALCONS POP WARNER, INC.
   P.O. BOX 1398
   CICERO, NY 13039
   (315) 699-6444

Name of Project Director:

   WILLIAM GOLEMBIESKI

Purpose of Project:

   FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR FOOTBALL AND CHEERLEADING PROGRAM. FUNDS WILL ALSO BE USED TO PURCHASE A DEFIBRILLATOR.

Funded Amount:

   $5,400

Requested By:

   STIRPE

Name of Administering State Agency:

   OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CIRCULO DE LA HISPANIDAD
26 WEST PARK AVENUE
LONG BEACH, NY  11561
(516) 431-1135

Name of Project Director:

SARAH BREWSTER

Purpose of Project:

FUNDS WILL BE USED FOR A PROGRAM THAT SERVES HISPANIC WOMEN OF NASSAU COUNTY WHO ARE VICTIMS OF DOMESTIC VIOLENCE - AGES RANGING FROM 18 TO 70 YEARS.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CITIZEN'S ADVICE BUREAU, INC.
2054 MORRIS AVENUE, THIRD FLOOR
BRONX, NY  10453-3538
(718) 365-0910  25

Name of Project Director:

JUDITH SANTOS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EARLY LEARNING OPPORTUNITIES FOR PRE-SCHOOL CHILDREN, PARENT EDUCATION EXPERIENCES FOR THEIR PARENTS, PREPARE YOUNGSTERS FOR SUCCESS IN SCHOOL, AND STRENGTHEN BONDS BETWEEN PARENTS AND THEIR PRE-SCHOOLERS.

Funded Amount:

$21,000

Requested By:

GREENE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CITIZENS FOR NYC, INC.
305 7TH AVENUE
NEW YORK, NY  10001
(212) 989-0400

Name of Project Director:

PETER KASTMAYER

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT WORKSHOPS FOR GRASSROOT GROUPS THAT NEED TO TACKLE THE PRESSING PROBLEMS IN THEIR COMMUNITY.

Funded Amount:

$3,000

Requested By:

TOWNS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CITIZENS FOR NYC, INC.
305 SEVENTH AVENUE, 15TH FLOOR
NEW YORK, NY  10001
(212) 989-0909  559

Name of Project Director:

EDWARD HANCOX

Purpose of Project:

FUNDS WILL BE USED TO GIVE GRASSROOTS GROUPS AND COMMUNITY MEMBERS TOOLS TO BECOME ORGANIZED THROUGH WORKSHOPS WHICH INCLUDE; WORKING WITH THE MEDIA, FUNDRAISING AND PROPOSAL WRITING.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CITIZENS FOR NYC, INC.
305 SEVENTH AVENUE
NEW YORK, NY  10001
(212) 989-0909

Name of Project Director:

ISABEL CUERVO

Purpose of Project:

FUNDS WILL BE USED TOWARD CREATING A PROGRAM TO HELP DEVELOP GOOD LEADERS IN THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CITY ISLAND BASEBALL CLUB, INC.
P.O. BOX 91, 275 FORDHAM PLACE
BRONX, NY 10464
(718) 885-9296

Name of Project Director:

ROBERT WHELAN

Purpose of Project:

FUNDS WILL BE USED TO HELP PURCHASE UNIFORMS, BASEBALLS AND OTHER NECESSARY EQUIPMENT.

Funded Amount:

$1,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
CITY THEATER PROJECT, INC.
170 TIER STREET
BRONX, NY  10464
(718) 907-0418

NICHOLA GARR

FUNDS WILL BE USED TO PROMOTE YOUTH THEATER AMONG COMMUNITY YOUTHS.

$5,000

BENEDETTO

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CLAREMONTE NEIGHBORHOOD CENTERS, INC.
489 EAST 169TH STREET
BRONX, NY 10456
(718) 588-1000 201

Name of Project Director:

ABRAHAM JONES

Purpose of Project:

FUNDS WILL BE USED FOR THE YOUTH JOURNALISM AND COMMUNITY OUTREACH PROGRAM.

Funded Amount:

$7,500

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CLEVELAND HILL LITTLE LEAGUE, INC.
7 COMMUNITY DRIVE
CHEEKTOWAGA, NY 14225
(716) 895-6452

Name of Project Director:

FRANK JONES

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FENCING FOR THE OUTFIELD.

Funded Amount:

$1,000

Requested By:

GABRYSZAK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CLIFTON PARK WORLD SERIES COMMITTEE, INC.
P.O. BOX 1001
CLIFTON PARK, NY  12065
(518) 852-7528

Name of Project Director:

BILL BUTLER

Purpose of Project:

FUNDS WILL BE USED FOR DUGOUT CONSTRUCTION/IMPROVEMENTS ON THE FIELDS.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CLUB ATLETICO MEXICANO DE NUEVA YORK, INC.
P.O. BOX 180445
BROOKLYN, NY  11218-0445
(718) 871-1021

Name of Project Director:

ADEN LAZERO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ANNUAL CINCO DE MAYO 5K RUN EVENT.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CLUSTER
20 SOUTH BROADWAY
YONKERS, NY 10701
(914) 963-6440

Name of Project Director:

TONI VOLCHOK

Purpose of Project:

FUNDS WILL BE USED FOR DAY CAMP

Funded Amount:

$5,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COALITION AGAINST CHILD ABUSE & NEGLECT
229 SEVENTH STREET, SUITE 00
GARDEN CITY, NY 11530
(516) 747-2966

Name of Project Director:

CYNTHIA SCOTT

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF ANTI PREDATOR ASSISTANCE PROGRAM

Funded Amount:

$5,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COALITION AGAINST CHILD ABUSE & NEGLECT
229 SEVENTH STREET, SUITE 00
GARDEN CITY, NY 11530
(516) 747-2966

Name of Project Director:

ANTHONY ZENKUS

Purpose of Project:

FUNDS WILL BE USED FOR COMPUTER INTERNET SAFETY AWARENESS PROGRAMS

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COALITION AGAINST CHILD ABUSE & NEGLECT (CCAN)
229 SEVENTH STREET, SUITE 00
GARDEN CITY, NY 11530
(516) 747-2966

Name of Project Director:

ANTHONY ZENKUS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF PROGRAMS THAT THE COALITION AGAINST CHILD ABUSE & NEGLECT PROVIDES

Funded Amount:

$1,500

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COALITION AGAINST CHILD ABUSE AND NEGLECT
229 SEVENTH STREET
GARDEN CITY, NY 11530
(516) 747-2966

Name of Project Director:

CYNTHIA SCOTT

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT VARIOUS AWARENESS PROGRAMS,
SEMINARS AND OTHER INFORMATION RELATED TO KEEPING PARENTS
INFORMED ABOUT CHILD ABUSE

Funded Amount:

$5,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COALITION FOR COMMUNITY WELL-BEING, INC.
230 HILTON AVENUE, SUITE 217
HEMPSTEAD, NY 11550
(516) 867-2568

Name of Project Director:

DR. AUBREY LEWIS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF PROGRAMS THAT THE
COALITION FOR COMMUNITY WELL-BEING PROVIDES

Funded Amount:

$1,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COALITION FOR THE HOMELESS, INC.
129 FULTON STREET
NEW YORK, NY 10038
(212) 776-2000

Name of Project Director:

MARY BROSNAHAN SULLIVAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE UPDATED AND UPGRADED TECHNOLOGY SYSTEMS TO BETTER SERVE CLIENTS.

Funded Amount:

$65,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COHOES LITTLE LEAGUE BASEBALL, INC.
P.O. BOX 652
COHOES, NY 12047
(518) 857-4167

Name of Project Director:

SEAN CONNORS

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE FACILITIES AT COHOES LITTLE LEAGUE WHICH BENEFITS OVER 250 KIDS IN THE CITY.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COLONIAL YOUTH & FAMILY SERVICES
P.O. BOX 391
MASTIC BEACH, NY 11951
(631) 281-4461

Name of Project Director:

STEVEN LASKOE

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH SERVICES

Funded Amount:

$2,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMITE DEL DOMINICANO EN EL EXTERIOR, INC.
P.O. BOX 623
HAMILTON STATION, NY 10031
(718) 588-9018

Name of Project Director:

MAXIMO PADILLA

Purpose of Project:

FUNDS WILL BE USED TO SPONSOR AN ANNUAL CELEBRATION OF "DIA DEL DOMINICANO EN EL EXTERIOR" PROMOTING CULTURAL EXCHANGE.

Funded Amount:

$2,500

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMITTEE FOR HISPANIC CHILDREN AND FAMILIES, INC.
110 WILLIAM STREET, SUITE #1802
NEW YORK, NY  10038
(212) 206-1090

Name of Project Director:

ELBA MONTALVO

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTER SCHOOL PROGRAM, WHICH WILL IMPROVE THE QUALITY OF LIFE FOR LATINO CHILDREN AND FAMILIES.

Funded Amount:

$3,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY ACTION ORGANIZATION OF ERIE COUNTY, INC.
70 HARVARD PLACE
BUFFALO, NY  14209
(716) 881-5150

Name of Project Director:

L. NATHAN HARE

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL AND EDUCATIONAL SERVICES
FOR YOUTH AFTER SCHOOL AND DURING THE SUMMER.

Funded Amount:

$10,000

Requested By:

PEOPLES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY ACTION PROGRAM OF ROCKLAND COUNTY, INC.
176 NORTH MAIN STREET
SPRING VALLEY, NY 10977
(845) 352-4167

Name of Project Director:

VIDETTA HANLEY

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE SISTERHOOD, PROVIDE A SAFE HAVEN FOR DISCUSSION, AND MODEL POSITIVE BEHAVIOR FOR YOUNG WOMEN.

Funded Amount:

$5,000

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY ACTION PROGRAM OF ROCKLAND COUNTY, INC.
176 N. MAIN STREET
SPRING VALLEY, NY 10977
(845) 352-4167

Name of Project Director:

VEDETA HANLEY

Purpose of Project:

FUNDS WILL BE USED TO ENGAGE GIRLS IN POSITIVE GROUPS WHICH PROMOTE SISTERHOOD, SELF-ESTEEM, AND PROVIDE A SAFE HAVEN FOR DISCUSSION AS A DETERRENT TO GANG INVOLVEMENT AND OTHER NEGATIVE BEHAVIOR.

Funded Amount:

$7,000

Requested By:

ZEBROWSKI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COMMUNITY ACTION PROJECT
890 FLATBUSH AVENUE
BROOKLYN, NY  11226
(718) 287-4334

Name of Project Director:

JESSICA DIAS

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY OUTREACH, PROVIDING TRAININGS AND LEADERSHIP DEVELOPMENT SKILLS TO PARENTS, TEACHERS, SCHOOL ADMINISTRATIONS AND CONCERNED INDIVIDUALS IN THE COMMUNITIES OF FLATBUSH.

Funded Amount:

$3,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY ASSOCIATION OF THE EAST HARLEM TRIANGLE, INC.
145 EAST 126TH STREET
NEW YORK, NY 10035
(646) 672-1503

Name of Project Director:

MIRIAM FALCON LOPEZ

Purpose of Project:

FUNDS WILL BE USED TO OFFER YOUTH BETWEEN THE AGES OF 8-12 YEARS, TUTORIAL SERVICES, EDUCATION, AND TRAINING ABOUT ENVIRONMENTAL ISSUES, I.E. PLANT LIFE. FUNDS WILL ALSO BE USED TO COVER THE COSTS OF FIELD TRIPS WITHIN NEW YORK.

Funded Amount:

$10,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY AWARENESS NETWORK FOR A DRUG-FREE LIFE AND ENVIRONMENT, INC.
20 NORTH MAIN STREET, SUITE 301
NEW CITY, NY 10956
(845) 634-6677

Name of Project Director:

JOANN GOODMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PREVENTION COUNSELING FOR ORANGETOWN RESIDENTS WHO CAN'T REACH TAPPAN ZEE HIGH CANDLE CENTRAL OFFICE. THE PROGRAM WILL OFFER SHORT TERM COUNSELING.

Funded Amount:

$4,000

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COMMUNITY CARE NETWORK OF NICHOLS
P.O. BOX 100
NICHOLS, NY 13812
(607) 731-3100

Name of Project Director:

JEAN STARK

Purpose of Project:

FUNDS WILL BE USED FOR PURCHASE OF OFFICE EQUIPMENT (COMPUTER, COPIER, ETC.) AND TRANSPORTATION EXPENSES

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COMMUNITY CENTER OF PLAINVIEW-OLD BETHPAGE  
P.O. BOX 334  
PLAINVIEW, NY  11803  
(516) 935-6243

Name of Project Director:

EUGENE GOIDELL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND RECREATIONAL ACTIVITIES TO YOUTH, PARENTS AND SENIORS.

Funded Amount:

$2,750

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY CENTER OF THE ROCKAWAY PENINSULA
257 BEACH 17TH STREET
FAR ROCKAWAY, NY 11691
(718) 868-2904

Name of Project Director:

JOEL KAPLAN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN PLANNING AND IMPLEMENTATION OF RECREATIONAL OPPORTUNITIES FOR ROCKAWAY YOUTH PROGRAMS, INCLUDING IN-STATE TRANSPORTATION FOR SENIORS AND YOUTH.

Funded Amount:

$4,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY FOOD BANK
108 BLEECKER STREET
UTICA, NY  13501
(315) 733-0346

Name of Project Director:

KIM STRONG

Purpose of Project:

FUNDS WILL BE USED FOR CAPITAL IMPROVEMENTS, INCLUDING ASBESTOS REMOVAL FOR THE NEW HEADQUARTERS AND DISTRIBUTION CENTER FOR THE COMMUNITY FOOD BANK OF GREATER UTICA, WHICH PROVIDES FOOD FOR NEEDY RESIDENTS OF THE MOHAWK VALLEY REGION.

Funded Amount:

$15,000

Requested By:

DESTITO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY LEADERSHIP DEVELOPMENT PROGRAM OF
NIAGARA COUNTY, INC.
4455 PORTER ROAD
NIAGARA FALLS, NY  14305
(716) 286-7913

Name of Project Director:

RICHARD LASKOWSKI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTER SOFTWARE AND OTHER
RESOURCES TO CREATE AND MAINTAIN A DATA BANK TO BECOME A
CLEARINGHOUSE FOR BOARDMANSHIP IN NIAGARA COUNTY.

Funded Amount:

$2,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY MATERNITY SERVICES
27 NORTH MAIN AVENUE
ALBANY, NY  12203
(518) 482-8836

Name of Project Director:

ANNE MARIE COUSER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL FENCING TO ENCLOSE THE PLAY YARD OF THE FARRANO RESIDENTIAL CENTER FOR CHILDREN OPERATED BY COMMUNITY MATERNITY SERVICES.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY PREVENTION ALTERNATIVES FOR FAMILIES IN CRISIS
NATURE/NURTURE COUNSELING CENTER, INC. 143-40 41ST AVENUE
FLUSHING, NY 11355
(718) 647-2694

Name of Project Director:

MARTHA FLORES-VAZQUEZ

Purpose of Project:

FUNDS WILL BE USED TO ASSIST INDIVIDUALS WITH DISABILITIES, SUCH AS,
SUBSTANCE ABUSE, MENTAL HEALTH, VICTIMS OF DOMESTIC VIOLENCE
AND THE HOMELESS POPULATION.

Funded Amount:

$2,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COMMUNITY RESOURCES
3450 VICTORY BOULEVARD
STATEN ISLAND, NY 10314
(718) 447-5200

Name of Project Director:

DANA T. MAGEE

Purpose of Project:

FUNDS WILL BE USED FOR COMPREHENSIVE REHAB SERVICES FOR CHILDREN.

Funded Amount:

$5,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COMMUNITY SERVICE SOCIETY OF NEW YORK
105 EAST 22ND STREET
NEW YORK, NY 10010
(212) 254-8900

Name of Project Director:

DAVID JONES

Purpose of Project:

FUNDS WILL BE USED FOR THE EXPERIENCE CORPS PROJECT TO HELP CHILDREN AT-RISK FOR ACADEMIC FAILURE.

Funded Amount:

$3,000

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COMMUNITY WORKS
55 WEST END AVENUE
NEW YORK, NY  10023
(212) 459-1857

Name of Project Director:

BARBARA HOROWITZ

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY WORKS, WHICH PROVIDES INNOVATIVE PUBLIC ARTS EDUCATION PROGRAMMING TO APPROXIMATELY 200,000 PUBLIC SCHOOL STUDENTS IN OVER 500 PUBLIC SCHOOLS THROUGHOUT THE FIVE BOROUGHS.

Funded Amount:

$5,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CONCERNED CITIZENS OF BENSONHURST
8616 19TH AVENUE
BROOKLYN, NY  11214
(718) 688-0097

Name of Project Director:

ADELINE MICHAELS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE GROUP’S MONTHLY MEETINGS. MEETINGS COVER A WIDE VARIETY OF COMMUNITY ISSUES SUCH AS PUBLIC SAFETY CONCERNS, ENVIRONMENTAL CONCERNS, SANITATION, HEALTH, ETC. FUNDS WILL ALSO BE USED FOR POSTAGE, REFRESHMENTS, ETC.

Funded Amount:

$3,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CONESUS FOOD PANTRY
6176 ELM STREET
CONESUS, NY 14435
(585) 346-5581

Name of Project Director:

JEAN SPARKS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH FOOD PANTRY

Funded Amount:

$1,000

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CONEY ISLAND GENERATION GAP
2904 NEPTUNE AVENUE
BROOKLYN, NY 11224
(718) 975-0447

Name of Project Director:

PAMELA HARRIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AMUSEMENT RIDES FOR THE SUMMER CELEBRATION. PROGRAM IS OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CONEY ISLAND GOSPEL ASSEMBLY
2828 NEPTUNE AVENUE
BROOKLYN, NY  11224
(718) 996-9301

Name of Project Director:

RODERICK HULLA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL PROGRAMS FOR CHILDREN. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CONGREGATION CHESED SHEL EMES, INC.
1224 52ND STREET
BROOKLYN, NY  11219
(718) 436-2121

Name of Project Director:

MENDEL ROSENBERG

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE BURIALS FOR NEEDY, AS WELL AS TO FEED FAMILY AND PATIENTS IN VARIOUS HOSPITALS. THE PROGRAM IS OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$27,000

Requested By:

HIKIND

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CONGREGATION OHR MOSHE, INC.
170-16 73RD AVENUE
FLUSHING, NY  11366
(718) 591-4888

Name of Project Director:

RABBI ASHER SCHECHLTTER

Purpose of Project:

FUNDS WILL BE USED TO INCULCATE WITHIN THE YOUTH OF THE COMMUNITY RESPONSIBILITY AND HEALTHY ATTITUDES TOWARD EACH OTHER AND THOSE NEEDY IN THE COMMUNITY. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CONGRESS OF ITALIAN OF AMERICAN ORGANIZATIONS
57 PARK HILL AVENUE
YONKERS, NY 10701
(914) 423-1371

Name of Project Director:

JIM CILIBERTI

Purpose of Project:

Funds will be used for operating community outreach program

Funded Amount:

$7,500

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CONNECT, INC.
P.O. BOX 20217, GREELEY SQUARE STATION
NEW YORK, NY 10001
(212) 683-0015

Name of Project Director:

MARY BARBER

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP CREATIVE, PREVENTIVE, COMMUNITY BASED SOLUTIONS TO THE PROBLEM OF FAMILY VIOLENCE.

Funded Amount:

$2,500

Requested By:

O’DONNELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CO-OP CITY LITTLE LEAGUE, INC.
P.O. BOX 215, CO-OP CITY STATION
BRONX, NY  10457
(718) 379-8242

Name of Project Director:

HECTOR AYALA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW BALLS AND BATS AND OTHER NEEDED EQUIPMENT.

Funded Amount:

$1,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CO-OP CITY TENNIS CLUB
140 ASCH LOOP, #20 G
BRONX, NY  10475
(718) 671-4437

Name of Project Director:

MILTON ALEXANDER

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY THE COSTS OF TENNIS INSTRUCTIONS AT TENNIS CLINICS.

Funded Amount:

$2,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COPIAGUE YOUTH COUNCIL, INC.
P.O. BOX 247, 650 GREAT NECK ROAD
COPIAGUE, NY 11726
(631) 841-1775

Name of Project Director:

CAROLE J. WILDER

Purpose of Project:

FUNDS WILL BE USED FOR OPERATIONS AND EXPENSES OF YOUTH SERVICES.

Funded Amount:

$5,000

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COPIAGUE YOUTH LEAGUES, INC.
24 COLONIAL ROAD
COPIAGUE, NY 11726
(631) 598-2776

Name of Project Director:

MICKEY KANE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND FOR THE OPERATION OF THE YOUTH RECREATION LEAGUE.

Funded Amount:

$4,000

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COPIN FOUNDATION, INC.
5622 BUFFALO AVENUE
NIAGARA FALLS, NY 14304
(716) 283-5622

Name of Project Director:

SHARON MCGRATH

Purpose of Project:

FUNDS WILL BE USED TO MAKE EXTENSIVE REPAIRS TO COPIN'S FRONT PORCH.

Funded Amount:

$3,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CORNELL COOPERATIVE EXTENSION OF FULTON AND MONTGOMERY COUNTIES
55 EAST MAIN STREET #210
JOHNSTOWN, NY 12095
(518) 762-3909

Name of Project Director:

SARAH WEST

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE HEALTHY EATING AND PHYSICAL ACTIVITY AMONG LOCAL YOUTH AND FAMILIES THROUGH HANDS-ON EDUCATIONAL ACTIVITIES.

Funded Amount:

$5,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CORNELL COOPERATIVE EXTENSION OF SUFFOLK COUNTY
423 GRIFFING AVENUE
RIVERHEAD, NY 11901
(631) 727-7850

Name of Project Director:

PAT HUBBARD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FACILITY FOR PROCESSING VENISON FOR APPROVED STATEWIDE VENISON DONATION PROGRAM TO FEED NEEDY FAMILIES.

Funded Amount:

$20,000

Requested By:

ALESSI, FIELDS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CORNELL COOPERATIVE EXTENSION OF SUFFOLK COUNTY
423 GRIFFEN AVENUE, SUITE 100
RIVERHEAD, NY 11901
(631) 727-7850 306

Name of Project Director:

THOMAS WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE VENISON TO HUNGRY PERSONS IN SUFFOLK COUNTY AND TO PROVIDE A MECHANISM TO HELP FARMERS WITH DEER.

Funded Amount:

$20,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COUNCIL OF JEWISH ORGANIZATIONS OF FLATBUSH, INC.
1550 CONEY ISLAND AVENUE
BROOKLYN, NY 11230
(718) 377-2900

Name of Project Director:

MARTIN KAHAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OUTREACH TO SINGLE HEADS-OF-
HOUSEHOLDS TO ENABLE THEM TO OBTAIN APPROPRIATE ENTITLEMENTS
AND REFERRALS. PROGRAMS ARE OFFERED ON A NON-SECTARIAN BASIS.

Funded Amount:

$6,000

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COUNCIL OF JEWISH ORGANIZATIONS OF FLATBUSH, INC.
1550 CONEY ISLAND AVENUE
BROOKLYN, NY  11230
(718) 377-2900

Name of Project Director:

RUTH PARIS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT WORK WITH HOMEBOUND, FRAIL ELDERLY AND HANDICAPPED IN THE COMMUNITY, ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

JACOBS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COUNCIL OF JEWISH ORGANIZATIONS OF FLATBUSH, INC.
1550 CONEY ISLAND AVENUE
BROOKLYN, NY  11230
(718) 377-2900  226

Name of Project Director:

YECEHZKEL PIKUS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A SIGN LANGUAGE INTERPRETER FOR A VARIETY OF COMMUNITY EVENTS.

Funded Amount:

$5,000

Requested By:

HIKIND

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COUNCIL OF JEWISH ORGANIZATIONS OF FLATBUSH, INC.
1550 CONEY ISLAND AVENUE
BROOKLYN, NY  11230
(718) 377-2900

Name of Project Director:

RABBI YECHEZKEL PIKUS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST NEEDY, SOCALLY ISOLATED SINGLE HEADS OF HOUSEHOLDS IN OBTAINING SOCIAL SERVICES, JOB TRAINING AND EMPLOYMENT, AS WELL AS, INTERGRATING THEM INTO THE FLATBUSH/MIDWOOD COMMUNITY. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$7,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

COUNCIL OF JEWISH ORGANIZATIONS OF FLATBUSH, INC.
1550 CONEY ISLAND AVENUE
BROOKLYN, NY 11230
(718) 377-2900

Name of Project Director:

SUSAN LASHER

Purpose of Project:

FUNDS WILL BE USED FOR A PROGRAM THAT TARGETS NEEDY, SINGLE HEADS OF HOUSEHOLDS AND PROVIDES THEM WITH THE RESOURCES NECESSARY IN OBTAINING THE SOCIAL SERVICES TO WHICH THEY MAY BE ENTITLED AND ALSO REFERS THEM TO APPROPRIATE AGENCIES. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COUNCIL OF JEWISH ORGANIZATIONS OF STATEN ISLAND, INC.
984 POST AVENUE
STATEN ISLAND, NY 10302
(718) 720-4047

Name of Project Director:

BRACHA CABOT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPLEMENTAL FOOD TO NEEDY FAMILIES, CHILDREN, SENIORS, HOMEBOUND & IMMIGRANTS. NUTRITIONAL COUNSELING ASSISTANCE WITH ENTITLEMENTS & PROVIDE REFERRALS SERVICES FOR EMERGENCY HOUSING, MEDICAL, JOB COUNSELING & TRAINING. PANTRY SERVES ALL WITHOUT DISCRIMINATION, WORKS WITH OTHER COMMUNITY AGENCIES AND ORGANIZATIONS IN THE EFFORT TO ERRADICATE HUNGER AND HARDSHIP ON STATEN ISLAND.

Funded Amount:

$5,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
COUNCIL OF LEADERS OF NEIGHBORHOOD YOUTH, INC. (COLONY)
611 MINNEFORD AVENUE
BRONX, NY  10464
(718) 885-1197

TOM McMAHON

FUNDS WILL BE USED TO HELP SPONSOR AFTER SCHOOL AND OTHER PROGRAMS (BASKETBALL, SOFTBALL, ETC.) FOR CHILDREN.

$3,000

BENEDETTO

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CRADLE BEACH CAMP, INC.
8038 OLD LAKESHORE ROAD
ANGOLA, NY  14006
(716) 549-6307

Name of Project Director:

CARA STILLMAN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING EXPENSES OF A PROGRAM THAT SERVES DISABLED AND DISADVANTAGED CHILDREN BETWEEN 9 AND 16 FROM WNY IN A RESIDENTIAL SUMMER CAMP PROGRAM.

Funded Amount:

$4,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CROWN HEIGHTS JEWISH COMMUNITY COUNCIL, INC.
387 KINGSTON AVENUE
BROOKLYN, NY  11225
(718) 778-8808

Name of Project Director:

SARA KARASIK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ASSISTANCE TO FAMILIES IN STRESS AND IN DANGER OF BECOMING DYSFUNCTIONAL AND/OR ABUSIVE. WITH EARLY INTERVENTION AND THE GUIDANCE OF TRAINED SOCIAL WORKERS AND VOLUNTEERS, FAMILIES BECOME BETTER FUNCTIONING.

Funded Amount:

$82,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CYPRESS TENANTS' ASSOCIATION, INC.
1266 SUTTER AVENUE, #1C
BROOKLYN, NY  11208
(718) 348-6481

Name of Project Director:

DWAYNE FAISON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE REFRESHMENTS FOR RECREATIONAL PROGRAM, TROPHIES, AWARDS, AND T-SHIRTS FOR TENANTS.

Funded Amount:

$2,000

Requested By:

GORDON-D

Name of Administering State Agency:

DIVISION OF HOUSING AND COMMUNITY RENEWAL
Legal Name, Address, and Telephone Number:

CROWN HEIGHTS JEWISH COMMUNITY COUNCIL, INC.
387 KINGSTON AVENUE
BROOKLYN, NY  11225
(718) 778-8808

Name of Project Director:

PHYLLIS MINTZ

Purpose of Project:

FUNDS WILL BE USED TO HELP FAMILIES IN DISTRESS. EARLY INTERVENTION AND THE GUIDANCE OF TRAINED STAFF AND VOLUNTEERS WILL ASSIST ALL FAMILIES IN THE COMMUNITY. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$7,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CROWN HEIGHTS YOUTH COLLECTIVE, INC.
113 ROGERS AVENUE
BROOKLYN, NY   11216-3913
(718) 756-7600

Name of Project Director:

RICHARD GREEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR YOUTH.

Funded Amount:

$5,000

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CROWN HEIGHTS YOUTH COLLECTIVE, INC.
113 ROGERS AVENUE
BROOKLYN, NY  11216
(718) 756-1922

Name of Project Director:

RICHARD GREEN

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH OF PROGRAMS FOR DISCONNECTED YOUTH.

Funded Amount:

$5,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CUB SCOUT PACK #211
75 REYNOLD STREET
BRONX, NY  10464
(718) 885-2169

Name of Project Director:

ANGELO BELLOCCHIO

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY COSTS OF EDUCATIONAL PROGRAMS
AND IN-STATE TRIPS.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

CYO-MISSION OF THE IMMACULATE VIRGIN
6451 HYLAN BOULEVARD
STATEN ISLAND, NY  10309
(718) 317-2255

Name of Project Director:

TONY NAPOLITANO

Purpose of Project:

FUNDS WILL BE USED TO COMPLETE THE WATER PLAYGROUND WHICH IS HANDICAPPED ACCESSIBLE, AND WILL SERVICE ALL OF THE CHILDREN OF STATEN ISLAND.

Funded Amount:

$10,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

DAYCARE AND CHILD DEVELOPMENT COUNCIL OF TOMPKINS COUNTY, INC.
609 WEST CLINTON STREET
ITHACA, NY 14850
(607) 273-0259

Name of Project Director:

SUE DALE-HALL

Purpose of Project:

FUNDS WILL BE USED TO OFFER ASSISTANCE FOR CHILDCARE WHEN A FAMILY FACES A FINANCIAL CRISIS.

Funded Amount:

$11,000

Requested By:

LIFTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

DIASPORA COMMUNITY SERVICES, INC.
182 FOURTH AVENUE
BROOKLYN, NY 11217
(718) 399-0200

Name of Project Director:

CARINE JOCELYN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SERVICES TO POOR, IMMIGRANT WOMEN INCLUDING ESL CLASSES, LIFE SKILLS WORKSHOPS AND CASE MANAGEMENT.

Funded Amount:

$5,000

Requested By:

JACOBS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

DIRECTIONS FOR OUR YOUTH, INC.
21 WEST 86TH STREET, BSM2
NEW YORK, NY  10024
(212) 362-4020

Name of Project Director:

CARY GOODMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LIFE SKILLS FOR MIDDLE SCHOOL STUDENTS.

Funded Amount:

$7,500

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

DOMINICAN WOMEN'S DEVELOPMENT CENTER
519 W. 189TH STREET GROUP CENTER
NEW YORK, NY 10040
(212) 568-6616

Name of Project Director:

MIREYA CRUZ

Purpose of Project:

Funds will be used to provide help to victims of domestic violence, educating and promoting the March of the Brides’ project.

Funded Amount:

$5,000

Requested By:

ESPAILLAT, FARRELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

DOMINICAN WOMEN’S DEVELOPMENT CENTER
519 WEST 189TH STREET, GROUP CENTER
NEW YORK, NY  10040
(212) 568-6616

Name of Project Director:

MIREYA CRUZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HELP TO VICTIMS OF DOMESTIC VIOLENCE, EDUCATING AND PROMOTING THE MARCH OF THE BRIDES’ PROJECT.

Funded Amount:

$2,500

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

DOMINICO AMERICAN SOCIETY OF QUEENS, INC.
40-27 97TH STREET
CORONA, NY  11368
(718) 457-5395

Name of Project Director:

JOSE TEJADA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ORGANIZATION’S PROGRAMMATIC STRUCTURE IN PROVIDING ENGLISH AS A SECOND LANGUAGE CLASSES, COMPUTER TRAINING, CITIZENSHIP AND CIVIC INSTRUCTION, AS WELL AS AN AFTER SCHOOL PROGRAM FOR CHILDREN AND GED CLASSES. FUNDS WILL ALSO BE USED TO PURCHASE EQUIPMENT SUCH AS COMPUTERS, ETC.

Funded Amount:

$7,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

DOMINICO AMERICAN SOCIETY OF QUEENS, INC.
40-27 97TH STREET
CORONA, NY 11368
(917) 751-8482

Name of Project Director:

CARLOS SUAREZ

Purpose of Project:

FUNDS WILL BE USED TO OFFER EDUCATIONAL ASSISTANCE TO LOW-INCOME IMMIGRANTS. THE PROGRAM INCLUDES ENGLISH AS A SECOND LANGUAGE INSTRUCTION AND TRAINING CITIZENSHIP CIVIC CLASSES.

Funded Amount:

$15,000

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

DOROT, INC.
171 WEST 85TH STREET
NEW YORK, NY 10024
(917) 441-3718

Name of Project Director:

ANDREW MARTIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE HOMELESSNESS PREVENTION PROGRAM.

Funded Amount:

$2,500

Requested By:

BING, ROSENTHAL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
**Legal Name, Address, and Telephone Number:**

DUANESBURG LITTLE LEAGUE, INC.
P.O. BOX 184
DUANESBURG, NY 12056
(518) 875-6113

**Name of Project Director:**

BOB POWERS

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE A ZOLL AED PLUS, AUTOMATED EXTERNAL DEFIBRILLATOR FOR DUANESBURG LITTLE LEAGUE TO INCREASE SAFETY AT FIELDS.

**Funded Amount:**

$2,000

**Requested By:**

TONKO

**Name of Administering State Agency:**

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

DUTCH SETTLERS SOCIETY OF ALBANY
23 DRESDEN COURT
ALBANY, NY  12203
(518) 456-7202

Name of Project Director:

JOHN G. WEMPLE, JR.

Purpose of Project:

FUNDS WILL BE USED TO HELP ESTABLISH COMPUTER GENEALOGY RECORDS OF THE FOUNDING ALBANY DUTCH SETTLERS AND FAMILIES.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

DWARF-GIRAFFE ATHLETIC LEAGUE OF WHITESTONE, INC.
140-50 15 ROAD
WHITESTONE, NY  11357
(718) 746-1539

Name of Project Director:

GENE BRENnan

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT ATHLETIC PROGRAMS IN ROLLER HOCKEY, BASEBALL AND BASKETBALL FOR BOYS AND GIRLS OF NORTHEAST QUEENS: TO IMPROVE THE PHYSICAL CONDITION OF PLAYING FACILITIES.

Funded Amount:

$3,500

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

DYNAMIC YOUTH COMMUNITY, INC.
1830 CONEY ISLAND AVENUE
BROOKLYN, NY 11230
(718) 376-7923

Name of Project Director:

KAREN CARLINI

Purpose of Project:

FUNDS WILL BE USED TO TRANSPORT ADOLESCENTS AND YOUTH TO FAMILY VISITS, COURT APPEARANCES, DOCTOR APPOINTMENTS, ETC.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EAST BUSHWICK COMMUNITY COALITION
61 COOPER STREET
BROOKLYN, NY 11221
(718) 628-3012

Name of Project Director:

FRANK BOSWELL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TRAINING AND SEMINARS ON COMMUNITY REVITALIZATION.

Funded Amount:

$12,000

Requested By:

TOWNS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EAST HAMPTON DAY CARE CENTER
P.O. BOX 63
EAST HAMPTON, NY 11937
(631) 324-5560

Name of Project Director:

NANCY GOELL

Purpose of Project:

FUNDS WILL BE USED FOR CHILD CARE SERVICES

Funded Amount:

$5,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EAST HIGHWAY LITTLE LEAGUE, INC.
3419 AVENUE S
BROOKLYN, NY  11234
(718) 382-4973

Name of Project Director:

CHARLES T. BRANDQUIST

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SUPPLIES FOR THE LITTLE LEAGUE, INCLUDING BASEBALLS, BATS, UNIFORMS AND OTHER MISCELLANEOUS EQUIPMENT.

Funded Amount:

$1,500

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EAST ROCHESTER YOUTH ACTIVITY CENTER, INC.
242 WEST COMMERCIAL STREET
EAST ROCHESTER, NY 14445
(585) 586-1003

Name of Project Director:

BARBARA M.F. MAINE

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE YOUTH DEVELOPMENT PROGRAM AND CONTINUE TO PROVIDE TUTORING FOR STUDENTS FOR THE SAT'S AND OTHER STANDARDIZED TESTS. FUNDS WILL ALSO BE USED TO HELP STUDENTS WORK ON THEIR CAREER GOALS.

Funded Amount:

$5,000

Requested By:

KOON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EAST SIDE NEIGHBORHOOD RECREATION CENTER
DBA HOPE 7 COMMUNITY CENTER, 596 PAULING AVENUE
TROY, NY 12180
(518) 272-8029

Name of Project Director:

PHYLLIS P. SANDROW

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE SERVICES FOR THE PRE-SCHOOL, AFTER SCHOOL, AND SUMMER DAY CAMP PROGRAMS, STOCK FOOD PANTRY, AND VARIOUS COMMUNITY OUTREACH PROJECTS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EASTERN NEW YORK YOUTH SOCCER ASSOCIATION, INC.
25 BRYAN STREET
STATEN ISLAND, NY 10307
(718) 948-7744

Name of Project Director:

SAL RAPAGLIA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH WITH THE VALUES AND EXPERIENCES OF SOCCER. YOUTH WILL BE GIVEN TRAINING AND AN OPPORTUNITY TO PLAY SOCCER ON TEAMS AND TO BE PROVIDED WITH THE NECESSARY EQUIPMENT, UNIFORMS, ETC.

Funded Amount:

$2,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EASTPORT SOUTH MANOR SPORTS ASSOCIATION
P.O. BOX 701
MANORVILLE, NY  11949
(631) 874-3827

Name of Project Director:

MARK DANOWSKI

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP THE PLAYGROUND FOR CAMP-AGED CHILDREN.

Funded Amount:

$2,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EDISON EXPLORATORIUM, INC.
P.O. BOX 1417
SCHENECTADY, NY   12301
(518) 372-8425

Name of Project Director:

CLAUDE SEWARD

Purpose of Project:

FUNDS WILL BE USED FOR THE ENTRANCE ENHANCEMENT FOR THE EDISON EXPLORATORIUM.

Funded Amount:

$10,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EDITH AND CARL MARKS JEWISH COMMUNITY HOUSE OF BENSONHURST, INC.
7802 BAY PARKWAY
BROOKLYN, NY 11214
(718) 331-6800

Name of Project Director:

HOWARD WASSERMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES IN THE AREAS OF EDUCATION AND SOCIAL SERVICES FOR THE ENTIRE COMMUNITY SUCH AS ASSISTING WITH HEOP, SOCIAL SECURITY, STAR PROGRAM, STATE PROGRAMS, COMMUNITY SERVICES AND VETERANS EXEMPTIONS.

Funded Amount:

$2,000

Requested By:

ABBATE, COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EDITH AND CARL MARKS JEWISH COMMUNITY HOUSE OF BENSONHURST, INC.
7802 BAY PARKWAY
BROOKLYN, NY 11214
(718) 331-6800

Name of Project Director:

LYUVBOB MIKITYANSKY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CITIZENSHIP CLASSES, LEGAL ASSISTANCE, PERTAINING TO APPLICATIONS FOR CITIZENSHIP, JOB PLACEMENT, AND VOCATIONAL COUNSELING. EMERGENCY ASSISTANCE IS ALSO AVAILABLE FOR THOSE, MOSTLY SENIORS, WHO NEED IT. SERVICES ARE AVAILABLE TO ANYONE IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$9,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EDUCATIONAL ALLIANCE, INC.
197 EAST BROADWAY
NEW YORK, NY  10002
(212) 780-2300

Name of Project Director:

MARION LAZER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH OUTREACH WITHIN THE COMMUNITY.

Funded Amount:

$113,500

Requested By:

GLICK, SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EDUCATIONAL ALLIANCE, INC.
197 EAST BROADWAY
NEW YORK, NY  10002
(212) 475-2210

Name of Project Director:

MARION LAZER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATION AND INTERVENTION SUPPORT TO CHILDREN, ADULTS, AND FAMILIES FROM LOWER EAST SIDE COMMUNITIES WHO ARE NOT ELIGIBLE FOR GOVERNMENTALLY SUPPORTED SERVICES (SEVERAL LOCATIONS).

Funded Amount:

$176,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EDUCATIONAL ALLIANCE, INC.
197 EAST BROADWAY
NEW YORK, NY 10002
(212) 475-2210

Name of Project Director:

ROBIN BERNSTEIN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING EXPENSES, INCLUDING, BUT NOT LIMITED TO PROVIDING EDUCATIONAL, SOCIAL SERVICES, ARTS AND RECREATION PROGRAMS WHICH STRENGTHEN FAMILIES AND BUILD INCLUSIVE COMMUNITIES.

Funded Amount:

$270,000

Requested By:

GLICK, SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EDUCATIONAL CENTER FOR RUSSIAN JEWRY, INC.
98-12 66TH AVENUE
REGO PARK, NY 11374
(718) 275-3318

Name of Project Director:

NACHUM KAZIEV

Purpose of Project:

FUNDS WILL BE USED TO HELP WITH FOOD DISTRIBUTION TO THE ELDERLY, HOMEBOUND AND NEEDY OF THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EIS - EVICTION INTERVENTION SERVICES HOMELESSNESS PREVENTION, INC.
150 EAST 62ND STREET
NEW YORK, NY   10021
(212) 308-2210

Name of Project Director:

AUDREY BERMAN TANNEN

Purpose of Project:

FUNDS WILL BE USED FOR WEEKLY LEGAL CLINICS AND SEMINARS.

Funded Amount:

$5,000

Requested By:

BING

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ELBARRIOS OPERATION FIGHTBACK, INC.
413 EAST 120TH STREET, ROOM 403
NEW YORK, NY 10035
(212) 410-7900

Name of Project Director:

GUS ROSADO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SUMMER YOUTH ACTIVITIES, INCLUDING IN-STATE BUS TRIPS AND INDOOR/OUTDOOR RECREATIONAL GAMES.

Funded Amount:

$5,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ELDERS SHARE THE ARTS, INC.
138 SOUTH OXFORD STREET
BROOKLYN, NY  11217
(718) 398-3870

Name of Project Director:

MARCIA GILDIN

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT AN INTERGENERATIONAL PROGRAM IN PARTNERSHIP WITH AN ELEMENTARY SCHOOL (P.S. 24) AND NEIGHBORING SENIOR CENTERS (ROSENTHAL SENIOR CENTER). STUDENTS AND ELDERS WILL ENGAGE IN EXPLORING EACH OTHER’S STORIES AND CULTURAL BACKGROUND.

Funded Amount:

$2,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ELMCOR YOUTH AND ADULT ACTIVITIES, INC.
33-16 108TH STREET
CORONA, NY 11368
(718) 651-0096

Name of Project Director:

MS. GINA LEWIS

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE EXISTING YOUTH PROGRAMS AND TO PROVIDE BASKETBALL TOURNAMENTS, IN-STATE TRAVEL AND SUPPLIES.

Funded Amount:

$15,000

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
ELMJACK LITTLE LEAGUE
P.O. BOX 285
EAST ELMHURST, NY 11369
(917) 301-6118

ELLEN MCDONALD

FUNDS WILL BE USED TO SUPPORT THE ELMJACK LITTLE LEAGUE BY IMPROVING FIELD CONDITIONS AND PURCHASING EQUIPMENT.

$3,500

GIANARIS

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ELVA MCZEAL TENANT ASSOCIATION HOUSING DEVELOPMENT FUND CORP.
405 WILLIAMS AVENUE
BROOKLYN, NY 11207
(718) 498-7558

Name of Project Director:

DOROTHY JONES

Purpose of Project:

FUNDS WILL BE USED FOR FAMILY DAY OUTING, REFRESHMENTS, GAMES, AND PAPER GOODS.

Funded Amount:

$2,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EMMANUEL COMMUNITY ECONOMIC DEVELOPMENT CORPORATION
36 ST. JAMES PLACE
BROOKLYN, NY   11205
(718) 622-1107

Name of Project Director:

SHEREEN WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PROGRAMMING FOR RE-ENTRY OF FORMERLY INCARCERATED INDIVIDUALS, AS WELL AS, YOUTH ENTREPRENUERSHIP PROGRAMS.

Funded Amount:

$10,000

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

EXPLORER POST 2008, BOYS SCOUTS OF AMERICA
2794 RANDALL AVENUE
BRONX, NEW YORK  10465
(718) 409-0162

Name of Project Director:

JOEL BRATHWAITE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND/OR MATERIALS FOR VARIOUS EXPLORER PROJECTS.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FAITH BAPTIST CHURCH OF CORAM YOUTH AWARENESS, INC.
P.O. BOX 151
CORAM, NY 11727
(631) 732-1133

Name of Project Director:

REV. BERESFORD ADAMS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH EXPENSES FOR THE AFTER SCHOOL CARE PROGRAM, WHICH IS OPEN TO ALL YOUTH ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FAMILIES FIRST, INC.
250 BALTIC STREET
BROOKLYN, NY  11201
(718) 237-1862

Name of Project Director:

LINDA BLYER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PARENTING WORKSHOPS.

Funded Amount:

$3,500

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FAMILY AND CHILDREN’S ASSOCIATION
100 EAST OLD COUNTRY ROAD
MINEOLA, NY 11501
(516) 746-0350

Name of Project Director:

JIM HARNETT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PROGRAMS TO TREAT SUBSTANCE AND ALCOHOL ABUSE

Funded Amount:

$2,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FAMILY FOCUS ADOPTION SERVICES
54-40 LITTLE NECK PARKWAY, SUITE 4
LITTLE NECK, NY  11362
(718) 224-1919

Name of Project Director:

MARIS H. BLECHNER

Purpose of Project:

FUNDS WILL BE USED TO FACILITATE IN THE PLACING OF THE MOST DIFFICULT OLDER TEENS. THE FUNDS WOULD PROVIDE FOR GIVEAWAY MALL PROJECTS ENCOURAGING THE "ADOPTION OF A TEEN"; FOR THE PRINTING OF CHILD ADOPTION PAMPHLETS.

Funded Amount:

$2,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FAMILY OF WOODSTOCK, INC.
P.O. BOX 3516
KINGSTON, NY 12402
(845) 331-7080

Name of Project Director:

MICHAEL BERG

Purpose of Project:

FUNDS WILL BE USED FOR: (1) $5,000 TO AID NEEDS OF FAMILY DOMESTIC VIOLENCE SHELTER RESIDENTS; AND (2) $5,000 TO AID NEEDS OF YOUTH WHO RESIDE AT "FAMILY INN" SHELTER.

Funded Amount:

$10,000

Requested By:

CAHILL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FAMILY RESIDENCES AND ESSENTIAL ENTERPRISES, INC.
191 SWEET HOLLOW ROAD
OLD BETHPAGE, NY 11804
(516) 870-1600

Name of Project Director:

PATRICE RADOWITZ

Purpose of Project:

FUNDS WILL BE USED FOR RESIDENCE IMPROVEMENTS

Funded Amount:

$5,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

MARGARET BOYD

Purpose of Project:

FUNDS WILL BE USED FOR LACASITA PRESCHOOL LEARNING CENTER

Funded Amount:

$30,000

Requested By:

CONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FAMILY SERVICE LEAGUE
1444 FIFTH AVENUE
BAY SHORE, NY 11706
(631) 647-3100

Name of Project Director:

KAREN BOORSHITEIN

Purpose of Project:

FUNDS WILL BE USED FOR ELDER LINK PROGRAM

Funded Amount:

$5,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

LARRY WEISS

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH SERVICES

Funded Amount:

$5,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FAMILY SERVICE LEAGUE OF SUFFOLK COUNTY, INC.
1444 FIFTH AVENUE
BAY SHORE, NY 11706
(631) 647-3100

Name of Project Director:

KAREN BOORSHTHEIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A FULL-TIME CASE MANAGER THAT WOULD ENSURE THAT THE CULTURE AND LANGUAGE NEEDS OF THE FAMILIES WHO ARE SERVED ARE MET.

Funded Amount:

$5,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FAMILY SERVICE SOCIETY OF YONKERS
70 ASHBURTON AVENUE
YONKERS, NY 10703
(914) 963-5118

Name of Project Director:

SETH Berman

Purpose of Project:

FUNDS WILL BE USED FOR LEGAL GUARDIANSHIP/ELDER ABUSE PREVENTION PROGRAM

Funded Amount:

$5,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FAMILY SUPPORT SYSTEMS UNLIMITED, INC.
2530 GRAND CONCOURSE
BRONX, NY 10458
(718) 220-5400 235

Name of Project Director:

BELINDA BROWN

Purpose of Project:

FUNDS WILL BE USED FOR A COMPREHENSIVE CULTURAL EDUCATIONAL PROGRAM DESIGNED TO PREPARE AFRICAN-AMERICAN, LATINO AND OTHER CULTURAL GROUPS FOR TRANSITION FROM UNCERTAIN ADOLESCENCE TO SUCCESSFUL ADULTHOOD. SERVICES WILL BE PROVIDED TO YOUTH IN FOSTER CARE AND AT-RISK YOUTH IN TARGETED COMMUNITIES TO HELP THEM ACQUIRE THE SKILLS AND EXPERIENCE NECESSARY TO FUNCTION AS SUCCESSFUL ADULTS.

Funded Amount:

$47,000

Requested By:

GREENE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
FAMILY SUPPORT SYSTEMS UNLIMITED, INC.
1 FORDHAM PLAZA, SUITE 500
BRONX, NY 10458
(718) 220-4500

BRENDA HART

FUNDS WILL BE USED TO PROVIDE PLACEMENT SERVICES FOR HARD TO PLACE CHILDREN IN FOSTER CARE, AGES 14-21.

$60,000

GREENE

OFFICE OF CHILDREN AND FAMILY SERVICES
FEDERATION EMPLOYMENT AND GUIDANCE SERVICE, INC.
315 HUDSON STREET
NEW YORK, NY 10013
(718) 366-8400

AMY DORIN

FUNDS WILL BE USED TO PROVIDE OUTREACH TO QUEENS-BASED COMMUNITY GROUPS TO INFORM THEM OF FEGS BOROUGH-WIDE SERVICES AND TO SUPPORT IDENTIFICATION OF PEOPLE IN NEED OF REFERRAL TO PROGRAMS AND SERVICES AT FEGS QUEENS LOCATION AND OTHER QUEENS-BASED SERVICES.

$2,000

PHEFFER

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FEDERATION EMPLOYMENT AND GUIDANCE SERVICE, INC.
315 HUDSON STREET
NEW YORK, NY 10013
(212) 366-8400

Name of Project Director:

IRA MACHOWSKY

Purpose of Project:

FUNDING WILL BE USED FOR F.E.G.S. AFTER SCHOOL PROGRAMS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:
FEDERATION EMPLOYMENT AND GUIDANCE SERVICE, INC.
315 HUDSON STREET
NEW YORK, NY  10013
(718) 366-8400

Name of Project Director:
JOYCE KEVELSON

Purpose of Project:
FUNDS WILL BE USED TO PROVIDE OUTREACH TO QUEENS-BASED COMMUNITY GROUPS TO INFORM THEM OF FEGS BOROUGHWIDE SERVICES AND SUPPORT. THIS INCLUDES IDENTIFICATION OF PEOPLE IN NEED OF REFERRALS TO PROGRAMS AND SERVICES AT FEGS AND OTHER QUEENS-BASED SERVICES.

Funded Amount:
$1,000

Requested By:
MAYERSOHN

Name of Administering State Agency:
OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FEDERATION OF ITALIAN-AMERICAN ORGANIZATIONS OF BROOKLYN, LTD.
7403 18TH AVENUE
BROOKLYN, NY  11204
(718) 259-2828

Name of Project Director:

NANCY SOTTILE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE DIRECT SERVICES AND REFERRALS TO SENIORS, YOUTH, NON-ENGLISH SPEAKING ADULTS AND FAMILIES. THE FEDERATION SERVES THE POPULATION AT LARGE, REGARDLESS OF RACE, RELIGION, NATIONALITY OR SEX.

Funded Amount:

$10,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FEDERATION OF ITALIAN-AMERICAN ORGANIZATIONS OF QUEENS, INC.
29-12 21ST AVENUE
ASTORIA, NY 11105
(718) 204-2444

Name of Project Director:

ANGIE MARKHAM

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A WIDE RANGE OF SERVICES TO THE
COMMUNITY, INCLUDING CULTURAL EDUCATION, ASSISTANCE FOR
SENIORS WITH SOCIAL SECURITY APPLICATIONS AND IMMIGRATION
SERVICES.

Funded Amount:

$3,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FEDERATION OF ORGANIZATIONS
1 FARMINGDALE ROAD
WEST BABYLON, NY 11704
(631) 669-5355

Name of Project Director:

RUTH DEL COL

Purpose of Project:

FUNDS WILL BE USED FOR FOSTER GRANDPARENT PROGRAM

Funded Amount:

$5,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FEDERATION OF ORGANIZATIONS FOR THE NY STATE MENTALLY
ONE FARMINGDALE ROAD, RTE. 109
WEST BABYLON, NY  11704
(631) 669-5355

Name of Project Director:

RUTH DECAL

Purpose of Project:

FUNDS WILL BE USED FOR THE FOSTER GRANDPARENTS PROGRAM.

Funded Amount:

$1,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FEDERATION OF ORGANIZATIONS FOR THE NY STATE MENTALLY
ONE FARMINGDALE ROAD, ROUTE 109
WEST BABYLON, NY 11704
(631) 669-5355

Name of Project Director:

RUTH DEL COL

Purpose of Project:

FUNDS WILL BE USED TO ADMINISTER VOCATIONAL AND EMPLOYMENT OPPORTUNITY SERVICES.

Funded Amount:

$1,000

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FEDERATION OF PROTESTANT WELFARE AGENCIES, INC.
281 PARK AVENUE SOUTH
NEW YORK, NY 10010
(212) 801-1322

Name of Project Director:

FATIMA GOLDMAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT STAFF TO COORDINATE THE WELFARE REFORM NETWORK INCLUDING PREPARING THE NEWSLETTER, HOSTING GENERAL MEMBERSHIP MEETINGS, RECRUITING GUEST SPEAKERS, MODERATE THE LIST SERVED, CREATE ACTION ALERTS, ETC.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FEDERATION OF SPORTMENS’ CLUBS OF SULLIVAN COUNTY, INC.
473 PETERS ROAD
CALLICOON, NY  12723
(845) 482-4147

Name of Project Director:

RAY HERBERT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE EDDIE EAGLE GUN SAFETY EDUCATION PROGRAM FOR YOUTH IN THE LOCAL SCHOOLS.

Funded Amount:

$5,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FELLOWSHIP HOUSE FOUNDATION, INC.
625 BUFFALO AVENUE
NIAGARA FALLS, NY  14303
(716) 282-8510

Name of Project Director:

DONALD C. SCHULTZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A NEW 15 PASSENGER VAN. THIS VAN WILL BE USED FOR IN-STATE TRANSPORT FOR RESIDENTS THAT LIVE AT SOMERSET HOUSE. SOMERSET HOUSE IS OPERATED BY FELLOWSHIP HOUSE AND IS A HOME FOR RECOVERING ADDICTS.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FERRINI WELFARE LEAGUE
101-41 91ST STREET
OZONE PARK, NY  11416
(718) 845-0539

Name of Project Director:

REV. FRANCES J. PASSENGANT

Purpose of Project:

FUNDS WILL BE USED TO ALLOW THE LEAGUE TO ACT AS A REFERRAL AGENCY, PROVIDE TRANSLATION SERVICES, ASSISTANCE WITH NATURALIZATION AND OTHER PROBLEMS THAT MAY ARISE IN THE LOCAL COMMUNITY. AFTER SCHOOL TUTORIAL PROGRAMS ARE ALSO PROVIDED.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FERRINI WELFARE LEAGUE
98-21 101ST AVENUE
OZONE PARK, NY  11416
(718) 845-0539

Name of Project Director:

SISTER THOMAS ANGELA

Purpose of Project:

FUNDS WILL BE USED FOR A NON-SECTARIAN PROGRAM AVAILABLE TO ALL COMMUNITY RESIDENTS. FUNDS WILL BE USED TO OFFSET RENTAL EXPENSES FOR AN AFTER SCHOOL TUTORIAL PROGRAM PROVIDING COMPENSATION FOR EIGHT TO TEN TUTORS AND RELATED EXPENSES FOR THE PROGRAM AND MATERIALS.

Funded Amount:

$3,800

Requested By:

SEMINERIO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
FIGURE SKATING IN HARLEM, INC.
361 WEST 125TH STREET, 4TH FLOOR
NEW YORK, NY 10027
(646) 698-3440

SHARON COHEN

FUNDS WILL BE USED TO PROVIDE ICE SKATING EDUCATION FOR PEOPLE OF COLOR IN NORTHERN MANHATTAN.

$7,500

WRIGHT

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FINGER LAKES COUNCIL, INC.
3685 PRE-EMPTION ROAD
GENEVA, NY 14456
(315) 789-1166

Name of Project Director:

ROBERT DORN

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE PETERSON LODGE WHICH IS USED YEAR ROUND BY MORE THAN 1,000 YOUTH AND LEADERS

Funded Amount:

$5,000

Requested By:

KOLB

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FIRST FAITH BAPTIST CHURCH
224-07 LINDEN BOULEVARD
CAMBRIA HEIGHTS, NY   11411
(718) 658-6255

Name of Project Director:

DORITA CLARKE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUNG PEOPLE WITH ASSISTANCE IN THE COLLEGE DECISION MAKING PROCESS THRU CAMPUS VISITS, TEST PREP AND COUNSELING. PROGRAM IS NON-SECTARIAN.

Funded Amount:

$4,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FIRST PRESBYTERIAN CHURCH OF NEWTOWN
54-05 SEABURY STREET
ELMHURST, NY  11373
(718) 803-1070

Name of Project Director:

MARY SHUTAK-JENKINS

Purpose of Project:

FUNDS WILL BE USED FOR AN OUTREACH PROGRAM DESIGNED TO CREATE A SUSTAINABLE FOOD SOURCE FOR THE LOCAL COMMUNITY THROUGH COMMUNITY GARDENING. PRODUCE WILL BE DONATED TO LOCAL FOOD BANKS. THE PROGRAM IS OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FIVE BORO SOCCER LEAGUE, INC.
270 CLARKSON AVENUE, APT. 302
BROOKLYN, NY  11226
(718) 693-0269

Name of Project Director:

THOMAS E. BAILEY

Purpose of Project:

FUNDS WILL BE USED TO ADMINISTER THE SUMMER YOUTH SOCCER PROGRAM.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FIVE TOWNS CHILD CARE CENTER, INC.
112 WAHL AVENUE
INWOOD, NY 11096
(516) 239-4660

Name of Project Director:

PAULA ROBINSON

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING FACILITY IMPROVEMENTS INCLUDING, BUT NOT LIMITED TO NEW WINDOWS.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FIVE TOWNS COMMUNITY CENTER
270 LAWRENCE AVENUE
LAWRENCE, NY  11559
(516) 239-6244

Name of Project Director:

PETER VISCONTI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN INSTRUCTOR TO WORK WITH CHILDREN ON COMPUTER SKILLS DURING AN AFTER-SCHOOL PROGRAM.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FLUSHING COUNCIL ON CULTURE AND THE ARTS, INC.
137-35 NORTHERN BOULEVARD
FLUSHING, NY  11354
(718) 463-7700  235

Name of Project Director:

CATHY HUNG

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF TECHNOLOGY EQUIPMENT.

Funded Amount:

$5,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FLUSHING JEWISH COMMUNITY COUNCIL, INC.
43-43 BOWNE STREET
FLUSHING, NY 11355
(718) 463-0434

Name of Project Director:

PAUL ENGEL

Purpose of Project:

FUNDS WILL BE USED TO OFFER ENGLISH AND CITIZENSHP CLASSES; PLAN MULTICULTURAL EVENTS; AND TEACH PEOPLE ABOUT DOMESTIC VIOLENCE, ANGER MANAGEMENT, ETC.

Funded Amount:

$5,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FLUSHING YMCA BEACON CENTER 194
154-60 17TH AVENUE, B7
WHITESONE, NY  11357
(718) 747-3644

Name of Project Director:

COURTNEY SPEARS

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY OUTREACH.

Funded Amount:

$1,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FOCUS EMERGENCY FEEDING PROGRAMS
275 STATE STREET
ALBANY, NY 12210
(518) 443-0460

Name of Project Director:

REV. DEBRA JAMESON

Purpose of Project:

FUNDS WILL BE USED TO HELP WITH THE CONTINUING OPERATION OF
THE FOCUS EMERGENCY FEEDING PROGRAMS. PROGRAMS ARE OPEN TO
ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FONDA-FULTONVILLE LITTLE LEAGUE, INC.
P.O. BOX 342
FONDA, NY 12068
(518) 853-4565

Name of Project Director:

DOUG HALL

Purpose of Project:

FUNDS WILL BE USED FOR THE UPKEEP AND MAINTENANCE OF THE LITTLE LEAGUE FIELDS, "FIELD OF DREAMS".

Funded Amount:

$2,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FOOD BANK OF WESTERN NEW YORK, INC.
91 HOLT STREET
BUFFALO, NY 14206
(716) 852-1305

Name of Project Director:

CLEM ECKERT

Purpose of Project:

FUNDS WILL SUPPORT THE GENERAL OPERATING EXPENSES FOR THE FOOD BANK OF WNY WHICH, INCLUDE BUT ARE NOT LIMITED TO, SUPPORT FOR PROGRAMS THAT PROVIDE FOOD TO THE NEEDY.

Funded Amount:

$10,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FORDHAM BEDFORD CHILDREN’S SERVICES
2715 BAINBRIDGE AVENUE
BRONX, NY  10465
(718) 733-2557

Name of Project Director:

JOHN GARCIA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF HIRING 3 ESL INSTRUCTORS, AND PROVIDE FOR THE PURCHASE OF TEXTBOOKS FOR STUDENTS. THE CLASSES ARE FREE OF CHARGE AND RUN FROM OCTOBER TO MAY.

Funded Amount:

$6,000

Requested By:

RIVERA-J

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FORDHAM BEDFORD LITTLE LEAGUE
2751 BAINBRIDGE AVENUE
BRONX, NY 10458
(718) 367-3200

Name of Project Director:

EVELYN COLON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS ASSOCIATED WITH SUPPLIES, FEES AND IN-STATE TRAVEL FOR THE LITTLE LEAGUE.

Funded Amount:

$6,000

Requested By:

RIVERA-J

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FOREST HILLS COMMUNITY HOUSE, INC.
108-25 62ND DRIVE
FOREST HILLS, NY  11375
(718) 592-5757

Name of Project Director:

SUSAN MATLOFF-NIEVES

Purpose of Project:

FUNDS WILL BE USED FOR THE MANAGEMENT OF THE GENERATION Q YOUTH PROGRAM FOR THE RAINBOW COMMUNITY CENTER/QUEENS PRIDE COMMITTEE. FUNDS WILL SUPPORT AWARENESS OF GAY, BI-SEXUAL, STRAIGHT AND TRANSGENDER YOUTH UNDER THE AGE OF 21. FUNDS MAY ALSO BE USED FOR CULTURAL PROGRAMS.

Funded Amount:

$1,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FOREST HILLS COMMUNITY HOUSE, INC.
108-25 62ND DRIVE
FOREST HILLS, NY 11375
(718) 592-5757

Name of Project Director:

SUSAN MATLOFF-NIEVES

Purpose of Project:

FUNDS WILL BE USED FOR THE MANAGEMENT OF THE GENERATION Q YOUTH PROGRAM AT THE RAINBOW COMMUNITY CENTER. FUNDS WILL SUPPORT AWARENESS OF GAY, BI-SEXUAL, STRAIGHT, AND TRANSGENDERED YOUTH UNDER THE AGE OF 21. FUNDS MAY ALSO BE USED FOR CULTURAL PROGRAMS.

Funded Amount:

$2,500

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FOREST HILLS COMMUNITY HOUSE, INC.
108-25 62 DRIVE
FOREST HILLS, NY 11375
(718) 592-5757

Name of Project Director:

SUSAN MATLOFF

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE YOUTH OUTREACH AND AFTER SCHOOL PROGRAMS AT THE FOREST HILLS COMMUNITY HOUSE AND THE FHCH AT POMONOK. FUNDS WILL BE USED FOR SUPPLIES, EQUIPMENT, MAINTENANCE, TRANSPORTATION AND OTHER OPERATING EXPENSES.

Funded Amount:

$52,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FOREST HILLS LITTLE LEAGUE, INC.  
P.O. BOX 740036  
REGO PARK, NY 11374  
(917) 626-3401

Name of Project Director:

JEFF GLASSER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL AND WEEKEND RECREATION FOR CHILDREN, INCLUDING THE PURCHASE OF EQUIPMENT, ETC.

Funded Amount:

$10,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FORT GREENE VOLUNTEERS, INC.
P.O. BOX 24562
BROOKLYN, NY 11202
(718) 687-8356

Name of Project Director:

RONALD WASHINGTON

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH BASKETBALL AND DOUBLE DUTCH PROGRAMS AT WALT WHITMAN HOUSING DEVELOPMENT.

Funded Amount:

$2,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FRANCIS J. LOGAN, JR. FOUNDATION, INC.
P.O. BOX 8050
GARDEN CITY, NY  11530
(516) 483-9719

Name of Project Director:

JACQUELINE MORGAN

Purpose of Project:

FUNDS WILL BE USED TO ALLOW CHILDREN FROM THE COMMUNITY TO ATTEND SUMMER CAMP.

Funded Amount:

$8,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FREEDOM COMMUNITY RESOURCE CENTER, INC.
455 EAST 140TH STREET, GARDEN LEVEL
BRONX, NY  10454
(718) 402-2236

Name of Project Director:

SANDRA HERNANDEZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HOMEWORK ASSISTANCE AND LITERACY DEVELOPMENT FOR STUDENTS OF COMMUNITY SCHOOL DISTRICT 7.

Funded Amount:

$33,000

Requested By:

ARROYO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FRIENDS OF FREDERICK E. SAMUEL FOUNDATIONS, INC.
2472 ADAM CLAYTON POWELL BOULEVARD
NEW YORK, NY   10030
(212) 862-7726

Name of Project Director:

CLYDE FRASIER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES AND ENGAGE YOUTH IN ACTIVITIES TO PREVENT JUVENILE DELINQUENCY ISSUES.

Funded Amount:

$2,500

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FRIENDS OF FREDERICK E. SAMUEL FOUNDATIONS, INC.
2472 ADAM CLAYTON POWELL BOULEVARD
NEW YORK, NY  10030
(212) 862-4216

Name of Project Director:

CLYDE FRASIER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES AND ENGAGE YOUTH IN ACTIVITIES TO PREVENT JUVENILE DELIQUENCY ISSUES.

Funded Amount:

$15,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FRIENDS OF KAREN, INC.
21 PERRY STREET
PORT JEFFERSON, NY 11777
(631) 473-1768

Name of Project Director:

NANCY MARIANO

Purpose of Project:

FUNDS WILL BE USED FOR FAMILY SUPPORT PROGRAM

Funded Amount:

$1,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FRIENDS OF THE CANTEEN  
P.O. BOX 1521  
CICERO, NY 13039  
(315) 699-1391

Name of Project Director:

VINCENT HOLLOPETER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND FURNITURE FOR THE TEEN CENTER.

Funded Amount:

$5,000

Requested By:

STIRPE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FRIENDS UNITED YOUTH CENTER
1045 REMSEN AVENUE
BROOKLYN, NY 11236
(718) 649-6538

Name of Project Director:

GARDY BRAZELA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AN AFTER-SCHOOL PROGRAM TO PROVIDE TUTORING, BEHAVIOR MODIFICATION, RECREATION, EQUIPMENT AND PUBLICITY.

Funded Amount:

$13,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FRIENDS UNITED YOUTH CENTER
1045 REMSEN AVENUE
BROOKLYN, NY  11236
(718) 649-6538

Name of Project Director:

GARDY BRAZELA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AN AFTER SCHOOL PROGRAM TO PROVIDE TUTORING, RECREATION AND EQUIPMENT PURCHASE.

Funded Amount:

$5,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FRIENDS UNITED YOUTH CENTER
1045 REMSEN AVENUE
BROOKLYN, NY  11236
(718) 649-6438

Name of Project Director:

GERDY BREZELA

Purpose of Project:

FUNDS WILL BE USED FOR THE AFTER SCHOOL PROGRAM, WHICH PROVIDES TUTORING TO STUDENTS IN MATH, SCIENCE, ENGLISH AND SOCIAL STUDIES.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FULTON COUNTY YMCA
19 EAST FULTON STREET
GLOVERSVILLE, NY 12078
(518) 725-0627

Name of Project Director:

STEVEN SERGE

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION COSTS ASSOCIATED WITH NEW YMCA FACILITY

Funded Amount:

$15,000

Requested By:

BUTLER-M

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

FUNDACION HISPANOAMERICANA, INC.
636 SEAMAN AVENUE
BALDWIN, NY 11510
(516) 467-2626

Name of Project Director:

JEOVANNY MATA

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE THE FOUNDATION AND TO PROVIDE NEEDED EQUIPMENT FOR THE OFFICE.

Funded Amount:

$2,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GAY AND LESBIAN SWITCHBOARD OF LONG ISLAND, INC.
P.O. BOX 1312
RONKONKOMA, NY  11779
(631) 665-3700

Name of Project Director:

NICK DEDIO

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH OPERATING EXPENSES IN MAINTAINING AND PROMOTING THE SWITCHBOARD.

Funded Amount:

$1,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GENESEE PARISH OUTREACH CENTER
4520 GENESEE STREET
GENESEO, NY 14454
(585) 243-3120

Name of Project Director:

LINDA WEAVER

Purpose of Project:

FUNDS WILL BE USED FOR MEDICAL AND DENTAL EXPENSES

Funded Amount:

$2,500

Requested By:

BURLING

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GENESIS HOUSE
P.O. BOX 139
OLEAN, NY 14760
(716) 373-3354

Name of Project Director:

LINORE E. LOUNSBURY

Purpose of Project:

FUNDS WILL BE USED FOR OPERATING FUNDS FOR HOMELESS SHELTER

Funded Amount:

$10,000

Requested By:

GIGLIO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
GENEVA CENTER CHILD & FAMILY RESOURCES, INC.
41 LEWIS STREET, SUITE 103
GENEVA, NY 14456
(315) 781-1491 203

DAWN WAITE

FUNDS WILL BE USED FOR EQUIPMENT AND SUPPLIES FOR PARENTING AND EARLY CHILDHOOD

$5,000

KOLB

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GEORGIA AVENUE BLOCK ASSOCIATION
670 GEORGIA AVENUE
BROOKLYN, NY 11207
(718) 272-3853

Name of Project Director:

PHYLLIS MCDONALD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE REFRESHMENTS, GAMES, AND T-SHIRTS.

Funded Amount:

$1,500

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GEORGIA L. MCMURRAY BATKIDS CENTER
140 58TH STREET
BROOKLYN, NY  11220
(718) 567-0818

Name of Project Director:

NIXSA M. SINGH

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE DAY CARE PROGRAM AND TO PURCHASE EQUIPMENT, BOOKS, EDUCATIONAL TOYS, ETC. FOR THE PROGRAM.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
GERMAN-AMERICAN CLUB OF ALBANY, NY, INC.
32 CHERRY STREET
ALBANY, NY  12205
(518) 482-5845

HEINZ RUPPERT

FUNDS WILL BE USED TOWARDS THE UPKEEP AND MAINTENANCE OF THE CLUB’S FACILITIES AND GROUNDS WHICH ARE OPEN TO THE PUBLIC FOR A VARIETY OF FUNCTIONS AND EVENTS.

$4,000

MCENENY

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GERRITSEN BEACH LITTLE LEAGUE
32 FLORENCE AVENUE
BROOKLYN, NY 11229
(718) 646-2836

Name of Project Director:

SAL MATTALIANO

Purpose of Project:

FUNDS WILL BE USED TO BUY EQUIPMENT AND FOR FIELD MAINTENANCE.

Funded Amount:

$1,500

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GINA GET INVOLVED NOW ASSOCIATION
675 LINCOLN AVENUE, 16F
BROOKLYN, NY  11208
(718) 235-8563

Name of Project Director:

REGINA POWELL

Purpose of Project:

FUNDS WILL BE USED FOR IN-STATE FIELD TRIPS.

Funded Amount:

$5,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GIRL SCOUTS OF GENESEE VALLEY, INC.
1020 JOHN STREET
WEST HENRIETTA, NY 14586
(585) 292-5160

Name of Project Director:

ANN SARTWELL

Purpose of Project:

FUNDS WILL BE USED TO FUND GIRL SCOUT CONNECTION PROGRAM IN CONJUNCTION WITH ROCHESTER INSTITUTE OF TECHNOLOGY AND UNDERWRITE THE GOLD AWARD DINNER AND CEREMONY

Funded Amount:

$9,500

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GIRL SCOUTS OF NASSAU COUNTY
110 RING ROAD WEST
GARDEN CITY, NY 11530
(516) 741-2550

Name of Project Director:

LUCI DUCKSON-BRAMBLE

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE GIRL SCOUT PROGRAMS THROUGHOUT THE COUNTY

Funded Amount:

$2,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GIRL SCOUTS OF NORTHEASTERN NEW YORK, INC.
10 MOUNTAIN VIEW DRIVE
ALBANY, NY 12205
(518) 489-8110

Name of Project Director:

KERRY CONNOLLY

Purpose of Project:

FUNDS WILL BE USED FOR INFRASTRUCTURE SUPPORT FOR NEWLY MERGED FOUR GIRL SCOUT COUNCILS

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GIRL SCOUTS OF SOUTHWESTERN NEW YORK, INC.
2661 HORTON ROAD
JAMESTOWN, NY 14701
(716) 665-2225

Name of Project Director:

LISA LANE-GNIEWECKI

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE GIRL SCOUT CAMP TIMBERCREST.

Funded Amount:

$75,000

Requested By:

PARMENT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GIRL SCOUTS/INDIAN HILLS COUNCIL, INC.
32 WEST STATE STREET, P.O. BOX 2145
BINGHAMTON, NY 13902
(607) 724-6577

Name of Project Director:

DENISE NEWVINW

Purpose of Project:

FUNDS WILL BE USED FOR THIRTEENTH MOON PROGRAM

Funded Amount:

$6,000

Requested By:

CROUCH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GIRLS INCORPORATED OF THE GREATER CAPITAL REGION
962 ALBANY STREET
SCHENECTADY, NY 12302
(518) 374-9800  230

Name of Project Director:

TERI BORDENAVE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TRANSPORTATION FOR 25 GIRLS LIVING IN THE 110TH A.D. TO DAY CAMP IN EAST GALWAY

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GIRLS INCORPORATED OF THE GREATER CAPITAL REGION
25 WESTERN AVENUE
ALBANY, NY  12203
(518) 374-9800  230

Name of Project Director:

TERI BORDENAVE

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT AN AFTER SCHOOL PROGRAM AT THE
HACKETT MIDDLE SCHOOL THAT HELPS GIRLS DEVELOP HEALTHY SOCIAL
BEHAVIORS AND PREVENT TEEN PREGNANCY.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GIRLS INCORPORATED OF THE GREATER CAPITAL REGION
962 ALBANY STREET
SCHENECTADY, NY  12307
(518) 374-9800  230

Name of Project Director:

TERI BORDENAVE

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE COMPUTER LITERACY PROGRAM
AND THE SISTER TO SISTER SUMMIT.

Funded Amount:

$4,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GLENN HINES BOYS & GIRLS CLUB
285 LIBERTY STREET
NEWBURGH, NY 12550
(845) 561-4936

Name of Project Director:

NELSON MCALLISTER

Purpose of Project:

FUNDS WILL BE USED TO FUND SUMMER PROGRAMS FOR BOYS AND GIRLS IN NEWBURGH

Funded Amount:

$5,000

Requested By:

KIRWAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GLENS FALLS AREA YOUTH CENTER, INC.
P.O. BOX 469
GLENS FALLS, NY 12801
(518) 793-5932

Name of Project Director:

MATT CONGDON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE 3 POOL TABLES, 1 AIR HOCKEY TABLE AND 1 ICE HOCKEY TABLE

Funded Amount:

$10,000

Requested By:

SAYWARD

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GODDARD-RIVERSIDE COMMUNITY CENTER
593 COLUMBUS AVENUE
NEW YORK, NY 10024
(212) 595-2868

Name of Project Director:

BOB MENDELSOHN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ONE HOT MEAL PER WEEKDAY TO THE ELDERLY AND MENTALLY HANDICAPPED RESIDENTS OF THE STRATFORD ARMS HOTEL.

Funded Amount:

$5,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GOOD OLD LOWER EAST SIDE, INC.
169 AVENUE B
NEW YORK, NY  10009
(212) 358-1231

Name of Project Director:

DAMARIS REYES

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COUNSELING AND ASSISTANCE IN AREAS OF HOUSING SERVICES, JOB TRAINING, PUBLIC BENEFITS ENROLLMENT, SENIOR SERVICES, WORKSHOPS AND TRAINING FOR COMMUNITY.

Funded Amount:

$12,000

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GOOD SHEPHERD SERVICES
305 7TH AVENUE
NEW YORK, NY 10001
(212) 243-7070

Name of Project Director:

FRAN YORK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE CRISIS INTERVENTION SERVICES PROGRAM PROVIDED BY THE PARK SLOPE SAFE HOMES PROJECT.

Funded Amount:

$2,000

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GOOD SHEPHERD SERVICES
441 4TH AVENUE
BROOKLYN, NY 11215
(718) 788-0666

Name of Project Director:

KATHY GORDON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A PROGRAM OF FAMILY STRENGTHENING AND GROWTH DEVELOPMENT THROUGH INDIVIDUAL AND GROUP COUNSELING, AND OTHER ACTIVITIES.

Funded Amount:

$2,500

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GOOD SHEPHERD SERVICES
305 7TH AVENUE
BROOKLYN, NY  10001
(212) 243-7070

Name of Project Director:

FRAN YORK

Purpose of Project:

FUNDS WILL BE USED TO BENEFIT A NEW PROGRAM DEALING WITH TEEN DATING VIOLENCE. WORKING WITH SOAR, GOOD SHEPHERD SERVICES WILL PRODUCE A CONFERENCE IN THE SPRING TO BE FACILITATED AND ATTENDED BY TEENS TO ADDRESS THESE ISSUES.

Funded Amount:

$6,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GOOD SHEPHERD SERVICES
305 SEVENTH AVENUE
NEW YORK, NY  10001
(212) 243-7070

Name of Project Director:

SR. PAULETTE LOMONACO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE RED HOOK COMMUNITY CENTER BEACON AT PUBLIC SCHOOL 15 WHICH PROVIDES YEAR-ROUND ACTIVITIES AND AFTER SCHOOL PROGRAMS FOR YOUTH AND THEIR FAMILIES.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GOODWILL INDUSTRIES OF GREATER NEW YORK AND NORTHERN NEW JERSEY, INC.
4-21 27TH AVENUE
ASTORIA, NY  11102
(718) 728-5400

Name of Project Director:

REX DAVIDSON

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTER SCHOOL AND SUMMER PROGRAM WHICH WILL ENCOMPASS RECREATION, HOMEWORK HELP TUTORIAL, COMPUTER LABS, KARATE AND MENTORING. THERE WILL BE AN ALCOHOL AND SUBSTANCE ABUSE PREVENTION EDUCATION PROGRAM.

Funded Amount:

$5,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GORMAN YOUTH GROUP
1381A LINDEN BOULEVARD
BROOKLYN, NY  11212
(718) 345-5561

Name of Project Director:

HAZEL YOUNGER

Purpose of Project:

FUNDS WILL BE USED TOWARD THE CONTINUED ADMINISTRATION OF THE AFTER SCHOOL PROGRAM.

Funded Amount:

$2,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GRAVESEND ATHLETIC ASSOCIATION, INC.
C/O FRANK LOPICCOLO, 169 BAY 44TH STREET
BROOKLYN, NY  11214
(718) 372-1951

Name of Project Director:

JAMES FURLANI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE OPPORTUNITY FOR YOUTH TO EXPERIENCE THE VALUES AND DISCIPLINE OF TEAM SPORTS IN AN ORGANIZED SETTING OF A LITTLE LEAGUE BALLFIELD COMPETITION.

Funded Amount:

$2,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GREATER MALONE YMCA
326 WEST MAIN STREET
MALONE, NY 12953
(518) 483-2355

Name of Project Director:

MICHELLE SCHUMAKER

Purpose of Project:

FUNDS WILL BE USED FOR INSTALLATION OF NEW INDOOR PLAYGROUND EQUIPMENT

Funded Amount:

$5,000

Requested By:

DUPREY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GREATER NY COUNCILS, BOY SCOUTS OF AMERICA
350 FIFTH AVENUE
NEW YORK, NY  10118
(212) 242-1100

Name of Project Director:

CHRISTOPHER COSCIA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PROGRAMS FOR AT-RISK YOUTH IN BROOKLYN THROUGH THE BOY SCOUTS OF AMERICA.

Funded Amount:

$5,000

Requested By:

JACOBS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GREATER PLATTSBURGH INTERFAITH HOSPITALITY NETWORK
36 BRINKERHOFF STREET, P.O. BOX 2873
PLATTSBURGH, NY 12901
(518) 562-0753

Name of Project Director:

MAUREEN BRADISH

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT AND SUPPORT SERVICES FOR HOMELESS FAMILIES AND CHILDREN

Funded Amount:

$10,000

Requested By:

DUPREY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

ROBERT MONAHAN

Purpose of Project:

FUNDS WILL BE USED FOR LOW COST AFTER SCHOOL AND SUMMER PROGRAMS FOR CHILDREN AND YOUNG ADULTS.

Funded Amount:

$2,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

ANNE R. ELLIOT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PROGRAMS THAT WILL PREPARE RESIDENTS TO OBTAIN EMPLOYMENT AND AFFORDABLE HOUSING.

Funded Amount:

$8,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GREENWICH VILLAGE YOUTH COUNCIL, INC.
437 WEST 16TH STREET (BELL #2)
NEW YORK, NY 10011
(212) 414-4742

Name of Project Director:

DAVID KAPLAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A MULTI-CULTURAL/MULTI-RACIAL AFTER-SCHOOL TEEN PROGRAM AT P.S. 130 IN LITTLE ITALY.

Funded Amount:

$23,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GREENWICH VILLAGE YOUTH COUNCIL, INC.
345 EAST 15TH STREET
NEW YORK, NY 10003
(212) 475-7972

Name of Project Director:

LAURA A. SIEGEL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE GREENWICH VILLAGE GIRLS' BASKETBALL LEAGUE THROUGH THE PURCHASE OF NEW UNIFORMS AND EQUIPMENT, RENTAL OF FACILITIES, AND OTHER LEAGUE OPERATING COSTS.

Funded Amount:

$3,500

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GROSVENOR NEIGHBORHOOD HOUSE YMCA FACILITY
5 WEST 63RD STREET
NEW YORK, NY 10023
(212) 875-4137

Name of Project Director:

DEBORAH BAGATTA-BOWLES

Purpose of Project:

FUNDS WILL BE USED TO INCREASE COMPUTER LITERACY FOR PEOPLE WHO DO NOT HAVE ACCESS TO COMPUTERS AT HOME.

Funded Amount:

$3,000

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GROUNDSWELL COMMUNITY MURAL PROJECT, INC.
339 DOUGLASS STREET
BROOKLYN, NY  11217
(718) 254-9782

Name of Project Director:

AMY SONANMAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AND PURCHASE SUPPLIES FOR THE GROUNDSWELL COMMUNITY MURAL PROJECT.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GROUNDWORKS, INC.
595 SUTTER AVENUE
BROOKLYN, NY 11207
(718) 346-2200

Name of Project Director:

RICHARD BERRY

Purpose of Project:

FUNDS WILL BE USED TO TRAIN STAFF ON AN EFFICIENTLY WORKING PC
NETWORK AND TO PROVIDE AN AVENUE FOR THE PROMOTION OF
COMPUTER AWARENESS THROUGH OUT THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

BOYLAND

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

GROWING YEARS CHILDREN'S CENTER, INC.
530 FIFTH AVENUE
OWEGO, NY 13827
(607) 687-4710

Name of Project Director:

DR. BILL DAVENPORT

Purpose of Project:

FUNDS WILL BE USED FOR RELOCATION AND EXPANSION OF DAY CARE CENTER

Funded Amount:

$5,000

Requested By:

FINCH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GUARDIANS OF THE SICK, INC.
5216 ELEVENTH AVENUE
BROOKLYN, NY 11219
(718) 438-2020

Name of Project Director:

RABBI SHMUEL STEINHARTER

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE FAMILY CRISIS INTERVENTION PROGRAM.

Funded Amount:

$51,000

Requested By:

CYMBROWITZ-S, HIKIND, SILVER, WEINSTEIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GUIDANCE CENTER SERVICES, INC.
3485 MAIN BAYVIEW ROAD
SOUTHOLD, NY 11971
(631) 664-9886

Name of Project Director:

SUSAN TOMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PREVENTION MATERIALS REGARDING UNDERAGE DRINKING AND TOBACCO USE, AS WELL AS SUBSTANCE ABUSE AND ANTI-SOCIAL BEHAVIOR, FOR THE GUIDANCE CENTER.

Funded Amount:

$2,500

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legislative Initiative Form

Legal Name, Address, and Telephone Number:

GUN HILL YOUTH FOOTBALL AND CHEERLEADING ALLIANCE, INC.
3239 FISH AVENUE
BRONX, NY 10469
(888) 973-2357

Name of Project Director:

RAYMOND BAXTER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MATERIALS AND SUPPLIES TO CONDUCT FOOTBALL AND CHEERLEADING YOUTH PROGRAM.

Funded Amount:

$2,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HAITIAN AMERICAN CULTURAL AND SOCIAL ORGANIZATION, INC.
25 SOUTH MAIN STREET, SUITE 2A (P.O. BOX 477)
SPRING VALLEY, NY 10977
(845) 352-5897

Name of Project Director:

ROSE LEANDRE

Purpose of Project:

FUNDS WILL BE USED TO RECRUIT INDIVIDUALS IN NEED OF SERVICES THAT REQUIRE LANGUAGE SUPPORT. THIS WILL INCLUDE CREATION OF A WORK/CARE PLAN AND WILL LINK EACH CASE TO APPROPRIATE PROVIDERS.

Funded Amount:

$15,000

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HAITIAN AMERICANS UNITED FOR PROGRESS
1850 FLATBUSH AVENUE
BROOKLYN, NY  11210
(718) 377-1745

Name of Project Director:

ELSIE ACCILIEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE IMMIGRANT COMMUNITY OF BROOKLYN WITH IMMIGRATION COUNSELING ASSISTANCE, SOCIAL SERVICES AND EDUCATIONAL PROGRAMS.

Funded Amount:

$3,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HAITIAN AMERICANS UNITED FOR PROGRESS
221-05 LINDEN BOULEVARD
CAMBRIA HEIGHTS, NY 11411
(718) 527-3776

Name of Project Director:

ELSIE ACCILIEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE IMMIGRANTS WITH SUPPORT SERVICES SUCH AS ENGLISH AS A SECOND LANGUAGE, PARENTING SKILLS, EDUCATIONAL ASSISTANCE AND OTHER SERVICES.

Funded Amount:

$4,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HAMBURG COUNSELING SERVICES, INC.
97 SOUTH BUFFALO STREET
HAMBURG, NY 14075
(716) 648-0650

Name of Project Director:

DAVID ISBELL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AN UPDATED PHONE SYSTEM

Funded Amount:

$6,000

Requested By:

QUINN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HANAC, INC.
49 W. 45TH STREET, 4TH FLOOR
NEW YORK, NY 10036
(212) 840-8005

Name of Project Director:

JOHN KAITERIS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE VOLUNTEER PROGRAM.

Funded Amount:

$2,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HARBOR DAY CARE CENTER, INC.
999 HERRICKS ROAD
NEW HYDE PARK, NY  11040
(516) 248-7048

Name of Project Director:

JILL ROONEY

Purpose of Project:

FUNDS WILL BE USED TO RESTORE AND MAINTAIN FACILITIES IN GLEN HEAD AND SEA CLIFF.

Funded Amount:

$1,875

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HARLEM JUNIOR TENNIS PROGRAM, INC.
40 WEST 143 STREET
NEW YORK, NY 10037
(212) 491-3738

Name of Project Director:

DANTE BROWN

Purpose of Project:

FUNDS WILL BE USED TO ENRICH YOUTH THROUGH THE SPORT OF TENNIS.

Funded Amount:

$10,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HARRIET AND KENNETH KUPFERBERG HOLOCAUST RESOURCE CENTER AND ARCHIVES
222-05 56TH AVENUE
BAYSIDE, NY  11364
(718) 281-5770

Name of Project Director:

DR. ARther Flug

Purpose of Project:

FUNDS WILL BE USED TO TRAIN STUDENTS TO INTERVIEW HOLOCAUST SURVIVORS AND DOCUMENT THEIR LIVES.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HARTLEY HOUSE
413 WEST 46TH STREET
NEW YORK, NY  10036
(212) 246-9885

Name of Project Director:

MARY FOLLETT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL SERVICES FOR 65 CHILDREN, INCLUDING HOMEWORK ASSISTANCE, ART, COMPUTERS, LITERACY, ART THERAPY, AND SUMMER DAY CAMP SERVICES FOR UP TO 120 CHILDREN.

Funded Amount:

$3,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HAVERSTRAW ECUMENICAL PROJECT AND DAY CARE CENTER, INC.
34 FIRST STREET
HAVERSTRAW, NY 10927
(845) 429-5263

Name of Project Director:

DAISY RIVERA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH CHILDCARE FOR LOW INCOME FAMILIES AND ALLOW THE CENTER TO PROVIDE QUALITY CHILDCARE YEAR ROUND. THE PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

ZEBROWSKI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HEARTSHARE HUMAN SERVICES OF NY, ROMAN CATHOLIC DIOCESE OF BROOKLYN
191 JORALEMON STREET
BROOKLYN, NY   11201
(718) 330-1530

Name of Project Director:

KENNETH CALLAHAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACCESS TO SOCIAL SERVICE COUNSELING, RECREATION AND JOB TRAINING SERVICES TO社ALLY ISOLATED PERSONS.

Funded Amount:

$10,000

Requested By:

ABBATE, MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HELLENIC COMMUNITY OF ASTORIA
30-11 30TH DRIVE
ASTORIA, NY 11102
(718) 728-1718

Name of Project Director:

ANESTESIUS KOURLERANIS

Purpose of Project:

FUNDS WILL BE USED FOR AFTER SCHOOL PROGRAMS FOR NEEDY STUDENTS THAT REQUIRE TUTORING ASSISTANCE.

Funded Amount:

$7,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HELP USA, INC.
685 BROOKHAVEN AVENUE
BELLPORT, NY  11713
(631) 286-2400

Name of Project Director:

NANCY NUNZIATA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE GAMES, TOYS, AND SPORTING EQUIPMENT FOR USE BY THE SHELTER’S RESIDENTS.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HELPING HANDS - INTERFAITH COALITION FOR THE HOMELESS OF ROCKLAND COUNTY
P.O. BOX 240
NYACK, NY 10960
(845) 709-2415

Name of Project Director:

CHRIS MURRAY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW OFFICE EQUIPMENT.

Funded Amount:

$7,000

Requested By:

ZEBROWSKI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
HELPING OTHERS PROSPER EVERYDAY, INC.
655 ASHFORD STREET
BROOKLYN, NY  11207
(347) 406-6210

KATRINA CONNOR

FUNDS WILL BE USED TO PURCHASE A SHREDDER, ADDING MACHINE,
COPIER, DESKTOP COMPUTER, NOTEBOOK COMPUTERS, INTERNET CABLE
CONNECTION, AND A SERVER.

$10,000

GORDON-D

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HENRY STREET SETTLEMENT
265 HENRY STREET
NEW YORK, NY  10002
(212) 766-9200

Name of Project Director:

EDDIE GARCIA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE COSTS OF ATHLETIC PROGRAMS
AND OTHER ACTIVITIES IN CONJUNCTION WITH THE SOL LAIN
PLAYGROUND.

Funded Amount:

$5,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HERMANAS MIRABAL FAMILY CENTER AND CHILDCARE NETWORK
416 E. 176TH STREET, 2ND FLOOR, SUITE B
NEW YORK, NY 10457
(718) 901-5100

Name of Project Director:

ROSAELBA POLANCO

Purpose of Project:

FUNDS WILL BE USED TO HELP EMPOWER LATINO WOMEN TO IMPROVE THEIR LIVES AND THE WELL-BEING OF THEIR FAMILIES THROUGH PROGRAMS AND SERVICES.

Funded Amount:

$4,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HERRICKS YOUTH COUNCIL
999 HERRICKS ROAD
NEW HYDE PARK, NY 11040
(516) 248-3181

Name of Project Director:

CHRISTINE N. MICHELEN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE HERRICKS YOUTH COUNCIL PROVIDES

Funded Amount:

$2,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HETRICK-MARTIN INSTITUTE, INC.
2 ASTOR PLACE
NEW YORK, NY 10003-6903
(212) 674-2400 251

Name of Project Director:

ESTHER CASSIDY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AFTER SCHOOL PROGRAMS INCLUDING ACADEMIC ENRICHMENT, ARTS AND CULTURE, HEALTH AND WELLNESS, JOB READINESS, AND CAREER EXPLORATION.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HICKSVILLE TEENAGE COUNCIL
79 WEST OLD COUNTRY ROAD
HICKSVILLE, NY 11801
(516) 822-7594

Name of Project Director:

THOMAS BRUNO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT VARIOUS YOUTH RELATED PROGRAMS, COUNSELING AND OTHER RELATED PROGRAMS

Funded Amount:

$4,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HIGHLAND PARK COMMUNITY DEVELOPMENT CORPORATION
2730 ATLANTIC AVENUE
BROOKLYN, NY  11207
(718) 647-7728

Name of Project Director:

ROBERT SANTIAGO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FORUMS AND EDUCATIONAL HEARINGS ON ISSUES THAT INVOLVE SERVICES AVAILABLE TO CITIZENS TO HELP THEM REMAIN AT HOME AND SAFE.

Funded Amount:

$47,000

Requested By:

TOWNS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE
65-30 KISSENA BOULEVARD
FLUSHING, NY 11367
(718) 793-2222

Name of Project Director:

MOSHE SHUR

Purpose of Project:

FUNDS WILL BE USED TO MENTOR AND TUTOR BUKHARIAN YOUTHS. PROGRAMS ARE NON-RELIGIOUS.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HINDU TEMPLE SOCIETY OF NA
45-57 BOWNE STREET
FLUSHING, NY 11355
(718) 460-8484

Name of Project Director:

DR. UMA MYSORETAR

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF A COMMUNITY CENTER, WEEKEND SCHOOL FOR CHILDREN AND SENIOR CENTER. THE CENTER IS OPEN TO ALL IN THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HISPANIC COUNSELING CENTER, INC.
344 FULTON AVENUE
HEMPSTEAD, NY 11550
(516) 538-2613

Name of Project Director:

GLADYS SERRANO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER-SCHOOL ACTIVITIES TO PREVENT CHILDREN AT RISK FOR GANG INVOLVEMENT, PREVENT CRIMINAL ACTIVITIES AND DRUG/ALCOHOL USE.

Funded Amount:

$7,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HISPANIC FEDERATION, INC.
130 WILLIAM ST, 9TH FL
NEW YORK, NY 10038
(212) 233 – 8655

Name of Project Director:

LILLIAN RODRIGUEZ LOPEZ

Purpose of Project:

FUNDS WILL BE USED TO ORGANIZE THE FIRST LONG ISLAND SOMOS EL FUTURO CONFERENCE.

Funded Amount:

$25,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HISPANIC INFORMATION & TELECOMMUNICATIONS NETWORK, INC.
63 FLUSHING AVENUE, UNIT 281
BROOKLYN, NY  11205-1078
(877) 391-4486

Name of Project Director:

JOSE LUIS RODRIGUEZ

Purpose of Project:

FUNDS WILL BE USED TO PRODUCE INDUSTRY STANDARD REPRODUCTIONS OF FIGHTING CHILD ABUSE VIDEO FOR STATEWIDE DISTRIBUTION.

Funded Amount:

$3,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HISPANOS UNIDOS DE BUFFALO, INCORPORATED
254 VIRGINIA STREET
BUFFALO, NY 14201
(716) 856-7110

Name of Project Director:

LOURDES T. IGLESIAS

Purpose of Project:

FUNDS WILL BE USED TO HELP COVER COSTS OF ORGANIZING THE ANNUAL WESTERN NY HISPANIC CONFERENCE; A REGIONAL SUMMIT ON HISPANIC ISSUES AND AFFAIRS.

Funded Amount:

$5,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HOLY NAME FATHER’S GUILD
245 PROSPECT PARK WEST
BROOKLYN, NY 11215
(718) 768-3071

Name of Project Director:

THOMAS LARKIN

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF UNIFORMS FOR THE SOFTBALL AND BASEBALL TEAMS.

Funded Amount:

$1,500

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HOLY TRINITY SON’S OF ITALY
14-51 143 STREET
WHITESTONE, NY  11357
(718) 746-7730

Name of Project Director:

RALPH CEFALO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING COSTS OF THE COMMUNITY BASED PROGRAMS. PROGRAMS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HOME FOR CONTEMPORARY THEATRE AND ART, LTD.
145 AVENUE OF THE AMERICAS
NEW YORK, NY 10013
(212) 647-0202 326

Name of Project Director:

PAUL MENARD

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT ACCESS HERE, WHICH PROVIDES FREE AND SUBSIDIZED THEATRE TICKETS TO NEW YORKERS NOT TYPICALLY TARGETED BY ARTS GROUPS, INCLUDING SENIORS, STUDENTS, AND A WIDE VARIETY OF SERVICE ORGANIZATIONS.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HOMELESS ACTION COMMITTEE
393 NORTH PEARL STREET
ALBANY, NY  12207
(518) 426-0554

Name of Project Director:

DONNA DEMARIA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE CONTINUING SERVICES AND OUTREACH PROGRAMS FOR HOMELESS PEOPLE IN ALBANY,

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HOPE HOUSE
P.O. BOX 161
UTICA, NY 13503
(315) 793-3723

Name of Project Director:

ROSE WHITE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CAPITAL IMPROVEMENTS TO A DROP-IN CENTER FOR LOW-INCOME AND HOMELESS RESIDENTS OF THE MOHAWK VALLEY, WHICH PROVIDES MEALS, SOCIALIZATION, AND SERVICES.

Funded Amount:

$5,000

Requested By:

DESTITO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HOPE PROGRAM, INC.
ONE SMITH STREET
BROOKLYN, NY 11201
(718) 852-9307

Name of Project Director:

BARBARA EDWARDS DELSMAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT HOPE'S DIRECT SERVICES, WHICH INCLUDE JOB READINESS INSTRUCTION, WORK INTERNSHIPS, COMPUTER TRAINING AND GED CLASSES. THE HOPE PROGRAM EMPOWERS INDIVIDUALS LIVING IN POVERTY TO ACHIEVE ECONOMIC SELF SUFFICIENCY.

Funded Amount:

$4,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HOSPITAL AUDIENCES, INC.
548 BROADWAY, 3RD FLOOR
NEW YORK, NY 10012
(212) 575-7676

Name of Project Director:

MICHAEL JON SPENCER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACCESS TO THE ARTS FOR VULNERABLE POPULATIONS IN HEALTH AND SOCIAL SERVICE FACILITIES AND WILL EXPAND OPPORTUNITIES FOR SENIOR CITIZEN ADDITIONAL ARTS PROGRAMMING.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

HUMAN SERVICES, INC.
110-10 LIBERTY AVENUE
RICHMOND HILL, NY  11419
(718) 641-3000

Name of Project Director:

TAJ RAJKUMAR

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE PRE-K TO B.A. INITIATIVE, THE PROJECT WILL PROVIDE OUTREACH TO PARENTS STRUGGLING TO ASSIST THEIR CHILDREN IN THE ACADEMIC ARENA. HOMEWORK ASSISTANCE, COLLEGE PREP AND MENTORING ARE AVAILABLE TO STUDENTS, AS WELL AS, CIVIC AWARENESS.

Funded Amount:

$20,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ICYP YOUTH PROGRAM OF ASTORIA, INC.
22-22 CRESCENT STREET
LONG ISLAND CITY, NY 11105
(212) 440-3207

Name of Project Director:

ROBERT MURPHY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE YOUTH PROGRAM WHICH OFFERS A VARIETY OF SPORTS AND IS OPEN TO BOYS AND GIRLS AGES 5 - 19 ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

INCORPORATED VILLAGE OF BAYVILLE
34 SCHOOL STREET
BAYVILLE, NY 11709
(516) 628-1439 24

Name of Project Director:

MAYOR VICTORIA SIEGEL

Purpose of Project:

FUNDS WILL BE USED TO REPLACE AND MAINTAIN VARIOUS COMMUNITY SPORTS FIELDS.

Funded Amount:

$6,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

INDEPENDENT CHURCH OF GOD IN CHRIST
2709 20TH STREET
NIAGARA FALLS, NY  14305
(716) 282-2217

Name of Project Director:

REV. JIMMIE SERIGHT

Purpose of Project:

FUNDS WILL BE USED TO PREVENT INCIDENCES OF JUVENILE DELINQUENCY IN AT-RISK YOUTH THROUGH EDUCATION. SPECIFICALLY, AN AUTO-DETAIL, PAINTING AND COLLISION PROGRAM TO HELP WITH EMPLOYMENT READINESS. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

INGLESIA LA FAMILIA CHRISTIANA
880 EAST 180TH STREET
BRONX, NY 10460
(718) 741-3403

Name of Project Director:

REV. MOISES NIEVES

Purpose of Project:

FUNDS WILL BE USED TO HELP OPERATE A FOOD PANTRY AND PROGRAMS FOR THE POOR. THE PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

INTERCLUB ASSOCIATION OF THROGGS NECK
665 SHORE DRIVE
BRONX, NY  10465
(718) 829-3129

Name of Project Director:

MICHELE LOUGHERY

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COSTS OF THE ANNUAL
INTERCLUB SWIMMING COMPETITION.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

INTERFAITH CAREGIVERS VOLUNTEER PROGRAM
2975 INDEPENDENCE AVENUE
BRONX, NY 10463
(718) 548-1700  477

Name of Project Director:

GRACE BOVA

Purpose of Project:

FUNDS WILL BE USED TO ENCOURAGE VOLUNTEERING WITHIN THE HISPANIC COMMUNITY IN THE BRONX TO AID ELDERLY RESIDENTS WITH DAY TO DAY ACTIVITIES AND PROVIDE VALUABLE SERVICES TO THE ELDERLY COMMUNITY.

Funded Amount:

$5,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
INTERFAITH NUTRITION NETWORK
211 FULTON AVENUE
HEMSTEAD, NY 11550
(516) 486-8506

JEAN KELLY

FUNDS WILL BE USED TO PROVIDE EMERGENCY SHELTER AND SUPPORTIVE SERVICES TO INDIVIDUALS AND FAMILIES WHO ARE NOT ELIGIBLE FOR OR DO NOT YET RECEIVE PUBLIC ASSISTANCE.

$2,500

LAVINE

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

INTERFAITH PARTNERSHIP FOR THE HOMELESS (IPH)
176 SHERIDAN AVENUE
ALBANY, NY 12210
(518) 434-8021

Name of Project Director:

JANINE ROBITAILLE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OPERATING SUPPORT FOR THE SHERIDAN HOLLOW DROP-IN CENTER.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

INTERNATIONAL BASEBALL LITTLE LEAGUE, INC.
1244 OGDEN AVENUE #1
BRONX, NY  10452
(718) 293-2429

Name of Project Director:

GABARIEL BARCACEI

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE A POSITIVE ENVIRONMENT FOR THE YOUTH THROUGH COMPETITIVE BASEBALL.

Funded Amount:

$2,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

IRONDEQUOIT YOUTH FOOTBALL ASSOCIATION, INC.
P.O. BOX 77059
ROCHESTER, NY 14617
(585) 967-2133

Name of Project Director:

BRIAN SAMPSON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW EQUIPMENT TO HELP KEEP CHILDREN SAFE.

Funded Amount:

$7,500

Requested By:

MORELLE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ISLAND HARVEST
199 SECOND STREET
MINEOLA, NY 11501
(516) 294-8528 38

Name of Project Director:

RANDI SHUBIN DRESNER

Purpose of Project:

FUNDS WILL BE USED FOR THE KIDS ALLIANCE WEEKEND FOOD-TO-GO PROGRAM TARGETING CHILDREN RELIANT ON SCHOOL LUNCHES

Funded Amount:

$2,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ISLAND HARVEST
199 SECOND AVENUE
MINEOLA, NY 11501
(516) 294-8528

Name of Project Director:

RANDI SHUBIN DRESNER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ASSISTANCE AND MEALS TO THE POOR AND HUNGRY. FUNDS WILL ALSO BE USED TO MAINTAIN THE DONATION OF FOOD TO SOUP KITCHENS AND FOOD PANTRIES.

Funded Amount:

$2,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ISLAND HARVEST
199 SECOND STREET
MINEOLA, NY 11501
(631) 294-8528

Name of Project Director:

RANDI SHUBIN-DRESNER

Purpose of Project:

Funds will be used for operating expenses for the Anti-Hunger Program.

Funded Amount:

$5,000

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ISLAND HARVEST  
199 SECOND STREET  
MINEOLA, NY 11501  
(516) 294-8528 23

Name of Project Director:

RANDI SHUBIN DRESNER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FOOD TO THOSE IN NEED AND FOR THE SUPPORT OF TRAINED VOLUNTEERS.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ISLAND HARVEST  
199 SECOND STREET  
MINEOLA, NY 11501  
(516) 294-8528

Name of Project Director:

RANDI SHUBIN DRESNER

Purpose of Project:

FUNDS WILL BE USED TO RESCUE AND TRANSPORT SURPLUS FOOD TO FEED THE HUNGRY.

Funded Amount:

$3,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ISLAND HARVEST
199 SECOND STREET
MINEOLA, NY  15501
(516) 294-8528

Name of Project Director:

RANDI SHUBIN DRESNER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CHILDREN WITH FOOD TO TAKE HOME FOR THE WEEKEND.

Funded Amount:

$10,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ISLAND HARVEST  
199 SECOND STREET  
MINEOLA, NY 11501  
(516) 294-8528

Name of Project Director:

RANDI SHUBIN DRESNER

Purpose of Project:

FUNDS WILL BE USED FOR COSTS OF DELIVERING FOOD TO RECIPIENT AGENCIES, SUCH AS FLEET MAINTENANCE AND FUEL AS WELL AS COMMUNITY EDUCATION

Funded Amount:

$5,000

Requested By:

FITZPATRICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
ISLAND HARVEST
199 SECOND STREET
MINEOLA, NY 11501
(516) 294-8528

RANDI SHUBIN DRESNER

FUNDS WILL BE USED TO INCREASE DELIVERY FOOD DISTRIBUTION

$2,500

RAIA

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ISLAND HARVEST
199 SECOND STREET
MINEOLA, NY 11501
(516) 294-8528

Name of Project Director:

RANDI SHUBIN DRESNER

Purpose of Project:

FUNDS WILL BE USED FOR DELIVERY OF FOOD TO THOSE IN NEED

Funded Amount:

$5,000

Requested By:

BARRA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ISLAND HARVEST
199 SECOND STREET
MINEOLA, NY 11501
(516) 294-8528

Name of Project Director:

RANDI SHUBIN DRESNER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE ISLAND HARVEST PROVIDES

Funded Amount:

$2,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ISLAND HARVEST
199 SECOND STREET
MINEOLA, NY 11501
(516) 294-8528

Name of Project Director:

RANDI SHUBIN DRESNER

Purpose of Project:

FUNDS WILL BE USED TO INCREASE THEIR DELIVERY OF QUALITY, RESCUED FOOD TO THE HUNGRY

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
ITALIAN BOARD OF GUARDIANS, INC.
7808 18TH AVENUE
BROOKLYN, NY  11214
(718) 232-4242

MARIA PATALANO

Funds will be used to enhance and expand educational and counseling services, and to provide tutorial and mentoring services.

$5,000

ABBATE

OFFICE OF CHILDREN AND FAMILY SERVICES
ITALIAN CLUB OF STATEN ISLAND FOUNDATION, INC.
1290 RICHMOND ROAD
STATEN ISLAND, NY  10304
(718) 979-9535

R. DOM MACRI

FUNDS WILL BE USED TO PURCHASE, PACK AND DELIVER 312 FOOD CARTONS TO NEEDY FAMILIES.

$3,000

CUSICK

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JAMAICA MUSLIM CENTER, INC.
85-37 168TH STREET
JAMAICA, NY  11432
(718) 739-3182

Name of Project Director:

KHWAJA MIZAN HASSAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MULTI-CULTURAL PROGRAMMING FOR YOUTH TO LEARN MORE ABOUT OTHER CULTURES. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JAMAICA YMCA
89-25 PARSONS BOULEVARD
JAMAICA, NY  11432
(718) 739-6600  6001

Name of Project Director:

CEDRIC DEW

Purpose of Project:

THE JAMAICA YMCA COMPUTER CENTER WILL OFFER THE COMMUNITY ACCESS TO TECHNOLOGY TO RESEARCH CAREERS, LEARN THE BASICS OF COMPUTERS, AND BE TRAINED IN BASIC OPERATING SYSTEMS. THIS TECHNOLOGY WILL BE USED FOR HOMEWORK ASSISTANCE AND RESOURCE OPPORTUNITIES. BY UPGRADING THIS COMPUTER CENTER THE YMCA WILL BE ABLE TO ASSIST EVERY AGE GROUP AND DIVERSE COMMUNITY IN JAMAICA WITH TECHNOLOGY.

Funded Amount:

$25,000

Requested By:

COOK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JAMES A. BLAND RESIDENT ASSOCIATION, INC.
40-25 COLLEGE POINT BOULEVARD, #5F
FLUSHING, NY 11354
(718) 321-9250

Name of Project Director:

CRAIG KINSEY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL PROGRAMS FOR FLUSHING CHILDREN.

Funded Amount:

$3,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JAMES E. DAVIS, STOP THE VIOLENCE
1135 SAINT JOHN'S PLACE
BROOKLYN, NY  11213
(718) 221-2911

Name of Project Director:

GEOFFREY DAVIS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF THE STOP THE VIOLENCE PROGRAM IN ORDER TO ENSURE A SAFER PLACE FOR THE COMMUNITY.

Funded Amount:

$4,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JAMESVILLE-DEWITT LITTLE LEAGUE, INC.
6300 LONE WOLF DRIVE
JAMESVILLE, NY  13078
(315) 492-2859

Name of Project Director:

BRUCE GIANNI

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT IMPROVEMENTS AT THE JAMESVILLE DEWITT LITTLE LEAGUE FIELD.

Funded Amount:

$15,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWHISH BOARD OF FAMILY AND CHILDREN'S SERVICES, INC.
521 WEST 239TH STREET
BRONX, NY 10403
(718) 601-2280

Name of Project Director:

KAREN CWALINSKI

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE PROGRAMS FOR CHILDREN THROUGH THE PURCHASE AND USE OF PLAY THERAPY EQUIPMENT AND SUPPLIES.

Funded Amount:

$2,500

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWISH CHILDCARE ASSOCIATION OF NEW YORK
120 WALL STREET, 12TH FLOOR
NEW YORK, NY 10005
(718) 558-9930

Name of Project Director:

DEBBY PERELMUTER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COUNSELING AND OTHER SERVICES TO TEENAGERS IN FOREST HILLS AND REGO PARK. THE PROGRAM IS OPEN TO ALL TEENS ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWS CHILREN’S LEARNING LAB, INC.
515 WEST 20TH STREET - 4E
NEW YORK, NY  10011
(212) 924-4500

Name of Project Director:

AVIVA SUSSMAN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROVIDING THE SCHOOL PROGRAMS, INCLUDING OUTREACH TO PUBLIC AND INDEPENDENT SCHOOLS, ART MATERIALS FOR STUDENT PROJECTS, SALARIES, ETC.

Funded Amount:

$26,000

Requested By:

BROOK-KRASNY, CYMBROWITZ-S, SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY CENTER OF GREATER BUFFALO, INC.
787 DELAWARE AVENUE
BUFFALO, NY 14209
(716) 886-3145

Name of Project Director:

BARBARA STONE REDEN

Purpose of Project:

FUNDS WILL BE USED TOWARD THE RECONSTRUCTION OF A PLAYGROUND, WHICH IS OPEN TO ALL CHILDREN IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$6,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY CENTER OF GREATER ROCHESTER, INC.
1200 EDGEWOOD AVENUE
ROCHESTER, NY  14618
(585) 461-2000

Name of Project Director:

LESLIE BERKOWITZ

Purpose of Project:

FUNDS WILL BE USED TO CREATE AN INDOOR PLAY GYM AND THERAPY AREA FOR CHILDREN AGES 1-4. THE CENTER IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

MORELLE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY COUNCIL OF GREATER CONEY ISLAND, INC.
3001 WEST 37TH STREET
BROOKLYN, NY  11224-1479
(718) 449-5000

Name of Project Director:

CHAVA ABELSKY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TECHNICAL ASSISTANCE TO THE NON-PROFIT COMMUNITY BASED ORGANIZATIONS TO HELP THEM COMPUTERIZE THEIR PROGRAMMATIC, FISCAL AND ADMINISTRATIVE OPERATIONS, THEREBY IMPROVING THEIR ACCOUNTABILITY.

Funded Amount:

$8,500

Requested By:

JACOBS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY COUNCIL OF KEW GARDENS AND RICHMOND HILL
82-46 LEFFERTS BOULEVARD, SUITE 1A
KEW GARDENS, NY   11415
(718) 847-5277

Name of Project Director:

LISA LEDERER

Purpose of Project:

FUNDS WILL BE USED TO SUPPLY YOUTH OF THE COMMUNITY WITH PHYSICAL FITNESS PROGRAMS, AS WELL AS, EDUCATIONAL AND CULTURAL ACTIVITIES, ON A NON-SECTARIAN BASIS. THE PROGRAM ALSO SUPPLIES NOURISHMENT FOR THE DESTITUTE AND HOMEBOUND, AS WELL AS, ASSISTING WITH EXCURSIONS AND SEMINARS.

Funded Amount:

$5,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY COUNCIL OF PELHAM PARKWAY, INC.
2157 HOLLAND AVENUE
BRONX, NY 10462
(718) 792-4744

Name of Project Director:

DAVID EDELSTEIN

Purpose of Project:

FUNDS WILL BE USED TO ASSURE THAT LOCAL SENIORS HAVE ACCESS TO PUBLIC BENEFITS AND ADVOCACY. IN ADDITION, FUNDS WILL ALSO BE USED TO PROVIDE GUIDANCE WITH HOUSING RELATED ISSUES IN THE NEIGHBORHOODS.

Funded Amount:

$20,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWSH COMMUNITY COUNCIL SERVICES COMMISSION, INC.
80-02 KEW GARDENS ROAD
KEW GARDENS, NY  11415
(718) 268-2900

Name of Project Director:

JOYCE TRAINA

Purpose of Project:

FUNDS WILL BE USED TO PARTIALLY OFFSET THE COST OF PROVIDING CRITICAL SOCIAL SERVICES TO NEEDY CHILDREN AND FAMILIES, INCLUDING BUT NOT LIMITED TO CRISIS INTERVENTION, HOUSING SUPPORT TO SPECIAL NEEDS POPULATIONS, EMPLOYMENT TRAINING AND JOB DEVELOPMENT, ETC.

Funded Amount:

$95,000

Requested By:

ABBATE, BENEDETTO, BING, BRENNAN, BROOK-KRASNY, CANESTRARI, CLARK, CYMBROWITZ-S, DINOWITZ, FARRELL, GLICK, GOTTFRIED, HIKIND, HOYT, MAISEL, MAYERSOHN, MILLMAN, O'DONNELL, PHEFFER, ROSENTHAL, SILVER, WEINSTEIN, WEPRIN, YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY LITTLE LEAGUE, INC.
71-25 171ST STREET
HILLCREST, NY  11365
(718) 380-0946

Name of Project Director:

MARC KATZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE POSITIVE RECREATIONAL OPPORTUNITIES FOR YOUTH. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWISH COMMUNITY SERVICES COALITION
1525 CENTRAL AVENUE
FAR ROCKAWAY, NY  11691
(718) 327-6060

Name of Project Director:

ESTHER SCHENKER

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET THE EXPENSE OF RUNNING THE FREE FOOD PANTRY.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWISH COUNCIL OF YONKERS
600 NORTH BROADWAY
YONKERS, NY 10701
(914) 423-5009

Name of Project Director:

JANICE LUBIN

Purpose of Project:

FUNDS WILL BE USED FOR INTERGENERATIONAL PROGRAMS

Funded Amount:

$10,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JEWISH COUNCIL OF YONKERS, INC.
600 NORTH BROADWAY
YONKERS, NY 10701
(914) 423-5009

Name of Project Director:

JANICE LUBIN KIRSCHNER

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF A NEW PHONE SYSTEM. THE COUNCIL OFFERS VARIOUS PROGRAMS WHICH ARE OPEN TO ALL IN THE COMMUNITY.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JUAN PABLO DUARTE FOUNDATION  
427 FT. WASHINGTON AVENUE, SUITE 35-A  
NEW YORK, NY 10033  
(212) 740-6806

Name of Project Director:

LAURA ACOSTA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES ASSOCIATED WITH DEVELOPMENT AND OUTREACH PROGRAMS.

Funded Amount:

$3,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JUBILEE HOMES OF SYRACUSE, INC.
901 TALLMAN STREET
SYRACUSE, NY 13204
(315) 428-0070

Name of Project Director:

WALT DIXIE

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE URBAN DELIGHTS YOUTH FARMSTAND PROJECT ($5,000) AND THE SOUTHWEST SHOWCASE SUNDAYS PROJECT ($5,000).

Funded Amount:

$10,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

JUNIOR ACHIEVEMENT OF NORTHEASTERN NEW YORK, INC.
8 STANLEY CIRCLE
LATHAM, NY 12110
(518) 783-4336

Name of Project Director:

EDWARD P. MURRAY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE K-12 STUDENTS WITH PROGRAMS THAT ARE AGE APPROPRIATE AND INTERACTIVE TO TEACH THEM ABOUT ECONOMICS AND FUNDAMENTAL THEORY OF THE FREE ENTERPRISE SYSTEM IN ORDER TO PREPARE THEM FOR A PRODUCTIVE ADULT LIFE.

Funded Amount:

$4,000

Requested By:

GORDON-T

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KEEP RISING TO THE TOP
119 EAST 102ND STREET, APT. #5B
NEW YORK, NY 10029
(212) 410-9426

Name of Project Director:

VIOLETA GALAGARZA

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE THE DEVELOPMENT OF YOUNG PEOPLE IN THE ARTS THROUGH MUSIC AND DANCE EDUCATIONAL PROGRAMS.

Funded Amount:

$5,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

KEHILAT SEPHARDIM OF AHAVAT ACHIM
150-62 78TH ROAD
FLUSHING, NY  11367
(718) 541-9574

Name of Project Director:

RABBI SHLOMO NISANOV

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTER SCHOOL PROGRAM INCLUDING TUTORIAL AND HOMEWORK HELPER AND MENTORING COMPONENTS. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KERRI EDGE CULTURAL ARTS COLLECTIVE, INC.
193-19 NASHVILLE BOULEVARD
ST. ALBANS, NY  11412
(718) 949-1024

Name of Project Director:

KERRI EDGE

Purpose of Project:

FUNDS WILL BE USED TO TEACH CHILDREN VARIOUS DANCE TECHNIQUES INCLUDING, MODERN, JAZZ, AFRICAN, TAP, BALLET AND OTHER DANCE FORMS.

Funded Amount:

$6,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KEW GARDENS HILLS CIVIC ASSOCIATION
P.O. BOX 670085
KEW GARDEN HILLS, NY  11367
(718) 263-1760

Name of Project Director:

PATRICIA DOLAN

Purpose of Project:

FUNDS WILL BE USED FOR LIBRARY PROGRAMS FOR YOUTH IN THE COMMUNITY.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KEW GARDENS HILLS COMMUNITY FOUNDATION, INC.
P.O. BOX 670085
FLUSHING, NY 11367
(718) 263-1760

Name of Project Director:

PATRICIA DOLAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE KEW GARDENS HILLS HOMEOWNERS CIVIC ASSOCIATION. IN ADDITION TO BASIC OPERATING EXPENSES, FUNDS MAY BE USED FOR COMMUNITY EVENTS SUCH AS CONCERTS AND GRAFFITI REMOVAL.

Funded Amount:

$2,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KEY WOMEN OF AMERICA, INC.
100 WASHINGTON STREET, #3-S
HEMPSTEAD, NY 11550
(516) 538-2192

Name of Project Director:

DOROTHY PORTER

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY SUPPORT FOR THE YOUTH AND SENIORS; PROVIDE CLOTHING TO CHILDREN OF INCARCERATED PARENTS; ASSIST YOUTH IN SUMMER CAMP PROGRAMS; PROVIDE FOOD TO THE HOMELESS.

Funded Amount:

$5,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KICKERS YOUTH SPORTS ASSOCIATION OF SOUTHEAST QUEENS, INC.
139-34 225TH STREET
LAURELTON, NY 11413
(718) 723-7014

Name of Project Director:

FRITZ CASIMIR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUNG PEOPLE WITH EDUCATIONAL, RECREATIONAL AND MENTORING SERVICES.

Funded Amount:

$4,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KIDS S.P.A.C.E. (SCHOOL-BASED PROGRAM OF ACTIVITY, CARE AND ENRICHMENT 
21 LOCUST AVENUE 
RYE, NY  10580 
(914) 921-3390

Name of Project Director:

LAUREN COLLINS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CLEAN, SAFE PLAY CENTERS WHERE CHILDREN CAN USE BLOCKS, MANIPULATIVES AND GAMES. FUNDS WILL ALSO BE USED TO REPLACE BROKEN BLOCK UNITS AND CARPETS, AS WELL AS TO INCREASE THE SUPPLY OF UNIT BLOCKS.

Funded Amount:

$2,500

Requested By:

LATIMER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KIDS X-PRESS, INC.
P.O. BOX 374
WHITE PLAINS, NY 10603
(914) 261-0815

Name of Project Director:

NIVIA VIERA

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE WRITTEN AND ILLUSTRATIVE COMMUNICATIONS AMONG CHILDREN WITHIN THE AGE RANGE OF 7-14 YEARS OLD. THIS IS DONE IN A MONTESSORI BASED PROGRAM.

Funded Amount:

$5,000

Requested By:

BRADLEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KINGS BAY YM-YWHA, INC.
3495 NOSTRAND AVENUE
BROOKLYN, NY  11229
(718) 648-4700

Name of Project Director:

LEONARD PETLAKH

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE A TWO-DAY A WEEK PROGRAM FOR THE VISUALLY IMPAIRED AND SENIORS.

Funded Amount:

$6,752

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KINGS BAY YOUTH ORGANIZATION, INC.
2670 COYLE STREET
BROOKLYN, NY  11235
(718) 934-6341

Name of Project Director:

LOUIS A. SPINA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SPORTS EQUIPMENT FOR THE YOUTH
AFTER SCHOOL PROGRAM.

Funded Amount:

$2,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KINGSBRIDGE HEIGHTS COMMUNITY CENTER, INC.
3101 KINGSBRIDGE TERRACE
BRONX, NY 10463
(718) 884-0700

Name of Project Director:

GISELLE SUSCA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND RECREATIONAL SERVICES VIA THE TEEN CENTER.

Funded Amount:

$10,000

Requested By:

RIVERA-J

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KISSENA PARK CIVIC ASSOCIATION
P.O. BOX 580423
FLUSHING, NY 11358
(718) 692-7744

Name of Project Director:

BEVERLY MCDERMOTT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A COMMUNITY EVENT.

Funded Amount:

$5,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

KOREAN COMMUNITY SERVICES OF METROPOLITAN NEW YORK, INC.
35-56 159TH STREET
FLUSHING, NY  11358
(718) 939-6137

Name of Project Director:

SHIH SON

Purpose of Project:

FUNDS WILL BE USED FOR A SUMMER INTERNSHIP PROGRAM FOR KOREAN YOUTH WHO WILL WORK IN THE COMMUNITY.

Funded Amount:

$14,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LABOR AND INDUSTRY FOR EDUCATION, INC.
112 SPRUCE STREET
CEDARHURST, NY 11516
(516) 374-4564

Name of Project Director:

RABBI RICHARD BERNSTEIN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR THE EDUCATIONAL CENTERS FOR RECREATIONAL AND EDUCATION PROGRAMS AND DEVELOP DROP-IN HOMEWORK CENTERS FOR AT-RISK YOUTH.

Funded Amount:

$10,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LACKAWANNA COMMUNITY BOXING, INC.
625 RIDGE ROAD
LACKAWANNA, NY 14218
(716) 826-3422

Name of Project Director:

RAY BRASCH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BOXING PROGRAMS FOR YOUTH.

Funded Amount:

$5,000

Requested By:

SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LAFUERZA UNIDA, INC.
14 GLEN STREET
GLEN COVE, NY  11542
(516) 756-0788

Name of Project Director:

PASQUAL BLANCO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COUNSELING AND RELATED SERVICES FOR THE PREVENTION OF HOMELESSNESS.

Funded Amount:

$5,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LAKEVIEW YOUTH FEDERATION, INC.
BOX 525
WEST HEMPSTEAD, NY 11552
(516) 766-8634

Name of Project Director:

CHARLES NANTON

Purpose of Project:

FUNDS WILL BE USED TO ENCOURAGE HIGH-LEVEL COMPETITION IN HIGH SCHOOL ATHLETICS THROUGH SUMMER YOUTH PROGRAMS.

Funded Amount:

$5,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LANSINGBURGH BOYS AND GIRLS CLUB, INC.
501 4TH AVENUE
TROY, NY 12182
(518) 235-4143

Name of Project Director:

JOSEPH G. MANUPELLA

Purpose of Project:

FUNDS WILL BE USED TO REPLACE 5 WINDOWS AND INSULATE THE WALLS IN THE COMMUNITY ROOM WHICH WILL RESULT IN A REDUCTION IN HEATING COSTS AND MAINTENANCE OF A COMFORTABLE ENVIRONMENT FOR THE YOUTH AND THE COMMUNITY RESIDENTS WHO USE THE ROOM FOR A VARIETY OF EVENTS.

Funded Amount:

$8,000

Requested By:

GORDON-T

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LANSINGBURGH BOYS AND GIRLS CLUB, INC.
501 4TH AVENUE
TROY, NY 12182
(518) 235-4143

Name of Project Director:

JOSEPH G. MANUPELLA

Purpose of Project:

FUNDS WILL BE USED TO EXPAND SERVICES FOR AT-RISK YOUTH AGES 13-19 YEARS OLD.

Funded Amount:

$7,500

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LATHAM LASSIES SOFTBALL LEAGUE, INC.
TOWN OF COLONIE PARKS AND RECREATION  ATTN: LATHAM LASSIES
71 SCHERMERHORN ROAD
COHOES, NY 12047
(518) 782-1879

Name of Project Director:

SCOTT MCINTYRE

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE LATHAM LASSIE'S SOFTBALL FIELDS FOR SAFETY PURPOSES.

Funded Amount:

$10,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LATIN AMERICAN INTEGRATION CENTER
49-06 SKILLMAN AVENUE
WOODSIDE, NY 11377
(718) 565-8500

Name of Project Director:

ANNA MARIA ARCHILLA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE WORKSHOPS IN MULTICULTURAL PROGRAMS FOR IMMIGRANT YOUTH.

Funded Amount:

$2,500

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LATINO EDUCATIONAL MEDIA CENTER, INC.
1690 LEXINGTON AVENUE
NEW YORK, NY  10029
(845) 634-0496

Name of Project Director:

LILLIAN JIMENEZ

Purpose of Project:

FUNDS WILL BE USED TO PRODUCE A DOCUMENTARY ON PUERTO RICAN WOMEN STRUGGLING FOR HUMAN RIGHTS.

Funded Amount:

$10,000

Requested By:

RIVERA-J

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LATINO UNITY DANCE PROGRAM
455 EAST 138TH STREET
BRONX, NY 10454
(718) 585-5234

Name of Project Director:

JOSE ORTEGA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ARTS, DANCE CHOREOGRAPHY INSTRUCTION AND THE PURCHASE OF SUPPLIES AND EQUIPMENT.

Funded Amount:

$8,000

Requested By:

ARROYO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LATINO-JEWISH COUNCIL OF LONG ISLAND
375 NORTH BROADWAY
JERICHO, NY 11753
(516) 942-2651

Name of Project Director:

ELLEN ISRAELSON

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE YOUTH LEADERS IN CIVIC PARTICIPATION AND ADVOCACY SKILLS.

Funded Amount:

$3,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LATINOS MAKING A DIFFERENCE, INC.
2038 DAVIDSON AVENUE
BRONX, NY  10453
(718) 294-7151

Name of Project Director:

ROBERT BARNES

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE AND CREATE MORE SPACE FOR THE AFTER SCHOOL PROGRAM, AND TO PURCHASE COMPUTERS.

Funded Amount:

$35,500

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LAW ENFORCEMENT EXPLORER
2120 RYER AVENUE
BRONX, NY  10457
(718) 220-5234

Name of Project Director:

WARREN THOMPSON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE UNIFORMS FOR EXPLORER POST, DEFRAY COST OF BI-ANNUAL TRIP TO NATIONAL CONFERENCE (WITHIN NYS), CLASSROOM SUPPLIES AND TRAINING AIDES.

Funded Amount:

$3,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LEARNING FOR LIFE CENTER
755 PARK AVENUE
HUNTINGTON, NY 11743
(631) 367-1038

Name of Project Director:

JUDAH RHINE

Purpose of Project:

FUNDS WILL BE USED FOR ONE SOUL PROJECT

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LEFRAK CITY YOUTH & ADULT ACTIVITIES ASSOCIATION, INC.
97-30 57TH AVENUE, APT. 18D
CORONA, NY 11368
(866) 862-5544

Name of Project Director:

MALACHY Z. OKOLO

Purpose of Project:

FUNDS WILL BE USED FOR A PROGRAM THAT PROVIDES SERVICES FOR COMMUNITY YOUTH AND ADULTS. THE PROGRAM HAS EDUCATIONAL ALTERNATIVES TO CRIMINAL AND SOCIIALLY DEVIANT BEHAVIOR. CULTURAL ACTIVITIES AND LOCAL IN-STATE FIELD TRIPS ARE ALSO PROVIDED.

Funded Amount:

$20,000

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LEGACY COALITION
590 EAST 166TH STREET, BUILDING C
BRONX, NY  10456
(718) 861-3330

Name of Project Director:

CAMELLA PRICE

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE FACILITY AND PURCHASE SUPPLIES FOR YOUTH ACTIVITIES.

Funded Amount:

$11,000

Requested By:

DIAZ-R

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LENOX HILL NEIGHBORHOOD HOUSE, INC.
331 EAST 70TH STREET
NEW YORK, NY   10021
(212) 744-5022

Name of Project Director:

WARREN SCHARF

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE IMPORTANT LEGAL ADVOCACY AND ORGANIZING WORK BEING DONE.

Funded Amount:

$5,000

Requested By:

BING, GRANNIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LENOX HILL NEIGHBORHOOD HOUSE, INC.
331 EAST 70TH STREET
NEW YORK, NY  10021
(212) 744-5022  1232

Name of Project Director:

WARREN B. SCHARF

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND VOCATIONAL PROGRAMS TO ADULTS IN THE COMMUNITY.

Funded Amount:

$15,000

Requested By:

GRANNIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LEROY CHRISTIAN COMMUNITY PROJECT
124 EAST MAIN STREET
LEROY, NY 14482
(585) 768-7540

Name of Project Director:

SUSAN WAKEFIELD

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM SUPPLIES FOR YOUTH PROGRAM

Funded Amount:

$2,500

Requested By:

HAWLEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LESBIAN AND GAY COMMUNITY SERVICES CENTER, INC.
ONE LITTLE WEST 12TH STREET
NEW YORK, NY 10014
(212) 620-7310

Name of Project Director:

ROSALBA MESSINA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HIV/AIDS, SUBSTANCE ABUSE AND SOCIAL SERVICE PROGRAMMING.

Funded Amount:

$29,500

Requested By:

GLICK, SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LESBIAN AND GAY COMMUNITY SERVICES CENTER, INC.
208 WEST 13TH STREET
NEW YORK, NY 10011
(212) 620-7310

Name of Project Director:

MIRIAM YOUNG

Purpose of Project:


Funded Amount:

$6,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LESBIAN AND GAY COMMUNITY SERVICES CENTER, INC.
208 WEST 13TH STREET
NEW YORK, NY 10011
(212) 620-7310

Name of Project Director:

RICHARD BURNS

Purpose of Project:

FUNDS WILL BE USED FOR MENTAL HEALTH AND SOCIAL SERVICES FOR THE LGBT COMMUNITY.

Funded Amount:

$3,000

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LESBIAN AND GAY COMMUNITY SERVICES CENTER, INC.
208 WEST 13TH STREET
NEW YORK, NY 10011
(212) 670-7310

Name of Project Director:

RICHARD BURNS

Purpose of Project:

FUNDS WILL BE USED FOR MENTAL HEALTH AND SOCIAL SERVICES PROGRAMS FOR MEMBERS OF THE LGBT COMMUNITY.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LEVISTER TOWERS COMMUNITY DEVELOPMENT CORPORATION
230 SOUTH 7TH AVENUE, APT. #3C
MOUNT VERNON, NY 10550
(914) 995-5597

Name of Project Director:

SYLVIA TYREE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT NEEDED TO RUN AN AFTER SCHOOL PROGRAM AND A SUMMER PROGRAM.

Funded Amount:

$5,000

Requested By:

PRETLOW

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LEVITTOWN/ISLAND TREES YOUTH COUNCIL
28 CHASE LANE
LEVITTOWN, NY 11756
(516) 812-3480

Name of Project Director:

KEVIN REGAN

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAM

Funded Amount:

$5,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LEVITTOWN-ISLAND TREES YOUTH COUNCIL
28 CHASE LANE
LEVITTOWN, NY 11756
(516) 731-5016

Name of Project Director:

KEVIN REGAN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THEIR COMMUNITY PROGRAMS

Funded Amount:

$10,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LEWIS MUSIC SCHOOL, INC.
116 SOUTH FRANKLIN STREET
HEMPSTEAD, NY 11550
(516) 292-7416

Name of Project Director:

KENDRA LEWIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MUSICAL INSTRUMENTS AND LESSON BOOKS FOR YOUTH (STUDENTS OF MUSIC).

Funded Amount:

$5,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LEXINGTON SCHOOL FOR THE DEAF FOUNDATION
30TH AVENUE AND 75TH STREET
JACKSON HEIGHTS, NY  11370
(718) 899-8800

Name of Project Director:

GINA CARROLL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SPORTS AND ATHLETIC EQUIPMENT FOR THE SPORTS PROGRAM. FUNDS WILL ALSO BE USED FOR GENERAL OPERATING EXPENSES TO RUN THE AFTER SCHOOL SPORTS PROGRAM.

Funded Amount:

$15,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LIFE CAMPS, INC.
90-04 161ST STREET, ROOM 201
JAMAICA, NY 11432
(646) 258-0936

Name of Project Director:

ERICA FORD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH RECREATIONAL, TUTORIAL AND ENRICHMENT SERVICES TO YOUNG PEOPLE IN SOUTHEAST QUEENS.

Funded Amount:

$5,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LIFELINE MEDIATION CENTER, INC.
615 MIDDLE COUNTRY ROAD
MIDDLE ISLAND, NY 11953
(631) 205-5054

Name of Project Director:

JOSEPH LECCI

Purpose of Project:

FUNDS WILL BE USED TO ASSIST ADOLESCENTS IN LEARNING THE IMPORTANCE OF COMMUNITY LIVING AND INVOLVEMENT.

Funded Amount:

$10,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
LIFESPAN OF GREATER ROCHESTER, INC.
1900 SOUTH CLINTON AVENUE
ROCHESTER, NY  14472
(585) 244-8400

ANN MARIE COOK

FUNDS WILL BE USED TO RECRUIT VOLUNTEERS TO BE FRIENDLY VISITORS TO HOME-BOUND OLDER ADULTS IN FAIRPORT.

$10,000

KOON

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LIFESPAN/PARTNERS IN CARING
1900 SOUTH CLINTON AVENUE
ROCHESTER, NY 14628
(585) 244-8400

Name of Project Director:

CAROLYN GANLEY

Purpose of Project:

FUNDS WILL BE USED FOR SUPPORT PROGRAMS FOR CAREGIVERS TO ASSIST CLIENTS WITH MEDICAL APPOINTMENTS, HOMECARE, SHOPPING ETC.

Funded Amount:

$5,000

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LIGHTHOUSE RESOURCE CENTER, INC.
37 WILLIAM AVENUE
CENTRAL ISLIP, NY 11722
(631) 234-7138

Name of Project Director:

REVERAND ERIC COOK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RESOURCES TO THE FAMILIES THAT ARE IN NEED, SUCH AS PROVIDING GED SERVICES, COUNSELING, JOB TRAINING, JOB PLACEMENT, ETC.

Funded Amount:

$1,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LINCOLN SQUARE NEIGHBORHOOD CENTER, INC.
250 WEST 65TH STREET
NEW YORK, NY 10023
(212) 874-0860

Name of Project Director:

STEPHANIE PINDER

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTERSCHOOL PROGRAM FOR 11-14 YEAR OLD CHILDREN.

Funded Amount:

$10,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LINDEN RESIDENTS ASSOCIATION
245 WORTMAN AVENUE, #6K
BROOKLYN, NY 11207
(718) 927-9367

Name of Project Director:

CARMEN WHICHARD

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE REFRESHMENTS FOR HOLIDAY CELEBRATION, AND TO SUPPORT EDUCATIONAL IN-STATE FIELD TRIPS.

Funded Amount:

$1,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LINDENHURST FOOTBALL & CHEERLEADING LEAGUE, INC.
P.O. BOX 477
LINDENHURST, NY 11757
(631) 226-7642

Name of Project Director:

TERRI MULZ

Purpose of Project:

FUNDS WILL BE USED FOR OPERATING EXPENSES AND FOR EQUIPMENT FOR A YOUTH RECREATION PROGRAM.

Funded Amount:

$6,000

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LIPSKY-BLUM 764 JEWISH WAR VETERANS
58-20 LITTLE NECK PARKWAY
LITTLE NECK, NY 11362
(718) 225-6750

Name of Project Director:

BENJAMIN SINGER

Purpose of Project:

FUNDS WILL BE USED FOR THE HARMONY INITIATIVE PROGRAM WHICH BRINGS DIVERSE GROUPS LIVING IN THE SAME NEIGHBORHOOD TOGETHER IN FORUM, AND PROVIDES WORKSHOPS TO PREVENT AN ANTI-BIASED SITUATION. FUNDS WILL ALSO BE USED FOR AN ANNUAL FOOD DRIVE PANTRY.

Funded Amount:

$1,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LITTLE BRANCHES OF BORINQUEN, INC.
2038 DAVIDSON AVENUE
BRONX, NY  10453
(718) 583-9708

Name of Project Director:

LUCY VELEZ

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF EQUIPMENT AND UNIFORMS.

Funded Amount:

$1,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LITTLE LEAGUE BASEBALL, INC.
P.O. BOX 48
CENTRAL ISLIP, NY 11722
(631) 234-4464

Name of Project Director:

BARBARA LAWRENCE

Purpose of Project:

FUNDS WILL BE USED TOWARDS COST FOR EQUIPMENT NEEDED FOR THE LITTLE LEAGUE.

Funded Amount:

$3,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LITTLE LEAGUE BASEBALL, INC.
1936 EAST TREMONT AVENUE, SUITE 3B
BRONX, NY  10462
(718) 863-7222

Name of Project Director:

DEAN RICKS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL SPORTS TO AREA YOUTH THAT FOSTER DISCIPLINE, CHARACTER AND COMMUNITY.

Funded Amount:

$3,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LITTLE LEAGUE BASEBALL, INC.
25 INDIAN ROAD
NEW YORK, NY 10034
(212) 942-1163

Name of Project Director:

PEDRO RAMIREZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SPORTS EQUIPMENT, SPONSOR UMPIRES, AND PROVIDE IN-STATE TRANSPORTATION.

Funded Amount:

$4,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LITTLE LEAGUE RAIDERS BASEBALL, INC.
1015 GERARDS AVENUE, #6C
BRONX, NY 10452
(718) 583-5977

Name of Project Director:

ARMANDO PENA

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE A POSITIVE ENVIRONMENT FOR YOUTH THROUGH SOCIAL SKILLS AND COMPETITIVE BASEBALL.

Funded Amount:

$2,500

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LITTLE SHEPHERDS COMMUNITY SERVICES
2260 ANDREWS AVENUE
BRONX, NY  10468
(718) 295-2740

Name of Project Director:

DEXTER CRUZADO

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE AFTERSCHOOL PROGRAM.

Funded Amount:

$7,700

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LITTLE SHEPHERDS COMMUNITY SERVICES  
2051 GRAND CONCOURSE  
BRONX, NY  10453  
(718) 295-2277

Name of Project Director:

ROSALYN SPRIGGS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE YOUTH WITH COLLEGE TOURS WITHIN NEW YORK STATE.

Funded Amount:

$5,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LIVING RESOURCES CORPORATION
2176 GUILDERLAND AVENUE
SCHENECTADY, NY 12306
(518) 346-8888 3317

Name of Project Director:

FREDRICK W. ERLICH

Purpose of Project:

FUNDS WILL BE USED FOR NEW FLOORING, CARPETING AND FURNITURE
FOR 3 OF THE RESIDENCE HOMES AND THE MAIN OFFICE

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LIVONIA FOOD PANTRY
P.O. BOX 223
LAKEVILLE, NY 14480
(585) 346-6470

Name of Project Director:

DANIELLE WEICHMAN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH FOOD PANTRY

Funded Amount:

$1,000

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LONG BEACH LATINO CIVIC ASSOCIATION, INC.
52 EAST PARK AVENUE, 2ND FLOOR
LONG BEACH, NY  11561
(516) 889-4912

Name of Project Director:

MIGUEL CRUZ

Purpose of Project:

FUNDS WILL BE USED TO IDENTIFY AND INTERVENE WITH AT-RISK YOUTH AGES 14-18 TO IMPLEMENT ACTIVITIES TO CULTIVATE COMMUNITY LEADERSHIP AND DEVELOP VOCATIONAL SKILLS.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LONG ISLAND CITY - YMCA  
32-23 QUEENS BOULEVARD  
LONG ISLAND CITY, NY 11101  
(718) 392-7932

Name of Project Director:

MICHAEL KELLER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE TEEN MENTOR PROGRAM IN WESTERN QUEENS HIGH SCHOOL, INCLUDING SALARIES AND SUPPLIES.

Funded Amount:

$2,500

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LONG ISLAND CITY GOSPEL CHURCH, INC.
12-11 40TH AVENUE
LONG ISLAND CITY, NY  11101
(718) 784-4673

Name of Project Director:

DR. MITCHELL O. TAYLOR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE AFTER SCHOOL TUTORIAL PROGRAMS WHICH PROVIDE SAFE, NURTURING SUPPORTIVE ENVIRONMENT FOR AT-RISK YOUTH AFTER SCHOOL TUTORIAL HOMEWORK ASSISTANCE AND RECREATIONAL PROGRAMS ARE OFFERED. PROGRAMS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LONG ISLAND FAMILIES TOGETHER
193 BROADWAY, SUITE A
AMITYVILLE, NY 11701
(631) 264-5438

Name of Project Director:

JANET ULLRICH

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT SEMINARS AND PROGRAMS AIMED AT BUILDING FAMILY INVOLVEMENT IN MENTAL ILLNESS SITUATIONS AND FOR PROGRAMS AND MATERIALS ASSOCIATED WITH A YOUTH FORUM

Funded Amount:

$5,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LONG ISLAND GAY AND LESBIAN YOUTH, INC.
34 PARK AVENUE
BAY SHORE, NY 11706
(631) 665-2300

Name of Project Director:

DAVID KILMNICK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE AND CONFIDENTIAL SERVICES TO GAY, LESBIAN, BI-SEXUAL, AND TRANSGENDER YOUTH AND ADULTS AFFECTED BY VIOLENCE. FUNDS WILL ALSO BE USED TO SERVE VICTIMS THROUGH PREVENTION AND TREATMENT SERVICES.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LONG ISLAND GAY AND LESBIAN YOUTH, INC.
34 PARK AVENUE
BAY SHORE, NY  11706
(631) 665-2300

Name of Project Director:

DAVID KILMNICK, PH.D

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE THE COMMUNITY ON LEADERSHIP DEVELOPMENT. MENTAL HEALTH SERVICES WILL ALSO BE PROVIDED.

Funded Amount:

$2,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LONG ISLAND GAY AND LESBIAN YOUTH, INC.
34 PARK AVENUE
BAY SHORE, NY  11706
(631) 665-2300

Name of Project Director:

DAVID KILMNICK, PH.D

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATION, HEALTH, ADVOCACY,
AND SOCIAL AND RECREATIONAL SERVICES TO THE LONG ISLAND
LGBT SENIOR COMMUNITY.

Funded Amount:

$75,000

Requested By:

EDDINGTON, LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LONG ISLAND MASTERWORKS
P.O. BOX 458
NORTHPORT, NY 11768
(631) 262-0200

Name of Project Director:

JERENE WEITMAN

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH PROGRAM FESTIVAL

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LONG ISLAND TOY LENDING CENTER FOR CHILDREN WITH DISABILITIES, INC.
116 MERRITTS ROAD
FARMINGDALE, NY  11735
(516) 889-8287

Name of Project Director:

COLLEEN MOSEMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CHILDREN WITH DISABILITIES, RANGING FROM INFANCY TO 10 YEARS OLD, WITH A TOY LENDING LIBRARY. TOYS ARE LOANED TO AID PARENTS IN FOSTERING THEIR CHILD’S DEVELOPMENT AND REINFORCING LEARNED SKILLS.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LOUIS H. PINK COMMUNITY CENTER, INC.
1210 LORING AVENUE, #5C
BROOKLYN, NY  11208
(718) 680-2712

Name of Project Director:

CLARISSA MOORE

Purpose of Project:

FUNDS WILL BE USED FOR IN-STATE BUS TRIPS, T-SHIRTS FOR TENANTS, FAMILY DAY REFRESHMENTS, TROPHIES, BASKETBALLS AND AWARDS.

Funded Amount:

$3,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LOWER EAST SIDE GAUCHO BASEBALL PROGRAM
9 AVENUE A
NEW YORK, NY  10009
(212) 473-1496

Name of Project Director:

DAVID MCWATER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE LEAGUE’S LOW COST (FREE BASEBALL PROGRAMS FOR NEIGHBORHOOD CHILDREN).

Funded Amount:

$5,000

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LOWER EAST SIDE GIRLS CLUB
67 AVENUE D
NEW YORK, NY  10009
(212) 982-1633

Name of Project Director:

LYN PENTECOST

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR THE GIRLS’ EDUCATIONAL SUPPORT CENTER.

Funded Amount:

$10,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LP FAM'S YOUTH ORGANIZATION, INC.
109-48 128 STREET
SOUTH OZONE PARK, NY  11420
(718) 835-8416

Name of Project Director:

PAUL COX

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT ACTIVITIES AND EXPENSES OF THE BASKETBALL AND BASEBALL TEAMS OF THIS ORGANIZATION, INCLUDING RENTAL OF PRACTICE SPACE, IN-STATE TRANSPORTATION, UNIFORMS OR EQUIPMENT.

Funded Amount:

$5,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LP FAM'S YOUTH ORGANIZATION, INC.
109-48 128TH STREET
SOUTH OZONE PARK, NY 11420
(718) 593-7864

Name of Project Director:

DAVID REID

Purpose of Project:

FUNDS WILL BE USED TO ORGANIZE BASEBALL, BASKETBALL, AND FOOTBALL TEAMS FOR CHILDREN AND SPONSOR EDUCATIONAL VISITS, AND IN-STATE TRIPS TO SPORTS AND CULTURAL EVENTS. FUNDS WILL ALSO Assist WITH THE ANNUAL CHILDREN'S DAY AND FAMILY DAY HELD IN SOUTH OZONE PARK.

Funded Amount:

$10,000

Requested By:

COOK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LUMBERJACK LOU'S COMMUNITY BOXING, INC.
40-G CORBIN AVENUE
BAY SHORE, NY 11706
(631) 968-8343

Name of Project Director:

LOU LLOVET

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE COMMUNITY WITH A BOXING PROGRAM FOR CHILDREN.

Funded Amount:

$3,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

LUTHERAN ELEMENTRY SCHOOL OF BAY RIDGE
440 OVINGTON AVENUE
BROOKLYN, NY 11209
(718) 748-9502

Name of Project Director:

LORRAINE M. TUCCILLO

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE MIND, BODY, AND SPIRIT OF COMMUNITY CHILDREN BY PROVIDING COUNSELLING AND ARTS PROGRAM AFTER SCHOOL. FUNDS WILL ALSO BE USED TO PURCHASE SUPPLIES AND OFFSET EXPENSES FOR COUNSELLING. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MACHSON MOBILE
80 MAIDEN LANE - 21ST FLOOR
NEW YORK, NY 10038
(212) 453-9500

Name of Project Director:

HERB FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CLOTHING, FOOD AND OTHER ESSENTIALS TO POOR FAMILIES WITHIN THE COMMUNITY.

Funded Amount:

$115,000

Requested By:

ABBATE, BENEDETTO, BING, BRENNAN, BROOK-KRASNY, CANESTRARI, CLARK, CYMBROWITZ-S, DINOWITZ, FARRELL, GLICK, GOTTFRIED, HIKIND, HOYT, MAISEL, MAYERSOHN, MILLMAN, O’DONNELL, PHEFFER, ROSENTHAL, SILVER, WEINSTEIN, WEPRIN, YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MANHATTAN YOUTH RECREATION AND RESOURCES, INC.
225 BROADWAY, SUITE 1020
NEW YORK, NY 10007
(212) 766-1104  229

Name of Project Director:

BOB TOWNLEY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PUBLIC SCHOOL 89'S AFTER SCHOOL PROGRAM WHICH PROVIDES COMPREHENSIVE CHILD CARE AND NUMEROUS EDUCATIONAL AND RECREATIONAL ACTIVITIES IN A SAFE, SUPERVISED ENVIRONMENT FOR MORE THAN 221 KINDERGARTEN THROUGH 5TH GRADE STUDENTS.

Funded Amount:

$5,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MANHATTAN YOUTH RECREATION AND RESOURCES, INC.
18 HARRISON STREET
NEW YORK, NY 10013
(212) 941-8553

Name of Project Director:

BOB TOWNLEY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL PROGRAMS FOR CHILDREN IN PUBLIC SCHOOL SETTINGS AND COMMUNITY SPACE. ALSO TO BE USED FOR IN-STATE TRIPS.

Funded Amount:

$50,000

Requested By:

GLICK, SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:
MANHATTAN YOUTH RECREATION AND RESOURCES, INC.
225 BROADWAY, #1020
NEW YORK, NY 10007
(212) 766–1104

Name of Project Director:
ROBERT TOWNLEY, EXECUTIVE DIRECTOR

Purpose of Project:
FUNDS WILL BE USED FOR PROGRAMS INCLUDING A TEEN LOUNGE, BASKETBALL LEAGUE, KARATE, ART, IN–STATE TRIPS, AND AFTER SCHOOL PROGRAMS IN PUBLIC SCHOOL SETTINGS AND COMMUNITY SPACE.

Funded Amount:
$151,000

Requested By:
GLICK, SILVER

Name of Administering State Agency:
OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MARINE PARK COMMUNITY ASSOCIATION
4011 AVENUE R
BROOKLYN, NY  11234
(914) 440-7886

Name of Project Director:

GREG BORUSSO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CHILDREN’S PROGRAMMING (I.E. BACK TO SCHOOL FAIR, HALLOWEEN WALK).

Funded Amount:

$5,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MARTIN LUTHER KING MULTI-PURPOSE CENTER
110 BETHUNE BOULEVARD
SPRING VALLEY, NY 10977
(845) 301-8398

Name of Project Director:

NATHAN MUNGIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE UPDATED EQUIPMENT AND SOFTWARE TO BETTER COORDINATE BETWEEN THE AFTER SCHOOL PROGRAM AND THE LOCAL SCHOOL DISTRICT. EQUIPMENT WILL ALSO BE USED TO ASSIST COMMUNITY AT LARGE IN EMPLOYMENT TRAINING.

Funded Amount:

$8,000

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MARY MITCHELL FAMILY AND YOUTH CENTER, INC.
2007 MAPES AVENUE
BRONX, NY  10460
(718) 583-1765

Name of Project Director:

HIEDI HIENZ

Purpose of Project:

FUNDS WILL BE USED TO CREATE A COLLEGE PREP LIBRARY IN S.A.T.,
SCIENCE, AND MATH.

Funded Amount:

$5,000

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MASPETH TOWN HALL, INC.
53-37 72ND STREET
MASPETH, NY  11378
(718) 335-6049

Name of Project Director:

EILEEN REILLY

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY PROGRAMS INCLUDING, BUT NOT LIMITED TO, SENIOR PROGRAMMING, CHILDREN'S PROGRAMS, PARENTING WORKSHOPS, IN-STATE BUS TRIPS AND CONCERTS.

Funded Amount:

$39,000

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MASPETH TOWN HALL, INC.
53-37 72ND STREET
MASPETH, NY  11378
(718) 335-6049

Name of Project Director:

EILEEN REILLY

Purpose of Project:

FUNDS WILL BE USED FOR PARENTING WORKSHOPS, BUSES FOR EDUCATIONAL TRIPS TO ALBANY, COMPUTER CLASSES, SENIOR CITIZEN RECREATIONAL AND EDUCATIONAL IN-STATE TRIPS AND OTHER SUCH PROGRAMS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MASSACHUSETTES AVENUE PROJECT, INC.
382 MASSACHUSETTES AVENUE
BUFFALO, NY  14213
(716) 882-5327

Name of Project Director:

GARY WELLBORN

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP COMMUNITY FOOD SYSTEMS TO PROMOTE ACCESS TO NUTRITIOUS FOOD AND ECONOMIC OPPORTUNITIES.

Funded Amount:

$5,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
MATH CLUB, INC.
114 NELSON AVENUE
PEEKSILL, NY 10566
(914) 293-7823

JEFFREY BLAKE

FUNDS WILL BE USED TO PURCHASE MATERIALS AND SUPPLIES TO RUN THE PROGRAM. THIS PROGRAM OFFERS YOUTH AN OPPORTUNITY TO PRACTICE AND EXCEL IN MATHEMATICS.

$1,000

HEASTIE

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MCBURNLEY YMCA
125 WEST 14TH STREET
NEW YORK, NY 10011
(212) 741-9210

Name of Project Director:

CHRISTIAN MILLER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A DANCE INSTRUCTOR FOR THE Y'S SATURDAY NIGHT TEEN CENTER.

Funded Amount:

$2,500

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MCMAHON-RYAN CHILD ADVOCACY SITE, INC.
509 WEST ONONDAGA STREET
SYRACUSE, NY 13204
(315) 701-2985

Name of Project Director:

JENNIFER PARMALEE

Purpose of Project:

FUNDS WILL BE USED TO LAUNCH AND IMPLEMENT A COMMUNITY-BASED EDUCATION PROGRAM FOR SHAKEN BABY SYNDROME. A SUMMIT FOR CHILD CARE WORKERS, PARENTS, AND COMMUNITY GROUPS WILL BE HELD IN NOVEMBER OF 2007.

Funded Amount:

$6,500

Requested By:

MAGNARELLI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MEDFORD YOUTH ATHLETIC ASSOCIATION, INC.
P.O. BOX 99
MEDFORD, NY  11763
(631) 447-1312

Name of Project Director:

TODD LAVENDER

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE PURCHASE OF EQUIPMENT AND UNIFORMS.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MERCAZ GAN YISROEL OF FLATBUSH
1968 OCEAN AVENUE
BROOKLYN, NY  11230
(718) 336-8582

Name of Project Director:

SOFEI DIAZ

Purpose of Project:

FUNDS WILL BE USED TO OFFSET GENERAL DAY CARE EXPENDITURES, SUCH AS SCHOOL SUPPLIES, ETC. THE DAY CARE IS OPEN TO ALL CHILDREN IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$9,000

Requested By:

HIKIND

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

METRO COMMUNITY DEVELOPMENT CORPORATION
877 EAST DELAVAN AVENUE
BUFFALO, NY 14215
(716) 896-7021

Name of Project Director:

JEFFREY BISHOP

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL AND EDUCATIONAL SERVICES FOR YOUTH AFTER SCHOOL AND DURING THE SUMMER.

Funded Amount:

$10,000

Requested By:

PEOPLES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

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:

HERB FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO PARTIALLY OFFSET THE COST OF SERVICES
PROVIDED TO NEEDY CHILDREN AND FAMILIES, INCLUDING BUT NOT
LIMITED TO CRISIS INTERVENTION, HOUSING SUPPORT TO SPECIAL NEEDS
POPULATIONS, EMPLOYMENT TRAINING AND JOB DEVELOPMENT, ETC.
PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$155,000

Requested By:

ABBATE, BENEDETTO, BING, BRENNAN, BROOK-KRASNY, CANESTRARI,
CLARK, CYMBROWITZ-S, DINOWITZ, FARRELL, GLICK, GOTTFRIED, HIKIND,
HOYT, MAISEL, MAYERSOHN, MILLMAN, O’DONNELL, PHEFFER,
ROSENTHAL, SILVER, WEINSTEIN, WEPRIN, YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
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:

PETER BREST

Purpose of Project:

FUNDS WILL BE USED TO RESPOND TO IMMEDIATE NEEDS CREATED BY IMMIGRATION PROBLEMS, MEDICAL EMERGENCIES, VICTIMIZATION, EVICTION, LOSS OF INCOME AND OTHER DIRE CIRCUMSTANCES.

Funded Amount:

$8,000

Requested By:

O’DONNELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
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:

PETER BREST

Purpose of Project:

FUNDS WILL BE USED TO RESPOND TO IMMEDIATE NEEDS CREATED BY IMMIGRATION PROBLEMS, MEDICAL EMERGENCIES, VICTIMIZATION, EVICTION, LOSS OF INCOME, OR OTHER DIRE CIRCUMSTANCES. ALL PROGRAMS ARE OFFERED ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
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:

PETER BREST

Purpose of Project:

FUNDS WILL BE USED TO RESPOND TO IMMEDIATE NEEDS CREATED BY IMMIGRATION PROBLEMS, MEDICAL EMERGENCIES, VICTIMIZATION, EVICTION, LOSS OF INCOME, OR OTHER DIRE CIRCUMSTANCES SUCH AS NEED FOR EMERGENCY FOOD AND CLOTHING, UTILITY TURN-OFF AND THOSE WHO ARE IN FAMILY VIOLENCE SITUATIONS, ALL OFFERED ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
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:

HERB FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FOR AN EXPANSION OF THE FOOD PANTRY PROGRAM, WHICH IS OPEN TO ALL IN NEED ON A NON-SECTARIAN BASIS.

Funded Amount:

$130,000

Requested By:

ABBATE, BENEDETTO, BING, BRENNAN, BROOK-KRASNY, CANESTRARI, CLARK, CYMBROWITZ-S, DINOWITZ, FARRELL, GLICK, GOTTFRIED, HIKIND, HOYT, MAISEL, MAYERSOHN, MILLMAN, O’DONNELL, PHEFFER, ROSENTHAL, SILVER, WEINSTEIN, WEPRIN, YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

METROPOLITAN NEW YORK COORDINATING COUNCIL ON JEWISH POVERTY
9 MURRAY STREET, 4TH FLOOR EAST
NEW YORK, NY 10007
(212) 267-9500

Name of Project Director:

YECHIEL KAUFMAN

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN A COMMUNITY ADVISORY BOARD IN
THE BORO PARK COMMUNITY WHICH WILL ADVISE THEM OF THE SERVICES
AND PROGRAMS AVAILABLE TO THE COMMUNITY AT THE MET COUNCIL
MULTI-SERVICE CENTER.

Funded Amount:

$15,000

Requested By:

ABBATE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
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:

PETER BREST

Purpose of Project:

FUNDS WILL BE USED TO RESPOND TO IMMEDIATE NEEDS CREATED BY IMMIGRATION PROBLEMS, MEDICAL EMERGENCIES, ETC.

Funded Amount:

$2,500

Requested By:

BING, FARRELL, GLICK, GOTTFRIED, SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
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:

PETER BREST

Purpose of Project:

FUNDS WILL BE USED TO RESPOND TO THE IMMEDIATE NEEDS CREATED BY IMMIGRATION PROBLEMS, MEDICAL EMERGENCIES, VICTIMIZATION, EDUCATION, LOSS OF INCOME, OR OTHER DIRE CIRCUMSTANCES SUCH AS NEED FOR EMERGENCY FOOD AND CLOTHING, UTILITY TURN OFF AND FAMILY VIOLENCE. PROGRAMS ARE OFFERED ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MICCIO CENTER POLICE ATHLETIC LEAGUE
110 WEST 9TH STREET
BROOKLYN, NY  11231
(718) 243-1528

Name of Project Director:

GARY CAMPBELL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FINANCIAL SUPPORT FOR RECREATIONAL AND EDUCATIONAL ACTIVITIES FOR INNER-CITY YOUTH.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MID ISLAND Y JEWISH COMMUNITY CENTER, INC.
45 MANETTO HILL ROAD
PLAINVIEW, NY 11803
(516) 822-3535

Name of Project Director:

JOYCE GLICK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES FOR MEMBERS OF THE COMMUNITY WHO HAVE SPECIAL NEEDS. SERVICES ARE OFFERED TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MIDDLE VILLAGE MASPEH CIVIC ASSOCIATION, INC.  
P.O. BOX 780599  
MASPEH, NY  11378  
(917) 683-2599

Name of Project Director:

JOSEPH CIMINO

Purpose of Project:

FUNDS WILL BE USED TO PRESERVE THE QUALITY OF LIFE OF THE NEIGHBORHOOD INCLUDING, BUT NOT LIMITED TO, WORKING WITH CITY AND STATE AGENCIES AND ELECTED OFFICIALS TO RESOLVE ISSUES OF CONCERN TO THE COMMUNITY.

Funded Amount:

$2,500

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MIDDLE VILLAGE MASPETH CIVIC ASSOCIATION, INC.
P.O. BOX 780599
MASPETH, NY  11378
(718) 683-2599

Name of Project Director:

JOSEPH CIMINO

Purpose of Project:

FUNDS WILL BE USED TO SPONSOR COMMUNITY OUTREACH AND SENIOR CITIZEN EVENTS.

Funded Amount:

$4,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MIDORI FOUNDATION, INC.
352 SEVENTH AVENUE, SUITE 201
NEW YORK, NY 10001
(212) 767-1300

Name of Project Director:

JUDI LINDEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE NEW PROGRAMMING, INCLUDING TWO IN-SCHOOL CONCERTS SERVING ONE TO TWO GRADES IN CONJUNCTION WITH PRE-CONCERT WORKSHOPS DURING THE FALL AND WINTER, AND ONE FAMILY CONCERT TO BE HELD IN THE SPRING, WHICH WOULD BE OPEN TO THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MIDORI FOUNDATION, INC.
352 SEVENTH AVENUE, SUITE 201
NEW YORK, NY  10001
(212) 767-1300

Name of Project Director:

JUDI LINDEN

Purpose of Project:

FUNDS WILL BE USED TOWARD PROGRAMMING IN GENERAL MUSIC STUDIES, INSTRUMENT INSTRUCTION, AND CULTURAL PERFORMANCES.

Funded Amount:

$2,500

Requested By:

BING

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MILL BASIN MARINERS YOUTH ORGANIZATION, INC.
4103 AVENUE I
BROOKLYN, NY  11234
(347) 546-9006

Name of Project Director:

SHAWN WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SPORTS EQUIPMENT FOR THE FOOTBALL LEAGUE.

Funded Amount:

$1,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MINEOLA YOUTH AND FAMILY SERVICES
450 JERICHO TURNPIKE, SUITE 201
MINEOLA, NY 11501
(516) 742-1715

Name of Project Director:

CRISTINA BALBO

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS TO AID MINEOLA YOUTH

Funded Amount:

$5,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOHAWK VALLEY YOUTH HOCKEY ASSOCIATION
1405 SOUTH PARK DRIVE
UTICA, NY  13502
(315) 793-0784

Name of Project Director:

STEVE WHITE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT SO THAT CHILDREN OF LOW-INCOME FAMILIES CAN PARTICIPATE IN THE MOHAWK VALLEY YOUTH HOCKEY ASSOCIATION AND SIMILAR ORGANIZATIONS IN THE MOHAWK VALLEY REGION. THIS PROGRAM IS CALLED THE LEARN TO SKATE PROGRAM.

Funded Amount:

$5,000

Requested By:

DESTITO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOMENTUM PROJECT, INC.
322 8TH AVENUE, 3RD FLOOR
NEW YORK, NY 10001
(212) 691-8100

Name of Project Director:

DAWN BUYAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FOOD TO LOW-INCOME PEOPLE LIVING WITH HIV/AIDS IN NEW YORK CITY, AS WELL AS, TO PROVIDE SOCIAL SERVICES, INCLUDING COUNSELING, HOUSING, ENTITLEMENT ASSISTANCE, NURSING, EDUCATION, WICA.

Funded Amount:

$3,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOMENTUM PROJECT, INC.
322 EIGHTH AVENUE
NEW YORK, NY  10001
(212) 691-8100

Name of Project Director:

DAWN BRYAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HOT MEALS, NUTRITION EDUCATION AND COUNSELING, SOCIAL SERVICES, HARM REDUCTION AND HOUSING ADVOCACY FOR INDIVIDUALS LIVING WITH HIV/AIDS.

Funded Amount:

$2,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MONROE COMMUNITY COLLEGE ASSN., INC.
1000 E. HENRIETTA ROAD
ROCHESTER, NY  14623
(585) 262-2100

Name of Project Director:

R. THOMAS FLYNN

Purpose of Project:

FUNDS WILL BE USED FOR THE NATIONAL YOUTH SPORTS PROGRAM WHICH ALLOWS MORE THAN 400 INNER CITY YOUTH TO PARTICIPATE IN ORGANIZED ATHLETICS INSTRUCTION AND ACTIVITY.

Funded Amount:

$22,500

Requested By:

GANTT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MONROE COUNTY YOUTH HOCKEY ASSOCIATION, INC.
P.O. BOX 93015
ROCHESTER, NY 14692
(585) 889-1810

Name of Project Director:

SAL GORINO

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL OPERATING EXPENSES FOR THE AMATEUR ATHLETIC YOUTH HOCKEY PROGRAMS WHICH WILL FOSTER GOOD SPORTSMANSHIP THROUGH ENCOURAGEMENT AND INSISTING UPON A COURSE OF CONDUCT THAT EXEMPLIFIES GOOD SPORTSMANSHIP AND LEARNING.

Funded Amount:

$33,000

Requested By:

JOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MONTICELLO HOUSING AUTHORITY
76 EVERGREEN DRIVE
MONTICELLO, NY 12701
(845) 794-6855 301

Name of Project Director:

MATTIE ANDERSON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE YOUTH PROGRAM.

Funded Amount:

$5,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
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 ART PROGRAM DEVELOPMENT FOR SENIOR CITIZENS. FUNDS WILL ALSO BE USED TOWARD OPERATIONAL EXPENSES ASSOCIATED WITH A PROGRAM TO ASSIST HIGH SCHOOL STUDENTS WITH THE COLLEGE SELECTION AND APPLICATION PROCESSES.

Funded Amount:

$10,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

RITA SANTELIA

Purpose of Project:

FUNDS WILL BE USED FOR OPERATION OF THE YOUTH CENTER AT TRACEY TOWERS, INCLUDING THE PURCHASE OF SUPPLIES AND EQUIPMENT.

Funded Amount:

$5,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOST PRECIOUS BLOOD YOUTH CENTER
2739 HARWAY AVENUE
BROOKLYN, NY  11214
(718) 373-4076

Name of Project Director:

MICHEAL VENEZIA

Purpose of Project:

FUNDS WILL BE USED TO TEACH SPORTSMENSHP, TEAMWORK, DISCIPLINE, AND BASKETBALL FUNDAMENTALS TO YOUTHS FROM AGES 5 TO 13. THIS PROGRAM IS OPEN TO ALL YOUTH IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MOTHERS AGAINST DRUNK DRIVING
2125 BUFFALO ROAD, SUITE 115
ROCHESTER, NY  14624
(585) 426-3130

Name of Project Director:

TRACEY HOLBROOK

Purpose of Project:

FUNDS WILL BE USED TO ENABLE MADD TO IMPLEMENT THEIR MISSION IN
MONROE COUNTY THROUGH EDUCATIONAL PROGRAMS TARGETED TO
THE COMMUNITY AT-LARGE AND TO AT-RISK YOUTH.

Funded Amount:

$2,500

Requested By:

MORELLE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOTHERS AGAINST DRUNK DRIVING
790 WATERVLIET-SHAKER ROAD, SUITE #6
LATHAM, NY  12110
(800) 245-6233

Name of Project Director:

CAROLE SEARS

Purpose of Project:

FUNDS WILL BE USED TO SPONSOR MULTI-MEDIA PREVENTION EDUCATION PROGRAMS IN LOCAL SCHOOLS, PROVIDE VOLUNTEER TRAINING TO HELP VICTIMS AND SURVIVORS, AS WELL AS TO IMPLEMENT DRUNK DRIVING EDUCATION.

Funded Amount:

$5,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOTHERS AGAINST DRUNK DRIVING
2125 BUFFALO ROAD, SUITE 15
ROCHESTER, NY 14624
(585) 426-3130

Name of Project Director:

ELIZABETH OBAD

Purpose of Project:

FUNDS WILL BE USED FOR MULTI-MEDIA PREVENTION EDUCATION IN WNY SCHOOLS, SPONSOR LOCAL YOUTH IN ACTION (UMADD) GROUPS, TRAIN VOLUNTEERS TO HELP VICTIMS AND SURVIVORS, AS WELL AS, TO INCREASE PUBLIC AWARENESS.

Funded Amount:

$1,500

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOTHERS AGAINST DRUNK DRIVING
NEW YORK STATE CHARTER OFFICE, 790 WATERVLIET-SHAKER ROAD, SUITE 6
LATHAM, NY 12110
(518) 785-6233

Name of Project Director:

KAREN PETTIGREW

Purpose of Project:

FUNDS WILL BE USED FOR PUBLIC AWARENESS CAMPAIGN, EDUCATION PROGRAMS IN SCHOOLS, AND TO TRAIN VOLUNTEERS.

Funded Amount:

$2,500

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOTHERS ALIGNED SAVING KIDS, INC.
2566 NOSTRAND AVENUE
BROOKLYN, NY  11210
(718) 758-0400

Name of Project Director:

RUCHAMA CLAPMAN

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE IN-SCHOOL AND OUT OF SCHOOL PREVENTION PROGRAMS FOR AT RISK YOUTH AND THE PARENT BODY. ENHANCEMENTS INCLUDE: SUPPORT, CRISIS INTERVENTION AND TRUANCY ISSUES.

Funded Amount:

$26,000

Requested By:

HIKIND

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOUNT HOPE HOUSING CO., INC.
2030 WALTON AVENUE
BRONX, NY  10453
(718) 299-2051

Name of Project Director:

WILBERT T. LAWTON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT, UNIFORMS AND MISCELLANEOUS ITEMS FOR THE YOUTH.

Funded Amount:

$3,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOUNT KISCO DAY CARE CENTERS, INC.
95 RADIO CIRCLE
MOUNT KISCO, NY  10549
(914) 241-2135  240

Name of Project Director:

DOROTHY JORDAN

Purpose of Project:

FUNDS WILL BE USED TO ALLOW CHILDREN (6-12 YRS. OLD) AND SENIORS TO COME TOGETHER TO DO A THEATER PROGRAM, INCLUDING WRITING AN ORIGINAL SCRIPT WHICH ENABLES THE CHILDREN AND SENIORS TO SHARE LIFE EXPERIENCES AND FIND COMMONALITY.

Funded Amount:

$10,000

Requested By:

BRADLEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOUNT LEBANON BAPTIST CHURCH  
350 EAST 165TH STREET  
BRONX, NY 10456  
(718) 588-4984

Name of Project Director:

BETTY A. FLUDD

Purpose of Project:

FUNDS WILL BE USED FOR THE SUMMER DAY CAMP PROGRAM FOR GROWING CHILDREN. THE PROGRAM IS OPEN TO ALL YOUTH IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,500

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOUNT VERNON RECREATION DEPARTMENT
ROOM 3 - CITY HALL
MOUNT VERNON, NY 10550
(914) 665-2420

Name of Project Director:

KEVIN WATTS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH ACTIVITIES AND TEENAGE DEVELOPMENT.

Funded Amount:

$10,000

Requested By:

PRETLLOW

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MOVEMENT OF THE CHILDREN DANCENTER, INC.
142-09 ROCKAWAY BOULEVARD
JAMAICA, NY  11436
(718) 659-0337

Name of Project Director:

BERNADETTE MCKETNEY-BROWN

Purpose of Project:

MOVEMENT OF THE CHILDREN DANCENTER PROVIDES CHILDREN AGES 3-18 WITH DANCE INSTRUCTION, PERSONAL GROWTH INCENTIVES AND CULTURAL ENHANCEMENT. FUNDS WILL BE USED TO PURCHASE THE TECHNOLOGY SUCH AS: DIGITAL CAMERA PROJECTOR, COMPUTER SYSTEM TO DISPLAY DIGITAL IMAGES AND GRAPHICS, TELEVISION TO PROJECT IMAGES. FUNDS WILL ALSO BE USED TO INSTALL, IMPLEMENT AND MAINTAIN INSTRUCTIONAL AND PUBLIC INFORMATION SYSTEM.

Funded Amount:

$10,000

Requested By:

COOK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MR. BEE’S HORNETS, INC.
1369 EAST 51ST STREET
BROOKLYN, NY 11234
(718) 444-4322

Name of Project Director:

RUSSELL BOMAR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BASKETBALL COACHING AND TOURNAMENTS FOR YOUTH THROUGHOUT THE FLATLANDS AND EAST FLATBUSH COMMUNITIES. FUNDS WILL ALSO BE USED FOR EQUIPMENT, AND REGISTRATION FEES FOR YOUNGSTERS UNABLE TO PAY TOURNAMENT ENTRY FEES.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MT. CARMEL SPORTS
275 N. 8TH STREET
BROOKLYN, NY 11211
(718) 384-0223

Name of Project Director:

PAT IANNOTTO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SPORTS PROGRAMS THAT ENGAGE YOUTH IN ACTIVE PROGRAMS TO HELP DEVELOP EACH YOUNGSTER’S CHARACTER. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,752

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MT. VERNON RAZORBACKS
667 SOUTH 5TH AVENUE
MOUNT VERNON, NY  10550
(914) 473-6779

Name of Project Director:

FELIX BURTON

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY COSTS OF THE FOOTBALL PROGRAM, THEREBY KEEPING IT AFFORDABLE TO THE MAJORITY OF FAMILIES WITHIN THE COMMUNITY.

Funded Amount:

$10,000

Requested By:

PRETLOW

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MULTICULTURAL MUSIC GROUP, INC.
41 WEST 184TH STREET, APT. # 2A
BRONX, NY 10468
(718) 884-5495

Name of Project Director:

LUIS MOJICA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL CLASSES ON MUSIC AND MUSICAL INSTRUMENTS.

Funded Amount:

$10,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MUSIC MOBILE, INC.
P.O. BOX 6024
ALBANY, NY 12206
(518) 462-8714

Name of Project Director:

RUTH PELHAM

Purpose of Project:

FUNDS WILL BE USED TO ENGAGE DIVERSE CAPITAL REGION RESIDENTS IN A COMMUNITY WIDE CELEBRATION OF 30 YEARS, FOR 3,000 PEOPLE FEATURING MUSIC, FAMILY ACTIVITIES, INFORMATION BOOTHs, AND A HISTORY CENTER.

Funded Amount:

$4,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MY SISTER’S PLACE
ONE WATER STREET
WHITE PLAINS, NY 10601
(914) 683-1599

Name of Project Director:

KAREN CHEEKS-LOMAX

Purpose of Project:

FUNDS WILL BE USED FOR LIFE SKILLS PROGRAM

Funded Amount:

$5,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

MY SISTER’S PLACE, INC.
1 WATER STREET
WHITE PLAINS, NY 10601
(914) 683-1333

Name of Project Director:

KAREN CHEEKS-LOMAX

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF PROGRAMS SUCH AS COUNSELING THAT MY SISTER’S PLACE PROVIDES TO BATTERED WOMEN

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NAACP - NORTHEAST QUEENS
133-31 39TH AVENUE
FLUSHING, NY  11354
(718) 321-2585

Name of Project Director:

VALERIE LITTLETON-COHEN

Purpose of Project:

FUNDS WILL BE USED TO INCREASE EDUCATIONAL PROGRAMS TO THE COMMUNITY, SUCH AS, ACADEMIC ENRICHMENT, CULTURAL EXPOSURE, ENCOURAGEMENT FOR COLLEGE, PARENTAL INVOLVEMENT/EMPOWERMENT AND POLITICAL SCIENCE.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NAPLES OPEN CUPBOARD
5 CONCORD PARK
NAPLES, NY 14512
(585) 374-8697

Name of Project Director:

ROSALIE PECK

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH FOOD PANTRY

Funded Amount:

$1,000

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NASSAU COUNTY POLICE ACTIVITY, INC.
P.O. BOX 162
ROOSEVELT, NY 11575
(516) 876-4182

Name of Project Director:

TODD PARRISH

Purpose of Project:

FUNDS WILL BE USED TO REFURBISH VEHICLES THAT ARE USED IN BEFORE AND AFTER SCHOOL PROGRAMS, SUMMER CAMP PROGRAMS AND ALL OF SPORTS ACTIVITIES.

Funded Amount:

$8,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NATIONAL ASSOCIATION OF EACH ONE TEACH ONE, INC.
2110 FIRST AVENUE, SUITE 417
NEW YORK, NY 10029
(646) 408-0173

Name of Project Director:

BOB MCCULLOUGH

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT CAREER WORKSHOPS, ALL-STAR GAMES, SPORTS CLINCS, AND IN-STATE COLLEGE TOURS.

Funded Amount:

$6,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NATIONAL ASSOCIATION OF PUERTO RICAN-HISPANIC SOCIAL WORKERS, INC.
P.O. BOX 6512
BRENTWOOD, NY 11717
(631) 864-1536

Name of Project Director:

LYNDA PENDOMO-AYALA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET ADMINISTRATIVE COSTS AND FOR PROMOTING ANNUAL CONFERENCES, INCLUDING FOOD AND SUPPLIES NEEDED FOR WORKSHOPS THAT ENCOURAGE PROMOTING HIGHER EXCELLENCE FOR HISPANIC YOUTH.

Funded Amount:

$1,500

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NATIONAL COUNCIL OF JEWISH WOMEN, INC.
1001 QUENTIN ROAD
BROOKLYN, NY 11223
(718) 627-7680

Name of Project Director:

TED ABLE

Purpose of Project:

FUNDS WILL BE USED FOR THE NEW EDUCATIONAL AND RECREATIONAL PROGRAM WHICH IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NATIONAL COUNCIL OF NEGRO WOMEN, INC.
P.O. BOX 93, CO-OP CITY STATION
BRONX, NY  10475
(718) 655-9034

Name of Project Director:

JOYCE HOWARD

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COSTS OF A SATURDAY ELEMENTARY SCHOOL-AGE PROGRAM FROM SEPTEMBER TO JUNE.

Funded Amount:

$8,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NATIONAL COUNCIL OF NEGRO WOMEN, INC.
4035 WHITE PLAINS ROAD
BRONX, NY 10466
(718) 882-2351

Name of Project Director:

OLIA BARRETT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MATERIALS TO PROVIDE TUTORIAL SERVICES FOR LOCAL YOUTHS AND THE COMMUNITY.

Funded Amount:

$3,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NATIONAL FOUNDATION FOR TEACHING ENTREPRENEURSHIP TO HANDICAPPED
120 WALL STREET, 29TH FLOOR
NEW YORK, NY 10005
(212) 232-3333 330

Name of Project Director:

MICHAEL JOHN CASLIN, III

Purpose of Project:

FUNDS WILL BE USED TO SPREAD THE POWER OF YOUTH ENTREPRENEURSHIP TO YOUNG PEOPLE IN LOW-INCOME COMMUNITIES THROUGH ITS CURRICULUM, TEACHER EDUCATION PROGRAMS, STRATEGIC UNIVERSITY AND PROGRAM PARTNERSHIPS, AND SUPPORTIVE ALUMNI SERVICES.

Funded Amount:

$12,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NATIONAL INNER CITIES YOUTH OPPORTUNITIES, INC.
549 LINWOOD AVENUE
BUFFALO, NY  14209
(716) 912-4166

Name of Project Director:

JOYCE WILSON-NIXON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL SUPPORT FOR LITTLE LEAGUE FOOTBALL, BASKETBALL AND OTHER SPORTS TEAMS AT THE CENTER.

Funded Amount:

$15,000

Requested By:

PEOPLES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NATIONAL LATINAS CAUCUS INCORPORATED
245 EAST 111TH STREET, STOREFRONT
NEW YORK, NY 10029
(212) 423-9010

Name of Project Director:

YOLANDA SANCHEZ

Purpose of Project:

FUNDS WILL BE USED TO PLAN AND HOLD AN ANNUAL CONFERENCE IN NYS WITH 500 PARTICIPANTS KNOWN AS "MUERVELE!" IT IS THE LARGEST GATHERING OF LATINO YOUTH IN THE NORTHEAST.

Funded Amount:

$10,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEIGHBORHOOD COALITION FOR SHELTER, INC.
157 EAST 86TH STREET
NEW YORK, NY 10028
(212) 861-0704

Name of Project Director:

ANNE R. TEICHER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF NCS'S OVERNIGHT SHELTER. THIS PROGRAM IS OPEN TO ALL INDIVIDUALS IN NEED ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

GRANNIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEIGHBORHOOD COALITION FOR SHELTER, INC.
157 EAST 86TH STREET
NEW YORK, NY  10028
(212) 861-0704

Name of Project Director:

ANNE TEICHER

Purpose of Project:

FUNDS WILL BE USED FOR THE OPERATION OF THE SHELTER. THE SHELTER PROVIDES SUPPORTIVE HOUSING AND A TRANSITIONAL OPPORTUNITY.

Funded Amount:

$2,500

Requested By:

BING

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEIGHBORHOOD ECONOMIC DEVELOPMENT AND ADVOCACY PROJECT, INC.
73 SPRING STREET, SUITE 506
NEW YORK, NY 10012
(211) 680-5100 208

Name of Project Director:

MARK WINSTON GRIFFITH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FINANCIAL AND LITERACY SKILLS TO YOUTH TORN AND OTHER YOUTH WHO HAVE GONE THROUGH THE CRIMINAL JUSTICE SYSTEM.

Funded Amount:

$4,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEIGHBORHOOD ENHANCEMENT FOR TRAINING AND SERVICES, INC.
1375 VIRGINIA AVENUE
BRONX, NY 10402
(718) 430-1400

Name of Project Director:

LIZANDRA MARTINEZ

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT GENERAL AND ADMINISTRATIVE COSTS OF THE YOUTH AND YOUNG ADULT PROGRAMS IN THE COMMUNITY.

Funded Amount:

$122,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEPPERHAN COMMUNITY CENTER, INC.
342 WARBURTON AVENUE
YONKERS, NY 10701
(914) 965-0103

Name of Project Director:

JIM BOSTIC

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A LCD PROJECTOR; FOR THE PRODUCTION AND PRINTING OF BROCHURES, LITERATURE AND SIGNAGE FOR THE VIOLENCE PREVENTION PROGRAM FOR PARENTS, STUDENTS AND EDUCATORS.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEPPERHAN COMMUNITY CENTER, INC.
342 WARBURTON AVENUE
MT. VERNON, NY 10550
(914) 965-0203

Name of Project Director:

JIM BOSTIC

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL PROGRAMS TO COMMUNITY YOUTH.

Funded Amount:

$5,000

Requested By:

PRETLOW

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW DIRECTIONS SERVICES, INC.
1027 POST AVENUE
STATEN ISLAND, NY 10302
(718) 447-3786

Name of Project Director:

WENDY DESHONG-NEUHALFEN

Purpose of Project:

FUNDS WILL BE USED FOR THE PANTRY’S BENEFIT SCREENING AND REFERRAL COMPONENT THAT ADDRESSES THE NEEDS OF WOMEN CLIENTS BEYOND JUST FOOD RESOURCES TO HELP IMPROVE THE QUALITY OF LIFE OF THOSE STRUGGLING TO MAKE ENDS MEET.

Funded Amount:

$7,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEW LITTLE BRANCHES, INC.
150 WOODWORTH AVENUE
YONKERS, NY 10701
(914) 378-1473

Name of Project Director:

ANN ABROKWA

Purpose of Project:

FUNDS WILL BE USED TO HELP ENABLE NLB TO PROVIDE AN AFTER SCHOOL PROGRAM FOR LOW AND MODERATE INCOME FAMILIES IN THE SOUTHWEST QUADRANT OF THE CITY OF YONKERS.

Funded Amount:

$10,000

Requested By:

PRETLOW

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW ROCHELLE DAY NURSERY
115 CLINTON AVENUE
NEW ROCHELLE, NY 10801
(914) 632-2093

Name of Project Director:

SABRINA DELGADO

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF PLAYGROUND EQUIPMENT FOR THE NURSERY SCHOOL.

Funded Amount:

$10,000

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW ROCHELLE LIGHTNING HOCKEY, INC.
183 WOOD HOLLOW LANE
NEW ROCHELLE, NY  10804
(914) 391-4080

Name of Project Director:

PETER VASAPOLLI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ICE HOCKEY TRAINING AND COMPETITION FOR UNDER PRIVILEGED YOUTH IN NEW ROCHELLE.

Funded Amount:

$2,000

Requested By:

LATIMER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW ROCHELLE-CAMPERSHIP FUND
P.O. BOX 255
NEW ROCHELLE, NY  10804
(914) 632-8798

Name of Project Director:

MARTIN FRIEDRICH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FINANCIAL ASSISTANCE FOR ECONOMICALLY DEPRIVED CHILDREN TO ATTEND SUMMER CAMP PROGRAMS.

Funded Amount:

$5,000

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW SETTLEMENT APARTMENTS
1512 TOWNSEND AVENUE
BRONX, NY 10452
(718) 716-8000 123

Name of Project Director:

JACK DOYLE

Purpose of Project:

FUNDS WILL BE USED FOR A COMMUNITY SERVICE AND LEADERSHIP PROGRAM FOR MIDDLE-SCHOOL AGED YOUTH. THE BRONX HELPERS LEARN ABOUT AND PLAN SERVICE AND ADVOCACY PROJECTS FOCUSED ON ISSUES THAT IMPACT THEIR NEIGHBORHOOD REGARDING HUNGER, HOMELESSNESS, VIOLENCE, ENVIRONMENTAL JUSTICE, INTERGENERATIONAL RELATIONSHIPS AND EDUCATIONAL EQUITY.

Funded Amount:

$10,000

Requested By:

GREENE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW WAY CIRCUS CENTER, INC.
2820 OCEAN PARKWAY, 21E
BROOKLYN, NY 11235
(718) 266-0202

Name of Project Director:

REGINA BERENCHTEIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EXISTING PROGRAMS AS WELL AS TO PROVIDE PERFORMANCES AND WORKSHOPS IN THE COMMUNITY.

Funded Amount:

$4,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW WAY CIRCUS CENTER, INC.
2820 OCEAN PARKWAY, SUITE #21E
BROOKLYN, NY 11235
(718) 266-0202

Name of Project Director:

REGINA BERENCHTEIN

Purpose of Project:

FUNDS WILL BE USED FOR THE ORGANIZATION’S AFTER SCHOOL PROGRAMS FOR CHILDREN.

Funded Amount:

$3,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK ASSOCIATION OF HOLOCAUST SURVIVORS, INC.
2880 WEST 12TH STREET
BROOKLYN, NY  11224
(718) 373-5010

Name of Project Director:

SEMYON ROYTBBLAT

Purpose of Project:

FUNDS WILL BE USED FOR MEETINGS, ENTERTAINMENT, AND OTHER EVENTS. THE ORGANIZATION IS OPEN TO ALL INDIVIDUALS ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK CARES, INC.
214 WEST 29TH STREET, 5TH FLOOR
NEW YORK, NY 10001-5203
(212) 228-5000

Name of Project Director:

SARAH DAHAN

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN THE WORK THE ORGANIZATION DOES, SPECIFICALLY, HELPING SENIORS, ALLEVIATING HUNGER AND PROVIDING ADULT EDUCATION SERVICES.

Funded Amount:

$2,500

Requested By:

BING

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK CITY GAY AND LESBIAN ANTI-VIOLENCE PROJECT, INC.
240 WEST 35TH STREET, SUITE 200
NEW YORK, NY 10001
(212) 714-1184

Name of Project Director:

CLARENCE PATTON

Purpose of Project:

FUNDS WILL BE USED FOR A CRISIS HOTLINE, HOTLINE VOLUNTEER TRAINING, AND OUTREACH.

Funded Amount:

$2,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK CITY GAY AND LESBIAN ANTI-VIOLENCE PROJECT, INC.
240 WEST 35TH STREET, SUITE 200
NEW YORK, NY  1001
(212) 714-1184

Name of Project Director:

CLARENCE PATTON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ANTI-VIOLENCE PROJECT'S 24 HOUR, CONFIDENTIAL, BI-LINGUAL (ENGLISH/SPANISH) CRISIS INTERVENTION HOTLINE, WHICH HAS BEEN IN OPERATION SINCE 1980 AS A LIFE LINE TO VICTIMS OF HATE, VIOLENCE, RAPE OR SEXUAL ASSAULT, POLICE ABUSE, OR SAME SEX DOMESTIC VIOLENCE.

Funded Amount:

$5,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK CITY HOUSING AUTHORITY - BRONX RIVER COMMUNITY
1619 EAST 174TH STREET
BRONX, NY  10472
(718) 589-0553

Name of Project Director:

NORMA SAUNDERS

Purpose of Project:


Funded Amount:

$5,000

Requested By:

DIAZ-R

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEW YORK JUNIOR TENNIS LEAGUE, INC.
58-12 QUEENS BOULEVARD - SUITE 1
WOODSIDE, NY 11377
(718) 786-7110

Name of Project Director:

GARY DAVIS

Purpose of Project:

FUNDS WILL BE USED TO COVER COSTS ASSOCIATED WITH FREE TENNIS INSTRUCTION TO CHILDREN OF QUEENS THROUGH AN AFTER SCHOOL AND SUMMER PROGRAM BASED IN NUMEROUS QUEENS ELEMENTARY AND SECONDARY SCHOOLS.

Funded Amount:

$6,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK JUNIOR TENNIS LEAGUE, INC.
24-16 QUEENS PLAZA SOUTH
LONG ISLAND CITY, NY 11101
(718) 786-7110

Name of Project Director:

MARTIN BARRETT

Purpose of Project:

FUNDS WILL BE USED TO COVER COSTS ASSOCIATED WITH FREE TENNIS INSTRUCTION TO CHILDREN IN QUEENS, THROUGH AFTER SCHOOL PROGRAMS.

Funded Amount:

$1,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK JUNIOR TENNIS LEAGUE, INC.
58-12 QUEENS BOULEVARD, SUITE 1
WOODSIDE, NY  11377
(718) 786-7110

Name of Project Director:

GARY DAVIS

Purpose of Project:

FUNDS WILL BE USED TO ENABLE SCHOOL YOUTH TO HAVE THE OPPORTUNITY, EQUIPMENT AND TRAINING TO ENGAGE IN THE SPORT OF TENNIS.

Funded Amount:

$3,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK JUNIOR TENNIS LEAGUE, INC.
58-12 QUEENS BOULEVARD, SUITE 1
WOODSIDE, NY 11377
(718) 786-1770

Name of Project Director:

ALLAN SHWEKY

Purpose of Project:

FUNDS WILL BE USED FOR, BUT NOT LIMITED TO, TENNIS INSTRUCTION AND AWARDS FOR YOUTH AT P.S. 150 (40-01 43RD AVENUE) AND IS 204 (25-03 37TH AVENUE) IN LONG ISLAND CITY, QUEENS, AND THE PURCHASE OF TENNIS RACQUETS AND BALLS FOR THE CHILDREN.

Funded Amount:

$1,500

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEW YORK JUNIOR TENNIS LEAGUE, INC.
58-12 QUEENS BOULEVARD, SUITE 1
WOODSIDE, NY 11377
(718) 786-7110

Name of Project Director:

LEWIS HARTMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE INSTRUCTION IN THE GAME OF TENNIS TO YOUNGSTERS.

Funded Amount:

$1,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK JUNIOR TENNIS LEAGUE, INC.
58-12 QUEENS BOULEVARD, SUITE #1
WOODSIDE, NY  11377
(718) 699-0005

Name of Project Director:

SHELDON LEFFLER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TENNIS INSTRUCTION, SUPERVISED PRACTICE AND COMPETITION FOR YOUTH. FUNDS WILL ALSO BE USED TO PURCHASE RACKETS, BALLS AND YEAR END AWARDS.

Funded Amount:

$3,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEW YORK JUNIOR TENNIS LEAGUE, INC.
58-12 QUEENS BOULEVARD
WOODSIDE, NY 11377
(718) 786-7110

Name of Project Director:

GARY DAVIS

Purpose of Project:

FUNDS WILL BE USED TO COVER COSTS ASSOCIATED WITH FREE TENNIS INSTRUCTION TO THE QUEENS CHILDREN THROUGH AN AFTER SCHOOL PROGRAM BASED IN NUMEROUS QUEENS ELEMENTARY SCHOOLS.

Funded Amount:

$10,000

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK JUNIOR TENNIS LEAGUE, INC.
58-12 QUEENS BOULEVARD, SUITE 1
WOODSIDE, NY 11377
(718) 786-7110

Name of Project Director:

GARY L. DAVIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL AND SUMMER TENNIS PROGRAMS AT JHS 189, JHS 194, AND LEVITT’S FIELD.

Funded Amount:

$1,500

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK JUNIOR TENNIS LEAGUE, INC.
58-12 QUEENS BOULEVARD, SUITE 1
WOODSIDE, NY 11377
(718) 786-7110 23

Name of Project Director:

LEWIS H. HARTMAN

Purpose of Project:

FUNDS WILL BE USED FOR THE NYJTL SCHOOL YARD AFTER SCHOOL COMMUNITY OUTREACH YOUTH TENNIS CENTER PROGRAM AND EDUCATIONAL SUPPORT SERVICES.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
NEW YORK STATE AMERICAN LEGION BASEBALL CHAMPIONSHIP
154 HARTS DRIVE
NEW HARTFORD, NY 13413
(315) 734-1002

DONALD OLIVER

FUNDS WILL BE USED FOR SUPPLIES AND CAPITAL EXPENSES ASSOCIATED WITH THE NEW YORK STATE AMERICAN LEGION BASEBALL CHAMPIONSHIP IN UTICA.

$7,500

DESTITO

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NEW YORK STATE FOSTER & ADOPTIVE PARENTS ASSOCIATION, INC.
92-31 UNION HALL STREET
JAMAICA, NY  11433
(718) 725-2103

Name of Project Director:

RENEE BOLAGUN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE INFORMATION, SERVICES AND ADVOCACY FOR FOSTER AND ADOPTIVE PARENTS AND FAMILIES THROUGHOUT NEW YORK STATE.

Funded Amount:

$6,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NIAGARA COMMUNITY ACTION PROGRAM, INC.
1521 MAIN STREET
NIAGARA FALLS, NY 14305
(716) 285-9681

Name of Project Director:

SUZANNE SHEARS

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE TELEPHONE SYSTEM AND REPLACE WINDOWS AND CARPETING.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NIAGARA FALLS HUMAN RIGHTS COMMISSION
P.O. BOX 69
NIAGARA FALLS, NY  14302
(716) 286-4463

Name of Project Director:

RICHARD WILLIAMS, SR.

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOFTWARE, COPYING MATERIALS, BINDERS, FOLDERS.

Funded Amount:

$2,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTH AREA MEALS ON WHEELS, INC.
P.O. BOX 347
NORTH SYRACUSE, NY  13212
(315) 452-1402

Name of Project Director:

JAMES BAKER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A RECONDITIONED WASHER TO BE UTILIZED TO PROVIDE A HIGHER STANDARD OF SERVICE FOR THE DAY-TO-DAY OPERATION OF THE MEALS-ON-WHEELS PROGRAM, WHICH DELIVERS MEALS TO OVER 400 LUNCH AND DINNER RECIPIENTS DAILY.

Funded Amount:

$6,600

Requested By:

STIRPE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTH BRONX YOUTH SPORTS ASSOCIATION, INC.
2420 HUNTER AVENUE, #14A
BRONX, NY  10475
(917) 855-1672

Name of Project Director:

CALVILLE IGOR BASCOLM

Purpose of Project:

FUNDS WILL BE USED TO HELP REDUCE THE COST OF TRANSPORTATION AND TO PURCHASE EQUIPMENT.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NORTH BROOKLYN COMMUNITY COUNCIL, INC.
567 WILSON AVENUE
BROOKLYN, NY  11207
(718) 443-5153

Name of Project Director:

JANITZA D. LUNA

Purpose of Project:

FUNDS WILL BE USED TO OPERATE YOUTH, SENIOR AND CULTURAL
PROGRAMS IN THE NORTH BROOKLYN COMMUNITIES. THE FUNDS MAY
ALSO BE USED TO COVER ADMINISTRATIVE COSTS.

Funded Amount:

$50,000

Requested By:

LOPEZ-V

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTH BROOKLYN DEVELOPMENT CORPORATION
148 HURON STREET
BROOKLYN, NY 11222
(718) 389-9044

Name of Project Director:

RICHARD MAZUR

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE AFTER-SCHOOL PROGRAM CONSISTING OF RECREATIONAL AND EDUCATIONAL OPPORTUNITIES.

Funded Amount:

$3,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTH BROOKLYN RESIDENTS ASSOCIATION
217 WYCKOFF AVENUE
BROOKLYN, NY 11237
(718) 366-3800

Name of Project Director:

MARITZA DAVILA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL AND EDUCATIONAL ACTIVITIES INCLUDING IN-STATE TRIPS TO MUSEUMS, AQUARIUMS, SPORTING EVENTS, WITH ADMISSION WHERE APPLICABLE, DIRECT SPONSORING OF LITTLE LEAGUES AND A SUMMER YOUTH DAY WITH AN ANTI-DRUG MESSAGE.

Funded Amount:

$30,000

Requested By:

LOPEZ-V

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTH CHEEKTOWAGA AMATEUR ATHLETIC ASSOCIATION
P.O. BOX 55
CHEEKTOWAGA, NY 14225
(716) 983-0454

Name of Project Director:

TOM SCHUGARDT

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF PITCHING MACHINES.

Funded Amount:

$2,000

Requested By:

GABRYSZAK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTH SHORE BOYS AND GIRLS CLUB, INC.
200 GLEN HEAD ROAD
GLEN HEAD, NY 11545
(516) 609-8050

Name of Project Director:

EDWARD MOFFETT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE VARIOUS YOUTH PROGRAMS AND EQUIPMENT FOR THE PROGRAM

Funded Amount:

$4,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTH SHORE CHILD AND FAMILY GUIDANCE ASSOCIATION, INC.
480 OLD WESTBURY ROAD
ROSLYN HEIGHTS, NY  11577
(516) 626-1971  302

Name of Project Director:

NELLIE TAYLOR-WALTHRUST

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE, STRUCTURE, SUPPORT AND SUPERVISE AT-RISK YOUTH IN THE WESTBURY-NEW CASSEL COMMUNITY TO MAXIMIZE ACADEMIC, SOCIAL AND EMOTIONAL FUNCTIONING.

Funded Amount:

$4,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTH SHORE YOUTH COUNCIL, INC.
P.O. BOX 1286
ROCKY POINT, NY 11778
(631) 744-0207

Name of Project Director:

JEANINE GENTILLE

Purpose of Project:

FUNDS WILL BE USED FOR DIRECT SERVICES FOR PROGRAMMING FOR CHILDREN AND FOR CONTINUING THEIR BIG BUDDY LITTLE BUDDY PROGRAM.

Funded Amount:

$10,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NORTH TONAWANDA MEALS ON WHEELS, INC.
100 RIDGE ROAD
NORTH TONAWANDA, NY 14120
(716) 693-1663

Name of Project Director:

(FRANCES) JOY WELCH

Purpose of Project:

FUNDS WILL BE USED TO REFINISH FLOORS IN THE ORGANIZATION'S FACILITY.

Funded Amount:

$4,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTHEAST QUEENS JEWISH COMMUNITY COUNCIL, INC.
58-20 LITTLE NECK PARKWAY
LITTLE NECK, NY 11362
(718) 225-6750

Name of Project Director:

GAIL EISENBERG

Purpose of Project:

FUNDS WILL BE USED TO ENGAGE COMMUNITY LEADERS AND CLERGY TO SPONSOR AND PROMOTE YOUTH ORIENTED PROGRAMS THAT PROMOTE HARMONY AND UNDERSTANDING WITH PARTICIPANTS FROM DIVERSE CULTURAL BACKGROUNDS. OPEN TO ALL YOUTH ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTHEAST QUEENS JEWISH COMMUNITY COUNCIL, INC.
58-20 LITTLE NECK PARKWAY
LITTLE NECK, NY  11362
(718) 225-6750

Name of Project Director:

GAIL EISENBERG

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH COMMUNITY PROJECTS AND YOUTH PROJECTS. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTHEAST QUEENS JEWISH COMMUNITY COUNCIL, INC.
58-20 LITTLE NECK PARKWAY
LITTLE NECK, NY 11362
(718) 225-6750 247

Name of Project Director:

GAIL EISENBERG

Purpose of Project:

FUNDS WILL BE USED TO WORK WITH THE YOUTHS AND SENIORS OUT OF THE FRESH MEADOWS BUKHARIAN JEWISH CENTER. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTHERN WESTCHESTER SHELTER, INC.
P.O. BOX 203
PLEASANTVILLE, NY  10570
(914) 747-0828 11

Name of Project Director:

CARLLA HORTON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CIVIL LEGAL SERVICES TO VICTIMS OF DOMESTIC VIOLENCE.

Funded Amount:

$12,500

Requested By:

BRADLEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NORTHERN WESTCHESTER WOMEN’S SHELTER
P.O. BOX 203
PLEASANTVILLE, NY 10570
(914) 747-0828

Name of Project Director:

CARLLA HORTON

Purpose of Project:

FUNDS WILL BE USED FOR THE "LOVE SHOULD NOT HURT" TEEN DATING ABUSE PROGRAM

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NYACK CENTER
58 DEPEW AVENUE
NYACK, NY 10960
(845) 721-5514

Name of Project Director:

KIM CROSS

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTER SCHOOL CULTURAL ENRICHMENT PROGRAM.

Funded Amount:

$5,000

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NYC BOMBSQUAD BASKETBALL CLASSIC, INC.
2186 FIFTH AVENUE, SUITE 12R
NEW YORK, NY 10037
(212) 926-9272

Name of Project Director:

FLOYD "SKIP" BRANCH, JR.

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A SAFE, CLEAN, AND A POSITIVE LEARNING ENVIRONMENT. BASKETBALL WILL BE PROVIDED FOR BOYS AND GIRLS RANGING IN AGE FROM 6-18 YEARS OLD.

Funded Amount:

$10,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

NYC MISSION SOCIETY
105 EAST 22ND STREET, 6TH FLOOR
NEW YORK, NY  10010
(212) 674-3500  201

Name of Project Director:

COURTNEY BENNETT

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE AND EMPOWER YOUTH TO MAKE BETTER DECISIONS AND REDUCE THE HIGH RATES OF TEEN PREGNANCY IN HARLEM/NORTHERN MANHATTAN.

Funded Amount:

$5,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

OASIS CHRISTIAN CENTER
539 GREELEY AVENUE
STATEN ISLAND, NY 10306
(718) 980-2019

Name of Project Director:

TIM MCINTYRE

Purpose of Project:

FUNDS WILL BE USED FOR AN EMERGENCY FOOD PANTRY THAT FEEDS 50 - 75 PEOPLE EACH WEEK. FUNDS WILL ALSO ASSIST IN KEEPING THE PANTRY STOCKED AND ENABLE COMMUNITY OUTREACH TO FAMILIES IN NEED. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OCEAN BAY COMMUNITY DEVELOPMENT CORPORATION
339 BEACH 54 STREET, GROUND FLOOR
ARVERNE, NY  11692
(917) 345-3642

Name of Project Director:

PAT SIMON

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE COMMUNITY LEADERSHIP GROUP, INCLUDING TRAINING IN LEADERSHIP SKILLS TO INVOLVE COMMUNITY PARTNERS, SUCH AS BUSINESSES, MEDICAL AND EDUCATIONAL INSTITUTIONS IN SOLVING POVERTY, CONNECTING YOUTH WITH OPPORTUNITIES, COMBATING DRUGS, PROMOTING DIVERSITY AND BEAUTIFYING PUBLIC SPACES.

Funded Amount:

$25,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OFFICE OF CHILDREN AND FAMILY SERVICES
52 WASHINGTON STREET
RENSSELAER, NY  12144-2735
(518) 474-8627

Name of Project Director:

JOANNE MCELROY MOORE

Purpose of Project:

FUNDS WILL BE USED FOR THE STATEWIDE SETTLEMENT HOUSE PROGRAM, TO PROVIDE A COMPREHENSIVE RANGE OF SERVICES TO RESIDENTS OF NEIGHBORHOODS THEY SERVE.

Funded Amount:

$91,845

Requested By:

ARROYO , BENEDETTO , BENJAMIN , DIAZ -R, DINOWITZ GREENE , HEASTIE , RIVERA -N, RIVERA -P, SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OF HOME, FAMILY AND FUTURE, INC.
980 BROADWAY, SUITE 324
THORNWOOD, NY 10594
(914) 273-4155

Name of Project Director:

NANCY SCHULMAN, PH.D.

Purpose of Project:

FUNDS WILL BE USED FOR AN EDUCATION PROGRAM WHICH ASSISTS IN ALLOWING WORKING MOTHERS, AFFECTED BY DOMESTIC VIOLENCE, THE OPPORTUNITY TO REINVENT THEIR LIVES BY UPGRADING EDUCATIONAL CREDENTIALS AND THEREBY, EMPLOYMENT OPPORTUNITIES.

Funded Amount:

$3,000

Requested By:

LATIMER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

OGDENSBURG BOYS AND GIRLS CLUB, INC.
P.O. BOX 555
OGDENSBURG, NY  13669
(315) 393-1241

Name of Project Director:

THOMAS P. LUCKIE, JR.

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AFTER SCHOOL AND YOUTH
DEVELOPMENT PROGRAMS AT THE CLUB.

Funded Amount:

$10,000

Requested By:

AUBERTINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OLA-ORGANIZATION OF LATIN AMERICANS
9 LAKESIDE DRIVE
SOUTHAMPTON, NY 11968
(631) 678-3033

Name of Project Director:

ISABEL SEPULVEDA

Purpose of Project:

FUNDS WILL BE USED FOR HISPANIC COMMUNITY PROGRAMS

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OLD FIRST WARD COMMUNITY ASSOCIATION
62 REPUBLIC STREET
BUFFALO, NY 14204
(716) 856-8613

Name of Project Director:

LAURA KELLY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACTIVITIES AND PROGRAMS FOR AT-RISK YOUTH.

Funded Amount:

$10,000

Requested By:

SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OLEAN FAMILY YMCA
1101 WAYNE STREET
OLEAN, NY 14760
(716) 373-2400

Name of Project Director:

BARBARA SWEITZER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF YOUTH FITNESS EQUIPMENT

Funded Amount:

$3,000

Requested By:

GIGLIO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ONE STOP RICHMOND HILL COMMUNITY CENTER, INC.
110-08 JAMAICA AVENUE
RICHMOND HILL, NY 11418
(718) 849-3759

Name of Project Director:

JOAN BACHERT

Purpose of Project:

FUNDS WILL BE USED TO TUTOR COMMUNITY CHILDREN, GRADES 2 THROUGH 5 IN READING AND MATH IN AN AFTER SCHOOL PROGRAM.

Funded Amount:

$10,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ONE STOP RICHMOND HILL COMMUNITY CENTER, INC.
110-08 JAMAICA AVENUE
RICHMOND HILL, NY 11418
(718) 849-3759

Name of Project Director:

SIMCHA WAISMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMMUNITY OUTREACH SERVICE, SUCH AS ENTITLEMENTS, ASSISTANCE WITH HEAP, HEARTSHARE AND ENERGY SHARE APPLICATIONS, EMERGENCY FOOD ASSISTANCE, AFTER SCHOOL TUTORING PROGRAM FOR GRADES 2-6 IN READING AND MATH, AS WELL AS, PRESIDENT'S WEEK AND APRIL RECESS PROGRAMMING, CIVILIAN PATROL, MONTHLY NEWSLETTER AND THE MOMMIE AND ME PROGRAM, ETC.

Funded Amount:

$96,306

Requested By:

SEMINERIO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ONE STOP RICHMOND HILL COMMUNITY CENTER, INC.
110-08 JAMAICA AVENUE
RICHMOND HILL, NY  11418
(718) 849-3759

Name of Project Director:

JOAN BACHERT

Purpose of Project:

FUNDS WILL BE USED FOR PARENTS AND CHILDREN, AGES 1-3, TO ENGAGE IN ACTIVITIES SUCH AS ARTS AND CRAFTS, SONG AND DANCE, PLAYING MUSICAL INSTRUMENTS, READING TIME, PUPPET SHOWS, AND EDUCATIONAL GAMES.

Funded Amount:

$4,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ONTEORA BABE RUTH LEAGUE, INC.
18 EAST 48TH ST., 14TH FLOOR
NEW YORK, NY 10017
(845) 679-2537

Name of Project Director:

FRANCESCA ORTOLANO

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH ONGOING YOUTH TEAM NEEDS.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ORANGE COUNTY LAND TRUST
P.O. BOX 2442
MIDDLETOWN, NY  10940
(845) 343-0840

Name of Project Director:

JAMES DELAUNE

Purpose of Project:

FUNDS WILL BE USED FOR THE MULBERRY HOUSE FAÇADE RENOVATIONS.

Funded Amount:

$5,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OUR LADY OF GUADALUPE YOUTH PROGRAM, INC.
7201 15TH AVENUE
BROOKLYN, NY 11228-2199
(718) 236-8300

Name of Project Director:

GEORGE APPEL

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS OF INTEREST TO YOUTH, INCLUDING DANCE, MOVIES, TEAM SPORTS, AND PEER GROUP ACTIVITIES. THESE PROGRAMS ARE AVAILABLE TO ALL MEMBERS OF THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

ABBATE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OUR LADY OF MERCY ROMAN CATHOLIC CHURCH  
70-01 KESSEL STREET  
FOREST HILLS, NY 11375  
(718) 268-6143

Name of Project Director:

STANLEY SWIATOCH

Purpose of Project:

FUNDS WILL BE USED TOWARD GYMNASIUM RENTAL FEES. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,500

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OUR LADY OF MOUNT CARMEL
256 ST. MARY AVENUE
STATEN ISLAND, NY 10305
(718) 727-0809

Name of Project Director:

MIKE DICATALDO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF AN ANNUAL ITALIAN FESTIVAL AND CELEBRATION. THE FESTIVAL IS OPEN TO THE ENTIRE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OUR LADY OF SOLACE
2866 WEST 17TH STREET
BROOKLYN, NY 11224
(718) 266-1612

Name of Project Director:

AUGUSTINE QUILES

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE JERSEYS, EQUIPMENT AND BASEBALL LEAGUE COSTS. BASEBALL PROGRAM IS OPEN TO ALL YOUTH ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

OUR LADY OF THE BLESSED SACRAMENT-CYO
34-24 203RD STREET
BAYSIDE, NY 11361
(718) 424-8848

Name of Project Director:

JOHN CRONAN

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH PROGRAMS WHICH ARE OPEN TO ALL YOUTH ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PALLADIA, INC.
2006 – 2016 MADISON AVENUE
NEW YORK, NY 10035
(212) 979 – 8800

Name of Project Director:

DIANE BONAVOTA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE THE NECESSARY EQUIPMENT AND INSTALLATION SERVICES REQUIRED TO INSTITUTE AN AGENCY-WIDE INFORMATION TECHNOLOGY HELP DESK.

Funded Amount:

$60,000

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PAN-AMERICAN DANCE FOUNDATION, INC.
120 SCHILDKNECHT ROAD
HURLEY, NY 12443
(845) 338-2691

Name of Project Director:

RANDY P. CONTI

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH ONGOING YOUTH PROGRAMMING.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PARENT JOBNET
459 COLUMBUS AVENUE, #504
NEW YORK, NY 10024
(866) 541-3994

Name of Project Director:

PAT CRADDICK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SCHOOL-BASED PROGRAMS TO PREPARE, EDUCATE, AND CONNECT PARENTS WITH JOB RESOURCES AND OPPORTUNITIES.

Funded Amount:

$3,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PARENT TO PARENT NY, INC.
IBR - 1050 FOREST HILL ROAD
STATEN ISLAND, NY 10314
(718) 494-4872

Name of Project Director:

ANNE MARIE CAMINITI

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE WORKSHOPS WITH SERVICES, LITERATURE AND PRINTED MATERIAL; INCREASE ATTENDANCE OF STAFF MEMBERS AT EDUCATION BASED CONFERENCES IN NY STATE; AND FOR EQUIPMENT FOR MATERIAL REPRODUCTION.

Funded Amount:

$7,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PARENTS AS PRIMARY TEACHERS
198 HANCOCK STREET
BROOKLYN, NY 11216
(718) 857-8487

Name of Project Director:

VOIDETTE ERI MA

Purpose of Project:

FUNDS WILL BE USED FOR THE SHAKE, RATTLE AND ROLL PROGRAM-- A 12-WEEK, HANDS-ON PERCUSSION MUSIC LESSONS FOR CHILDREN. STUDENTS WILL ALSO CREATE THEIR OWN INSTRUMENTS AND COMPOSE RHYTHM PATTERNS.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PARENTS FOR MEGAN'S LAW
P.O. BOX 145
STONY BROOK, NY 11790
(631) 689-2672

Name of Project Director:

LAURA A. AHERN

Purpose of Project:

FUNDS WILL BE USED TO ADVOCATE FOR VICTIMS OF SEXUAL ABUSE AND PREVENTION EDUCATION PROGRAMS FOR CHILDREN.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PARENTS FOR MEGAN'S LAW  
P.O. BOX 145  
STONY BROOK, NY  11790  
(631) 689-2672

Name of Project Director:

LAURA AHEARN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPORT SERVICES, INFORMATION AND REFERRALS FOR INNOCENT VICTIMS OF CRIME. THIS PROGRAM IS IN DIRECT COLLABORATION WITH LAW ENFORCEMENT ORGANIZATIONS.

Funded Amount:

$5,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PARENTS UNITED FOR A BETTER SOCIETY, INC.
2671 ATLANTIC AVENUE
BROOKLYN, NY 11207
(347) 415-2443

Name of Project Director:

YOLANDA MARTIN

Purpose of Project:

FUNDS WILL BE USED FOR AFTER SCHOOL, DAYCARE, AND SUMMER PROGRAMS. FUNDS WILL ALSO BE USED FOR EARLY INTERVENTION PROGRAMS.

Funded Amount:

$6,000

Requested By:

TOWNS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PARK SLOPE CIVIC COUNCIL, INC.
357 9TH STREET
BROOKLYN, NY  11215
(212) 589-7540

Name of Project Director:

PAULINE BLAKE

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE ORGANIZATION OF SUMMER YOUTH RECREATION PROGRAMS.

Funded Amount:

$2,500

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PARKCHESTER MULTI-CULTURAL ASSOCIATION, INC.
P.O. BOX 239
BRONX, NY  10460
(401) 427-5618

Name of Project Director:

SAM JONES

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT COMMUNITY BASED PROGRAMS.

Funded Amount:

$3,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PARKSIDE COMMUNITY ASSOCIATION OF BUFFALO, INC.
2318 MAIN STREET
BUFFALO, NY 14214
(716) 838-1240

Name of Project Director:

KATHLEEN PETERSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPORT FOR THE SUMMER ARTS PROGRAM.

Funded Amount:

$7,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PARKSIDE COMMUNITY ASSOCIATION OF BUFFALO, INC.
2318 MAIN STREET
BUFFALO, NY  14214
(716) 838-1240

Name of Project Director:

KATHLEEN PETERSON

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL AND EDUCATIONAL SERVICES FOR YOUTH AFTER SCHOOL AND DURING THE SUMMER.

Funded Amount:

$10,000

Requested By:

PEOPLES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
PARKSIDE COMMUNITY ASSOCIATION OF BUFFALO, INC.
2318 MAIN STREET
BUFFALO, NY 14214
(716) 838-1240

KATHLEEN PETERSON

FUNDS WILL BE USED TO CONTINUE PROGRAMS AND SERVICES SUCH AS THE SUMMER ARTS PROGRAM, CRIME PREVENTION SERVICES, NEWSLETTER SPECIAL EVENTS, AS WELL AS REFERRALS FOR YOUTHS AND ADULTS.

$8,500

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PARSONS BEACON CHILD CENTER OF NY - QUEENS CHILD GUIDANCE CENTER
158-40 76TH ROAD/ PARSONS BOULEVARD
FLUSHING, NY 11366
(718) 820-0760

Name of Project Director:

JACKIE COHEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE SUMMER CAMP WITH EDUCATIONAL, CULTURAL AND RECREATIONAL ACTIVITIES DURING THE MONTHS OF JULY AND AUGUST.

Funded Amount:

$4,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PARTNERSHIP FOR CHILDREN, YOUTH & FAMILIES  
6 COURT STREET, ROOM 105  
GENESEO, NY 14454  
(585) 243-7047

Name of Project Director:  
NITA HAWKINS

Purpose of Project:  
FUNDS WILL BE USED TO SPONSOR A BUS FOR THE GENESEE VALLEY-FINGER LAKES REGION YOUTH TO ATTEND THE 2008 ASSOCIATION OF NYS YOUTH BUREAU’S ANNUAL LEADERSHIP FORUM

Funded Amount:  
$3,000

Requested By:  
ERRIGO

Name of Administering State Agency:  
OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PATCHOGUE-MEDFORD YOUTH FOOTBALL AND CHEERLEADING CLUB, INC.
P.O. BOX 322
MEDFORD, NY 11763
(631) 730-6841

Name of Project Director:

BOB CONROY

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE COSTS ASSOCIATED WITH OPERATING SPORTS PROGRAMS FOR YOUTHS WHICH INCLUDES THE PURCHASE OF SPORTING EQUIPMENT AND UNIFORMS.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PATCHOGUE-MEDFORD YOUTH SOCCER LEAGUE, INC.
P.O. BOX 454
PATCHOGUE, NY  11772
(631) 758-7419

Name of Project Director:

ROBERT EPSKY

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE COSTS OF PURCHASING EQUIPMENT AND UNIFORMS.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PELHAM BAY LITTLE LEAGUE  
2680 WESTCHESTER AVENUE  
BRONX, NY  10461  
(718) 931-9585

Name of Project Director:

SAM FRISINA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW EQUIPMENT.

Funded Amount:

$1,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PELHAM FRITZ BASKETBALL LEAGUE, INC.
22-25 FIFTH AVENUE, SUITE 8B
NEW YORK, NY  10037
(212) 307-8512

Name of Project Director:

MELVIN PRATT

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR THE TEAMS.

Funded Amount:

$5,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PENFIELD RANGERS SOCCER CLUB, INC.
7 WOODLYN WAY
PENFIELD, NY  14526
(585) 377-5974

Name of Project Director:

VICTORIA HANSEN

Purpose of Project:

FUNDS WILL BE USED FOR TRAINING OF COACHES AND PLAYERS. FUNDS
WILL ALSO BE USED FOR BENCHES FOR PLAYERS AND RENTAL SPACE.

Funded Amount:

$15,000

Requested By:

KOON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PEOPLE AND POSSIBILITIES, INC.
744 10TH STREET
NIAGARA FALLS, NY  14301
(716) 285-6961

Name of Project Director:

STEPHANIE COWART

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL/LITERACY MATERIALS AND SUPPLIES.

Funded Amount:

$3,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PERUVIAN AMERICAN CHAMBER OF COMMERCE OF LONG ISLAND, INC.
1223 SUFFOLK AVENUE
BRENTWOOD, NY 11717
(631) 434-2682

Name of Project Director:

JOSE PAREDES

Purpose of Project:

FUNDS WILL BE USED TO OFFSET GENERAL COSTS NEEDED TO MAINTAIN
AND PROVIDE COMMUNITY SERVICE PROGRAMS.

Funded Amount:

$1,500

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PETER STUYVESANT LITTLE LEAGUE
P.O. BOX 2622
NEW YORK, NY  10009
(646) 536-5754

Name of Project Director:

MIKE CONLON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE BASEBALL AND SOFTBALL INSTRUCTION TO THE BOYS AND GIRLS OF THE EASTSIDE COMMUNITY IN A SAFE ENVIRONMENT.

Funded Amount:

$5,000

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PITTSFORD FOOD PANTRY
ONE GROVE STREET, SUITE 103A
PITTSFORD, NY 14534
(585) 264-9860

Name of Project Director:

KELLY GILMAN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH FOOD PANTRY

Funded Amount:

$1,000

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PLATTSBURGH YMCA
17 OAK STREET
PLATTSBURGH, NY 12901
(518) 561-4290

Name of Project Director:

KEVIN J. KILLEEN

Purpose of Project:

FUNDS WILL BE USED FOR COMPUTER UPGRADES

Funded Amount:

$5,000

Requested By:

DUPREY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

POLICE ATHLETIC LEAGUE, INC.
2255 WEBSTER AVENUE
BRONX, NY  10457
(718) 562-3193

Name of Project Director:

FELIX A. URRUTIA JR.

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL PROGRAMS AND COMMUNITY NEEDS.

Funded Amount:

$2,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

POLICE ATHLETIC LEAGUE, INC.
34 – 1/2 E. 12TH STREET
NEW YORK, NY 10003
(212) 477 – 0836

Name of Project Director:

BOBBY DUNN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATIONAL, EDUCATIONAL, AND COUNSELING SERVICES FOR YOUNG PEOPLE BETWEEN THE AGES OF 6 – 19.

Funded Amount:

$35,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

POLONIANS ORGANIZED TO MINISTER TO OUR COMMUNITY, INC.
60-17 56TH DRIVE
MASPETH, NY 11378
(718) 326-9098

Name of Project Director:

EWA KORNACKA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES TO LOW-INCOME CLIENTS INCLUDING, BUT NOT LIMITED TO, CASE ASSISTANCE, ENTITLEMENTS, AND JOB ASSISTANCE.

Funded Amount:

$10,000

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

POMONOK RESIDENTS ASSOCIATION  
69-15 KISSENA BOULEVARD  
FLUSHING, NY  11367  
(718) 380-8921

Name of Project Director:

SUSAN MATLOFF

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE RESIDENTS ASSOCIATION ACTIVITIES, INCLUDING SUPPLIES, EQUIPMENT AND CLASSES.

Funded Amount:

$1,500

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

POSITIVE DIRECTION OF QUEENS COUNTY, INC.
137-25 BROOKVILLE BOULEVARD
ROSEDALE, NY 11422
(718) 949-4694

Name of Project Director:

JOANNE ARBITELLO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN AFTER SCHOOL RECREATIONAL AND TUTORIAL PROGRAM FOR THE YOUTH OF SOUTHEAST QUEENS.

Funded Amount:

$5,500

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PRE-K EARLY CHILDHOOD CENTER
411 46TH STREET
BROOKLYN, NY 11220
(718) 330-9298

Name of Project Director:

RAMONA ADORNO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE PRE-K ARTS PROGRAM INCLUDING SUPPLIES FOR ART AND DANCE EXPOSURE PROJECTS, ART SUPPLIES, MUSIC CD’S AND DANCE MATERIALS, ETC.

Funded Amount:

$4,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PRESBYTERIAN CHURCH OF LYONS
11 QUEEN STREET
LYONS, NY 14489
(315) 946-4723

Name of Project Director:

REV. CYNTHIA HULING HUMMEL

Purpose of Project:

FUNDS WILL BE USED FOR ASSISTANCE FOR COSTS ASSOCIATED WITH THE FREE LUNCH PROGRAM OPEN TO ALL IN THE COMMUNITY

Funded Amount:

$5,000

Requested By:

OAKS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PRESBYTERIAN SENIOR SERVICES  
2095 BROADWAY, SUITE 409  
NEW YORK, NY 10023  
(212) 874-6633  

Name of Project Director:

DAVID S. TAYLOR  

Purpose of Project:

FUNDS WILL BE USED TO TEACH OLDER ADULTS COMPUTER BASICS AND ADVANCE PROGRAMS. THE INTERGENERATIONAL PROGRAM WILL BRING TOGETHER SENIOR CENTER MEMBERS AND GRANDCHILDREN BEING RAISED BY THEIR GRANDPARENTS FOR MEANINGFUL ACTIVITIES.  

Funded Amount:

$10,000  

Requested By:

GREENE  

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PREVENT CHILD ABUSE NEW YORK, INC.
134 SOUTH SWAN STREET
ALBANY, NY  12210
(518) 445-1273

Name of Project Director:

CHRISTINE DEYSS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FOR THE TECHNICAL ASSISTANCE IN THE PRODUCTION AND DISTRIBUTION OF BILINGUAL CHILD ABUSE PREVENTION/AWARENESS MEDIA.

Funded Amount:

$3,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PROJECT LEAD, INC.
123-19 HILLSIDE AVENUE
RICHMOND HILL, NY 11418
(718) 495-6210

Name of Project Director:

RABBI AVROHAM HECHT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE NON-SECTARIAN, AFTER SCHOOL PROGRAMS FOR AT-RISK CHILDREN IN REGO PARK, FOREST HILLS, AND KEW GARDENS.

Funded Amount:

$7,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PROJECT LEAD, INC.
123-19 HILLSIDE AVENUE
RICHMOND HILL, NY 11418
(718) 495-6210

Name of Project Director:

AUROHAM HECHT

Purpose of Project:

FUNDS WILL BE USED FOR THE "FOOD FOR FAMILIES" PROGRAM WHICH PURCHASES AND DELIVERS FOOD TO DISADVANTAGED FAMILIES.

Funded Amount:

$3,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PRONTO OF LONG ISLAND, INC.
128 PINE AIRE DRIVE
BAY SHORE, NY 11706
(631) 231-8290

Name of Project Director:

LISSETTE RODRIGUEZ

Purpose of Project:

FUNDS WILL BE USED TO COVER EXPENSES RELATED TO THE OPERATION OF THE PRESCRIPTION DRUG PROGRAM.

Funded Amount:

$8,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUBLICOLOR, INC.
149 MADISON AVENUE, SUITE 1201
NEW YORK, NY  10016
(212) 213-6121

Name of Project Director:

MOIRA ARIEV BUTNER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EFFORTS TO ENGAGE GREATER NUMBERS OF CORPORATE, COLLEGE AND COMMUNITY GROUP VOLUNTEERS IN PAINTING WEEKLY ALONGSIDE OUR YOUNG PEOPLE, SERVING AS INFORMAL MENTORS AND ROLE MODELS. THIS INCLUDES THE DEVELOPMENT OF OUTREACH MATERIALS, COSTS RELATED TO PARTICIPATION AND VOLUNTEER FAIRS AND PRESENTATIONS, AND THE DEVELOPMENT OF A WELL-BASED REGISTRY AND INFORMATIONAL COMPONENT.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

PUERTO RICAN COALITION FOR A BETTER COMMUNITY, INC.
1010 SUFFOLK AVENUE
BRENTWOOD, NY 11717
(631) 231-1523

Name of Project Director:

ANGEL PABON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF ADMINISTRATION AND GENERAL EXPENSES OF A COMMUNITY EMPOWERMENT PROGRAM FOCUSED ON CREATING EDUCATIONAL, SOCIAL, AND CULTURAL PROGRAMS.

Funded Amount:

$2,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

QSAC, INC.
253 WEST 35TH STREET, 16TH FLOOR
NEW YORK, NY 10001
(212) 244-5560

Name of Project Director:

DIRK MCCALL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT SOCIAL SERVICES FOR CHILDREN WITH AUTISM AND THEIR FAMILIES.

Funded Amount:

$2,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

QUEENS BOROUGH PUBLIC LIBRARY
89-11 MERRICK BLVD.
JAMAICA, NY  11432
(718) 990-8585

Name of Project Director:

LAMBERT SHELL

Purpose of Project:

FUNDS WILL BE USED TO START THE SUMMER BASKETBALL PROGRAM IN LEFRAK CITY THAT WILL PROVIDE A WHOLESOME RECREATIONAL ACTIVITY AS AN ALTERNATIVE TO CRIMINAL AND SocialLY DEVIANT BEHAVIOR.

Funded Amount:

$10,000

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS CHILD GUIDANCE CENTER, INC.
60-02 QUEENS BOULEVARD
WOODSIDE, NY 11377
(718) 651-7770

Name of Project Director:

SANDRA HAGEN

Purpose of Project:

FUNDS WILL BE USED TO STRENGTHEN PROGRAMS THAT ASSIST FAMILIES AND CHILDREN (AGES 0 - 3) WITH CHILD CARE AND TEEN BATTERING PREVENTION.

Funded Amount:

$2,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

QUEENS JEWISH COMMUNITY COUNCIL, INC.
119-45 UNION TURNPIKE
FOREST HILLS, NY 11375
(718) 544-9033 22

Name of Project Director:

CYNTHIA ZALISKY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ACTIVITIES AND PROGRAMS FOR AT-RISK YOUTH IN THE COMMUNITY. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

QUEENS JEWISH COMMUNITY COUNCIL, INC.
119-45 UNION TURNPIKE
FOREST PARK, NY 11375
(718) 544-9033

Name of Project Director:

JANE FENSTER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES ASSOCIATED WITH SOCIAL RECREATIONAL PROGRAMS FOR CHILDREN. PROGRAMS ARE OFFERED TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS LESBIAN AND GAY PRIDE COMMITTEE, INC.
P.O. BOX 720464
JACKSON HEIGHTS, NY   11372
(718) 429-2300

Name of Project Director:

DANIAL DROMM

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF OFFICE SUPPLIES FOR PRIDE COMMUNITY CENTER.

Funded Amount:

$1,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:
QUEENS LESBIAN AND GAY PRIDE COMMITTEE, INC.
P.O. BOX 720464
JACKSON HEIGHTS, NY  11372
(718) 429-2300

Name of Project Director:
DANIEL DROMM

Purpose of Project:
FUNDS WILL BE USED TO HIRE A PART-TIME YOUTH SERVICES COUNSELOR TO DO OUTREACH TO GAY, BI-SEXUAL, STRAIGHT AND TRANS-GENDER YOUTH UNDER 21 YEARS OF AGE.

Funded Amount:
$2,000

Requested By:
aubry

Name of Administering State Agency:
OFFICE OF CHILDREN AND FAMILY SERVICES
QUEENSBORO COUNCIL FOR SOCIAL WELFARE, INC.
221-10 JAMAICA AVENUE
QUEENS VILLAGE, NY  11428
(718) 468-8025

BETTY ENGLE

FUNDS WILL BE USED TO HELP OFFSET OPERATING EXPENSES ASSOCIATED WITH PROVIDING ASSISTANCE AND REFERRALS FOR CHILDREN, ADULTS, TEENS AND SENIOR CITIZENS.

$2,000

CARROZZA

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:
QUEENSBORO COUNCIL FOR SOCIAL WELFARE, INC.
221-10 JAMAICA AVENUE, SUITE 107
QUEENS VILLAGE, NY 11428
(718) 468-8025

Name of Project Director:
JOAN SERRANO-LAUFER

Purpose of Project:
FUNDS WILL BE USED TO PROVIDE INFORMATION AND REFERRALS TO PEOPLE NEEDING ASSISTANCE WITH CONSUMER RIGHTS, COUNSELING, CRIME VICTIMS ASSISTANCE, DAY CARE, DRUG/ALCOHOL TREATMENT, EDUCATION/TRAINING PROGRAMS, EMPLOYMENT, SOCIAL SERVICES, HEALTH CARE, HOUSING, LEGAL SERVICES, ETC.

Funded Amount:
$1,000

Requested By:
MAYERSOHN

Name of Administering State Agency:
OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RACHEL CARSON COMMUNITY ASSOCIATION, INC.
45-15 COLDEN STREET, #5B
FLUSHING, NY 11355
(718) 463-3589

Name of Project Director:

JOHN HENRY BYNS

Purpose of Project:

FUNDS WILL BE USED FOR THE AFTER SCHOOL SPORTS PROGRAM FOR
STUDENTS. ESL AND COMPUTER PROGRAMS FOR ADULTS IN THE
SURROUNDING COMMUNITY WILL ALSO BE PROVIDED.

Funded Amount:

$6,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RAINBOW HEIGHTS CLUB
25 FLATBUSH AVENUE, 3RD FLOOR
BROOKLYN, NY  11217
(718) 852-2584

Name of Project Director:

CHRISTIAN HUYGEN, PH.D.

Purpose of Project:

FUNDS WILL BE USED TO ENABLE LESBIAN, GAY, BISEXUAL AND TRANSGENDER PEOPLE WITH SERIOUS MENTAL ILLNESS TO PARTICIPATE IN THE PLANNING, SHOPPING, PREPARATION, SERVING AND CLEANING UP OF AN EVENING MEAL SERVED. PROVIDES INTERACTION ON A SOCIAL LEVEL, BUILDS FRIENDSHIPS, AND RESOLVES DIFFERENCES IN A SAFE AND STRUCTURED ENVIRONMENT. BASIC BUDGETARY SKILLS, SHOPPING, NUTRITION AND COOKING ARE ALSO TAUGHT.

Funded Amount:

$2,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

REAL WORLD FOUNDATION, INC.
273 BOWERY, CO #1
NEW YORK, NY 10002
(646) 465-5305

Name of Project Director:

REBECCA KALIN

Purpose of Project:

FUNDS WILL BE USED TO HELP COVER THE COSTS OF TRAINING BRONX PARENT COORDINATORS, TRANSLATION AND PRINTING EXPENSES, TRAINING MATERIALS, TRAINING KITS, BILINGUAL PARENT HANDOUTS AND MONTHLY NEWSLETTER.

Funded Amount:

$4,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
RECTOR CHURCH WARDENS & VESTRY MEMBERS OF CHURCH OF ST. LUKE IN FIELDS OF NY
487 HUDSON STREET
NEW YORK, NY 10014
(212) 633-2099

REV. MARY L. FOULKE

FUNDS WILL BE USED TO PROVIDE HOT, NUTRITIOUS SATURDAY EVENING DINNERS AND COMMUNITY SUPPORT FOR AMBULATORY PEOPLE LIVING WITH HIV/AIDS.

$3,000

GLICK

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

REDHOOK WEST RESIDENT ASSOCIATION, INC.
441 COLUMBIA STREET
BROOKLYN, NY  11231
(718) 488-8222

Name of Project Director:

LILLIE MARSHALL

Purpose of Project:

FUNDS WILL BE USED TO PAY FOR EXPENSES, SUCH AS MUSIC, FOOD, RIDES
AND GAMES ASSOCIATED WITH THE ANNUAL FAMILY DAY.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

REEVES-DRAKEFORD EDUCATIONAL & RECREATIONAL ASSN., INC.
169 EAST 56TH STREET
BROOKLYN, NY  11203
(718) 342-4616

Name of Project Director:

GREGG JACKSON

Purpose of Project:

FUNDS WILL BE USED FOR IN-STATE FIELD TRIPS FOR YOUTH AND TO OFFSET THE COST OF REFRESHMENTS, EDUCATIONAL TOURS AND TOURNAMENTS, RELAY RACES, BASKETBALL GAMES AND TICKETS FOR THE AMUSEMENT PARK.

Funded Amount:

$15,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

REGIONAL FOOD BANK OF NE NY, INC.
965 ALBANY SHAKER ROAD
LATHAM, NY  12110
(518) 786-3691

Name of Project Director:

MARK QUANDT

Purpose of Project:

FUNDS WILL BE USED TO HELP PURCHASE SOFTWARE TO UPGRADE THE REGIONAL FOOD BANK’S COMPUTER SYSTEM.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

REGIONAL FOOD BANK OF NE NY, INC.
965 ALBANY SHAKER ROAD
LATHAM, NY 12110
(518) 786-3691 222

Name of Project Director:

MARK QUANDT

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE INVENTORY SOFTWARE. THE NEW SYSTEM IS ACCURATE AND COST-EFFECTIVE INCLUDING ONLINE ORDERING AND BAR CODING, IMPROVING SERVICE AND REDUCING COSTS.

Funded Amount:

$3,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

REGIONAL FOOD BANK OF NORTHEASTERN NEW YORK
965 ALBANY SHAKER ROAD
LATHAM, NY 12110
(518) 786-3691

Name of Project Director:

MARK QUANDT

Purpose of Project:

FUNDS WILL BE USED FOR INVENTORY SOFTWARE UPGRADES

Funded Amount:

$5,055

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

REGIONAL FOOD BANK OF NORTHEASTERN NEW YORK
965 ALBANY SHAKER ROAD
LATHAM, NY 12110
(518) 786-3691

Name of Project Director:

MARK QUANDT

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM COSTS

Funded Amount:

$5,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RENEGADES YOUTH SPORTS, INC.
1166 EAST 105TH STREET
BROOKLYN, NY  11236
(718) 241-7885

Name of Project Director:

COURTNEY POLLINS

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT THE COMMUNITY YOUTH FOOTBALL PROGRAM.

Funded Amount:

$3,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RENSSLEAER POP WARNER
P.O. BOX 376
RENSSELAER, NY 12144
(518) 449-7053

Name of Project Director:

KELLY FAHRENKOPF

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE NEW UNIFORMS, EQUIPMENT FOR THE PLAYERS OF RENSSLEAER POP WARNER.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RESCUE ME, CORP.
91 GUYON AVENUE, 2ND FLOOR
STATEN ISLAND, NY 10306
(718) 761-3300

Name of Project Director:

SUSAN HAYES

Purpose of Project:

FUNDS WILL BE USED TO RAISE AWARENESS OF CHILD ABUSE THROUGH LITERATURE DISTRIBUTION AND OUTREACH. PREVENTION THROUGH SKILLS SEMINARS, STRESS REDUCTION, INTERVENTION THROUGH COUNSELLING, AND COMMUNITY SUPPORT SERVICES.

Funded Amount:

$7,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RESOURCE CENTER FOR ACCESSIBLE LIVING, INC.
592 ULSTER AVENUE
KINGSTON, NY 12401
(845) 331-0541

Name of Project Director:

SUZANNE DEBEAUMONT

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN PURCHASING COMPUTERS AND RELATED COMPONENTS TO UPGRADE RESOURCE CENTER FOR ACCESSIBLE LIVING’S AGING COMPUTER SYSTEM.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RETIREES OF DREISER LOOP, INC.
177 DREISER LOOP, ROOM 19
BRONX, NY 10475
(718) 379-0377

Name of Project Director:

LEONARD MURRELL

Purpose of Project:

FUNDS WILL BE USED TO HELP MAINTAIN THE VEHICLES AND LOCATIONS USED BY THE ORGANIZATIONS.

Funded Amount:

$3,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RHINELANDER CHILDREN'S CENTER
350 EAST 88TH STREET
NEW YORK, NY 10128
(212) 876-0500

Name of Project Director:

LAURA COLIN KLEIN

Purpose of Project:

FUNDS WILL BE USED TO ENABLE CHILDREN AT RHINELANDER CHILDREN'S CENTER TO ATTEND AN AFTER SCHOOL PROGRAM.

Funded Amount:

$10,000

Requested By:

GRANNIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RICHFIELD SPRINGS YOUTH MINISTRY CORP.
P.O. BOX 108
RICHFIELD SPRINGS, NY  13439
(315) 858-3200

Name of Project Director:

BILL KOSINA

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE BUILDING OF A COMMUNITY CENTER FOR THE ZONE, IN ORDER TO PROVIDE SERVICES TO THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$12,500

Requested By:

MAGEE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RIVERDALE COMMUNITY CENTER, INC.
660 WEST 237TH STREET
BRONX, NY 10463
(718) 796-4724

Name of Project Director:

KATHLEEN GILSON

Purpose of Project:

FUNDS WILL SUPPORT AFTER SCHOOL THEATER PROGRAMS AT MS 141 FOR OVER 100 BRONX CHILDREN. THE STUDENTS PERFORM MUSICALS AND OTHER PLAYS FOR THEIR FAMILIES AND THE LOCAL COMMUNITY.

Funded Amount:

$10,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RIVERTON TENANTS ASSOCIATION, INC.
P.O. BOX 501, LINCOLNTON STATION
NEW YORK, NY  10037
(212) 662-2000

Name of Project Director:

ANGELA JENKINS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LEGAL COUNSEL AND YOUTH PROGRAMS.

Funded Amount:

$7,500

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROCHDALE VILLAGE SOCIAL SERVICES, INC.
169-65 137TH AVENUE
JAMAICA, NY  11434
(718) 949-3499

Name of Project Director:

DEBRA MYREE

Purpose of Project:

FUNDS WILL BE USED FOR THE ROCHDALE VILLAGE NORC PROGRAM WHICH PROVIDES CASE MANAGEMENT, CASE ASSISTANCE, EDUCATIONAL AND RECREATIONAL PROGRAMS TO THOSE INDIVIDUALS RESIDING WITHIN THE HOUSING COMMUNITY. FUNDS WILL ALSO OFFSET ADMINISTRATIVE AND OPERATING EXPENSES OF THE PROGRAM.

Funded Amount:

$10,000

Requested By:

COOK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:
ROCKAWAY LITTLE LEAGUE
425 BEACH 145TH STREET
NEPONSIT, NY  11694
(718) 634-4240

Name of Project Director:
MURIEL DONOHUE

Purpose of Project:
FUNDS WILL BE USED TO HELP MAINTAIN FIVE BASEBALL FIELDS AT GATEWAY NATIONAL RECREATION AREA TO ALLOW LITTLE LEAGUE BASEBALL TO CONTINUE IN THE ROCKAWAY COMMUNITY. FUNDS WILL ALSO BE USED TO ASSIST IN PURCHASING UNIFORMS FOR THE LEAGUE PLAYERS.

Funded Amount:
$3,000

Requested By:
PHEFFER

Name of Administering State Agency:
OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ROCKLAND COUNTY YMCA
35 SOUTH BROADWAY
NYACK, NY 10960
(845) 358-0245

Name of Project Director:

CHARLES MAZE

Purpose of Project:

FUNDS WILL BE USED TO CREATE A CHALLENGING AFTER SCHOOL ENVIRONMENT. FUNDS WILL ALSO BE USED TO PROVIDE SUPPLIES INCLUDING EDUCATIONAL GAMES. PROGRAM SERVES 100 CHILDREN K-6.

Funded Amount:

$1,500

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ROCKLAND COUNTY YMCA
35 SOUTH BROADWAY
NYACK, NY 10960
(845) 358-0245

Name of Project Director:

CHARLES MAZE

Purpose of Project:

FUNDS WILL BE USED TO SERVE LOW-INCOME YOUTH BY PROVIDING STIMULATING AND ENJOYABLE ACTIVITIES SUCH AS IN-STATE FIELD TRIPS, SPORTS AND THE ARTS.

Funded Amount:

$6,000

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ROCKLAND FAMILY SHELTER, INC.
2 CONGERS ROAD
NEW CITY, NY  10956
(845) 634-3391

Name of Project Director:

VIVIAN ENGLAND

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE AND TRAIN TEENS IN A WORKSHOP FORMAT ABOUT THE WARNING SIGNS IN SOCIAL SITUATIONS THAT COULD LEAD TO ABUSIVE RELATIONSHIPS.

Funded Amount:

$9,500

Requested By:

JAGGERE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ROCKLAND FAMILY SHELTER, INC.
2 CONGERS ROAD
NEW CITY, NY 10956
(845) 634-3391

Name of Project Director:
CAROLYN FISH

Purpose of Project:
FUNDS WILL BE USED TO PURCHASE FURNISHINGS FOR THE NEW ROCKLAND FAMILY SHELTER FACILITY.

Funded Amount:
$8,000

Requested By:
ZEBROWSKI

Name of Administering State Agency:
OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROMAN CATHOLIC CHURCH OF ST. MARY OF THE ISLE
315 EAST WALNUT STREET
LONG BEACH, NY  11561
(516) 432-0157

Name of Project Director:

SISTER FRANCES MONUSZKO

Purpose of Project:

FUNDS WILL BE USED TO SERVE LONG BEACH AREA'S LOW-INCOME RESIDENTS OF ALL RACES AND RELIGIONS, THE MAJORITY BEING CHILDREN, SINGLE PARENTS, THE ELDERLY AND AIDS VICTIMS WHO WILL BE PROVIDED FOOD, COUNSELING AND REFERRAL ASSISTANCE.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ROMAN CATHOLIC CHURCH OF THE HOLY FAMILY
2158 WATSON AVENUE
BRONX, NY 10462
(718) 863-9156

Name of Project Director:

JULIA RODRIGUEZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CONTINUED COMMUNITY AND FAMILY SUPPORT SERVICES. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

RIVERA-P

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ROME YOUTH HOCKEY ASSOCIATION, INC.
P.O. BOX 861
ROME, NY 13440
(315) 335-3277

Name of Project Director:

CHIP TRAVIS

Purpose of Project:

FUNDS WILL BE USED TO: PURCHASE EQUIPMENT FOR BEGINNING HOCKEY PLAYERS; PAY FOR RENTAL FEES FOR USE OF THE ICE BY LOW-INCOME PLAYERS; REMODEL LOCKER ROOMS; AND FOR THE PURCHASE OF OFFICE EQUIPMENT AND COMMUNITY ROOM EQUIPMENT FOR THE ROME YOUTH HOCKEY ASSOCIATION.

Funded Amount:

$10,000

Requested By:

DESTITO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

PATRICIA DONNELLY

Purpose of Project:

FUNDS WILL BE USED TO COMPLETE CONSTRUCTION OF NEW OFFICE SPACE FOR THE BUILDING

Funded Amount:

$7,000

Requested By:

FITZPATRICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RONALD MCDONALD HOUSE OF LONG ISLAND
267-07 76TH AVENUE
NEW HYDE PARK, NY 11040
(516) 775-5683

Name of Project Director:

STACIE RODRIGUEZ

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE
RONALD MCDONALD HOUSE OF LONG ISLAND PROVIDES

Funded Amount:

$5,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

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

Name of Project Director:

PATRICIA C. DONNELLY

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS INVOLVED IN OPERATING PROGRAMS FOR CHILDREN WITH SPECIAL NEEDS.

Funded Amount:

$1,500

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RONDOUT VALLEY LITTLE LEAGUE
509 BUCK ROAD
ACCORD, NY 12404
(845) 687-4259

Name of Project Director:

ROBERT GILLILAND

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A SCOREBOARD AND/OR PUBLIC ADDRESS SYSTEM FOR THE RONDOUT VALLEY LITTLE LEAGUE TEAM FIELD.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROOSEVELT ISLAND YOUTH PROGRAM, INC.
506 MAIN STREET
ROOSEVELT ISLAND, NY 10044
(212) 935-3645

Name of Project Director:

STEVE KAUFMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATION, EDUCATION, AND COUNSELING SERVICES TO THE YOUNG PEOPLE OF ROOSEVELT ISLAND.

Funded Amount:

$10,000

Requested By:

GRANNIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROSEDALE JETS FOOTBALL ASSOCIATION
P.O. BOX 300415
JAMAICA, NY 11430
(718) 527-7620

Name of Project Director:

JACQUES LEANDRE

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE OPERATING AND MAINTENANCE OF THE TEAM'S ACTIVITIES, INCLUDING, BUT NOT LIMITED TO, UNIFORMS, IN-STATE TRANSPORTATION AND SUPPLIES.

Funded Amount:

$5,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RSVP OF WESTCHESTER
280 NORTH CENTRAL AVENUE, SUITE 310
HARTSDALE, NY 10530
(914) 948-6069

Name of Project Director:

ERIDANIA CAMACHO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT NECESSARY VOLUNTEER RECOGNITION ACTIVITIES. THESE ACTIVITIES SERVE AS A VEHICLE TO THANK AND MOTIVATE VOLUNTEERS 55 AND OVER FOR THEIR WORK ASSISTING PUBLIC AND NON PROFIT AGENCIES IN ADDRESSING COMMUNITY ISSUES.

Funded Amount:

$5,000

Requested By:

BRADLEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RUSH-HENRIETTA FOOD PANTRY
152 PARKMEADOW DRIVE
PITTSFORD, NY 14534
(585) 334-3141

Name of Project Director:

MEL & BARBARA WITMER

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH FOOD PANTRY

Funded Amount:

$1,000

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RUSSIAN AMERICAN COMMUNITY COALITION, INC.
3101 OCEAN PARKWAY, APT. 7C
BROOKLYN, NY 11235
(718) 714-6717

Name of Project Director:

SERGEY KOVALYOV

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND SOCIAL EVENTS TO
THE COMMUNITY AND EDUCATING THE COMMUNITY ABOUT THE
HOLOCAUST, COMMUNITY ISSUES, VOTER REGISTRATION, ETC.
PROGRAMS ARE OPEN TO ALL INDIVIDUALS ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

RYER ENTERTAINMENT
2120 RYER AVENUE
BRONX, NY  10453
(718) 220-5234

Name of Project Director:

LUIS MELENDEZ

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A LOCAL PLAY IN THE COMMUNITY ON RYER AVENUE, USING COMMUNITY YOUTH AS PERFORMERS.

Funded Amount:

$2,500

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SACHEM ATHLETIC CLUB, INC.
P.O. BOX 181
RONKONKOMA, NY  11779
(631) 472-0119

Name of Project Director:

RON CHAMBERLAIN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE COSTS OF PURCHASING EQUIPMENT AND UNIFORMS.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SACHEM TEEN CENTER, INC.
232 RONKONKOMA AVENUE
LAKE RONKONKOMA, NY 11779
(631) 585-1811

Name of Project Director:

JOHN FIORVANTE

Purpose of Project:

FUNDS WILL BE USED TO SUPPLY COMPUTER, GAMES, MOVIES, FIELD TRIPS AND ACTIVITIES TO TEENS ATTENDING THE CENTER.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SACRED HEART CYO
215-35 38 AVENUE
BAYSIDE, NY  11361
(718) 428-2200

Name of Project Director:

ROBERT KLEIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SPORTS PROGRAMS TO BOYS AND GIRLS IN GRADE SCHOOL THROUGH HIGH SCHOOL, INCLUDING BASEBALL, SOCCER AND BASKETBALL. PROGRAM IS NON-SECTARIAN AND OPEN TO ALL YOUTH WITHIN THE COMMUNITY.

Funded Amount:

$6,500

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SAFE, INC. OF SCHENECTADY
1344 ALBANY STREET
SCHENECTADY, NY 12304
(518) 374-0166

DELORES EDMONDS-MCINTOSH

FUNDS WILL BE USED TO REPLACE BACK STAIRS OF BUILDING, REWIRING OF SAFE HOME AND OFFICE SUPPLIES

$3,000

TEDISCO

OFFICE OF CHILDREN AND FAMILY SERVICES
SAFE, INC. OF SCHENECTADY  
1344 ALBANY STREET  
SCHENECTADY, NY   12304  
(518) 374-0166

DELORES EDMONDS-MCINTOSH

FUNDS WILL BE USED TO HELP PROVIDE NEW WIRING, NEW STAIRS, OFFICE EQUIPMENT AND SUPPLIES, AS WELL AS, COSTS OF THE SAFE HOUSE PROGRAM FOR RUNAWAY, HOMELESS AND SEXUALLY EXPLOITED TEENS.

$4,000

TONKO

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SALT AND SEA MISSION CHURCH, INC.
1329 SURF AVENUE
BROOKLYN, NY 11224
(718) 372-3576

Name of Project Director:

DEBBE SANTIAGO

Purpose of Project:

FUNDING WILL BE USED TO OPERATE THE FOOD PANTRY, WHICH IS OPEN TO ALL IN NEED ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SALTY DOG CHARITIES, INC.
874 LAKE ROAD
WEBSTER, NY  14580
(585) 258-4248

Name of Project Director:

KEITH BURHANS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PEOPLE WITH DISABILITIES FROM THE ROCHESTER AREA AN OPPORTUNITY TO BE INSPIRED BY AND MEET SOME OF THE WORLD’S MOST ACCOMPLISHED ATHLETES WITH DISABILITIES.

Funded Amount:

$10,000

Requested By:

KOON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SAMUEL FIELD YM & YWHA, INC.
212-00 23 AVENUE
BAYSIDE, NY 11360
(718) 423-6111

Name of Project Director:

STEVE GOODMAN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COST ASSOCIATED WITH OPERATING COMMUNITY YOUTH PROGRAMS.

Funded Amount:

$2,500

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SARAH WELLS GIRL SCOUT COUNCIL
162 BLOOMINGBURG ROAD
MIDDLETOWN, NY 10940
(845) 361-2898

Name of Project Director:

BARBARA SAMPSON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE SARAH WELLS GIRL SCOUT COUNCIL PROVIDES

Funded Amount:

$5,000

Requested By:

CALHOUN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SBH COMMUNITY SERVICES NETWORK, INC.
425 KINGS HIGHWAY
BROOKLYN, NY 11223
(718) 787-1100

Name of Project Director:

CHANA COHEN

Purpose of Project:

FUNDS WILL BE USED FOR THE WOMEN'S AND PARENTING SUPPORT GROUP, WHICH IS OPEN TO ALL MEMBERS OF THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SCARSDALE FAMILY COUNSELING SERVICE
405 HARWOOD BUILDING
SCARSDALE, NY 10583
(914) 723-3281

Name of Project Director:

GERALDINE GREENE

Purpose of Project:

FUNDS WILL BE USED FOR THE "VITAL AGING" INITIATIVE FOR OLDER COMMUNITY RESIDENTS TO PARTICIPATE IN MONTHLY WORKSHOPS TO PROMOTE HEALTH AND WELLNESS.

Funded Amount:

$3,000

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SCARSDALE TEEN CENTER, INC.
862 SCARSDALE AVENUE
SCARSDALE, NY 10583
(914) 722-8358

Name of Project Director:

JESSICA EDELMAN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF NEW FLOORING AND FURNITURE FOR TEEN CENTER AND FOR THE PURCHASE OF COMPUTER EQUIPMENT.

Funded Amount:

$12,000

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SCHENECTADY DAY NURSERY, INC.
25 LAFAYETTE STREET
SCHENECTADY, NY 12305
(518) 374-6319

Name of Project Director:

DIANE FISHER

Purpose of Project:

FUNDS WILL BE USED TO REPLACE AGING PLAYGROUND AND INSTALLATION OF NEW FENCING AT THE INNER CITY DAYCARE FACILITY

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SCHENECTADY PIPE BAND, LTD
40 TERRACE AVENUE
ALBANY, NY  12203
(518) 372-6469

Name of Project Director:

WILLIAM MUNRO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EXPENSES ASSOCIATED WITH PUTTING ON THE ANNUAL SCOTTISH GAMES IN THE CAPITAL REGION AREA.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SCHENECTADY ROWING CLUB, INC.
P.O. BOX 9004
SCHENECTADY, NY 12309
(518) 377-3632

Name of Project Director:

EDWARD J. BUTZ

Purpose of Project:

FUNDS WILL BE USED TO REPLACE AGING AND BROKEN EQUIPMENT FOR THE INNER CITY YOUTH ROWING PROGRAM - FOR BOAT OARS (SWEEPERS).

Funded Amount:

$2,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SCHILLER PARK COMMUNITY SERVICES, INC.
2056 GENESEE STREET
BUFFALO, NY 14211
(716) 896-1325

Name of Project Director:

BETH SIDEBOTTOM

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL AND EDUCATIONAL SERVICES FOR YOUTH AFTER SCHOOL AND DURING THE SUMMER.

Funded Amount:

$3,000

Requested By:

PEOPLES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SCHOOL SETTLEMENT ASSOCIATION, INC.
120 JACKSON STREET
BROOKLYN, NY 11211
(718) 389-1810

Name of Project Director:

RICK VESCOVI

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PROGRAMMING AND REFERRALS FOR NEEDY FAMILIES.

Funded Amount:

$10,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SELDEN-CENTEREACH LITTLE LEAGUE
P.O. BOX 383
CENTEREACH, NY  11720
(631) 445-9559

Name of Project Director:

PAUL GILISTRO

Purpose of Project:

FUNDS WILL BE USED TO ACQUIRE A PORTABLE CONCESSION TRAILER TO ALLOW THIS VOLUNTEER LEAGUE TO OFFER NUTRITIOUS REFRESHMENTS AT LEAGUE GAMES WHILE SIMULTANEOUSLY USING FUNDS RAISED FROM FOOD SALES TO SUPPORT LEAGUE EXPANSION SO THAT MORE CHILDREN CAN PARTICIPATE.

Funded Amount:

$12,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SENIOR OLYMPICS OF STATEN ISLAND
475 VICTORY BOULEVARD
STATEN ISLAND, NY 10301
(718) 981-1500

Name of Project Director:

BEATRICE VICTOR

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE LIGHT REFRESHMENTS, A LUNCHEON, AND MEDALS FOR THE 2007 SENIOR OLYMPICS.

Funded Amount:

$1,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SERVICE ALLIANCE FOR YOUTH
1522 GILLESPIE AVENUE
BRONX, NY  10461
(718) 829-7574

Name of Project Director:

JEROME DEMERS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NECESSARY EQUIPMENT FOR FOOTBALL AND CHEERLEADING SQUADS.

Funded Amount:

$3,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SERVICE FUND OF THE NATIONAL ORGANIZATION FOR WOMEN
150 WEST 28TH STREET, SUITE 304
NEW YORK, NY 10001
(212) 627-9895

Name of Project Director:

MEAGHAN CAREY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE WOMEN'S HELPLINE, WHICH OFFERS FREE TELEPHONE REFERRALS TO WOMEN WITH PROBLEMS INCLUDING HOUSING, HEALTH CARE, JOB TRAINING, EDUCATION, IMMIGRATION, EMPLOYMENT DISCRIMINATION, DIVORCE, CUSTODY, AND MORE.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SESAME FLYERS INTERNATIONAL, INC.
3510 CHURCH AVENUE
BROOKLYN, NY 11203
(718) 693-0500

Name of Project Director:

CURTIS NELSON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES OF THE COMMUNITY YOUTH FOOTBALL PROGRAM.

Funded Amount:

$3,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SEVENTH AVENUE CENTER FOR FAMILY SERVICES
1646 MONTGOMERY AVENUE
BRONX, NY   10453
(718) 901-0140

Name of Project Director:

TOLU OLUWOLE

Purpose of Project:

FUNDS WILL BE USED TO FACILITATE VISION SCREENING OF HEAD START CHILDREN, AND TO MAKE IT POSSIBLE FOR THEM TO GET GLASSES AS NEEDED.

Funded Amount:

$5,000

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SHAAREI EMUNAH
2915 OCEAN PARKWAY
BROOKLYN, NY 11235
(718) 812-0779

Name of Project Director:

RABBI MORDACHAI TOKARSKY

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE YOUTH LEADERSHIP PROGRAM. PROGRAM IS OPEN TO ALL YOUTH ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SHALOM SERVICE CENTER
483 ALBANY AVENUE
BROOKLYN, NY  11203
(718) 774-9213

Name of Project Director:

SHIMON HERZ

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY THE COST OF VEHICLE EXPENSE.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SHELTERING THE HOMELESS IS OUR RESPONSIBILITY, INC.
P.O. BOX 814
WHITE PLAINS, NY  10602
(914) 328-1896

Name of Project Director:

BARBARA FREIERT

Purpose of Project:

FUNDS WILL BE USED TO ASSIST AT LEAST TEN FAMILIES WHO HAVE TRANSITIONED FROM HOMELESSNESS TO PERMANENT HOUSING TO MAINTAIN A STABLE ENVIRONMENT, TO ADDRESS ISSUES OF EMPLOYMENT, SCHOOL, PARENTING, BUDGETING, HOUSEKEEPING, AND NEIGHBORHOOD AND LANDLORD-TENANT RELATIONS IN ORDER THAT THEY MAY ACHIEVE THE GREATEST LEVEL OF INDIVIDUAL AND FAMILY SELF-SUFFICIENCY.

Funded Amount:

$5,000

Requested By:

BRADLEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SHENENDEHOWA VARSITY HOCKEY BOOSTER CLUB
P.O. BOX 5173
CLIFTON PARK, NY  12065
(518) 426-5187

Name of Project Director:

DINO J. MACALUSO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF VARSITY ICE HOCKEY PROGRAM.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SHOREFRONT COUNCIL HOUSING DEVELOPMENT FINANCE CORP.
3915 NEPTUNE AVENUE
BROOKLYN, NY  11224
(718) 266-3666

Name of Project Director:

HERB FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SRO HOUSING FOR FORMERLY HOMELESS SENIOR CITIZENS.

Funded Amount:

$91,000

Requested By:

ABBATE, BENEDETTO, BING, BRENNAN, BROOK-KRASNY, CANESTRARI, CLARK, CYMBROWITZ-S, DINOWITZ, FARRELL, GLICK, GOTTFRIED, HIKIND, HOYT, MAISEL, MAYERSOHN, MILLMAN, O’DONNELL, PHEFFER, ROSENTHAL, SILVER, WEINSTEIN, WEPRIN, YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SHOREFRONT YM-YWHA OF BRIGHTON-MANHATTAN BEACH, INC.
330 CONEY ISLAND AVENUE
BROOKLYN, NY 11235
(718) 646-4444 318

Name of Project Director:

SUSAN FOX

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE AT-RISK YOUTH PROGRAM OFFERED BY THE SHOREFRONT Y.

Funded Amount:

$5,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SID JACOBSEN JEWISH COMMUNITY CENTER, INC.
300 FOREST DRIVE
EAST HILLS, NY  11548
(516) 484-1545

Name of Project Director:

SUSAN BENDER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES TO ADOLESCENTS AND TEENS WITH SPECIAL NEEDS. SERVICES ARE OPEN TO ALL ON A NON-SECTRIAN BASIS.

Funded Amount:

$10,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SILVER BEACH ASSOCIATION, INC.
1 PLAZA PLACE
BRONX, NY 10465
(718) 409-1665

Name of Project Director:

TRACY LYNCH

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING EXPENSES AND FOR COMMUNITY CENTER ACTIVITIES.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SIMPSON STREET DEVELOPMENT ASSOCIATION, INC.
997 EAST 163RD STREET
BRONX, NY  10458
(718) 589-1510

Name of Project Director:

MARGARITA SMITH

Purpose of Project:

FUNDS WILL BE USED TO OPERATE A YOUTH SERVICES CENTER, SUMMER CAMP, FOOD PANTRY, CLOTHING PANTRY, AS WELL AS OFFER SOCIAL SERVICES, YOUTH DEVELOPMENT TRAINING AND AFTER SCHOOL PROGRAMS.

Funded Amount:

$10,000

Requested By:

DIAZ-R

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SISTERS IN STRENGTH
1360 FULTON STREET, SUITE 314
BROOKLYN, NY  11216
(718) 857-1393

Name of Project Director:

JOANNE SMITH

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AN EMPOWERMENT GROUP FOR HIGH SCHOOL GIRLS, WHICH IS ORGANIZING THE SAFE START PROJECT AND COLLECTING DONATIONS OF BASIC NECESSITIES FOR WOMEN AND CHILDREN LIVING IN DOMESTIC VIOLENCE AND HOMELESS SHELTERS.

Funded Amount:

$5,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SKRIBBLERS MAGAZINE, INC.
P.O. BOX 286
CLIFTON PARK, NY  12065
(518) 280-5923

Name of Project Director:

TAMMY ELLIS ROBINSON

Purpose of Project:

FUNDS WILL BE USED TO PUBLISH A CHILDREN'S NEWSPAPER WHICH ENCOURAGES READING/Writing. ARTICLES ARE SUBMITTED BY LOCAL CHILDREN AND PUBLISHED.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SOCIETY OF ST. VINCENT DE PAUL
1298 MAIN STREET
BUFFALO, NY  14209
(716) 882-3360

Name of Project Director:

MARK ZIRNHELD

Purpose of Project:

FUNDS WILL BE USED TO RUN A CHILDREN'S SUMMER CAMP PROGRAM SERVING POOR, IMPOVERISHED AND NEEDY OF WNY FOR 75 YEARS. CAMP IS OPEN TO ALL YOUTH ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SOCIETY OF ST. VINCENT DE PAUL
1298 MAIN STREET
BUFFALO, NY 14209
(716) 882-3360

Name of Project Director:

MARK ZIRNHELD

Purpose of Project:

FUNDS WILL BE USED TO RUN A CHILDREN'S SUMMER CAMP PROGRAM SERVING POOR, IMPOVERISHED AND NEEDY OF WNY. CAMP IS OPEN TO ALL YOUTH ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SOCIETY OF ST. VINCENT DE PAUL HOLY NAME OF MARY CHURCH
55 EAST JAMAICA AVENUE
VALLEY STREAM, NY 11580
(516) 825-6969

Name of Project Director:

MARGIE KELLY

Purpose of Project:

FUNDS WILL BE USED FOR FOOD PANTRY FUNDING

Funded Amount:

$5,000

Requested By:

BARRA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SOUTH ASIAN YOUTH ACTION, INC.
54-04 SEABURY STREET
ELMHURST, NY 11373
(718) 651-3483

Name of Project Director:

ANNETTA SEECHARRAN

Purpose of Project:

FUNDS WILL BE USED TO SERVE YOUTH FROM BANGLADESH, GUYANA, INDIA, PAKISTAN, SRI LANKA AND TRINIDAD. THE MISSION IS TO PROVIDE SELF-ESTEEM, BUILD CULTURAL, SOCIAL AND POLITICAL AWARENESS AMONG SOUTH ASIAN YOUTH IN THE COMMUNITY.

Funded Amount:

$10,000

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SOUTH BROOKLYN YOUTH CONSORTIUM, INC.
P.O. BOX 245134
BROOKLYN, NY  11224
(718) 266-7050

Name of Project Director:

SHERYL ROBERTSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL PROGRAMS FOR CHILDREN.

Funded Amount:

$4,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SOUTH BUFFALO COMMUNITY ASSOCIATION, INC.
35 CAZANOVI A STREET
BUFFALO, NY 14220
(716) 822-4532

Name of Project Director:

KRIS PARISI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PROGRAMS AND ACTIVITIES FOR BOTH YOUTH AND SENIOR CITIZENS. FUNDS WILL ALSO BE USED TO PURCHASE FLAGS AND DECORATIONS FOR NEIGHBORHOOD BUSINESS STRIPS.

Funded Amount:

$11,000

Requested By:

SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SOUTH OZONE PARK COMMUNITY DEVELOPMENT CORPORATION  
134-04 ROCKAWAY BOULEVARD - 2ND FLOOR  
SOUTH OZONE PARK, NY  11420  
(718) 738-9200

Name of Project Director:

VALERIE BROUGHTON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE DAILY OPERATIONS AND ACTIVITIES, INCLUDING BUT NOT LIMITED TO THE PURCHASE OF SUPPLIES AND/OR EQUIPMENT, RENT, COSTS ASSOCIATED WITH PROVIDING HUMAN SERVICES, SOCIAL SERVICES, HOUSING SERVICE PROGRAMS, ETC. FOR MEMBERS OF THE COMMUNITY.

Funded Amount:

$15,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SOUTH QUEENS BOYS & GIRLS CLUB, INC.
110-04 ATLANTIC AVENUE
RICHMOND HILL, NY 11419
(718) 441-6051 209

Name of Project Director:

CAROL SIMON

Purpose of Project:

FUNDS WILL BE USED TO CREATE A PROGRAM TO INTRODUCE THE SOUTH ASIAN COMMUNITY TO THE BOYS AND GIRLS CLUB.

Funded Amount:

$10,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SOUTHEAST BRONX NEIGHBORHOOD CENTERS, INC.
955 TINTON AVENUE
BRONX, NY 10456
(718) 542-2727

Name of Project Director:

ROGER SAM

Purpose of Project:

FUNDS WILL BE USED TO AUGMENT THE ACADEMIC GAINS OF YOUTH IN THE AREAS OF MATH, LANGUAGE, ARTS AND INTERCULTURAL LEARNING.

Funded Amount:

$7,500

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SPLASHES OF HOPE
P.O. BOX 537
HUNTINGTON, NY 11743
(631) 424-8230

Name of Project Director:

HEATHER BUGGEE

Purpose of Project:

FUNDS WILL BE USED FOR SUPPLIES

Funded Amount:

$1,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SPORT FISHING ALLIANCE, LTD.
P.O. BOX 373
BABYLON, NY 11702
(631) 587-2873

Name of Project Director:

STEPHANIE MUSSO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RETREATS FOR BREAST CANCER SURVIVORS TO LEARN SKILLS OF FLYFISHING AND FLYCASTING SUPPORTING MENTAL AND PHYSICAL HEALING.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SPORT FISHING ALLIANCE, LTD.
P.O. BOX 373
BABYLON, NY 11702
(631) 587-2873

Name of Project Director:

CHUCK HOLLINS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR THE SPORT FISHING EDUCATION CENTER IN THE TOWN OF BABYLON, AND FOR A PART-TIME INTERN AT THE CENTER.

Funded Amount:

$9,000

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SQPA BEACON SCHOOL AT IS-8, QUEENS
108-35 167TH STREET
JAMAICA, NY 11434
(718) 276-4630 151

Name of Project Director:

TIMOTHY JAMES

Purpose of Project:

FUNDS WILL BE USED FOR THE AFTER SCHOOL PROGRAM FOR YOUTH.

Funded Amount:

$5,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SS. CYRIL & METHODIUS PARISH
98 EASTWOOD AVENUE
DEER PARK, NY 11729
(631) 667-7371

Name of Project Director:

RONALD F. PULICE

Purpose of Project:

FUNDS WILL BE USED FOR SENIOR CLUB

Funded Amount:

$2,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. ATHANASIUS YOUTH PROGRAM, INC.
2154 61ST STREET
BROOKLYN, NY  11204
(718) 236-0124

Name of Project Director:

JOSEPH RUSSOTTI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PROGRAMS WHICH ARE ORIENTED TO THE INTEREST OF YOUTH (I.E. TEAM SPORTS, DANCES, HEALTHY COMPETITION, SPORTSMANSHIP AND PEER GROUP ACTIVITIES). OPEN TO ALL YOUTH IN THE NEIGHBORHOOD ON A NON-SECTARIAN BASIS.

Funded Amount:

$7,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. ATHANASIUS YOUTH PROGRAM, INC.
2154 61ST STREET
BROOKLYN, NY  11204
(718) 259-6958

Name of Project Director:

JOSEPH A. RUSSOTTI

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS OF INTEREST TO YOUTH, SUCH AS DANCE, MOVIES, TEAM SPORTS AND PEER GROUP ACTIVITIES. THESE PROGRAMS ARE AVAILABLE TO ALL MEMBERS OF THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

ABBATE, COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. AUGUSTINE’S CATHOLIC CHURCH  
1183 FRANKLIN AVENUE  
BRONX, NY 10456  
(718) 893-0072

Name of Project Director:

ROGER F. REPOHL

Purpose of Project:

FUNDS WILL BE USED FOR THE PURPOSE OF SUPPLYING FRESH PRODUCE,  
AS WELL AS, CANNED AND DRIED FOODS TO OVER 200 FAMILIES PER WEEK.  
PROGRAM IS OFFERED TO ALL IN NEED ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. AUGUSTINE'S CHILDREN, YOUTH AND FAMILIES CENTER, INC.
4101 AVENUE D
BROOKLYN, NY 11203
(718) 629-0959

Name of Project Director:

MARK PAIGE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A HOMEWORK CLINIC/YOUTH ACTIVITY PROGRAM THAT WILL ASSIST RESIDENT STUDENTS WITH HOMEWORK AND PROVIDE TUTORING SERVICES, AS WELL AS, OTHER COMMUNITY SOCIALIZATION SKILLS. THESE PROGRAMS ARE OFFERED ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. BENEDICT JOSEPH LABRE SPORTS PROGRAM
94-40 118TH STREET
RICHMOND HILL, NY 11419
(718) 849-4048

Name of Project Director:

JOSE SALAZAR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A SPORTING OUTLET FOR THE YOUTH OF THE COMMUNITY. OPEN TO BOYS AND GIRLS AGES 8-14. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. COLUMBA ROMAN CATHOLIC CHURCH
343 WEST 25 STREET
NEW YORK, NY 10001
(213) 807-8876

Name of Project Director:

JOSE SERRANO

Purpose of Project:

FUNDS WILL BE USED TO OPERATE A SUMMER YOUTH PROGRAM, WHICH IS OPEN TO ALL YOUTH IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$8,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. FRANCIS OF ASSISI ROMAN CATHOLIC CHURCH
21-17 45TH STREET
ASTORIA, NY 11105
(917) 693-5745

Name of Project Director:

MARY ANN EVENGELOU

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A CHILDREN’S SPORTS PROGRAM AS AN ALTERNATIVE TO BEING ON THE STREETS. THIS IS A NON-SECTARIAN PROGRAM OPEN TO ALL YOUTH IN THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
ST. JOHN'S BREAD AND LIFE PROGRAM, INC.
75 LEWIS AVENUE
BROOKLYN, NY 11206
(718) 514-0058

LARRY GILE

FUNDS WILL BE USED TO OFFSET THE COST OF RUNNING MOM’S FOOD PANTRY (FAREWELL TO POVERTY) AND SOUP KITCHEN. SERVICES ARE AVAILABLE TO ALL IN NEED ON A NON-SECTARIAN BASIS.

$5,000

ROBINSON

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. JOSEPHS ROMAN CATHOLIC CHURCH
43-19 30TH AVENUE
ASTORIA, NY 11103
(718) 278-1611

Name of Project Director:

FLORENCE BELLIEVEAU

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH FROM PRE-SCHOOL TO TEEN YEARS WITH A HEALTHY ALTERNATIVE TO THE STREET, OFFERING A VARIETY OF ATHLETIC, SOCIAL, MUSICAL AND CULTURAL ACTIVITIES. THIS PROGRAM IS NON-SECTARIAN AND OPEN TO ALL.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. LUKE'S EPISCOPAL CHURCH
777 EAST 222ND STREET
BRONX, NY 10467
(718) 882-3060

Name of Project Director:

THOMAS GREENWAY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MATERIALS AND SUPPLIES TO PROVIDE EDUCATIONAL IN-STATE TRIPS. PROGRAM IS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. LUKE'S ITALIAN CLUB
16-34 CLINTONVILLE STREET
WHITESTONE, NY 11357
(718) 746-8102

Name of Project Director:

MONSIGNOR JOHN TOSI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COST OF THE ITALIAN CLUB'S COMMUNITY BASED PROGRAMS. PROGRAMS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. MARKS EPISCOPAL CHURCH
208 JAMAICA AVENUE
MEDFORD, NY  11763
(631) 475-7406

Name of Project Director:

DONNA ROBINSON

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE COST OF RELOCATING THE CHILD CARE CENTER.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. MATTHIAS ROMAN CATHOLIC CHURCH
58-15 CATALPA AVENUE
RIDGEWOOD, NY 11385
(718) 821-6447

Name of Project Director:

JOHN SANDS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES AND ASSISTANCE TO THE HOMELESS IN RIDGEWOOD AND GLENDALE INCLUDING MEALS, SHELTER AND DROP IN PROGRAMS. SERVICES TO BE PROVIDED ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. MEL'S ATHLETIC LEAGUE
28-20 154 STREET
FLUSHING, NY 11354
(718) 939-5457

Name of Project Director:

FRANK KEPPEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SPORT PROGRAMS FOR CHILDREN. ALL PROGRAMS ARE OPEN TO THE PUBLIC AND OFFERED ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,500

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. MEL'S ITALIAN CLUB
28-20 154 STREET
FLUSHING, NY 11354
(718) 939-5457

Name of Project Director:

VITO LAROCCO

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET EXPENSES, BOTH GENERAL OPERATING AND RECREATIONAL EXPENSES. SERVICES ARE OFFERED TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. MEL'S MEN'S CLUB
28-20 154 STREET
FLUSHING, NY 11354
(718) 939-5457

Name of Project Director:

FRANK KEPPEL

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATING EXPENSES OF THE CLUB'S RECREATIONAL PROGRAMS. PROGRAMS ARE OFFERED TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. NICHOLAS GREEK ORTHODOX CHURCH
43-15 196TH STREET
FLUSHING, NY 11358
(718) 357-5692

Name of Project Director:

FATHER PAUL PALESTY

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET EXPENSES ASSOCIATED WITH PROVIDING COMMUNITY RESOURCES TO THE GENERAL PUBLIC, AS WELL AS AN OUTREACH PROGRAM. SERVICES ARE OFFERED TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. NICHOLAS OF TOLENTINE YOUTH PROGRAM
150-75 GOETHAL AVENUE
JAMAICA, NY 11432
(718) 969-3226

Name of Project Director:

CHARLIE ZARAGOSA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SPORTS AND RECREATIONAL YOUTH PROGRAMS. PROGRAMS OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
ST. PATRICK’S YOUTH LEAGUE
9511 4TH AVENUE
BROOKLYN, NY  11209
(718) 238-2600

ROMEO PETRICK

FUNDS WILL BE USED TO PROVIDE JERSEYS, EQUIPMENT AND GENERAL BASEBALL LEAGUE COST. OPEN TO ALL ON A NON-SECTARIAN BASIS.

$1,000

BROOK-KRASNY

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. ROSALIA REGINA PACIS NEIGHBORHOOD IMPROVEMENT ASSOC.
1258 65TH STREET
BROOKLYN, NY  11219
(718) 236-5266

Name of Project Director:

ROSA CASELLA

Purpose of Project:

FUNDS WILL BE USED FOR THE EXPENSES OF THE DOMESTIC VIOLENCE AND FAMILY COUNSELING PROGRAM.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ST. ROSALIA REGINA PACIS NIA YOUTH PROGRAM
1258 65TH STREET
BROOKLYN, NY  11219
(718) 236-5266

Name of Project Director:

ROSA CASELLA

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE AND EXPAND COUNSELING SERVICES, PROVIDE RECREATIONAL ACTIVITIES AND TUTORIAL/MENTORING SERVICES FOR YOUTH. ALSO, OUTREACH SERVICES FOR WOMEN, COMMUNITY GROUPS AND MERCHANTS ARE PROVIDED. THESE PROGRAMS ARE AVAILABLE TO ALL MEMBERS OF THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$70,000

Requested By:

ABBATE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

STAR KIDS, INC.
P.O. BOX 348
GARNERVILLE, NY 10923
(845) 548-2878

Name of Project Director:

STEVE FOX

Purpose of Project:

FUNDS WILL BE USED FOR THE “SATURDAY SPORTS SAMPLER” THAT ACTS AS A DETERRENT TO ALCOHOL AND DRUG USE AND DELINQUENT OR GANG BEHAVIOR.

Funded Amount:

$2,500

Requested By:

ZEBROWSKI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

STAR OF BETHLEHEM MISSIONARY BAPTIST CHURCH
513 CLINTON AVENUE
ALBANY, NY 12206
(518) 438-3055

Name of Project Director:

REVEREND BERESFORD BAILEY

Purpose of Project:

FUNDS WILL BE USED FOR COSTS ASSOCIATED WITH IMPLEMENTING AN AFTER SCHOOL PROGRAM, SUCH AS FOOD, SUPPLIES, FURNITURE, AND STAFFING FEES. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

STATEN ISLAND COMMUNITY SERVICES FRIENDSHIP CLUBS, INC.
11 SAMPSON AVENUE
STATEN ISLAND, NY 10308
(718) 356-5050

Name of Project Director:

LEONORA VACCARO

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS OF CLUB FACILITIES AND TOWARD THE PURCHASE OF NEW EQUIPMENT/FURNITURE.

Funded Amount:

$10,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

STATEN ISLAND ECONOMIC DEVELOPMENT CORPORATION
900 SOUTH AVENUE SUITE 402
STATEN ISLAND, NY 10314
(718) 477-1400 15

Name of Project Director:

JEANNINE MAROTTA

Purpose of Project:

SECOND ANNUAL FILM FESTIVAL WILL SCREEN OVER 80 FILMS DURING A FIVE DAY PERIOD AT NINE VENUES. PROMOTES CULTURAL AWARENESS AND BOOSTS ECONOMIC DEVELOPMENT.

Funded Amount:

$20,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

STATEN ISLAND ECONOMIC DEVELOPMENT CORPORATION
900 SOUTH AVENUE, SUITE 402
STATEN ISLAND, NY 10314
(718) 477-1400

Name of Project Director:

CESAR J. CLARO

Purpose of Project:

FUNDS WILL BE USED FOR A NEW PROGRAM GEARED TOWARDS CREATING AN UMBRELLA GROUP FOR WOMEN OWNED FIRMS. FUNDS WILL ALSO BE USED TO ORGANIZE EDUCATIONAL SEMINARS AND WORKSHOPS FOCUSING ON RELEVANT ISSUES.

Funded Amount:

$2,500

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

STATEN ISLAND FLEET WEEK, INC.
455 FRONT STREET
STATEN ISLAND, NY 10304
(718) 273-9626

Name of Project Director:

DONNA CUTUGNO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OPPORTUNITIES FOR COMMUNITY
MEMBERS AND CHILDREN TO PARTICIPATE AND VISIT THE PORT AND
EXPERIENCE FIRST HAND WONDERS OF LARGE SHIPS. FUNDS WILL ALSO BE
USED TO PURCHASE FOOD AND SUPPLIES FOR THE EVENT.

Funded Amount:

$1,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

STATEN ISLAND TOUGH TACKLE LEAGUE
P.O. BOX 561
STATEN ISLAND, NY  10314
(718) 761-8321

Name of Project Director:

DENISE LAKEMAN

Purpose of Project:

FUNDS WILL BE USED TO PAY FOR THE USE OF THE PLAYING FIELD.

Funded Amount:

$3,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

STATEN ISLAND YMCA
3939 RICHMOND AVENUE
STATEN ISLAND, NY 10312
(718) 227-4000

Name of Project Director:

GREGORY COIL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ART THERAPY TO CHILDREN WHOSE PARENT(S) SUFFER FROM CHEMICAL DEPENDENCY AND ALSO ADDRESSES THE IMPACT OF DOMESTIC VIOLENCE IN THESE FAMILIES.

Funded Amount:

$5,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

STRIVING TO ACHIEVE AND REACH SUCCESS, INC.
STARS YOUTH CENTER, 8 COLEMAN SQUARE
HOWARD BEACH, NY  11414
(718) 845-6956

Name of Project Director:

FRANCES O. SCARANTINO

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE CONTINUED RECREATIONAL AND EDUCATIONAL PROGRAMS FOR THE BETTERMENT OF HOWARD BEACH AND OZONE PARK YOUTH.

Funded Amount:

$3,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

STS. SIMON AND JUDE ATHLETIC ASSOCIATION
294 AVENUE T
BROOKLYN, NY  11223
(718) 375-9600

Name of Project Director:

MIKE PANNONE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE OPPORTUNITY FOR YOUTH TO
EXPERIENCE THE VALUES AND DISCIPLINE OF TEAM SPORTS IN AN
ORGANIZED SETTING. PROGRAMS ARE OPEN TO ALL YOUTH IN THE
NEIGHBORHOOD ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SUFFOLK ASSOCIATION FOR JEWISH EDUCATIONAL SERVICES (SAJES)
777 LARKFIELD ROAD, SUITE 118
COMMACK, NY 11725
(631) 462-8600

Name of Project Director:

DEBORAH FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED FOR TEEN ACTION PROJECT

Funded Amount:

$5,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SUFFOLK ASSOCIATION OF JEWISH SCHOOLS, INC.
777 LARKFIELD ROAD, SUITE 118
COMMACK, NY 11725
(631) 462-8600

Name of Project Director:

DEBORAH FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE VOTER REGISTRATION, HELP THE HUNGRY, AND INVOLVE THE COMMUNITY IN DEVELOPING AND HONING LEADERSHIP SKILLS.

Funded Amount:

$5,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SUFFOLK COUNTY COALITION AGAINST DOMESTIC VIOLENCE
P.O. BOX 1269
BAYSHORE, NY 11706
(631) 666-7181

Name of Project Director:

JOANNE MELEDIERI SONDERS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH OPERATING EXPENSES, INCLUDED BUT NOT LIMITED TO PROVIDING COUNSELING AND OTHER SERVICES.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SUFFOLK COUNTY DOMESTIC VIOLENCE AGAINST WOMEN
P.O. BOX 1269M
BAY SHORE, NY 11706
(631) 666-7181

Name of Project Director:

JOANNE MITIDIERI SANDERS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS THAT THE SUFFOLK COUNTY DOMESTIC VIOLENCE AGAINST WOMEN PROVIDES

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SUFFOLK NETWORK ON ADOLESCENT PREGNANCY
22 WEST MAIN STREET, SUITE 7
PATCHOGUE, NY 11772
(631) 447-0698

Name of Project Director:

MARCIA K. SPECTOR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN ANNUAL CONFERENCE FOR LONG ISLAND’S TEEN PARENTS.

Funded Amount:

$3,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SUFFOLK Y JEWISH COMMUNITY CENTER
74 HAUPPAUGE ROAD
COMMACK, NY 11725
(631) 462-9800

Name of Project Director:

JOEL BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR UNITY IN THE COMMUNITY PROJECT

Funded Amount:

$5,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SUMMIT COUNCIL OF BAY SHORE - BRIGHTWATERS, INC.
75 WEST PENKAL STREET
BAY SHORE, NY 11706
(631) 968-1255

Name of Project Director:

BARBARA FISHKIND

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES INCLUDING, BUT NOT LIMITED TO, POSTAGE AND MAILINGS, PROMOTIONAL MATERIALS, AND MAINTENANCE OF THE WELCOME SIGN.

Funded Amount:

$2,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SUNNYSIDE CENTER
P.O. BOX 1410
TROY, NY 12181-1410
(518) 274-5986

Name of Project Director:

KIMBERLY PISER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES TO LOW INCOME CHILDREN AND FAMILIES IN THE NORTH CENTRAL TROY COMMUNITY WHERE CHILDREN ARE ELIGIBLE FOR FREE AND REDUCED LUNCH RATES. SERVICES FOCUS ON DAYCARE, AFTER SCHOOL, AND SUMMER PROGRAMS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SUNNYSIDE DRUM CORPS, INC.
C/O ALL SAINTS CHURCH - 43-12 46TH STREET
SUNNYSIDE, NY  11104
(718) 786-4141

Name of Project Director:

ANTHONY LANA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE UNIFORMS AND EQUIPMENT FOR THE YOUTH OF THE CORP.

Funded Amount:

$3,250

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SUNSET BAY COMMUNITY SERVICES, INC.
230 60TH STREET
BROOKLYN, NY  11220
(718) 439-0450

Name of Project Director:

ANN GUO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE CHILDHOOD CENTER AND TO PURCHASE OUTDOOR PLAYGROUND EQUIPMENT, CRIBS AND KIDDY KITCHEN SETS AND FURNITURE FOR CLASSROOMS, AND BOOKS FOR THE LIBRARY. FUNDS WILL ALSO BE USED TO SUPPORT THE GARDENING PROGRAM.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SUNSHINE CENTER, INC.
468 BOYLE ROAD
PORT JEFFERSON STATION, NY 11776
(631) 476-3099

Name of Project Director:

CAROL CARTER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE VIOLENCE PREVENTION PROGRAMS AND COMMUNITY OUTREACH FOR YOUTH AND FAMILIES IN SUFFOLK COUNTY.

Funded Amount:

$5,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SURE FOUNDATION CHILD CARE, INC.
652 UNION DRIVE
UNIONDALE, NY 11553
(516) 483-0855

Name of Project Director:

NOVELLA HARRIS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A SAFE HAVEN FOR GRADE SCHOOL
AND JUNIOR HIGH SCHOOL STUDENTS AFTER SCHOOL.

Funded Amount:

$7,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SURFGATE HOUSING DEVELOPMENT FUND CORPORATION
3811 SURF AVENUE
BROOKLYN, NY  11224
(718) 449-7145

Name of Project Director:

ARTHUR PATSINER

Purpose of Project:

FUNDS WILL BE USED TO INCREASE SOCIAL SERVICES TO A POPULATION THAT IS INCREASINGLY BECOMING MORE FRAIL.

Funded Amount:

$92,000

Requested By:

ABBATE, BENEDETTO, BING, BRENnan, BROOK-KRASNY, CANESTRARI, CLARK, CYMBROWITZ-S, DINOWITZ, FARRELL, GLICK, GOTTFRIED, HIKIND, HOYT, MAISEL, MAYERsOHN, MILLMAN, O’DONnell, PHEFFER, ROsENTHAL, SILVER, WEINSTEIN, WEPRIN, YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

SYRACUSE MODEL NEIGHBORHOOD FACILITY, INC.
401-425 SOUTH AVENUE
SYRACUSE, NY  13204
(315) 474-6823

Name of Project Director:

JESSE DOWDELL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE SOUTHWEST WACKATEERS TENNIS PROGRAM IN THE SOUTHWEST COMMUNITY CENTER'S EDUCATIONAL, SOCIAL AND RECREATIONAL PROGRAMS.

Funded Amount:

$15,000

Requested By:

CHRISTENSEN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

TALENTED SENIORS AND YOUTH ON THE MOVE, INC.
P.O. BOX 1682 MANHATTANVILLE
NEW YORK, NY 10027
(212) 234-9610

Name of Project Director:

JACKIE ROW ADAMS

Purpose of Project:

FUNDS WILL BE USED TO INCREASE AWARENESS ABOUT GUN VIOLENCE AND TRAFFICKING TO PREVENT FURTHER TRAGEDY.

Funded Amount:

$10,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

TANIMA PRODUCTIONS, INC.
489 EAST 183RD STREET - SUITE 5A
BRONX, NY 10458
(718) 733-6687

Name of Project Director:

NEREID MEDINA

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTER SCHOOL PROGRAM THAT WOULD KEEP YOUTH IN THE COMMUNITY INVOLVED IN MEANINGFUL CULTURAL AFFAIRS, INCLUDING BEING EDUCATED IN THEIR ETHNIC BACKGROUND AND PROMOTING SELF-ESTEEM AND PRIDE IN THEIR HERITAGE.

Funded Amount:

$8,000

Requested By:

RIVERA-J

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

TASK FORCE FOR FAMILIES AND CHILDREN AT RISK
80 MAIDEN LANE - 21ST FLOOR
NEW YORK, NY  10038
(212) 453-9534

Name of Project Director:

FAYE ZAKHEIM

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT CONFERENCES ON FAMILY VIOLENCE, CHILD ABUSE, CHILD NEGLECT AND TEENAGE SUBSTANCE ABUSE.

Funded Amount:

$44,000

Requested By:

ABBATE, BENEDETTO, BING, BRENNAN, BROOK-KRASNY, CANESTRARI, CLARK, CYMBROWITZ-S, DINOWITZ, FARRELL, GLICK, GOTTFRIED, HIKIND, HOYT, MAISEL, MAYERSOHN, MILLMAN, O’DONNELL, PHEFFER, ROSENTHAL, SILVER, WEINSTEIN, WEPRIN, YOUNG

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

THE CHILD CENTER OF NY, INC.
60-02 QUEENS BOULEVARD
WOODSIDE, NY  11373
(718) 651-7770  211

Name of Project Director:

ELIZABETH TRAVERSO

Purpose of Project:

THE HOME BASED CRISIS INTERVENTION PROGRAM SERVES EMOTIONALLY DISTURBED CHILDREN, ADOLESCENTS AND THEIR FAMILIES, PROVIDING INTENSIVE HOME BASED SUPPORT TO AVERT PSYCHIATRIC HOSPITALIZATION. EACH STAFF MEMBER CARRIES A CASELOAD OF 2 FAMILIES AT ANY TIME, PROVIDING HOME VISITS, LINKAGE TO OTHER NEEDED SERVICES AND 24/7 ON-CALL FOR PARENTS. THIS YEAR, THE PROGRAM WILL BE EXPANDED TO INCLUDE SOCIAL SUPPORT GROUPS, EDUCATIONAL TESTING, TUTORING AND SUPPORT GROUPS FOR PARENTS.

Funded Amount:

$7,500

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
THE MINISTRY FOR HOPE, INC.
P.O. BOX 358
PORT JEFFERSON, NY 11777
(631) 473-8779

PATTY GRIFFIN

FUNDS WILL BE USED TOWARDS SUBSTANCE ABUSE PROGRAMS, REHABILITATION AND COUNSELING FOR THE COMMUNITY

$5,000

FITZPATRICK

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007 – 2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

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

Name of Project Director:

RICHARD STOPOL

Purpose of Project:

FUNDS WILL SUPPORT SERVICES AND EXPENSES OF OUTWARD BOUND PROGRAMMING FOR NEW YORK CITY PUBLIC HIGH SCHOOL STUDENTS.

Funded Amount:

$100,000

Requested By:

FARRELL, NOLAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

THE NONPROFIT HELP DESK
3001 WEST 37TH STREET
BROOKLYN, NY  11224
(718) 449-5000

Name of Project Director:

RABBI MOSHE WIENER

Purpose of Project:

FUNDS WILL BE USED TO FUND THE NONPROFIT HELP DESK TECHNICAL ASSISTANCE PROGRAM. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

THE SOCIETY OF ST. VINCENT DE PAUL
1011 FIRST AVENUE
NEW YORK, NY 10022
(212) 755-8615

Name of Project Director:

LUKE F. FINN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FOOD TO ST. MARY’S PANTRY TO FEED THE MANY FAMILIES IN NEED IN NEW YORK CITY. THE FOOD PANTRY IS OPEN TO ALL IN NEED, ON A NON-SECTARIAN BASIS.

Funded Amount:

$47,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

THEODORE YOUNG COMMUNITY CENTER
32 MANHATTAN AVENUE
WHITE PLAINS, NY  10607
(914) 989-3600

Name of Project Director:

WINSOME GORDON

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF FURNITURE FOR THE SENIOR LOUNGE, AS WELL AS, THE PURCHASE OF MUSICAL INSTRUMENTS FOR THE CENTER.

Funded Amount:

$7,000

Requested By:

BRODSKY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

THOMAS H. SLATER CENTER, INC.
2 FISHER COURT
WHITE PLAINS, NY  10601
(914) 948-6211

Name of Project Director:

HEATHER A. MILLER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL TECHNOLOGY EQUIPMENT INCLUDING, BUT NOT LIMITED TO, COMPUTERS, FAX MACHINES, COPIERS, DESKS AND DIGITAL CAMERAS, ENABLING THE CONTINUATION OF HUMAN SERVICES PROGRAMS IN THE COMMUNITY.

Funded Amount:

$4,500

Requested By:

BRADLEY, PAULIN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
THOMAS H. SLATER CENTER, INC.
2 FISHER COURT
WHITE PLAINS, NY  10601
(914) 948-6211

HEATHER A. MILLER

FUNDS WILL BE USED TO PURCHASE AND INSTALL TECHNOLOGY EQUIPMENT, INCLUDING BUT NOT LIMITED TO COMPUTERS, FAX MACHINES, COPIERS, DESKS, AND DIGITAL CAMERAS, ENABLING THE CONTINUATION OF HUMAN SERVICES PROGRAMS IN THE COMMUNITY.

$4,500

BRADLEY, PAULIN

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

THROGGS NECK GIRLS SOFTBALL LEAGUE, INC.
35 1/2 EDGEWATER PARK
BRONX, NY  10465
(718) 824-6986

Name of Project Director:

KATHY HURRELL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND TO DEFRAY UMPIRING EXPENSES.

Funded Amount:

$1,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

THROGGS NECK HALLOWEEN PARADE COMMITTEE & COMMUNITY ACTIVITY SUPPORT FUND, INC.
P.O. BOX 186, THROGGS NECK STATION
BRONX, NY  10465
(914) 523-5034

Name of Project Director:

FRANK RANDAZZO

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY COSTS OF HALLOWEEN PARADE AND OTHER COMMUNITY PROJECTS THROUGHOUT THE YEAR.

Funded Amount:

$10,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

THROGGS NECK LITTLE LEAGUE
3105 TIERNEY PLACE
BRONX, NY 10465
(718) 822-8232

Name of Project Director:

ROBER JONAP

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE UNIFORMS AND OTHER PLAYER EQUIPMENT.

Funded Amount:

$1,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

THROGGS NECK RESIDENT COUNCIL, INC.
2786 DEWEY AVENUE, #4A
BRONX, NY  10465
(718) 518-9190

Name of Project Director:

DWAYNE JENKINS

Purpose of Project:

FUNDS WILL BE USED TO SPONSOR EDUCATIONAL, CULTURAL AND RECREATION PROGRAMS FOR RESIDENTS IN THE THROGGS NECK HOUSES.

Funded Amount:

$5,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

TORAH CENTER OF HILLCREST, INC.
171-05 JEWEL AVENUE
FLUSHING, NY  11365
(718) 380-5511

Name of Project Director:

MOSHE WARSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TUTORING, MENTORING AND OTHER RESOURCES TO EXCEL IN SCHOOL. OPEN TO ALL ON A NON-SECTARIAN BASIS AND ARE NON-RELIGIOUS.

Funded Amount:

$4,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TORAH FAX, INC.
3844 LYNE AVENUE
BROOKLYN, NY 11224
(718) 266-1736

Name of Project Director:

RABBI HAIM BRIKMAN

Purpose of Project:

FUNDS WILL BE USED FOR THE EXPANSION OF YOUTH PROGRAMMING AND FOR A NATURE PROGRAM FOR UNDERPRIVILEGED CHILDREN. OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$3,000

Requested By:

BROOK-KRASN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

TOT SPOT, INC.
30 UNION PLACE
ROOSEVELT, NY 11575
(516) 379-2030

Name of Project Director:

MICHELE MILES

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A TECHNOLOGY PROGRAM, HOME AND CAREERS PROGRAM FOR SCHOOL AGE CHILDREN. FUNDS WILL BE USED TO PURCHASE 5 COMPUTERS, 2 PRINTERS, COMPUTER SOFTWARE, SEWING MACHINE, SMALL KILN CRAFTING AND SCIENCE MATERIALS, ATHLETIC EQUIPMENT, UPGRADE OF PRESCHOOL READING AND CLASSROOM, MANIPULATIVE SAND, SCHOOL-AGE READING MATERIALS, GAME AND PLAYGROUND AREA FENCE.

Funded Amount:

$6,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

TOWERS PLAY N LEARN, INC.
60-10A 47TH AVENUE
WOODSIDE, NY  11377
(718) 478-3885

Name of Project Director:

ELIZABETH O'HARA

Purpose of Project:

FUNDS WILL BE USED FOR CLASSROOM MATERIALS INCLUDING, BUT NOT LIMITED TO, BULLETIN BOARDS AND LEARNING MATERIALS.

Funded Amount:

$3,000

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TRAVIS FOURTH OF JULY CELEBRATION COMMITTEE, INC.
17 CANNON AVENUE
STATEN ISLAND, NY   10314
(718) 983-9077

Name of Project Director:

JANICE BLANCHARD

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES OF THE INDEPENDENCE DAY PARADE.

Funded Amount:

$5,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TRIBORO INTERGENERATIONAL SERVICES, INC.
P.O. BOX 340376
JAMAICA, NY 11434
(718) 481-7927

Name of Project Director:

MARTHA SAXON

Purpose of Project:

FUNDS WILL BE USED TO BRING SENIOR CITIZENS AND HIGH SCHOOL YOUTH TOGETHER FOR INTERGENERATIONAL ACTIVITIES.

Funded Amount:

$5,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TRI-COMMUNITY AND YOUTH AGENCY, INC.
310 WEST HILLS ROAD
HUNTINGTON STATION, NY 11746
(631) 673-3303

Name of Project Director:

DEBBIE RIMMIER

Purpose of Project:

FUNDS WILL BE USED FOR C.A.S.T. PROGRAM GANG PREVENTION PROGRAM

Funded Amount:

$20,000

Requested By:

CONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

TRINITY INSTITUTION, INC.
15 TRINITY PLACE
ALBANY, NY  12202
(518) 449-5115

Name of Project Director:

HARRIS OBERLANDER

Purpose of Project:

FUNDS WILL BE USED TO HELP WITH THE COST OF RENOVATING THE ORGANIZATION’S BUILDING IN ORDER TO AFFECT ENERGY EFFICIENCIES.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

TROY AREA UNITED MINISTRIES, INC.
392 SECOND STREET
TROY, NY 12180
(518) 274-5920 202

Name of Project Director:

REVEREND DONNA M. ELIA

Purpose of Project:

FUNDS WILL BE USED FOR AN INSTRUCTOR AND TO UPGRADE COMPUTER EQUIPMENT. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TSQ, INC.
67-07 AUSTIN STREET
FOREST HILLS, NY   11375
(718) 275-5193

Name of Project Director:

ISAAC KATZ

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PROGRAMS WHICH DELIVER FOOD TO
THE POOR, DISADVANTAGED AND HOMEBOUND MEMBERS OF THE
COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

TWIN RIVERS COUNCIL, BOY SCOUTS OF AMERICA
253 WASHINGTON AVENUE EXTENSION
ALBANY, NY 12205
(518) 869-6436

Name of Project Director:

STEVEN B. SILVERMAN

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE CAMP WATER AND SEPTIC SYSTEM.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
UJIMA COMPANY, INC.
545 ELMWOOD AVENUE
BUFFALO, NY 14222
(716) 479-5444

LORNA HILL

FUNDS WILL BE USED TO SUPPORT THE PAUL LAWRENCE DUNBAR PROJECT, PRE-PROFESSIONAL THEATRICAL TRAINING PROGRAM, TEACHING CULTURAL SPECIFICS OF AFRICAN AMERICAN PERFORMER TECHNIQUES FOR YOUTH.

$20,000

PEOPLES

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ULSTER COUNTY MULTI-SERVICE CENTER, INC.
P.O. BOX 1714
KINGSTON, NY 12401
(845) 331-2325

Name of Project Director:

DR. PAULA CHILDS

Purpose of Project:

FUNDS WILL BE USED TO AID IN THE COST OF FIELD TRIPS WITHIN NYS FOR PARTICIPANTS IN THE NON-SECTARIAN, FREE WEEKLY "KINGS KIDS" PROGRAM THAT SERVES SCHOOL AGE CHILDREN AGES FOUR THROUGH 18.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNIONDALE NEIGHBORHOOD CENTER
800 JERUSALEM AVENUE
UNIONDALE, NY 11553
(516) 564-9005

Name of Project Director:

LORRAINE DANSER

Purpose of Project:

FUNDS WILL BE USED FOR A SUMMER CAMP FOR YOUTH; RECREATIONAL ACTIVITIES FOR YOUTH.

Funded Amount:

$5,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNITED CHINESE ASSOCIATION OF BROOKLYN
223 KINGS HIGHWAY
BROOKLYN, NY 11223
(718) 724-6458

Name of Project Director:

STEVE CHUNG

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND INSPIRATIONAL CLASSES AND TRAINING TO IMPROVE AND ENHANCE LOCAL RESIDENTS' WELL-BEING. CLASSES AND TRAINING INCLUDE; ARTS, MUSIC, MARTIAL ARTS, CAREER DEVELOPMENT FOR CHILDREN AND DANCING. ENGLISH SPEECH AND PHYSICAL EXERCISE FOR ADULTS AND SENIORS IS ALSO PROVIDED.

Funded Amount:

$2,000

Requested By:

ABBATE, COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNITED CHINESE ASSOCIATION OF BROOKLYN
223 KINGS HIGHWAY
BROOKLYN, NY  11223
(718) 256-0404

Name of Project Director:

STEVE CHUNG

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL AND INSPIRATIONAL CLASSES AND TRAINING TO IMPROVE AND ENHANCE LOCAL RESIDENTS' WELL-BEING. CLASSES AND TRAINING INCLUDE ART, MUSIC, MARTIAL ARTS, AND CAREER DEVELOPMENT FOR CHILDREN. IT WILL ALSO PROVIDE AFTER SCHOOL ACTIVITIES, DANCING, ESL AND PHYSICAL EXERCISE FOR ADULTS AND SENIORS. OPEN TO ALL INDIVIDUALS ON A NON-SECTARIAN BASIS.

Funded Amount:

$37,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

UNITED JEWISH ORGANIZATIONS OF WILLIAMSBURG, INC.
32 PENN STREET
BROOKLYN, NY 11211
(718) 643-9700

Name of Project Director:

RABBI DAVID NIEDERMAN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE TO PROVIDE SOCIAL SERVICES, GUIDANCE AND ADVICE TO INDIVIDUALS IN NEED OF ASSISTANCE ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

UNITED WAY OF LONG ISLAND
819 GRAND BOULEVARD
DEER PARK, NY 11729
(631) 940-3700

Name of Project Director:

TOM CRUSO

Purpose of Project:

FUNDS WILL BE USED FOR LONG ISLAND YOUTHBUILD INITIATIVE

Funded Amount:

$2,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

UNITED WAY OF LONG ISLAND, INC.
819 GRAND BOULEVARD
DEER PARK, NY 11729
(631) 940-3700

Name of Project Director:

TOM CRUSO

Purpose of Project:

FUNDS WILL BE USED TO ADMINISTER A PROGRAM THAT PROVIDES HEAT RELIEF FOR RESIDENTS OF LONG ISLAND THROUGH THE UNITED WAY.

Funded Amount:

$10,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

UNITED WAY OF SULLIVAN COUNTY, INC.
33 LAKEWOOD AVENUE, P.O. BOX 1036
MONTICELLO, NY 12701
(845) 794-1771

Name of Project Director:

LINDA CELLINI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET EXPENSES FOR A COMMUNITY GANG AWARENESS SEMINAR.

Funded Amount:

$5,000

Requested By:

GUNther-A

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNITED WE STAND ENTERTAINMENT
P.O. BOX 358, CORNELL STATION
BRONX, NY  10473
(718) 874-9132

Name of Project Director:

ERIC HINDS

Purpose of Project:

FUNDS WILL BE USED FOR THE ANNUAL COMMUNITY DAY EVENT TO BRIDGE THE GAP BETWEEN YOUTH AND ADULTS, WHILE EDUCATING THE COMMUNITY ON VARIOUS ISSUES SUCH AS CULTURAL, SOCIAL, HEALTH, POLITICAL AND PERSONAL ISSUES USING MUSIC.

Funded Amount:

$5,000

Requested By:

DIAZ-R

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNITY NEIGHBORHOOD CENTER
3822 DYRE AVENUE
BRONX, NY 10466
(718) 994-8400

Name of Project Director:

JESSE COLLINS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MATERIALS AND SUPPLIES TO EXPAND SERVICES IN PUBLIC SCHOOL 87 AND PUBLIC SCHOOL 21. THIS PROGRAM PROVIDES INSTRUCTION IN DANCE, DRAWING, AND PAINTING.

Funded Amount:

$5,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

UNIVERSITY HEIGHTS COMMUNITY DEVELOPMENT ASSOCIATION, INC.
3242 MAIN STREET
BUFFALO, NY 14214
(716) 832-1010

Name of Project Director:

ALYCE CUDDY

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET COSTS OF THE AFTERSCHOOL PROGRAM.

Funded Amount:

$7,500

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UPROSE, INC.
166A 22ND STREET
BROOKLYN, NY  11232
(718) 492-9307

Name of Project Director:

ELIZABETH YEAMPIERRE

Purpose of Project:

FUNDS WILL BE USED FOR EXPENSES ASSOCIATED WITH UPROSE'S YOUTH PROGRAM SUCH AS PURCHASING EQUIPMENT AND SUPPLIES, SPONSORING EVENTS, AND IN-STATE FIELD TRIPS.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

URBAN NEIGHBORHOOD SERVICES
P.O. BOX 423
BROOKLYN, NY 11224
(718) 801-1054

Name of Project Director:

MATHYLDE FRONTUS

Purpose of Project:

FUNDING WILL GO TOWARDS ESTABLISHING A YOUTH AFTER SCHOOL PROGRAM.

Funded Amount:

$2,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

URBAN STRATEGIES, INC.
294 SUMPTER STREET
BROOKLYN, NY 11233
(718) 919-2140

Name of Project Director:

PELHAM BOLLERS

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATION AND COMPUTER TRAINING OF STAFF AND PARTICIPANTS OF THE LEADERSHIP PROGRAM.

Funded Amount:

$10,000

Requested By:

BOYLAND

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

URSULINE SOCIAL OUTREACH, INC. (DBA ADULT LEARNING CENTER)
138 CENTRE AVENUE
NEW ROCHELLE, NY  10805
(914) 633-7298

Name of Project Director:

EILEEN FANE

Purpose of Project:

FUNDS WILL BE USED TO TEACH NON-ENGLISH SPEAKING MOTHERS ABOUT ALTERNATIVE NUTRITIONAL FOODS AND TO SERVE Same IN CHILD CARE ROOM AT SNACK TIME.

Funded Amount:

$3,000

Requested By:

LATIMER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UTOPIA JEWISH CENTER
64-41 UTOPIA PARKWAY
FRESH MEADOWS, NY  11365
(718) 461-8347

Name of Project Director:

JAY GOLDBERG

Purpose of Project:

FUNDS WILL BE USED FOR VARIOUS EVENTS AND PROGRAMS FOR YOUTH, WHICH ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VALLEY YOUTH FOOTBALL AND CHEER OF SYRACUSE
P.O. BOX 204
NEDROW, NY 13120
(315) 492-1379

Name of Project Director:

JOANNE HARLOW

Purpose of Project:

FUNDING WILL BE USED FOR A WIDE RANGE OF FOOTBALL/CHEER EQUIPMENT AND SAFETY GEAR.

Funded Amount:

$5,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VAN NEST LITTLE LEAGUE, INC.
1500 WATER PLACE
BRONX, NY 10461
(718) 518-9303

Name of Project Director:

CHRIS AMOROSA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE UNIFORMS, EQUIPMENT, AND SUPPLIES FOR THE LITTLE LEAGUE.

Funded Amount:

$5,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VANNGUARD URBAN IMPROVEMENT ASSOCIATION, INC.
613-619 THROUP AVENUE, 3RD FLOOR
BROOKLYN, NY 11216
(718) 453-4976

Name of Project Director:

ARTHUR H. NILES

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH DEVELOPMENT THROUGH AFTERSCHOOL TUTORIAL PROGRAMS, RECREATION AND CULTURAL AWARENESS EDUCATION.

Funded Amount:

$15,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VARIED INTERNSHIP PROGRAM, INC.
89-31 161ST STREET
JAMAICA, NY 11432
(718) 206-9521

Name of Project Director:

NETTIE JOHNSON-BURGESS

Purpose of Project:

FUNDS WILL BE USED TO PAIR LOCAL MERCHANTS AND STUDENTS FOR INTERNSHIPS AND MENTORING.

Funded Amount:

$2,500

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VARIETY BOYS AND GIRLS CLUB OF QUEENS, INC.
21-12 30TH ROAD
LONG ISLAND CITY, NY 11102
(718) 728-0946

Name of Project Director:

TRACY SPELLMEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMMUNITY YOUTH WITH RECREATIONAL AND ACADEMIC ASSISTANCE IN A STRUCTURED ENVIRONMENT AFTER SCHOOL.

Funded Amount:

$3,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VERA HOUSE, INC.
6181 THOMPSON ROAD, SUITE 100
SYRACUSE, NY 13206
(315) 425-0818

Name of Project Director:

RANDI BREGMAN

Purpose of Project:

FUNDS WILL BE USED FOR CAPITAL IMPROVEMENTS TO THE STRUCTURE, INCLUDING ELECTRICAL AND ROOM IMPROVEMENTS, PURCHASE OF A GENERATOR, AND ROOM FURNISHINGS.

Funded Amount:

$25,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VICTIMS INFORMATION BUREAU OF SUFFOLK
P.O. BOX 5483
HAUPPAUGE, NY 11788
(631) 360-3710

Name of Project Director:

PAMELA JOHNSTON

Purpose of Project:

FUNDS WILL BE USED TO HELP FUND CHILDREN’S PROGRAMS

Funded Amount:

$10,000

Requested By:

BOYLE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VICTIMS INFORMATION BUREAU OF SUFFOLK, INC.
515 ROUTE 111
HAUPPAUGE, NY  11788
(631) 360-3730

Name of Project Director:

PAMELA C. JOHNSTON

Purpose of Project:

FUNDS WILL BE USED FOR EXPENSES THAT PROVIDE CRISIS INTERVENTION AND COUNSEL VICTIMS OF DOMESTIC VIOLENCE AND SEXUAL ASSAULT.

Funded Amount:

$10,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VICTIMS INFORMATION BUREAU OF SUFFOLK, INC.
P.O. BOX 5483
HAUPPAUGE, NY 11788
(631) 360-3730

Name of Project Director:

PAMELA JOHNSTON

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE PREVENTION AND PROVIDE COUNSELLING TO VICTIMS AND FAMILIES WHO ARE IN NEED.

Funded Amount:

$2,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VICTIMS RESOURCE CENTER OF THE FINGER LAKES
P.O. BOX 134
ROSE, NY 14542
(315) 587-9503

Name of Project Director:

KATHLEEN HILDEBRAND

Purpose of Project:

FUNDS WILL BE USED FOR DEVELOPMENT OF BROCHURE AND DISTRIBUTION TO AGENCIES AND ORGANIZATIONS

Funded Amount:

$2,500

Requested By:

OAKS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VICTOR/FARMINGTON FOOD CUPBOARD
221 HIGH STREET
VICTOR, NY 14564
(585) 924-4972

Name of Project Director:

KATHLEEN TEEL WAGNER

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH FOOD PANTRY

Funded Amount:

$1,000

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VICTORY MARTIAL ARTS  
4260 WHITE PLAINS ROAD  
BRONX, NY 10466  
(718) 654-6919

Name of Project Director:

GENE FRAZIER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AFTER SCHOOL CARE AND MARTIAL ARTS TO FAMILIES WHOSE FINANCIAL HARDSHIP PREVENT THEM FROM QUALIFYING FOR ALTERNATIVE CARE.

Funded Amount:

$1,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VILLA MARIA HOMES ACTIVITIES COMMITTEE
546 FOX STREET
BRONX, NY 10455
(718) 402-0453

Name of Project Director:

ANA M. REYES

Purpose of Project:

FUNDS WILL BE USED FOR AN AFTER SCHOOL RECREATIONAL PROGRAM AND DANCE LESSONS FOR CHILDREN AND YOUNG ADULTS.

Funded Amount:

$8,000

Requested By:

ARROYO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VILLAGE OF AIRMONT
251 CHERRY LANE, BOX 578
TALLMAN, NY 10982
(845) 357-8111

Name of Project Director:

ANTHONY VALENTI

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE PURCHASED SPACE FOR USE BY AREA SENIOR CITIZENS AND TEENS.

Funded Amount:

$10,000

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VILLAGE OF ELLENVILLE
81 N. MAIN STREET
ELLENVILLE, NY 12428
(845) 647-7080

Name of Project Director:

ELLIOTT AUERBACH, VILLAGE MANAGER

Purpose of Project:

FUNDS WILL BE USED FOR A YOUTH COMMUNITY ARTS PROGRAM ADMINISTERED JOINTLY BY THE ELLENVILLE-WARWARSING YOUTH COMMISSION AND THE VILLAGE OF ELLENVILLE AT THE ELLENVILLE YMCA LOCATION.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VISION URBANA, INC.
207-9 EAST BROADWAY
NEW YORK, NY 10002
(212) 673-6257

Name of Project Director:

REV. MARCOS RIVERA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIAL SERVICES TO ASSIST CHILDREN, FAMILIES, AND SENIORS. FUNDS WILL BE USED TO HIRE AN EXECUTIVE DIRECTOR, WHOSE DUTIES WILL INCLUDE DAY-TO-DAY COORDINATION AND DIRECTION OF PROGRAMS AND EXPANSIONS.

Funded Amount:

$112,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VOCES LATINA MARCANDO LA DIFERENCIA
120 TIMBERLINE DR.
BRENTWOOD, NY 11717
(631) 952-7829

Name of Project Director:

EMILIO HERNANDEZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CHILD CARE PERSONNEL WITH COMPUTER EDUCATION AND GENERAL OPERATING PROGRAMS.

Funded Amount:

$10,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VOLUNTEER COUNSELING SERVICE OF ROCKLAND COUNTY, INC.
77 SOUTH MAIN STREET
NEW CITY, NY 10956
(845) 634-5729

Name of Project Director:

DEBORAH CARY MURNION

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE EXISTING COMPUTER SYSTEM TO ENABLE THE AGENCY TO MEET EXPANDING CASELOAD DEMAND IN ROCKLAND COUNTY.

Funded Amount:

$4,000

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

VOLUNTEER COUNSELING SERVICE OF ROCKLAND COUNTY, INC.
77 S. MAIN STREET
NEW CITY, NY 10956
(845) 634-5729

Name of Project Director:

DEBORAH CARY MURNION

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE AND EXPAND THE COMPUTER SYSTEM.

Funded Amount:

$5,000

Requested By:

ZE布朗斯基

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WARREN WASHINGTON COUNTIES HOMELESS YOUTH COALITION, INC.
P.O. BOX 3252
GLENS FALLS, NY 12801
(518) 798-4384

Name of Project Director:

DUANE VAUGHN

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING RENOVATIONS; PURCHASE APPLIANCES; OFFICE EQUIPMENT AND OUTREACH SUPPLIES

Funded Amount:

$10,000

Requested By:

SAYWARD

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WASHINGTON HEIGHTS INWOOD PRESERVATION AND RESTORATION
121 BENNETT AVENUE #11-A
NEW YORK, NY 10033
(212) 795-7522

Name of Project Director:

DEBORAH HESS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES AND PROGRAMS TO THE GROWING NEEDY, FRAIL, ELDERLY, AND IMMIGRANT POPULATIONS IN THE COMMUNITY.

Funded Amount:

$35,000

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WASHINGTON HEIGHTS TENNIS ASSOCIATION, INC.
256 WADSWORTH AVENUE, APT. 4A
NEW YORK, NY 10033
(212) 781-8513

Name of Project Director:

ELIGIO REYNOSO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SPORTS EQUIPMENT, IN-STATE TRANSPORTATION OF ATHLETES, AND OTHER RECREATIONAL ACTIVITIES FOR YOUTH.

Funded Amount:

$5,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WATERBURY LASALLE COMMUNITY AND HOMEOWNERS ASSOCIATION, INC.
1145 HOBART AVENUE
BRONX, NY  10461
(718) 792-6385

Name of Project Director:

MARY JANE MUSANO

Purpose of Project:

FUNDS WILL BE USED TO HELP COVER THE COSTS OF THE ANNUAL HOLIDAY CELEBRATIONS, WHICH ARE OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WATERBURY ROLLER HOCKEY LEAGUE
1521 ROBERTSON PLACE
BRONX, NY  10465
(718) 822-3164

Name of Project Director:

GEORGE HAVRANEK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW EQUIPMENT AND SUPPLIES TO SUPPORT THE LEAGUE.

Funded Amount:

$1,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WATERFORD SUMMER BASEBALL
18 MURRAY AVENUE
WATERFORD, NY  12188
(518) 441-4464

Name of Project Director:

WILLIAM KELTS

Purpose of Project:

FUNDS WILL BE USED TO MAKE FIELD IMPROVEMENTS, CONSTRUCTION OF LIGHTS THAT WERE PURCHASED FROM HERITAGE PARK, PROVIDE UNIFORM EQUIPMENT, ASSISTANCE IN HOSTING THE 2007 UPSTATE MICKEY MANTLE 15 YEAR OLD TOURNAMENT.

Funded Amount:

$5,000

Requested By:

CANE STRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WATERTOWN URBAN MISSION, INC.
247 FACTORY STREET
WATERTOWN, NY  13601
(315) 782-8440

Name of Project Director:

MARY MORGAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMPUTER/OFFICE EQUIPMENT AND TO SUPPORT THE SUMMER YOUTH DEVELOPMENT PROGRAM.

Funded Amount:

$10,000

Requested By:

AUBERTINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WATERVLIET LITTLE LEAGUE, INC.
P.O. BOX 31
WATERVLIET, NY  12189
(518) 272-2304

Name of Project Director:

NICK TAMBOLLEO

Purpose of Project:

FUNDS WILL BE USED TO HELP INSTALL LIGHTS ON THE LITTLE LEAGUE FIELD, WHICH HAS SERVED THE YOUTH OF WATERVLIET FOR 58 YEARS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WATERVLIET POP WARNER
P.O. BOX 312
WATERVLIET, NY  12189
(518) 273-2342

Name of Project Director:

LISA DENNIS

Purpose of Project:

FUNDS WILL BE USED FOR WATERVLIET POP WARNER, SUCH AS HELMETS, PADS AND UNIFORMS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WE CARE FUND
15TH & WEST STREETS
NEW YORK, NY 11501
(516) 747-4070

Name of Project Director:

ELAINE LEVENTHAL

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THEIR ONGOING WORK TO IMPROVE THE QUALITY OF LIFE FOR CHILDREN, THE ELDERLY AND OTHERS IN NEED THROUGHOUT NASSAU COUNTY

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WEST SENECA YOUTH BUREAU - AMERICORPS
2001 UNION ROAD
WEST SENECA, NY 14224
(716) 677-2434

Name of Project Director:

MARK LAZZARA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE AMERICORPS REGIONAL FOOD DELIVERY PROGRAM.

Funded Amount:

$8,500

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WEST SIDE CAMPAIGN AGAINST HUNGER
263 WEST 86TH STREET
NEW YORK, NY 10024
(212) 362-3662

Name of Project Director:

DOREEN WOHL

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF AN EMERGENCY FOOD PROGRAM. FUNDS WILL ALSO BE USED TO PROVIDE SOCIAL SERVICE COUNSELING.

Funded Amount:

$2,500

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WEST SIDE CRIME PREVENTION PROGRAM, INC.
893 AMSTERDAM AVENUE
NEW YORK, NY 10025
(212) 866-8603

Name of Project Director:

MARJORIE COHEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CONFLICT RESOLUTION TRAINING AND ANTI-VIOLENCE WORKSHOPS FOR ELEMENTARY, MIDDLE SCHOOL, AND HIGH SCHOOL AGED CHILDREN.

Funded Amount:

$6,500

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WESTBURY COMMUNITY IMPROVEMENT CORPORATION
249 POST AVENUE
WESTBURY, NY 11590
(516) 333-9224

Name of Project Director:

BRIAN AGARD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPLIES FOR THE YOUTH SERVICES PROGRAM, AS WELL AS, TRANSPORTATION FOR VARIOUS TRIPS WITHIN NYS.

Funded Amount:

$6,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WESTCHESTER COALITION FOR THE HUNGRY AND HOMELESS, INC.
48 MAMARONECK AVENUE, #35/37
WHITE PLAINS, NY  10601
(914) 682-2737

Name of Project Director:

ROSA BOONE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW DATABASE SOFTWARE, NEW COMPUTERS AND A FILING CABINET FOR THEIR OFFICE.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WESTCHESTER HOLOCAUST COMMISSION AND FOUNDATION, INC.
2900 PURCHASE STREET
PURCHASE, NY 10577
(914) 696-0738

Name of Project Director:

ANDY CAHN

Purpose of Project:

FUNDS WILL BE USED TO HEIGHTEN AWARENESS OF THE LESSONS OF THE HOLOCAUST AS THEY RELATE TO HUMAN RIGHTS ISSUES TODAY.

Funded Amount:

$10,000

Requested By:

BRADLEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WESTCHESTER JEWISH COMMUNITY SERVICES, INC.
845 NORTH BROADWAY
WHITE PLAINS, NY 10603
(914) 761-0600 227

Name of Project Director:

PAT GROSSMAN

Purpose of Project:

FUNDS WILL BE USED TO ALLOW THE WJCS AUTISM FAMILY CENTER TO INFORM FAMILIES ABOUT SERVICES FOR CHILDREN WITH AUTISM PROVIDED BY WJCS AND BY OTHER SERVICE PROVIDERS AND TO SUPPORT THE FAMILIES IN THE UTILIZATION OF THOSE SERVICES. PROGRAM OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$10,000

Requested By:

BRADLEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WHITE PLAINS YOUTH BUREAU
11 AMHERST PLACE
WHITE PLAINS, NY  10601
(914) 422-1378

Name of Project Director:

FRANK WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT A STRATEGIC PLAN TO IMPROVE OUTCOMES FOR MALE AFRICAN-AMERICAN YOUTH IN WHITE PLAINS. COMMUNITY CHANGES WILL BE EMPHASIZED TO ENHANCE TARGETED AREAS; EDUCATIONAL SUCCESS, CAREER EXPLORATION, AND SOCIAL SKILLS.

Funded Amount:

$3,000

Requested By:

BRADLEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WOMEN AND CHILDREN FAMILY ENTERPRISE, INCORPORATED
1931 MOTT AVENUE, #401
FAR ROCKAWAY, NY  11691
(718) 471-4694

Name of Project Director:

JULIA BLAIR

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A SATURDAY ACADEMIC ACADEMY TO PROVIDE REMEDIATION AND ENRICHMENT INSTRUCTION FOR YOUTH INCLUDING IN-STATE TRANSPORTATION AND FIELD TRIPS.

Funded Amount:

$5,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WOMEN FRESH START CORPORATION
1366 NEW YORK AVENUE, 5C
BROOKLYN, NY 11210
(347) 661-3340

Name of Project Director:

CAROL J. TAYLOR

Purpose of Project:

FUNDS WILL BE USED TO LESSEN RECIDIVISION OF WOMEN THROUGH A SUPPORTIVE ENVIRONMENT WHICH WILL OFFER SERVICES SUCH AS MENTORING, CARE MANAGEMENT AND JOB HUNTING.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WOMEN'S ORG. DEDICATED TO MEETING THEIR MEDICAL AND EMOTIONAL NEEDS, INC.
9201 4TH AVENUE, 2ND FLOOR
BROOKLYN, NY 11209
(718) 232-1351

Name of Project Director:

JODI HEYWOOD

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE AND EMPOWER WOMEN AGAINST VIOLENCE AND ABUSE. WORKSHOPS, LECTURES AND DISCUSSIONS WITH HEALTH CARE WORKERS ARE PROVIDED.

Funded Amount:

$15,000

Requested By:

ABBATE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WOODHAVEN POST 118
89-02 91ST STREET
WOODHAVEN, NY  11421
(718) 846-6116

Name of Project Director:

MICHAEL J. DICKS

Purpose of Project:

FUNDS WILL BE USED FOR A VARIETY OF EDUCATIONAL AND
RECREATIONAL PROGRAMS FOR THE YOUTH AND OTHER COMMUNITY
MEMBERS. FUNDS WILL BE USED TO OFF-SET THE COSTS OF MAINTENANCE,
UTILITIES AND CUSTODIAL EXPENSES OF THE BUILDING.

Funded Amount:

$4,000

Requested By:

SEMINERIO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WOODYCREST CENTER FOR HUMAN DEVELOPMENT, INC.
175 WEST 166TH STREET
BRONX, NY  10452
(718) 538-4708

Name of Project Director:

ADE A. RASUL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH AGES 6 TO 21 WITH AFTER
SCHOOL SERVICES WHICH INCLUDE TUTORING, HOMEWORK ASSISTANCE,
YOUTH CULTURAL AND RECREATIONAL SERVICES, AS WELL AS, INDIVIDUAL
AND GROUP COUNSELING. FUNDS WILL ALSO BE USED FOR END OF THE
YEAR PROGRAM WHICH WILL HIGHLIGHT THE ABOVE SERVICES.

Funded Amount:

$25,000

Requested By:

GREENE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WYANDANCH YOUTH SERVICES, INC.
20 ANDREWS AVENUE
WYANDANCH, NY 11798
(631) 643-5629

Name of Project Director:

PATTI BULLARD

Purpose of Project:

FUNDS WILL BE USED TOWARD OPERATING EXPENSES AND EQUIPMENT FOR SUMMER YOUTH SPORTS AND AN ACADEMICS PROGRAM.

Funded Amount:

$10,000

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

WYCKOFF GARDENS ASSOCIATION, INC.
272 WYCKOFF STREET, 15D
BROOKLYN, NY 11217
(718) 801-6115

Name of Project Director:

CHARLENE NIMMONS

Purpose of Project:

FUNDS WILL BE USED IN SUPPORT OF THE RECREATIONAL CENTER FOR SENIORS AND AFTER SCHOOL PROGRAMS FOR CHILDREN.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YES COMMUNITY COUNSELING CENTER
75 GRAND AVENUE
MASSAPEQUA, NY 11758
(516) 799-3000

Name of Project Director:

JAMIE BOGENSHUTZ

Purpose of Project:

FUNDS WILL BE USED FOR FAMILY COUNSELING SERVICES

Funded Amount:

$7,000

Requested By:

CONTE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

YESHIVA RABBI CHAIM BERLIN
1585 CONEY ISLAND AVENUE
BROOKLYN, NY 11230
(718) 377-0777

Name of Project Director:

RABBI ELI RABINOWITZ

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A SWIMMING PROGRAM FOR CHILDREN IN THE COMMUNITY, PROVIDING SUPERVISED ACTIVITIES IN A SAFETY MONITORED ENVIRONMENT AFTER SCHOOL AND ON WEEKENDS. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$4,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YESHIVATH KEHILATH YAKOV, INC.
206 WILSON STREET
BROOKLYN, NY 11211
(718) 963-3940

Name of Project Director:

RABBI JOSEPH WEBER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIAL SERVICE PROGRAMS, INCLUDING APPROPRIATE REFERRALS AND GUIDANCE TO FAMILIES. ALL PROGRAMS ARE OPEN TO ALL IN THE COMMUNITY ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

YMCA OF GREATER NEW YORK
224 EAST 47TH STREET
NEW YORK, NY 10017
(212) 756-9600

Name of Project Director:

RENA MCGREEVY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SOFTWARE TO BE USED AS PART OF A TEAM PROGRAM.

Funded Amount:

$5,000

Requested By:

BING

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA OF GREATER NEW YORK
5 WEST 63RD STREET
NEW YORK, NY 10023
(212) 875-4100

Name of Project Director:

DEBORAH BAJATTU-BOWLES

Purpose of Project:

FUNDS WILL BE USED FOR THE COLLEGE PREPARATION INITIATIVE.

Funded Amount:

$2,500

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA OF GREATER NEW YORK
121 BEDFORD AVENUE
BROOKLYN, NY  11216
(718) 789-1497

Name of Project Director:

JOHN RAPPAPORT

Purpose of Project:

FUNDS WILL BE USED FOR SPORTS AND RECREATIONAL PROGRAMMING FOR YOUTH AND FAMILIES.

Funded Amount:

$5,000

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA OF GREATER NEW YORK
180 WEST 135TH STREET
NEW YORK, NY 10030
(212) 281-4100 201

Name of Project Director:

CHARLES TAYLOR

Purpose of Project:

FUNDS WILL BE USED TO MAKE RENOVATIONS AND UPGRADES TO THE HARLEM YMCA YOUTH OUTREACH CENTER’S COMPUTER LAB, INCLUDING REPLACEMENT OF OUTDATED COMPUTERS AND SOFTWARE.

Funded Amount:

$25,000

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

YMCA OF GREATER NEW YORK
180 WEST 135TH STREET
NEW YORK, NY 10030
(212) 281-4100 201

Name of Project Director:

ELAINE EDMONDS

Purpose of Project:

FUNDS WILL BE USED TO HELP SUPPORT THE VIRTUAL Y AFTER SCHOOL PROGRAM AT PS 57 LOCATED ON 115TH STREET AND 2ND AVENUE.

Funded Amount:

$8,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA OF GREATER NEW YORK
3939 RICHMOND AVENUE
STATEN ISLAND, NY 10312
(718) 227-4000

Name of Project Director:

JOHN SEMERAD

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE BROADWAY AND SOUTH SHORE
STATEN ISLAND YMCA'S. THE FACILITIES WILL BE OPEN TO ALL YOUTH IN
THE COMMUNITY AGES 12-15 FOR RECREATION ACTIVITIES.

Funded Amount:

$10,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA OF GREATER NEW YORK – BRONX YMCA
2 CASTLE HILL AVENUE
BRONX, NY 10473
(718) 792 – 9736

Name of Project Director:

ELIZABETH TOLEDO, EXECUTIVE DIRECTOR

Purpose of Project:

FUNDS WILL BE USED FOR THE "VIRTUAL Y PROGRAM" AT P.S. 68 AND P.S. 87 IN THE BRONX. THIS PROGRAM OFFERS AN ENRICHED AFTER SCHOOL PROGRAM CONSISTING OF A VARIETY OF ACADEMIC, RECREATIONAL AND VALUES BASED ACTIVITIES.

Funded Amount:

$52,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA OF GREATER NEW YORK - JAMAICA BRANCH
89-25 PARSONS BOULEVARD
JAMAICA, NY 11432
(718) 739-6600

Name of Project Director:

CEDRIC DEW

Purpose of Project:

FUNDS WILL BE USED FOR THE AFTER SCHOOL PROJECT DESIGNED TO TEACH YOUNG PEOPLE ABOUT DISCIPLINE, RESPONSIBILITY AND VALUES.

Funded Amount:

$25,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA OF GREATER ROCHESTER
444 E. MAIN STREET
ROCHESTER, NY 14604
(585) 325-2880

Name of Project Director:

ROBIN SMITH

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW COMPUTER EQUIPMENT IN THE LEON CENTER.

Funded Amount:

$10,000

Requested By:

GANTT

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA OF GREATER ROCHESTER
444 EAST MAIN STREET
ROCHESTER, NY  14604-2595
(585) 546-5500

Name of Project Director:

KAREN P. HIGMAN

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A MULTI-PURPOSE PLAYING FIELD ADJACENT TO THE EASTSIDE FAMILY YMCA FOR USE BY THE CHILDREN OF THE COMMUNITY INVOLVED IN THE YMCA YOUTH SPORTS PROGRAM.

Funded Amount:

$15,000

Requested By:

KOON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA OF GREATER ROCHESTER ASSOCIATION
444 EAST MAIN STREET
ROCHESTER, NY 14604
(585) 546-5500

Name of Project Director:

GEORGE ROMELL

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY TRANSPORTATION COSTS TO THE CONFERENCE AND STUDENTS IN ROCHESTER PROGRAM WHO CANNOT AFFORD FEES

Funded Amount:

$5,000

Requested By:

ERRIGO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

YMCA OF GREATER SYRACUSE
340 MONTGOMERY STREET
SYRACUSE, NY 13202-2094
(315) 474-0784

Name of Project Director:

CATHERINE RANIERI

Purpose of Project:

FUNDS WILL BE USED FOR COMPUTERS, TRANSPORTATION, AND OTHER EQUIPMENT AND SUPPLIES.

Funded Amount:

$10,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA OF GREENPOINT
99 MESEROLE AVENUE
BROOKLYN, NY 11222
(718) 389-3700

Name of Project Director:

MEL TSE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMPUTERS AND PROGRAMS FOR PRE-SCHOOL PROGRAM.

Funded Amount:

$5,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YMCA, INC.
50 WEYMAN AVENUE
NEW ROCHELLE, NY  10805
(914) 632-1818

Name of Project Director:

JEFFREY KRAUSE

Purpose of Project:

FUNDS WILL BE USED FOR THE KIDS CLUB, AN AFTER SCHOOL PROGRAM THAT PROVIDES A SAFE, HEALTHY AND ENRICHING ENVIRONMENT TO OVER 50 CHILDREN WHO VISIT THE Y EACH DAY.

Funded Amount:

$5,000

Requested By:

LATIMER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUNG MEN AND YOUNG WOMENS HEBREW ASSOCIATION
5625 ARLINGTON AVENUE
BRONX, NY 10471
(718) 548-8200

Name of Project Director:

SIMON JAFFEE

Purpose of Project:

FUNDS WILL BE USED FOR A RIVERDALE-WIDE EVENT WHICH WILL SHOWCASE VARIOUS MUSICAL, DANCE, CULINARY, AND THEATRICAL PERFORMANCES.

Funded Amount:

$5,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUNG MEN'S & YOUNG WOMEN'S HEBREW ASSOCIATION DBA 92ND
1395 LEXINGTON AVENUE
NEW YORK, NY 10128
(212) 415-5470

Name of Project Director:

SOL ADLES

Purpose of Project:

FUNDS WILL BE USED FOR THE TEENS PROGRAM. IT PROVIDES TEENS WITH
A NETWORK OF LEADERSHIP AND SERVICE OPPORTUNITIES.

Funded Amount:

$7,500

Requested By:

BING

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUNG MEN'S & YOUNG WOMEN'S HEBREW ASSOCIATION OF
54 NAGLE AVENUE
NEW YORK, NY 10040
(212) 569-6200

Name of Project Director:

MARTIN ENGLISHER

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE MAIN OFFICE FACILITIES.

Funded Amount:

$5,000

Requested By:

ESPAILLAT, FARRELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUNG MEN’S & YOUNG WOMEN’S HEBREW ASSOCIATION OF WASHINGTON
HEIGHTS AND INWOOD
54 NAGLE AVENUE
NEW YORK, NY 10040
(212) 569-6200

Name of Project Director:

MARTIN ENGLISHER

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE MAIN OFFICE FACILITIES. PROGRAMS ARE OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,500

Requested By:

ESPAILLAT, FARRELL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUNG WOMENS CHRISTIAN ASSOC. OF TONAS, INC
49 TREMONT STREET
NORTH TONAWANDA, NY 14120
(716) 692-5580

Name of Project Director:

JILL TOWNSON

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING RENOVATIONS TO PROVIDE EXPANDED ADMINISTRATIVE SPACE.

Funded Amount:

$7,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUNG WOMENS CHRISTIAN ASSOC. OF YONKERS
87 SOUTH BROADWAY
YONKERS, NY  10701
(914) 963-0640

Name of Project Director:

YEJIDE OKUNRIBIDO

Purpose of Project:

FUNDS WILL BE USED TO EFFECT NECESSARY BUILDING REPAIRS AND RENOVATIONS THAT WILL FACILITATE THE EXPANSION OF A CHILD DEVELOPMENT CENTER.

Funded Amount:

$5,000

Requested By:

PRETLOW

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUNG WOMENS CHRISTIAN ASSOCIATION OF BINGHAMTON AND BROOME COUNTY
80 HAWLEY STREET
BINGHAMTON, NY 13901
(607) 772-0340 227

Name of Project Director:

CAROL COPPENS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE BEDS, CHAIRS, TABLES, SOFAS, ETC. TO FURNISH FOUR RENOVATED, EFFICIENCY APARTMENTS FOR RESIDENTS. OPEN TO ALL IN THE COMMUNITY ON AN NON-SECTARIAN BASIS.

Funded Amount:

$6,000

Requested By:

LUPARDO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUNG WOMENS CHRISTIAN ASSOCIATION OF ULSTER COUNTY, INC.
209 CLINTON AVENUE
KINGSTON, NY 12401
(845) 338-6844

Name of Project Director:

ANDREA PARK

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE EARLY CHILDHOOD LEARNING CENTER PLAYGROUND AND EXPAND HEALTH AND FITNESS PROGRAMMING TO COMPLY WITH ACCREDITATION REQUIREMENTS OF THE NATIONAL ASSOCIATION OF EDUCATION OF THE YOUNG CHILD (NAEYC).

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUTH AND TENNIS, INC.
ROY WILKINS PARK, 177TH STREET AND BAISLEY BLVD.
JAMAICA, NY 11434
(718) 658-6728

Name of Project Director:

WILLIAM BRIGGS

Purpose of Project:

FUNDS WILL BE USED TO TEACH YOUNG PEOPLE IN SOUTHEAST QUEENS ABOUT TENNIS AND ACADEMICS.

Funded Amount:

$10,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUTH CADET PROGRAM
455 EAST 138TH STREET
BRONX, NY  10454
(718) 585-5234

Name of Project Director:

CARLOS QUINTANA

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP DISCIPLINE AND SELF-ESTEEM THROUGH MILITARY STRUCTURED ACTIVITIES FOR YOUTH OF THE SOUTH BRONX.

Funded Amount:

$8,000

Requested By:

ARROYO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUTH ENVIRONMENTAL SERVICES
75 GRAND AVENUE
MASSAPEQUA, NY 11758
(516) 799-3203

Name of Project Director:

JAMIE BOGENSHTUTZ

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAM

Funded Amount:

$3,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YOUTH SERVICE OPPORTUNITIES PROJECT, INC.
15 RUTHERFORD PLACE
NEW YORK, NY  10003
(212) 598-0973

Name of Project Director:

EDWARD DOTY

Purpose of Project:

FUNDS WILL BE USED TO INTRODUCE STUDENTS TO VOLUNTEER SERVICE WITH THE HUNGRY AND HOMELESS.

Funded Amount:

$2,500

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

YWCA OF CORTLAND
14 CLAYTON AVENUE
CORTLAND, NY 13045
(607) 753-9651

Name of Project Director:

JAMI BISTOCCHI

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE DAYCARE CENTER.

Funded Amount:

$20,000

Requested By:

LIFTON

Name of Administering State Agency:

OFFICE OF CHILDREN AND FAMILY SERVICES
Legal Name, Address, and Telephone Number:

ALABAMA AMERICAN LEGION/VFW POST 626
1338 LEWISTON ROAD
BASOM, NY 14013
(585) 948-9795

Name of Project Director:

RED ROBINSON

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE RESTROOMS (TO MAKE THEM HANDICAPPED ACCESSIBLE)

Funded Amount:

$5,300

Requested By:

HAWLEY

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

AMERICAN LEGION GREENLAWN POST #1244
16 TODD COURT
HUNTINGTON STATION, NY 11746
(631) 673-8704

Name of Project Director:

BOB SANTO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE AMERICAN LEGION PROVIDES

Funded Amount:

$1,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

AMERICAN LEGION HUNTINGTON POST #360
P.O. BOX 93
HUNTINGTON, NY 11743
(631) 423-7575

Name of Project Director:

TED HARBACH

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS THAT THE AMERICAN LEGION PROVIDES

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

AMERICAN LEGION NORTHPORT POST #694
75 WOODSIDE AVENUE
NORTHPORT, NY 11768
(631) 368-0699

Name of Project Director:

TED KAZMERSKI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE
AMERICAN LEGION PROVIDES

Funded Amount:

$5,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

AMERICAN LEGION POST 94
22 GROVE PLACE
BABYLON, NY 11702
(631) 669-0094

Name of Project Director:

JOHN HORAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A PA SOUND SYSTEM FOR PARADES AND OTHER EVENTS

Funded Amount:

$2,500

Requested By:

BOYLE

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

AMERICAN LEGION WILLISTON POST NO. 144
730 WILLIS AVENUE, P.O. BOX 1
WILLISTON PARK, NY 11596
(516) 746-9310

Name of Project Director:

JOHN LAWLESS

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATION OF UPSTAIRS FOYER AND HALLWAY

Funded Amount:

$5,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

CAIRO-DURHAM ELKS LODGE 2630
P.O. BOX 524
CAIRO, NY 12413
(518) 622-3574

Name of Project Director:

GEORGE CARROLL

Purpose of Project:

FUNDS WILL BE USED FOR CONCRETE FLOOR FOR ELKS LODGE

Funded Amount:

$5,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

DEER PARK LIONS CLUB
569 ACORN STREET, SUITE 1
DEER PARK, NY 11729
(631) 667-3769

Name of Project Director:

TIM ENRIGHT

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE DEER PARK LIONS CLUB PROVIDES

Funded Amount:

$1,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

EAST AURORA AMERICAN LEGION POST #362
1 LEGION DRIVE
EAST AURORA, NY 14052
(716) 652-9862

Name of Project Director:

DAVID DIPIETRO

Purpose of Project:

FUNDS WILL BE USED FOR THE ACQUISITION AND DEMILITARIZATION OF AN AMERICAN WAR PLANE USED DURING THE KOREAN WAR TO SERVE AS A MEMORIAL

Funded Amount:

$15,000

Requested By:

COLE

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

EAST MEADOW KIWANIS CLUB
1 WEST STREET
MINEOLA, NY 11501
(516) 571-6213

Name of Project Director:

NORMA GONSALVES

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY OUTREACH PROJECTS

Funded Amount:

$4,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

ILION MOOSE LODGE 1010
302 BARRINGER ROAD, P.O. BOX 28
ILION, NY 13357
(315) 894-1021

Name of Project Director:

JOHN WRIGHT

Purpose of Project:

FUNDS WILL BE USED TOWARDS UPGRADING HANDICAPPED ACCESSIBILITY TO BUILDING ENTRANCE AND REST FACILITIES

Funded Amount:

$5,000

Requested By:

BUTLER-M

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

ITALIAN AMERICAN WAR VETERANS OF THE US-DECARLO STAFFO POST NO. 8
P.O. BOX 49
LITTLE FALLS, NY
(315) 823-1635

Name of Project Director:

ROBERT CRISMAN

Purpose of Project:

FUNDS WILL BE USED TOWARDS RESTROOM FACILITY UPGRADES AND REPAIRS

Funded Amount:

$5,000

Requested By:

BUTLER-M

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

KIWANIS CLUB OF GARDEN CITY, INC.
400 GARDEN CITY PLAZA, SUITE 500
GARDEN CITY, NY 11530
(516) 240-4361

Name of Project Director:

JOHN COLLINS

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY ACTIVITIES

Funded Amount:

$2,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

KNIGHTS OF COLUMBUS FATHER THOMAS A. JUDGE #6893
P.O. BOX 1151
EAST NORTHPORT, NY 11731
(631) 261-2201

Name of Project Director:

ANTHONY D'ANGELIS

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS

Funded Amount:

$1,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

KNIGHTS OF COLUMBUS OUR LADY OF THE ROSARY #4428
759 LONG ISLAND AVENUE
DEER PARK, NY 11729
(631) 595-2012

Name of Project Director:

JOHN LAZAR

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY PARK AND SPORT FIELD

Funded Amount:

$1,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

KNIGHTS OF COLUMBUS ST. JOSEPH'S COUNCIL #4810
24 BOULEVARD AVENUE
GREENLAWN, NY 11740
(631) 754-9488

Name of Project Director:

JOSEPH FERRANDINA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE
KNIGHTS OF COLUMBUS PROVIDES

Funded Amount:

$1,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LOYAL ORDER OF MOOSE:HUNTINGTON LODGE #318
631 PULASKI ROAD
GREENLAWN, NY 11740
(631) 757-2777

Name of Project Director:

STEPHEN GABRIEL, JR.

Purpose of Project:

FUNDS WILL BE USED FOR ROOF REPAIR

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

MASSAPEQUA KIWANIS
P.O. BOX 195
MASSAPEQUA, NY 11758
(516) 541-1443

Name of Project Director:

JOHN RYWELSKI

Purpose of Project:

FUNDS WILL BE USED FOR ONGOING YOUTH AND COMMUNITY PROGRAMS

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

MELVILLE LIONS CLUB
241 NORWOOD AVENUE
NORTHPORT, NY 11768
(631) 261-6044

Name of Project Director:

JEFF JEROME

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE MELVILLE LIONS CLUB PROVIDES

Funded Amount:

$1,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

OPERATION OSWEGO COUNTY
44 WEST BRIDGE STREET
OSWEGO, NY 13126
(315) 343-1545

Name of Project Director:

MICHAEL TREADWELL

Purpose of Project:

FUNDS WILL BE USED FOR A FEASIBILITY STUDY

Funded Amount:

$20,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

OPERATION OSWEGO COUNTY
44 WEST BRIDGE STREET
OSWEGO, NY 13126
(315) 343-1545

Name of Project Director:

MICHAEL TREADWELL

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A NEW VETERANS VAN

Funded Amount:

$19,500

Requested By:

BARCLAY

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

ORANGE COUNTY VETERANS CEMETERY
111 CRAIGVILLE ROAD
GOSHEN, NY 10924
(845) 291-2470

Name of Project Director:

ANTHONY ZIPPO

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$3,000

Requested By:

CALHOUN

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

ORANGE COUNTY VETERAN’S SERVICE AGENCY
111 CRAIGVILLE ROAD
GOSHEN, NY 10924
(845) 291-2470

Name of Project Director:

TONY ZIPPO

Purpose of Project:

FUNDS WILL BE USED FOR CEMETERY EQUIPMENT

Funded Amount:

$3,000

Requested By:

RABBITT

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

SAUGERTIES ELKS LODGE
P.O. BOX 141
SAUGERTIES, NY 12477
(845) 246-0841

Name of Project Director:

THOMAS SOLLITO

Purpose of Project:

FUNDS WILL BE USED FOR FACILITY IMPROVEMENTS

Funded Amount:

$2,500

Requested By:

LOPEZ-P

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

SON'S OF ITALY CONSTANTINO BRUMIDI LODGE #2211
2075 DEER PARK AVENUE
DEER PARK, NY 11729
(631) 242-5492

Name of Project Director:

SONNY MARIGLIANO

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING REPAIRS

Funded Amount:

$2,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

SON’S OF ITALY TOSCANINI LODGE #2107
5 PETTIT COURT
DIX HILLS, NY 11746
(631) 549-4278

Name of Project Director:

ANNE KLEIN

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH INITIATIVES

Funded Amount:

$1,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

TOWN OF MIDDLEBURGH-VFW POST 2161
143 VFW LANE
MIDDLEBURGH, NY 12122
(518) 827-4275

Name of Project Director:

ROGER BECKER

Purpose of Project:

FUNDS WILL BE USED FOR FACILITY IMPROVEMENTS

Funded Amount:

$10,000

Requested By:

LOPEZ-P

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

V.F.W. HILDERBRAND-DAVIS POST 1895
24 ONDERDONK ROAD
GLENVILLE, NY 12302
(518) 376-9504

Name of Project Director:

WILLIAM SCHMICK

Purpose of Project:

FUNDS WILL BE USED TO REPLACE ROOF AND REPAIR INSULATION DAMAGE

Funded Amount:

$17,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

VETERANS OUTREACH CENTER, INC.
4459 SOUTH AVENUE
ROCHESTER, NY 14620
(585) 546-1081

Name of Project Director:

THOMAS CRAY

Purpose of Project:

FUNDS WILL BE USED FOR EXPANSION OF VETERANS OUTREACH CENTER’S FACILITY TO BETTER SERVE 134TH DISTRICT’S (AND SURROUNDING COMMUNITIES) VETERANS

Funded Amount:

$5,000

Requested By:

REILICH

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VFW ALBERTSON POST NO. 5253
155 SEARINGTOWN ROAD
ALBERTSON, NY 11507
(516) 747-5049

Name of Project Director:

FRANK MALTESE

Purpose of Project:

FUNDS WILL BE USED TO REPLACE ROOF

Funded Amount:

$5,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

VFW POST 672
252 PEACEBILL HILL ROAD
BREWSTER, NY 10509
(845) 279-6969

Name of Project Director:

ARTHUR HANLEY

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN PROPERTY

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

VIETNAM VETERANS OF AMERICA, INC.
P.O. BOX 412
HICKSVILLE, NY 11802
(516) 677-5354

Name of Project Director:

CONNIE STEERS

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY PROGRAMS AND SERVICES

Funded Amount:

$1,500

Requested By:

MCKEVEITT

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

VIETNAM VETERANS OF NASSAU COUNTY, CHAPTER 82
P.O. BOX 412
HICKSVILLE, NY 11802
(516) 483-3113

Name of Project Director:

CONNIE STEERS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH PROGRAMS, AIDING THOSE IN
VETERANS OF TRANSPORTATION AND OTHER EXPENSES RELATED TO CARE
AND OTHER CHAPTER PROGRAMS

Funded Amount:

$2,500

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

VIETNAM VETS OF AMERICA, INC.
P.O. BOX 412
HICKSVILLE, NY 11802
(516) 677-5354

Name of Project Director:

CONNIE STEERS

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAMS AND PROJECTS

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF GENERAL SERVICES
Legal Name, Address, and Telephone Number:

ANGELO J. MELILLO CENTER FOR MENTAL HEALTH
113 GLEN COVE AVENUE
GLEN COVE, NY  11542
(516) 676-2388

Name of Project Director:

DANIEL VOGRIN

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP SELF-SUSTAINING COMMUNITY MENTAL HEALTH PROMOTION FORMULA WHICH WOULD INCLUDE A COMMUNITY SPECIFIC APPROACH TO ADVERTISING, PRESS RELEASES, COLLABORATIONS, GRANT WRITING AND FUND RAISING AS A MEANS OF PROMOTING ACCESS TO MENTAL HEALTH SERVICES AND PROMOTING CAPABILITIES OF PEOPLE WITH MENTAL ILLNESS.

Funded Amount:

$2,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

CHILD CENTER OF NEW YORK
60-02 QUEENS BOULEVARD, LOWER LEVEL
WOODSIDE, NY 11377
(718) 651-7770

Name of Project Director:

SANDRA HAGAN

Purpose of Project:

FUNDS WILL BE USED FOR, BUT NOT LIMITED TO, TRAINING COUNSELING STAFF, YOUTH DEVELOPMENT AND COUNSELING.

Funded Amount:

$5,000

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

FAMILY SERVICE LEAGUE OF SUFFOLK COUNTY, INC.
208 ROANOKE AVENUE
RIVERHEAD, NY  11901
(631) 369-0104

Name of Project Director:

LARRY WEISS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPLEMENTAL TREATMENT FOR CHILDREN WITH ONGOING EMOTIONAL DIFFICULTIES.

Funded Amount:

$10,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

FAMILY SERVICE LEAGUE, INC.
1444 FIFTH AVENUE
BAY SHORE, NY 11706
(632) 647-3100

Name of Project Director:

KAREN BOORSHTETIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES TO PARENTS WITH SERIOUS MENTAL ILLNESSES.

Funded Amount:

$5,000

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

FIRST AVENUE PEER SUPPORT, INC.
1401 FIRST AVENUE
WATERVLIEIT, NY  12189
(518) 273-0191

Name of Project Director:

ROBERT J. PETERS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COUNSELING SERVICES TO LOW-INCOME PEOPLE WITH MENTAL ILLNESS.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

HANDS ACROSS LONG ISLAND, INC.
159 BRIGHTSIDE AVENUE, P.O. BOX 1179
CENTRAL ISLIP, NY 11722
(631) 234-1925

Name of Project Director:

ELLEN HEALION

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SOLAR PANELS FOR HALI'S BUILDINGS.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

HANDS ACROSS LONG ISLAND, INC.
159 BRIGHTSIDE AVENUE
CENTRAL ISLIP, NY 11722
(631) 234-1925

Name of Project Director:

ELLEN HEALION

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE UPDATED AND MODERN EQUIPMENT THAT WILL BE USED TO ASSIST PEOPLE THAT ARE IN NEED OF SERVICES.

Funded Amount:

$8,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NAMI FAMILYA OF ROCKLAND COUNTY, INC.
P.O. BOX 635
ORANGEBURG, NY  10962
(845) 359-8787

Name of Project Director:

MARLENE BECKER

Purpose of Project:

FUNDS WILL BE USED TO INCREASE ABILITY TO SUPPORT FAMILIES DEALING WITH MENTAL ILLNESS BY PURCHASING SOFTWARE AND COMPUTER UPDATES.

Funded Amount:

$1,000

Requested By:

JAFFEE

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

NAMI NYC STATEN ISLAND, INC.
930 WILLOWBROOK ROAD, BLDG. 41A
STATEN ISLAND, NY   10314
(718) 477-1700

Name of Project Director:

LINDA WILSON

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE LIVES OF PEOPLE LIVING WITH MENTAL ILLNESS AND THEIR FAMILIES THROUGH SUPPORT, EDUCATION AND INFORMATION.

Funded Amount:

$5,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

NORTH SHORE CHILD & FAMILY GUIDANCE CENTER
480 OLD WESTBURY ROAD
ROSLYN HEIGHTS, NY 11577
(516) 626 – 1971

Name of Project Director:

MARION LEVINE

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A COMPREHENSIVE PROGRAM TO KEEP CHILDREN WITH SERIOUS EMOTIONAL DISABILITIES FROM BEING INSTITUTIONALIZED.

Funded Amount:

$15,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

QUEENS CHILD GUIDANCE CENTER, INC.
60-02 QUEENS BOULEVARD - LOWER LEVEL
WOODSIDE, NY 11377
(718) 651-7770

Name of Project Director:

SANDRA HAGAN

Purpose of Project:

THE QUEENS CHILD GUIDANCE CENTER IS A COMMUNITY-BASED MENTAL HEALTH AGENCY FOR CHILDREN AND FAMILIES. THE FUNDING WILL BE USED TO SUPPORT SERVICES AND CHILD GUIDANCE CENTERS THAT DIRECTLY IMPACT QUEENS COUNTY.

Funded Amount:

$5,000

Requested By:

COOK

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

QUEENS CHILD GUIDANCE CENTER, INC.
60-02 QUEENS BOULEVARD, LOWER LEVEL
WOODSIDE, NY  11377
(718) 651-7770

Name of Project Director:

SANDRA HAGAN

Purpose of Project:

FUNDS WILL BE USED TO EXPAND MENTAL HEALTH SERVICES TO TROUBLED QUEENS CHILDREN AND THEIR FAMILIES.

Funded Amount:

$2,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

QUEENS CHILD GUIDANCE CENTER, INC.
60-02 QUEENS BOULEVARD (LOWER LEVEL)
WOODSIDE, NY 11377
(718) 651-7770

Name of Project Director:

SANDRA HAGEN

Purpose of Project:

FUNDS WILL BE USED TO EXPAND MENTAL HEALTH SERVICES TO TROUBLED QUEENS CHILDREN AND THEIR FAMILIES IN THREE UNDERSERVED COMMUNITIES - FLUSHING, JAMAICA AND WOODSIDE.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
SFY 2007 – 2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RESPONSE OF SUFFOLK COUNTY
P.O. BOX 300
STONY BROOK, NY 11790
(631) 751 – 7620

Name of Project Director:

SONIA WAGNER

Purpose of Project:

FUNDS WILL BE USED FOR AN ON-LINE CRISIS INTERVENTION PROGRAM.

Funded Amount:

$25,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

RIVERDALE MENTAL HEALTH ASSOCIATION, INC.
5676 RIVERDALE AVENUE
BRONX, NY 10471-2191
(718) 796-2191

Name of Project Director:

ROBERT BREWSTER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADMINISTRATIVE SUPPORT IN ORDER TO EXPAND SERVICE DELIVERY TO RESIDENTS IN NEED OF MENTAL HEALTH SERVICES THROUGH EFFICIENT AND EFFECTIVE REVENUE MANAGEMENT.

Funded Amount:

$7,500

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
SERVICE PROGRAM FOR OLDER PEOPLE, INC.
302 WEST 91ST STREET
NEW YORK, NY 10024
(212) 787-7120

LAURA OSINOTT

FUNDS WILL BE USED TO PROVIDE MENTAL HEALTH AND OTHER CLINICAL SERVICES TO SENIORS.

$5,000

ROSENTHAL

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

SERVICE PROGRAM FOR OLDER PEOPLE, INC.
302 WEST 91ST STREET
NEW YORK, NY  10024
(212) 787-7120

Name of Project Director:

NANCY HARVEY

Purpose of Project:

FUNDS WILL BE USED FOR THE EXPANSION OF THEIR MENTAL HEALTH AND SUBSTANCE ABUSE SERVICE AND CLINIC OUTREACH SERVICES.

Funded Amount:

$4,500

Requested By:

O’DONNELL

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

STATEN ISLAND MENTAL HEALTH SOCIETY, INC.
669 CASTLETON AVENUE
STATEN ISLAND, NY 10301
(718) 442-2225

Name of Project Director:

KENNETH POPLER

Purpose of Project:

FUNDS WILL BE USED TO SPONSOR CHILDREN’S THERAPIST OFFICE IN THE GREEN BUILDING THAT WILL INCLUDE FAMILY RESOURCES AS PART OF THE SOCIETY’S CHILD ABUSE AND NEGLECT PREVENTION PROGRAM.

Funded Amount:

$1,500

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

WSNCHS EAST, INC.
400 SUNRISE HIGHWAY
AMITYVILLE, NY 11701
(631) 264-4000

Name of Project Director:

ROBERT DETOR

Purpose of Project:

FUNDS WILL BE USED FOR A YOUTH DEVELOPMENT AND CONFLICT MANAGEMENT INITIATIVE IN THE WYANDANCH PUBLIC SCHOOLS.

Funded Amount:

$25,000

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF MENTAL HEALTH
Legal Name, Address, and Telephone Number:

AID TO THE DEVELOPMENTALLY DISABLED, INC.
901 EAST MAIN STREET, SUITE 508
RIVERHEAD, NY 11901
(631) 727-6220

Name of Project Director:

DONALD RIEB

Purpose of Project:

FUNDS WILL BE USED TO SUPPLY AN AREA FOR SMALL ANIMALS TO BE VIEWED AND CARED FOR, AND FOR A SOLAR GARDEN FOR THE DEVELOPMENTALLY DISABLED.

Funded Amount:

$2,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
ALTERNATIVES FOR CHILDREN, MELVILLE
175 WOLF HILL ROAD
MELVILLE, NY 11747
(631) 271-0777

DR. MARIE FICANO

FUNDS WILL BE USED FOR PLAYGROUND EQUIPMENT FOR DISABLED CHILDREN AND SUN SHADES

$6,500

CONTE

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

BAIS EZRA
4510 16TH AVENUE
BROOKLYN, NY 11204
(718) 851-6300

Name of Project Director:

DAVID MANDEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE GENERAL SUPPORT FOR THE OPERATIONS OF THE ORGANIZATION, WHICH INCLUDE BUT ARE NOT LIMITED TO RESIDENTIAL SERVICES, DAY PROGRAMMING AND SUPPORT SERVICES AND COORDINATION, DAY CAMP, ETC. FOR CHILDREN AND ADULTS WITH DEVELOPMENTAL DISABILITIES.

Funded Amount:

$161,000

Requested By:

BRENNAN, CAMARA, CLARK, CYMBROWITZ-S, GOTTFRIED, HIKIND, KOON, MAISEL, MAYERSOHN, PHEFFER, SILVER, WEINSTEIN

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

CHALLENGE INDUSTRIES, INC.
402 EAST STATE STREET
ITHACA, NY 14850
(607) 272-8990

Name of Project Director:

MARTINE GOLD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PEOPLE WITH DISABILITIES EMPLOYMENT OPPORTUNITIES THROUGH CHALLENGE INDUSTRIES DOCUMENT PRESERVATION BUSINESS. THIS ESSENTIAL PROGRAM NOW Requires MICROFILM CONVERSION TO DIGITAL TECHNOLOGIES.

Funded Amount:

$20,000

Requested By:

LIFTON

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

CLEARVIEW CENTER, INC.
500 CENTRAL AVENUE
ALBANY, NY  12206
(518) 435-9931

Name of Project Director:

DOROTHY CUCINELLI

Purpose of Project:

FUNDS WILL BE USED TO HELP CLEARVIEW CENTER PURCHASE A VEHICLE TO ASSIST WITH CLIENT TRANSPORTATION WITHIN NEW YORK.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

CLEARY SCHOOL FOR THE DEAF
301 SMITHTOWN BOULEVARD
NESCONSET, NY 11767
(631) 588-0530

Name of Project Director:

KEN MORSEON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE CLASSROOM LEVERSETS, MASTER KEYS, HARDWARE AND LABOR

Funded Amount:

$5,000

Requested By:

FITZPATRICK

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

DEVELOPMENTAL DISABILITIES INSTITUTE
99 HOLLYWOOD DRIVE
SMITHTOWN, NY 11787
(631) 366-2900

Name of Project Director:

DAN ROWLAND

Purpose of Project:

FUNDS WILL BE USED FOR INCLUSIVE CLASSES' INITIATIVE

Funded Amount:

$5,000

Requested By:

CONTE

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

DEVELOPMENTAL DISABILITIES INSTITUTE (DDI)
99 HOLLYWOOD DRIVE
SMITHTOWN, NY 11787
(631) 366-2900

Name of Project Director:

DAN ROWLAND

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A VAN TO ASSIST CHILDREN AND ADULTS WITH AUTISM

Funded Amount:

$5,000

Requested By:

FITZPATRICK

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

DEVELOPMENTAL DISABILITIES INSTITUTE, INC.
99 HOLLYWOOD DRIVE
SMITHTOWN, NY 11787
(631) 366-2900

Name of Project Director:

DANIEL ROWLAND

Purpose of Project:

FUNDS WILL BE USED FOR TRANSPORTATION SERVICES FOR DEVELOPMENTALLY DISABLED CHILDREN AND ADULTS.

Funded Amount:

$5,000

Requested By:

SWEENEY

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

DEVELOPMENTAL DISABILITIES INSTITUTE, INC.
99 HOLLYWOOD DR.
SMITHTOWN, NY 11787
(631) 366-2905

Name of Project Director:

DANIEL ROWLAND

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE INCLUSIONAL CLASSES THAT WILL INCLUDE BILINGUAL REPRESENTATIVES FOR CLIENTS THAT ARE IN NEED.

Funded Amount:

$2,500

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

DEVELOPMENTAL DISABILITIES INSTITUTE, INC.
99 HOLLYWOOD DRIVE
SMITHTOWN, NY  11787
(631) 366-2900

Name of Project Director:

DAN ROWLAND

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH COSTS ASSOCIATED WITH OPERATING THE YOUNG AUTISM PROGRAM AT THE MEDFORD, NY FACILITY.

Funded Amount:

$5,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

DEVELOPMENTAL DISABILITIES INSTITUTE, INC.
99 HOLLYWOOD DRIVE
SMITHTOWN, NY  11787
(631) 366-2900

Name of Project Director:

DAN ROWLAND

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TABLES FOR DEVELOPMENTAL DISABILITIES INSTITUTE.

Funded Amount:

$7,500

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

DIHR, INC.
891 AMSTERDAM AVENUE
NEW YORK, NY 10025
(212) 665-7072

Name of Project Director:

ANITA SCHWARTZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SERVICES TO ADULTS WITH DEVELOPMENTAL DISABILITIES, WITH PARTICULAR EMPHASIS ON SUPPORTED DEVELOPMENT.

Funded Amount:

$10,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

EVELYN DOUGLIN CENTER FOR SERVING PEOPLE IN NEED, INC.
241 37TH STREET, SUITE 604
BROOKLYN, NY 11232
(718) 965-1998

Name of Project Director:

SEIBERT R. PHILLIPS

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP OUT OF HOME RESPITE SERVICES AND LEGAL ADVOCACY SUPPORT FOR DEVELOPMENTALLY DISABLED INDIVIDUALS LIVING IN QUEENS WHO REQUIRE RESPITE AND LEGAL ADVOCACY SERVICES. THE FUNDING WILL SUPPORT THE PROGRAM IN AREAS OF OUTREACH, PROGRAM SUPPLIES, TRANSPORTATION, STAFFING AND REFRESHMENTS.

Funded Amount:

$20,000

Requested By:

COOK

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

EXCALIBUR LEISURE SKILLS CENTER, INC.
90 NORTH DRIVE
BUFFALO, NY 14216
(716) 831-3188

Name of Project Director:

JAMES CATALANO

Purpose of Project:

FUNDS WILL BE USED TO OFFSET OPERATIONAL EXPENSES IN ORDER TO PROVIDE BOATING AND FISHING OPPORTUNITIES FOR DISABLED/DISADVANTAGED PEOPLE RESIDING IN WNY.

Funded Amount:

$1,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

FAST BREAK FUND, INC.
P.O. BOX 1128
LATHAM, NY  12110
(518) 371-2684

Name of Project Director:

KRISS DZIKAS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT RECREATIONAL AND EDUCATIONAL PROGRAMS FOR CHILDREN WITH DISABILITIES.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

GROUP RESIDENTS OF WESTCHESTER, INC.
P.O. BOX 1692
WHITE PLAINS, NY  10602
(914) 664-3856

Name of Project Director:

JANET SUGAR

Purpose of Project:

FUNDS WILL BE USED TO HELP COVER THE COST OF PRODUCING AND MAILING THE GROW NEWSLETTER, MAINTAINING THE HELPLINE, AND SPONSORING MEETINGS FEATURING SPEAKERS ON GROW ISSUES.

Funded Amount:

$5,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

GUILD FOR EXCEPTIONAL CHILDREN
260 68TH STREET
BROOKLYN, NY 11220
(718) 833-6633

Name of Project Director:

PAUL CASSONE

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP AND PRINT EDUCATIONAL MATERIALS FOR DISTRIBUTION TO THE GENERAL PUBLIC, INSTITUTIONS OF HIGHER LEARNING, AND COMMUNITY SERVICE PROVIDERS TO INCREASE AWARENESS OF THE NEED TO PROVIDE SERVICES FOR OLDER PEOPLE WITH DEVELOPMENTAL DISABILITIES.

Funded Amount:

$1,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

HEARTSONG, INC.
590 CENTRAL PARK AVENUE, SUITE C
SCARSDALE, NY 10583
(914) 725-9272

Name of Project Director:

CATHY BROWN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A NO-FEE MUSIC AND ART THERAPY PROGRAM FOR CHILDREN WITH DISABILITIES.

Funded Amount:

$10,000

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

HELEN KELLER SERVICES FOR THE BLIND
ONE HELEN KELLER WAY
HEMPSTEAD, NY 11550
(516) 485-1234

Name of Project Director:

JOHN P. LYNCH

Purpose of Project:

FUNDS WILL BE USED FOR THEIR PRESCHOOL VISION SCREENING PROGRAM

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

HELEN KELLER SERVICES FOR THE BLIND
40 NEW YORK AVENUE
HUNTINGTON, NY 11743
(631) 424-0022

Name of Project Director:

JOHN LYNCH

Purpose of Project:

FUNDS WILL BE USED FOR PRESCHOOL VISION TESTING

Funded Amount:

$5,000

Requested By:

CONTE

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

HELEN KELLER SERVICES FOR THE BLIND
57 WILLOUGHBY STREET
BROOKLYN, NY 11201
(718) 522-2122 209

Name of Project Director:

JOHN P. LYNCH

Purpose of Project:

FUNDS WILL BE USED FOR PRESCHOOL VISION SCREENING PROGRAM

Funded Amount:

$5,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

INSPIRE
2 FLETCHER STREET
GOSHEN, NY 10924
(845) 294-7300

Name of Project Director:

MARCEL MARTINO

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT TO TREAT AUTISTIC AND CEREBRAL PALSYED CHILDREN

Funded Amount:

$7,500

Requested By:

KIRWAN

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

LIFETIME CARE FOUNDATION FOR JEWISH DISABLED, INC.
4510 16TH AVENUE
BROOKLYN, NY 11204
(718) 851-6300

Name of Project Director:

JANE RUDOFF

Purpose of Project:

FUNDS WILL BE USED TO ASSIST ELDERLY PARENTS PLAN FOR THE FUTURE OF THEIR DISABLED CHILDREN (IE., GUARDIANSHIP, CASE MANAGEMENT, ETC.).

Funded Amount:

$70,000

Requested By:

BRENNAN, CAMARA, CLARK, CYMBROWITZ-S, GOTTFRIED, HIKIND, KOOM, MAISEL, MAYERSOHN, PHEFFER, SILVER, WEINSTEIN

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

LONG ISLAND SLED HOCKEY HANDICAPPED ICE HOCKEY
33 HARDING AVENUE
LYNBROOK, NY 11563
(516) 509-2406

Name of Project Director:

BRIAN BLOOMQUIST

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT UPGRADE FOR DISABLED

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

NNY AUTISM CLINIC
103 SOUTH MAIN STREET
BLACK RIVER, NY 13612
(315) 773-5347

Name of Project Director:

KATHERINE ROBERTSON

Purpose of Project:

FUNDS WILL BE USED TO RESEARCH PROTOCOL THAT MEDICAL APPROACH TO TREATMENT OF AUTISM DOES WORK

Funded Amount:

$15,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYSARC, INC. SARATOGA CHAPTER
690 ROUTE 9
GANSEVOORT, NY 12831
(518) 584-8172

Name of Project Director:

FRANK MARCELLINO

Purpose of Project:

FUNDS WILL BE USED TO BUY TOOLS, EQUIPMENT AND SUPPLIES TO BUILD BIRDHOUSES AND BIRDFEEDERS

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

NYSARC, INC., ONONDAGA COUNTY CHAPTER
600 SOUTH WILBUR AVENUE
SYRACUSE, NY 13204
(315) 476-7441

Name of Project Director:

RENEE FRAGALE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS, PRINTERS AND SOFTWARE PROGRAMS. THESE COMPUTERS AND SOFTWARE PROGRAMS WILL BE USED BY INDIVIDUALS WITH AUTISM TO ENCOURAGE EDUCATIONAL LEARNING AND TO CREATE COMMUNICATIONS BOARDS.

Funded Amount:

$5,000

Requested By:

CHRISTENSEN, MAGNARELLI

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

NYSARC, INC., ONONDAGA COUNTY CHAPTER
600 SOUTH WILBUR AVENUE
SYRACUSE, NY  13204
(315) 476-7441

Name of Project Director:

STANFORT J. PERRY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE CLINICAL EQUIPMENT TO BE USED BY THE AGENCY’S OPERATIONS SERVING INDIVIDUALS WITH AUTISM.

Funded Amount:

$5,000

Requested By:

CHRISTENSEN, MAGNARELLI

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

NYSARC, INC., SARATOGA COUNTY CHAPTER
16 SARATOGA BRIDGES BOULEVARD
BALLSTON SPA, NY 12020
(518) 587-0723

Name of Project Director:

VALERIE MURATORI

Purpose of Project:

FUNDS WILL BE USED FOR THE HORTICULTURE PROGRAM AT CLIFTON PARK DAY HABILITATION SITE.

Funded Amount:

$5,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

OHEL CHILDREN’S HOME AND FAMILY SERVICES, INC.
4510 16TH AVENUE
BROOKLYN, NY  11204
(718) 851-6300

Name of Project Director:

PHYLLIS MAYER

Purpose of Project:

FUNDS WILL BE USED FOR THE DOMESTIC VIOLENCE PROGRAM TO HELP VICTIMS OF DOMESTIC VIOLENCE.

Funded Amount:

$2,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

OHEL CHILDREN’S HOME AND FAMILY SERVICES, INC.
4510 16TH AVENUE
BROOKLYN, NY  11204
(718) 851-6300

Name of Project Director:

DAVID MANDEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ENRICHMENT EXPERIENCES FOR DEPRIVED CHILDREN IN FOSTER AND CONGREGATE CARE. TO SEED THE DEVELOPMENT OF A VOLUNTEER PROGRAM TO PROVIDE EXTRA HELP TO DEPENDENT AND NEGLECTED CHILDREN AND THEIR FAMILIES.

Funded Amount:

$203,000

Requested By:

BRENNAN, CAMARA, CLARK, CYMBROWITZ-S, GOTTFRIED, HIKIND, KOON, MAISEL, MAYERSOHN, PHEFFER, SILVER, WEINSTEIN

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

OHEL CHILDREN’S HOME AND FAMILY SERVICES, INC.
4510 16TH AVENUE
BROOKLYN, NY 11204
(718) 851-6300

Name of Project Director:

DAVID MANDEL

Purpose of Project:

FUNDS WILL BE USED FOR CRISIS INTERVENTION FOR CHILDREN WHO HAVE NO PARENTAL SUPPORT.

Funded Amount:

$132,000

Requested By:

BRENNAN, CAMARA, CLARK, CYMBROWITZ-S, GOTTFRIED, HIKIND, KOON, MAISEL, MAYERSOHN, PHEFFER, SILVER, WEINSTEIN

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

OHEL CHILDREN’S HOME AND FAMILY SERVICES, INC.
4510 16TH AVENUE
BROOKLYN, NY 11204
(718) 851-6555

Name of Project Director:

PHYLLIS MAYER

Purpose of Project:

FUNDS WILL BE USED FOR PREVENTION, EDUCATION, AND INTERVENTION PROGRAM FOR TROUBLED YOUTH IN THE COMMUNITY.

Funded Amount:

$3,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

OHEL CHILDREN'S HOME AND FAMILY SERVICES, INC.
4510 16TH AVENUE
BROOKLYN, NY 11204
(718) 851-6300

Name of Project Director:

DAVID MANDEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SOCIAL SERVICES AND DIRECT CASE CARE ASSISTANCE TO DEPENDENT AND NEGLECTED CHILDREN AND TO EMOTIONALLY AND DEVELOPMENTALLY DISABLED CHILDREN AND ADULTS.

Funded Amount:

$1,500

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

OHELE CHILDREN’S HOME AND FAMILY SERVICES
4510 16TH AVENUE
BROOKLYN, NY 11204
(718) 851 – 8883

Name of Project Director:

DAVID MANDEL

Purpose of Project:

FUNDING FOR A VOLUNTEER PROGRAM TO PROVIDE EXTRA HELP TO DEPENDENT AND NEGLECTED CHILDREN AND THEIR FAMILIES.

Funded Amount:

$380,000

Requested By:

BRENNAN, CAMARA, CLARK, CYMBROWITZ – S, GOTTFRIED, HIKIND, KOOK, MAISEL, MAIERSOHN, PHEFFER, SILVER, WEINSTEIN

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

PENINSULA COUNSELING CENTER, INC.
124 FRANKLIN PLACE
WOODMERE, NY 11598
(516) 569-6600

Name of Project Director:

HERBERT RUBEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COUNSELING, SUPPORT, CASE MANAGEMENT AND ADVOCACY SERVICES TO THE PHYSICALLY AND DEVELOPMENTALLY DISABLED AND THEIR FAMILIES.

Funded Amount:

$5,000

Requested By:

WEISENBERG

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QSAC, INC.
253 W 35TH STREET, 16TH FLOOR
NEW YORK, NY 10001
(718) 728-8476  2010

Name of Project Director:

GARY MAFFEI

Purpose of Project:

FUNDS WILL BE USED TO CREATE A SENSORY ROOM AT ONE OF THE ADULT DAY HABILITATION SITES TO HELP ADULTS WITH AUTISM.

Funded Amount:

$6,000

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

QSAC, INC.
253 WEST 35TH STREET, 16TH FLOOR
NEW YORK, NY 10001
(212) 244-5560

Name of Project Director:

GARY MAFFEI

Purpose of Project:

FUNDS WILL BE USED TO COVER EXPENSES AFFILIATED WITH THE SATURDAY RECREATION PROGRAM FOR STUDENTS AGE 5-21.

Funded Amount:

$1,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

RESOURCE CENTER FOR INDEPENDENT LIVING, INC.
347 WEST MAIN STREET
AMSTERDAM, NY  12010
(518) 842-3561

Name of Project Director:

RAMON RODRIGUEZ, RCIL

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE SAFETY AND ACCESSIBILITY OF THE RCIL PARKING LOT.

Funded Amount:

$3,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROOSEVELT ISLAND DISABLED ASSOCIATION, INC.
546-3 MAIN STREET
ROOSEVELT ISLAND, NY  10044
(212) 223-0879

Name of Project Director:

VIRGINIA GRANATO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RECREATION AND ARTS ACTIVITIES FOR THE RESIDENTS OF ROOSEVELT ISLAND WHO HAVE DISABILITIES.

Funded Amount:

$8,000

Requested By:

GRANNIS

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

SARATOGA BRIDGES, NYSARC, INC. SARATOGA CHAPTER
16 SARATOGA BRIDGES BOULEVARD
BALLSTON SPA, NY 12020
(518) 587-0723

Name of Project Director:

VALERIE MURATORI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF BOBCAT SKID STEER TO BE USED IN THEIR PALLET MANUFACTURING AND PRODUCTION BUSINESS WHICH SUPPORTS ARC'S INDEPENDENCE FROM GOVERNMENTAL FUNDING

Funded Amount:

$20,000

Requested By:

SAYWARD

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SARATOGA COUNTY BOARD OF SUPERVISORS
22 TRAVER ROAD
GANSEVOORT, NY 12831
(518) 587-1939

Name of Project Director:

ART JOHNSON

Purpose of Project:

FUNDS WILL BE USED FOR THE SARATOGA COUNTY AUTISM COUNCIL

Funded Amount:

$10,000

Requested By:

MCDONALD

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

SECOND CHANCES SPORTS FITNESS
220 BALLSTON AVENUE
SARATOGA SPRINGS, NY 12866
(518) 587-3262

Name of Project Director:

WILLIAM YAISER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE GOLF CARTS AND RETRO FIT FOR DISABLED PEOPLE

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

SKILLS UNLIMITED, INC.
405 LOCUST AVENUE
OAKDALE, NY 11769
(631) 567-3320

Name of Project Director:

RICHARD KASSANANE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS TO TRAIN MENTALLY HANDICAPPED ADULTS.

Funded Amount:

$2,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

SUFFOLK COMMUNITY COUNSEL, INC.
180 OSER AVENUE, SUITE 850
HAUPPAUGE, NY 11788
(631) 434-9277

Name of Project Director:

JUDY PANNULLO

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH EXPENSES ASSOCIATED WITH THE NETWORK OF WOMEN WITH DISABILITIES PROGRAM.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

SUFFOLK INDEPENDENT LIVING ORGANIZATION
745 WAVERLY AVENUE
HOLTSVILLE, NY 11742
(631) 654-8007

Name of Project Director:

EDWARD J. AHERN

Purpose of Project:

FUNDS WILL BE USED TO DO OUTREACH AND PROMOTION INCLUDING MAILINGS, PRINTING OF MATERIALS AND COMMUNITY MEETINGS.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNITED CEREBRAL PALSY ASSOCIATION OF NASSAU COUNTY, INC.
22 JERICHO TURNPIKE, SUITE 103
MINEOLA, NY 11501
(516) 294-5100

Name of Project Director:

ERNEST T. BARTOL

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT UPGRADE

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
WAYNE ARC
150 VAN BUREN STREET
NEWARK, NY 14513
(315) 331-7741

DONNA GRANGER

FUNDS WILL BE USED FOR FULL BODY LIFTS FOR NON AMBULATORY PROGRAM PARTICIPANTS AND A DELICATESSEN MEAT COOLER

$7,500

OAKS

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
Legal Name, Address, and Telephone Number:

YOUNG ADULT INSTITUTE, INC.
460 WEST 34TH STREET
NEW YORK, NY 10001
(212) 273-6251

Name of Project Director:

DIANE QUINTON

Purpose of Project:

FUNDS WILL BE USED FOR STATE-OF-THE-ART TRAINING FACILITY FOR INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES WHO PERFORM JANITORIAL SERVICES

Funded Amount:

$2,500

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

52ND STREET PROJECT, INC.
500 WEST 52 STREET, #2B
NEW YORK, NY  10019
(212) 333-5252

Name of Project Director:

CAROL OCHS

Purpose of Project:

FUNDS WILL BE USED FOR A PLAYWRITING COURSE FOR THE CHILDREN OF HELL'S KITCHEN (CLINTON) NEIGHBORHOOD THAT BRINGS THEM TOGETHER WITH PROFESSIONAL ACTORS AND DIRECTORS IN MENTORING RELATIONSHIPS TO CREATE ORIGINAL THEATER.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ADDED VALUE & HERBAN SOLUTIONS, INC.
305 VAN BRUNT STREET
BROOKLYN, NY  11231
(718) 855-5531

Name of Project Director:

IAN MARVEY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PROJECT INITIATIVES SUCH AS THE MARKET GARDENING AND MEDIA LITERACY PROGRAMS.

Funded Amount:

$2,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ADELANTE OF SUFFOLK COUNTY, INC.
10 THIRD AVENUE
BRENTWOOD, NY 11717
(631) 434-3481

Name of Project Director:

MIRIAM GARCIA

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE AND PROVIDE THE COMMUNITY WITH CULTURAL EVENTS AND OFFSET COST TO PROVIDE THESE EVENTS.

Funded Amount:

$10,000

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
AFRICAN CULTURAL CENTER OF BUFFALO, INC.
350 MASTEN AVENUE
BUFFALO, NY 14209
(716) 884-2013

AGNES M. BAIN

FUNDS WILL BE USED TO OFFSET EXPENSES OF THE CULTURAL PROGRAMS AT THE CENTER.

$6,000

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ALBANY CENTER GALLERIES, INC.
39 COLUMBIA STREET
ALBANY, NY  12207
(518) 462-4775

Name of Project Director:

SARAH MARTINEZ

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE EXHIBITIONS OF CONTEMPORARY ART BY REGIONAL ARTISTS.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ALDEN CHRISTIAN THEATER SOCIETY, INC.
1470 CHURCH STREET
ALDEN, NY 14004
(716) 432-9102

Name of Project Director:

KATHLEEN SUTTER

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL PROGRAM FUNDS AND COMMUNITY ARTS EDUCATION

Funded Amount:

$5,000

Requested By:

COLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ALL YONKERS YOUTH
331 PACKMAN AVENUE
MT. VERNON, NY 10552
(914) 668-1565

Name of Project Director:

GEORGE BURNS

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION OF STORAGE BUILDING FOR EQUIPMENT

Funded Amount:

$10,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ALLIANCE OF NEW YORK STATE ARTS COUNCILS, INC.
P.O. BOX 96
MATTITUCK, NY 11952
(631) 298-1234

Name of Project Director:

JUDITH KAUFMAN WEINER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NEW COMPUTER EQUIPMENT AND SOFTWARE FOR THE OFFICE.

Funded Amount:

$5,000

Requested By:

BRODSKY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ALLIANCE OF NEW YORK STATE ARTS COUNCILS, INC.
P.O. BOX 96
MATTITUCK, NY  11952
(631) 298-1234

Name of Project Director:

JUDITH KAUFMAN WEINER

Purpose of Project:

FUNDS WILL BE USED TO UPDATE THE ONLINE SERVICES PROVIDED BY THE ARTS COUNCIL.

Funded Amount:

$2,500

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ALLIANCE OF RESIDENT THEATRES  
575 EIGHTH AVENUE, SUITE 1720  
NEW YORK, NY 10018  
(212) 244-6667 229

Name of Project Director:

MARK ROSSIER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ADMINISTRATION OF A.R.T./NEW YORK’S TECHNICAL ASSISTANCE PROGRAMS AND PROVIDE ADMINISTRATIVE TRAININGS FOR ARTISTIC LEADERSHIP SO THEY CAN BETTER FULFILL THE ORGANIZATION’S ARTISTIC MISSIONS.

Funded Amount:

$5,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

AMERICAN CHAMBER ENSEMBLE
9 COMPASS LANE
MASSAPEQUA, NY 11758
(516) 541-9090

Name of Project Director:

NAOMI DRUCKER

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAM

Funded Amount:

$1,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AMERICAN DAY PARADE COMMITTEE
P.O. BOX 790366
MIDDLE VILLAGE, NY 11379

Name of Project Director:

WAYNE VANDERMARK

Purpose of Project:

FUNDS WILL BE USED TO CREATE A 9/11 MEMORIAL GARDEN IN FOREST PARK (DRY HARBOR PLAYGROUND).

Funded Amount:

$1,500

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AMERICAN LABOR STUDIES CENTER, INC.
100 SOUTH SWAN STREET
ALBANY, NY 12210
(518) 436-8516

Name of Project Director:

PAUL F. COLE

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION AND RESTORATION OF KATE MULLANY NATIONAL HISTORIC SITE INCLUDING RESTORATION AND FURNISHING 3RD FLOOR APARTMENT, HISTORIC STAIRWELL, BACK PORCH, BACKYARD, AND DEVELOPMENT OF KATE MULLANY PARK IN TROY, NY.

Funded Amount:

$5,000

Requested By:

GORDON-T

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

AMERICAN MUSEUM OF NATURAL HISTORY
CENTRAL PARK WEST AT 79TH STREET
NEW YORK, NY 10024-5192
(212) 769-5033

Name of Project Director:

DANIEL SLIPPEN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE SENIOR EDUCATIONAL DAY.

Funded Amount:

$4,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

AMERICAN MUSEUM OF THE MOVING IMAGE
35TH AVENUE AND 36TH STREET
ASTORIA, NY  11106
(718) 784-4520

Name of Project Director:

ROCHELLE SLOVIN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE PLANNING, IMPLEMENTATION AND MARKETING OF THE MUSEUM'S CRITICALLY ACCLAIMED FILM AND VIDEO PROGRAMS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

AMERICAN MUSEUM OF THE MOVING IMAGE
35TH AVENUE AT 36TH STREET
ASTORIA, NY 11106
(718) 784-4520

Name of Project Director:

ROCHELLE SLOVIN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE PLANNING, IMPLEMENTATION, AND MARKETING OF THE MUSEUM'S CRITICALLY ACCLAIMED FILM AND VIDEO PROGRAMS.

Funded Amount:

$3,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

AMERICAN REPERTORY THEATER OF WESTERN NEW YORK, INC.
14 COTTAGE STREET, APT. #1
BUFFALO, NY  14201
(716) 884-4858

Name of Project Director:

RENEE FILIP

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE FACILITATION OF SEVERAL COMMUNITY DIALOGUE PROGRAMS.

Funded Amount:

$5,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

AMERICAN SCOTTISH FOUNDATION, INC.
575 MADISON AVENUE - SUITE 10006
NEW YORK, NY 10022
(212) 605-0338

Name of Project Director:

ALAN BAIN

Purpose of Project:

FUNDS WILL BE USED BY THE FOUNDATION TO MAINTAIN THE JOHN MUIR NATURE TRAIL.

Funded Amount:

$5,500

Requested By:

GRANNIS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

AMIGOS DEL MUSEO DEL BARRIO, INC.
1235 5TH AVENUE & 104TH STREET
NEW YORK, NY  10029
(212) 831-7272

Name of Project Director:

DR. JULIA ZUGAZZGOITA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE CULTURAL EXHIBITION.

Funded Amount:

$2,500

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AMSTERDAM WATERFRONT FOUNDATION, INC.
P.O. BOX 636
AMSTERDAM, NY 12010
(518) 843-3050

Name of Project Director:

PAUL GAVRY

Purpose of Project:

FUNDS WILL BE USED FOR THE RIVERLINK CONCERT SERIES IN RIVERLINK PARK.

Funded Amount:

$15,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

AMSTERDAM WATERFRONT FOUNDATION, INC.
P.O. BOX 636
AMSTERDAM, NY  12010
(518) 843-3050

Name of Project Director:

PAUL GAVRY

Purpose of Project:

FUNDS WILL BE USED FOR BEAUTIFICATION EFFORTS IN THE CITY OF AMSTERDAM AND RIVERLINK PARK.

Funded Amount:

$8,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ART EDUCATION FOR THE BLIND, INC.
589 BROADWAY
NEW YORK, NY 10012
(212) 334-8720

Name of Project Director:

JOAN M. PURSLEY

Purpose of Project:

FUNDS WILL BE USED FOR RESEARCH AND WRITING OF VISUAL DESCRIPTIONS OF ART, ARCHITECTURE AND HISTORIC SITES FOR INDIVIDUALS WITH SIGHT LOSS, AND FOR A RECORDING AND WEB PUBLICATION.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ART MISSION LTD.
61 PROSPECT AVENUE
BINGHAMTON, NY  13905
(607) 722-6914

Name of Project Director:

PAUL F. STAPEL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL HEATING AND AIR CONDITIONING UNIT IN A RENOVATED BUILDING WHICH WILL HOUSE A PUBLIC ART THEATER.

Funded Amount:

$7,500

Requested By:

LUPARDO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ARTPEACE, INC.
104 BROOKFIELD ROAD
ROCHESTER, NY  14610-1018
(585) 234-0708

Name of Project Director:

ALLISON ROBERTS

Purpose of Project:

FUNDS WILL BE USED TO CREATE AN INTERACTIVE MURAL INVOLVING THE HISTORY OF FAIRPORT IN THE ENTRANCE WAY TO THE FAIRPORT LIBRARY.

Funded Amount:

$5,000

Requested By:

KOON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ARTS COUNCIL OF ROCKLAND, INC.
7 PERLMAN DRIVE
SPRING VALLEY, NY 10977
(845) 426-3660

Name of Project Director:

MARK JUDELSON

Purpose of Project:

FUNDS WILL BE USED TO REPLACE A 12 YEAR OLD PRINTER WITH CURRENT EQUIPMENT AND TECHNOLOGY. FUNDS WILL ALSO BE USED TO PAY TO PRINT AND DISTRIBUTE "ARTS HAPPENINGS."

Funded Amount:

$4,000

Requested By:

ZEBROWSKI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
ARTS COUNCIL OF ROCKLAND, INC.
7 PERLMAN DRIVE
SPRING VALLEY, NY 10977
(845) 426-3660

MARK JUDELSON

FUNDS WILL BE USED TO PROMOTE PROJECTS THAT BENEFIT ROCKLAND COMMUNITIES AND THAT MEET ARTISTIC STANDARDS. PAST PROJECTS HAVE INCLUDED MOSTLY MUSIC FESTIVAL ON THE HUDSON, CHIKU AWALI AFRICAN DANCE COMPANY PERFORMANCES AT LOCAL HOSPITALS.

$4,000

JAFFEE

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ARTS ON THIRD  
MT VERNON CITY HALL - ONE ROOSEVELT SQUARE  
MT. VERNON, NY  10550  
(914) 699-7230  125

Name of Project Director:

JUDY WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO HIGHLIGHT THE DIVERSE MUSIC AND ARTISTIC TRADITIONS IN THE COMMUNITY AND TO STIMULATE ECONOMIC DEVELOPMENT.

Funded Amount:

$5,000

Requested By:

PRETLOW

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
ARTS SOCIETY OF KINGSTON, INC.
97 BROADWAY
KINGSTON, NY 12401
(845) 338-0331

VINDORA WIXOM

FUNDS WILL BE USED FOR RESEARCH, PREPARATION, AND EXECUTION OF INTERNATIONAL DUTCH/NEW YORK ARTS EXCHANGE/TOURISM INITIATIVE CULMINATING DURING OFFICIAL QUADRICENTENNIAL IN 2009.

$30,000

CAHILL

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ASTORIA MUSIC SOCIETY, INC.
25-90 35TH STREET
ASTORIA, NY 11103
(718) 721-8311

Name of Project Director:

EVELYN GRIFFITHS

Purpose of Project:

FUNDS WILL BE USED TO ENRICH RESIDENTS MUSICALLY THROUGH CONCERTS AND PERFORMANCES BY THE ASTORIA SYMPHONY.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BABYLON CITIZENS COUNCIL ON THE ARTS
47 WEST MAIN STREET, SUITE 4
BABYLON, NY 11702
(631) 587-3696

Name of Project Director:

RAY ZACCARO

Purpose of Project:

FUNDS WILL BE USED TO HELP FUND UPCOMING PROGRAMMING FOR 2007

Funded Amount:

$10,000

Requested By:

BOYLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BABYLON CITIZENS COUNCIL ON THE ARTS
47 WEST MAIN STREET
BABYLON, NY 11702
(631) 587-3696

Name of Project Director:

RAYMOND F. ZACCARO

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM DEVELOPMENT

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BALLET ARTISTS OF WNY, INC.
1685 ELMWOOD AVENUE, 3RD FLOOR
BUFFALO, NY  14207
(716) 447-0401

Name of Project Director:

HEIDI HALT

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF RUNNING THE SCHOLARSHIP PROGRAM.

Funded Amount:

$5,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BALLET TECH FOUNDATION, INC.
890 BROADWAY
NEW YORK, NY 10003
(212) 777-7710

Name of Project Director:

SHANNON SHERIDAN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE A TUITION-FREE BALLET TECH SCHOOL FOR NYC PUBLIC SCHOOL STUDENTS CITYWIDE.

Funded Amount:

$2,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BALLET TECH FOUNDATION, INC.
890 BROADWAY
NEW YORK, NY  10003
(212) 777-7710  323

Name of Project Director:

SHANNON SHERIDAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE NYC PUBLIC SCHOOL STUDENTS WITH FREE BALLET TRAINING ALONGSIDE A PUBLIC ACADEMIC EDUCATION. EVERY YEAR 25,000 NYC PUBLIC SCHOOL CHILDREN AUDITION AND 800 STUDENTS ENROLL IN THE TUITION-FREE BALLET TECH SCHOOL.

Funded Amount:

$3,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BALLET THEATRE FOUNDATION, INC.
890 BROADWAY
NEW YORK, NY 10033
(212) 477-3030

Name of Project Director:

GRETCHEN LIGA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE STUDENTS WITH A HANDS ON OPPORTUNITY TO CREATE, PRODUCE, AND EXECUTE AN ORIGINAL DANCE PERFORMANCE UNDER THE COMBINED EXPERTISE OF SCHOOL AND ABT TEACHING ARTISTS.

Funded Amount:

$5,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BALLSTON SPA ROTARY CLUB
36 HYDE BOULEVARD
BALLSTON SPA, NY 12020
(518) 885-5986

Name of Project Director:

ANTHONY MARIANI

Purpose of Project:

FUNDS WILL BE USED FOR PURCHASE OF A USED TRAILER FOR CLUB FUNDRAISING EVENTS

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BARTOW-PELL LANDMARK FUND
895 SHORE ROAD, PELHAM BAY PARK
BRONX, NY  10464
(718) 885-1461

Name of Project Director:

CLARISSA CYLICH

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS FOR CHILDREN FROM DAY CAMP IN NEW ROCHELLE TO VISIT THE MUSEUM TO LEARN ABOUT LIFE IN NEW YORK IN THE 1860'S.

Funded Amount:

$1,200

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BARTOW-PELL LANDMARK FUND
895 SHORE DRIVE
BRONX, NY 10464
(718) 885-9164

Name of Project Director:

CLARISSA CYLICH

Purpose of Project:

FUNDS WILL BE USED TO HELP THE BARTOW-PELL MANSION MUSEUM RUN EDUCATIONAL PROGRAMS FOR LOCAL CHILDREN AND DEFRAY THE COSTS OF SUPPLIES.

Funded Amount:

$2,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BAY AREA FRIENDS OF THE FINE ARTS
P.O. BOX 16
BAYPORT, NY 11705
(631) 589-7343

Name of Project Director:

HELMUT NORPOTH

Purpose of Project:

FUNDS WILL BE USED TO PRESENT FREE CONCERTS TO THE PUBLIC.

Funded Amount:

$2,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BAY IMPROVEMENT GROUP, INC.
P.O. BOX 351115
BROOKLYN, NY 11235
(718) 646-9206

Name of Project Director:

STEVEN BARRISON

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE ANNUAL BAYFEST CELEBRATING THE MARINE SHIPS AND WATERFRONT OF SHEEPSHEAD BAY.

Funded Amount:

$2,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BAY IMPROVEMENT GROUP, INC.
30 DOOLEY STREET
BROOKLYN, NY 11235
(718) 646-9206

Name of Project Director:

STEVEN BARRISON

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE BAYFEST CELEBRATION WHICH PROMOTES THE WATERFRONT AREA THROUGH SPONSORSHIPS, DIRECT MARKETING, AND ADVERTISING.

Funded Amount:

$1,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BAY STREET THEATRE
P.O. BOX 810
SAG HARBOR, NY 11963
(631) 725-0818

Name of Project Director:

STEPHEN HAMILTON

Purpose of Project:

FUNDS WILL BE USED FOR THEATRICAL PROJECTS

Funded Amount:

$7,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BAYSIDE HISTORICAL SOCIETY
BUILDING 208, BOX 6 - FT. TOTTEN
BAYSIDE, NY  11359
(718) 352-1548

Name of Project Director:

GERALDINE SPINELLA

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE ON-GOING EDUCATIONAL PROGRAMS FOR THE LOCAL SCHOOL DISTRICT.

Funded Amount:

$2,500

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BELLPORT FILM SOCIETY, INC.
P.O. BOX 441
BELLPORT, NY  11713
(631) 286-1910

Name of Project Director:

JEFF KORN

Purpose of Project:

FUNDS WILL BE USED TO PAY COSTS ASSOCIATED WITH FILM SCREENINGS FOR THE COMMUNITY.

Funded Amount:

$1,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BELLPORT-BROOKHAVEN HISTORICAL SOCIETY
31 BELLPORT LANE
BELLPORT, NY  11713
(631) 286-6129

Name of Project Director:

CAROL BLISFER

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH EXPENSES ASSOCIATED WITH THE
OPERATION OF THE BELLPORT-BROOKHAVEN HISTORICAL SOCIETY, SUCH
AS PRINTING, POSTAGE, AND OTHER OFFICE EXPENSES.

Funded Amount:

$1,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BILLIE HOLIDAY THEATRE, INC.
1368 FULTON STREET
BROOKLYN, NY 11216
(718) 636-0918

Name of Project Director:

MAJORIE MOON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A 40 WEEK SEASON OF PLAYS BY AFRICAN-AMERICAN WRITERS WHOSE WORK REFLECTS THE ATTITUDES AND CONCERNS OF THE COMMUNITY IN A MANNER WHICH ENLIGHTENS AS WELL AS ENTERTAINS.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BINGHAMTON IMAGININK, INC.
19 CHENANGO STREET
BINGHAMTON, NY 13901
(607) 656-4127

Name of Project Director:

JENNIFER O'BRIEN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SUPPLIES FOR WORKSHOPS INCLUDING PAINT, BRUSHES, CLAY ETC. FUNDS WILL ALSO BE USED FOR MARKETING AND TRAINING MATERIALS TO TEACH NEW VOLUNTEERS AND FACILITATORS.

Funded Amount:

$5,000

Requested By:

LUPARDO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BLACK MOON THEATRE COMPANY, INC.
5 NORTH 11TH STREET
BROOKLYN, NY 11211
(718) 302-1700

Name of Project Director:

LORI VINCENT

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL OUTREACH PROGRAMS FOR KIDS IN THE GREENPOINT COMMUNITY.

Funded Amount:

$4,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BLACK SPECTRUM THEATRE CO., INC.
ROY WILKINS PARK, 177TH STREET & BAISLEY BLVD.
JAMAICA, NY   11434
(718) 723-1800

Name of Project Director:

CARL CLAY

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE CULTURAL ACTIVITIES IN SOUTHEAST QUEENS.

Funded Amount:

$10,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BOYS AND GIRLS HARBOR, INC.
ONE EAST 104TH STREET, SUITE 527
NEW YORK, NY 10029
(212) 427-2244

Name of Project Director:

RAMON RODRIGUEZ

Purpose of Project:

FUNDS WILL BE USED TO DOCUMENT AND MAKE ACCESSIBLE THE EVOLUTION AND HISTORY OF LATIN MUSIC IN NEW YORK CITY SINCE THE 1930'S TO PRESENT DAY.

Funded Amount:

$5,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BRIGHTON BALLET THEATER CO., INC.
KINSBOROUGH COMMUNITY COLLEGE, 2001 ORIENTAL BLVD., T7, 2ND.
BROOKLYN, NY 11235
(718) 769-9161

Name of Project Director:

IRINA ROIZIN

Purpose of Project:

FUNDS WILL BE USED FOR THE FESTIVAL WHICH IS SEEN BY THOUSANDS OF PEOPLE EACH YEAR AND INCLUDES DANCE PIECES FROM A WIDE RANGE OF CULTURES. THE FESTIVAL IS A SELECTION OF THE DIVERSITY AND ARTISTIC TALENT IN THE BROOKLYN COMMUNITY.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROADWAY MALL MAINTENANCE FUND, INC.
P.O. BOX 250234, COLUMBIA UNIVERSITY SUBSTATION
NEW YORK, NY 10025
(212) 491-6470

Name of Project Director:

ROBERT HERRMANN

Purpose of Project:

FUNDS WILL BE USED FOR MAINTENANCE, CLEANING, NEW PLANTINGS, AND HORTICULTURAL PROGRAMS ON THE LANDSCAPED MEDIANS ALONG BROADWAY FROM 70TH STREET TO 168TH STREET.

Funded Amount:

$3,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BRONX ARTS ENSEMBLE, INC.
80 VAN CORTLANDT PARK SOUTH, SUITE 7D-1
BRONX, NY  10463
(718) 601-7399

Name of Project Director:

WILLIAM SCRIBNER

Purpose of Project:

FUNDS WILL BE USED FOR THE PRODUCTION OF FREE OR LOW COST CONCERTS TO BRONX RESIDENTS, INCLUDING FAMILY CONCERTS AT THE NEW YORK BOTANICAL GARDEN, AND FREE CONCERTS IN VAN CORTLANDT PARK ON MEMORIAL DAY WEEKEND AND THROUGHOUT THE SUMMER.

Funded Amount:

$26,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX COUNCIL ON THE ARTS, INC.
1738 HUNE AVENUE
BRONX, NY 10461
(718) 931-9500

Name of Project Director:

WILLIAM AGUADO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A DISCOUNT CARD TO ALL MEMBERS OF THE COMMUNITY.

Funded Amount:

$5,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX COUNCIL ON THE ARTS, INC.
1738 HONE AVENUE
BRONX, NY 10461
(914) 632-4829

Name of Project Director:

YVETTE B. WILLIAMS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MATERIALS/SUPPLIES AND SUPPLEMENTAL INSTRUCTION FOR THE COMMUNITY DANCE PROGRAM. THIS PROGRAM OFFERS AN OPPORTUNITY FOR YOUNG ADULTS TO GAIN INSTRUCTION IN THE ARTS OF DANCE AND PERFORMANCE.

Funded Amount:

$3,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX COUNTY HISTORICAL SOCIETY
3309 BAINBRIDGE AVENUE
BRONX, NY  10467
(718) 881-8900

Name of Project Director:

GARY D. HERMALYN

Purpose of Project:

FUNDS WILL BE USED TO INVESTIGATE SOURCES OF MATERIAL ON AFRICAN-AMERICAN EXPERIENCE BY RESEARCHING LIBRARIES, INTERVIEWING PRIVATE CITIZENS, AND CONTACTING ASSOCIATIONS.

Funded Amount:

$10,000

Requested By:

BENJAMIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX COUNTY HISTORICAL SOCIETY
3309 BAINBRIDGE AVENUE
BRONX, NY 10467
(718) 881-8900

Name of Project Director:

DR. GARY HERMALYN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SETS OF THE "HISTORY OF LIFE" SERIES OF BOOKS ON THE BRONX AND DONATE THE SET TO SCHOOL LIBRARIES.

Funded Amount:

$5,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX COUNTY HISTORICAL SOCIETY
3309 BAINBRIDGE AVENUE
BRONX, NY  10467
(718) 881 – 8900

Name of Project Director:

DR. GARY HERMALYN, EXECUTIVE DIRECTOR

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL OPERATING SUPPORT OF THE BRONX COUNTY HISTORICAL SOCIETY.

Funded Amount:

$30,000

Requested By:


Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY 10456
(718) 681-6000

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED BY THE MUSEUM FOR PUBLIC EXHIBITIONS AND EDUCATIONAL PROGRAMS.

Funded Amount:

$7,000

Requested By:

ARROYO, BENEDETTI, BENJAMIN, DIAZ-L, DIAZ-R, DINOWITZ, GREENE, HEASTIE, RIVERA-J, RIVERA-N, RIVERA-P

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY  10456
(718) 681-6000

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS, PUBLIC AND EDUCATION PROGRAMS DESIGNED TO INCREASE ACCESS TO, AND APPRECIATION OF, CONTEMPORARY ARTS AND ART PRACTICES. THESE ESSENTIAL PROGRAMS ARE TARGETTED TO BRONX STUDENTS, YOUTH, AND FAMILIES, AS WELL AS ARTISTS AND THE GENERAL VIEWING PUBLIC.

Funded Amount:

$7,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY 10456-3999
(718) 681-6000

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS, PUBLIC, AND EDUCATIONAL PROGRAMS DESIGNED TO INCREASE ACCESS TO, AND APPRECIATION OF, CONTEMPORARY ARTS AND ART PRACTICES. THESE PROGRAMS ARE TARGETED TO BRONX STUDENTS AND FAMILIES, AS WELL AS, ARTISTS AND THE GENERAL VIEWING PUBLIC.

Funded Amount:

$3,000

Requested By:

ARROYO, BENEDETTO, BENJAMIN, DIAZ-L, DIAZ-R, DINOWITZ, GREENE, HEASTIE, RIVERA-J, RIVERA-N, RIVERA-P

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY 10456-3999
(718) 681-6000

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS, PUBLIC AND EDUCATIONAL PROGRAMS DESIGNED TO INCREASE ACCESS TO, AND APPRECIATION OF, CONTEMPORARY ARTS AND ART PRACTICES. THESE ESSENTIAL PROGRAMS ARE TARGETED TO BRONX STUDENTS, YOUTH AND FAMILIES, AS WELL AS ARTISTS AND THE GENERAL VIEWING PUBLIC.

Funded Amount:

$8,159

Requested By:

ARROYO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY 10456-3999
(718) 681-6000

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS, PUBLIC AND EDUCATIONAL PROGRAMS.

Funded Amount:

$7,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY 10456-3999
(718) 681-6000

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS, PUBLIC, AND EDUCATIONAL PROGRAMS DESIGNED TO INCREASE ACCESS TO AND APPRECIATION OF CONTEMPORARY ARTS AND ART PRACTICES. THESE ESSENTIAL PROGRAMS ARE TARGETTED TO BRONX STUDENTS, YOUTH AND FAMILIES, AS WELL AS, ARTISTS AND THE GENERAL VIEWING PUBLIC.

Funded Amount:

$7,000

Requested By:

ARROYO, BENEDETTO, BENJAMIN, DIAZ-L, DIAZ-R, DINOWITZ, GREENE, HEASTIE, RIVERA-J, RIVERA-N, RIVERA-P

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY 10456-3999
(718) 681-6000

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS, PUBLIC, AND EDUCATION PROGRAMS DESIGNED TO INCREASE ACCESS TO AND, APPRECIATION OF, CONTEMPORARY ARTS AND PRACTICES.

Funded Amount:

$7,000

Requested By:

ARIOYO, BENEDETTO, BENJAMIN, DIAZ-L, DIAZ-R, DINOWITZ, GREENE, HEASTIE, RIVERA-J, RIVERA-N, RIVERA-P

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY  10456-3999
(718) 681-6000

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS, PUBLIC AND EDUCATIONAL PROGRAMS DESIGNED TO INCREASE ACCESS TO, AND APPRECIATION OF, CONTEMPORARY ARTS AND ART PRACTICES. THESE ESSENTIAL PROGRAMS ARE TARGETED TO BRONX STUDENTS, YOUTH, AND FAMILIES, AS WELL AS, ARTISTS AND THE GENERAL VIEWING PUBLIC.

Funded Amount:

$7,000

Requested By:

RIVERA-J

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY  10456
(718) 681-6000  130

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EXHIBITIONS, PUBLIC AND EDUCATION PROGRAMS DESIGNED TO INCREASE ACCESS TO AND APPRECIATION OF CONTEMPORARY ART AND ART PRACTICES. THESE ESSENTIAL CULTURAL PROGRAMS TARGET BRONX STUDENTS, YOUTH AND FAMILIES IN ADDITION TO ARTISTS AND THE GENERAL VIEWING PUBLIC.

Funded Amount:

$10,000

Requested By:

GREENE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY 10456-3999
(718) 681-6000

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS, PUBLIC, AND EDUCATION PROGRAMS DESIGNED TO INCREASE ACCESS TO, AND APPRECIATION OF, CONTEMPORARY ARTS AND ART PRACTICES. THESE ESSENTIAL PROGRAMS ARE TARGETED TO BRONX STUDENTS, YOUTH AND FAMILIES.

Funded Amount:

$7,000

Requested By:

RIVERA-N

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX MUSEUM OF THE ARTS
1040 GRAND CONCOURSE
BRONX, NY 10456
(718) 681-6000

Name of Project Director:

HOLLY BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS, PUBLIC, AND EDUCATION PROGRAMS DESIGNED TO INCREASE ACCESS TO, AND APPRECIATION OF, CONTEMPORARY ARTS AND ART PRACTICES.

Funded Amount:

$8,900

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX OPERA COMPANY, INC.
5 MINERVA PLACE
BRONX, NY 10468
(718) 365-4209

Name of Project Director:

MICHAEL SPIERMAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT LOW-COST, FULL OPERA PRODUCTIONS IN THE BRONX COMMUNITY. FUNDS WILL ALSO ALLOW STUDENTS AND SENIOR CITIZENS TO ATTEND LIVE OPERA PERFORMANCES.

Funded Amount:

$22,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BRONX ZOO
2300 SOUTHERN BOULEVARD
BRONX, NY  10460
(718) 220-7139

Name of Project Director:

N. ROBINSON

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATION INSTRUCTORS AND TEACHER TRAINERS - TEACHING STRATEGIES AND MODEL ACTIVITIES TO ENHANCE CLASSROOM LIFE SCIENCE INSTRUCTION.

Funded Amount:

$7,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN ACADEMY OF MUSIC, INC.
30 LAFAYETTE AVENUE
BROOKLYN, NY 11217
(718) 636-4138

Name of Project Director:

KAREN BROOKS-HOPKINS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS AND THE PROMOTION OF CONCERTS AND MUSICAL PRODUCTIONS.

Funded Amount:

$1,458

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN ACADEMY OF MUSIC, INC.
30 LAFAYETTE AVENUE
BROOKLYN, NY 11217
(718) 636-4138

Name of Project Director:

KAREN BROOKS-HOPKINS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS AND FOR THE PROMOTION OF CONCERTS AND MUSICAL PRODUCTIONS.

Funded Amount:

$20,664

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN ACADEMY OF MUSIC, INC.
30 LAFAYETTE AVENUE
BROOKLYN, NY 11217-1486
(718) 636-4132

Name of Project Director:

KAREN BROOKS-HOPKINS

Purpose of Project:

FUNDS WILL BE USED TO BRING PERFORMING ARTS PROGRAMS TO PUBLIC SCHOOLS IN WILLIAMSBURG, FORT GREEN AND GREENPOINT.

Funded Amount:

$6,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN ARTS COUNCIL
55 WASHINGTON STREET, SUITE 218
BROOKLYN, NY 11201
(718) 625-0080

Name of Project Director:

ELLA WEISS

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT ARTS PROGRAMS IN THE SCHOOLS, SENIOR CENTERS AND COMMUNITY GROUPS.

Funded Amount:

$22,000

Requested By:

CAMARA, MAISEL, MILLMAN, ORTIZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN ARTS COUNCIL
55 WASHINGTON STREET, SUITE 218
BROOKLYN, NY 11201
(718) 625-0080

Name of Project Director:

ELLA WEISS

Purpose of Project:

FUNDS WILL BE USED FOR WEBSITE AND DATABASE ENHANCEMENTS.

Funded Amount:

$3,000

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN BRIDGE PARK CONSERVANCY, INC.
334 FURMAN STREET
BROOKLYN, NY  11201
(718) 802-0603

Name of Project Director:

SHANNON MEYERS

Purpose of Project:

FUNDS WILL BE USED FOR THE PRINTING OF A NEWSLETTER HIGHLIGHTING PARK UPDATES, FOR ADVOCACY AND FREE PUBLIC PROGRAMS PRESENTED BY BROOKLYN BRIDGE PARK CONSERVANCY.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
BROOKLYN CONSERVATORY OF MUSIC
58 SEVENTH AVENUE
BROOKLYN, NY 11217
(718) 622-3300

ALAN FOX

FUNDS WILL BE USED TO PROVIDE MUSIC EDUCATION TO SCHOOLS AND COMMUNITY CENTERS IN BROOKLYN, WHICH SERVE 2,000 STUDENTS A YEAR.

$2,500

MILLMAN

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN CRICKET LEAGUE, INC.
518 EAST 42ND STREET
BROOKLYN, NY  11203
(917) 865-1888

Name of Project Director:

PATRICK SUTHERLAND

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY FEES ASSOCIATED WITH USE OF THE PARKS FOR CRICKET MATCHES.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN INFORMATION AND CULTURE, INC.
647 FULTON STREET
BROOKLYN, NY  11217
(718) 855-7882

Name of Project Director:

LESLIE SCHULTZ

Purpose of Project:

FUNDS WILL BE USED TO PRESENT MULTI-CULTURAL AND FAMILY PERFORMANCES AT ANNUAL "CELEBRATE BROOKLYN" CONCERT SERIES AND ARTS EDUCATION PROGRAMS AT THE ROTUNDA GALLERY.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN INFORMATION AND CULTURE, INC.
647 FULTON STREET
BROOKLYN, NY 11217
(718) 855-7882 30

Name of Project Director:

SHANNON SNEAD

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT FREE PERFORMANCES, ARTS AND MEDIA EDUCATION PROGRAMS, AND THE BROOKLYN INDEPENDENT TELEVISION INITIATIVE.

Funded Amount:

$5,000

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN INFORMATION AND CULTURE, INC.
647 FULTON STREET
BROOKLYN, NY  11217
(718) 855-7882  30

Name of Project Director:

SHANNON SNEAD

Purpose of Project:

FUNDS WILL BE USED IN SUPPORT OF THE CELEBRATE BROOKLYN PERFORMING ARTS FESTIVAL AND BCAT - BROOKLYN INDEPENDENT TELEVISION PROGRAMMING.

Funded Amount:

$5,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN INFORMATION AND CULTURE, INC.
647 FULTON STREET – 2ND FLOOR
BROOKLYN, NY 11217
(718) 855 – 7882

Name of Project Director:

JUNE POSTER, MANAGING DIRECTOR

Purpose of Project:

FUNDS WILL BE USED TO OFFSET GENERAL OPERATING EXPENSES.

Funded Amount:

$20,000

Requested By:

ABBATE, BOYLAND, BRENNAN, CAMARA, COHEN – A, COLTON, CYMBROWITZ – S, HIKIND, HYER – SPENCER, JACOBS, JEFFRIES, LENTOL, LOPEZ – V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN INSTITUTE OF ARTS AND SCIENCES
200 EASTERN PARKWAY
BROOKLYN, NY 11238
(718) 638-5000

Name of Project Director:

DR. ARNOLD LEHMAN

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL PROGRAMS AND FOR THE PROMOTION OF MUSEUM PROGRAMS AND EXHIBITS.

Funded Amount:

$15,664

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY  11201
(718) 488-7012

Name of Project Director:

CATHY CAHILL

Purpose of Project:

FUNDS WILL BE USED FOR FREE CONCERTS, IN-STATE TRIPS, AND MUSIC ARTS INSTRUCTION.

Funded Amount:

$10,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY   11201
(718) 622-5555

Name of Project Director:

CATHERINE CAHILL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A RANGE OF EDUCATION AND COMMUNITY OUTREACH PROGRAMS SERVING A DIVERSE POPULATION OF STUDENTS, SENIOR CITIZENS AND UNDERSERVED CONSTITUENCIES IN THE BOROUGH OF BROOKLYN.

Funded Amount:

$2,500

Requested By:

ABBATE, CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY 11201
(718) 488-5700

Name of Project Director:

CATHERINE CAHILL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MUSIC EDUCATION FOR SENIORS AND CHILDREN AT MARINE PARK, YOUNG ISRAEL OF BEDFORD BAY AND MIDWOOD SENIOR CENTERS, AND AT PS 206 AND PS 194.

Funded Amount:

$2,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY  11201
(718) 488-5700

Name of Project Director:

CATHERINE CAHILL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE MUSIC PROGRAM BETWEEN BROOKLYN PHILHARMONIC AND PUBLIC SCHOOL 503.

Funded Amount:

$4,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY 11201
(718) 488-5700

Name of Project Director:

CATHERINE CAHILL

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH THE AFTER SCHOOL PROGRAM.

Funded Amount:

$4,250

Requested By:

BOYLAND

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138a COURT STREET
BROOKLYN, NY 11201
(718) 488-5902

Name of Project Director:

MARIE WATSON

Purpose of Project:

FUNDS WILL BE USED TO UNDERWRITE EXPENSES ASSOCIATED WITH PUBLIC SCHOOL MUSIC EDUCATION PROGRAMS.

Funded Amount:

$5,000

Requested By:

JACOBS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY  11201
(718) 488-5700

Name of Project Director:

CATHERINE CAHILL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OPPORTUNITIES FOR IMPROVED LEARNING AND DELINQUENCY PREVENTION FOR BROOKLYN’S NEEDIEST NEIGHBORHOODS THROUGH CULTURAL, ACADEMIC, AND SOCIAL ACTIVITIES.

Funded Amount:

$2,500

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY 11201
(718) 488-7014

Name of Project Director:

MARIA WATSON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMPREHENSIVE MUSIC PROGRAMS FOR STUDENTS, MENTORING FOR YOUNG MUSICIANS AND FREE CONCERT TICKETS TO COMMUNITY GROUPS.

Funded Amount:

$2,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY 11201
(718) 488-5700

Name of Project Director:

CATHERINE CAHILL

Purpose of Project:

FUNDS WILL BE USED FOR MENTORING PROGRAMS FOR YOUNG MUSICIANS WHO ARE PAIRED UP WITH PROFESSIONAL MUSICIANS.

Funded Amount:

$5,000

Requested By:

TOWNS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138 A COURT STREET
BROOKLYN, NY  11201
(718) 488-5700

Name of Project Director:

CATHERINE CAHILL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE PROGRAMMING OF THE BROOKLYN PHILHARMONIC IN LOCAL SCHOOLS (I.E. PS 222).

Funded Amount:

$2,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY  11201
(718) 488-5700

Name of Project Director:

ROBERT DAVIDSON

Purpose of Project:

FUNDS WILL BE USED FOR THE BROOKLYN PHILHARMONIC WHICH PROVIDES CRITICAL PROGRAMMING TO BROOKLYN'S NEEDIEST NEIGHBORHOODS, WITH THE GOAL OF PROMOTING WELL-BEING ACADEMIC ACHIEVEMENT AND SOCIAL SUCCESS OF CHILDREN AND THEIR FAMILIES THROUGH A VARIETY OF CULTURAL, ACADEMIC AND SOCIAL ACTIVITIES.

Funded Amount:

$2,500

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY  11201
(718) 488-5700

Name of Project Director:

CATHERINE M. CAHILL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE CONCERT TICKETS TO COMMUNITY GROUPS, TO ENSURE THAT ALL MEMBERS OF THE COMMUNITY CAN ATTEND LIVE CONCERTS.

Funded Amount:

$1,500

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON, CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V, MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY 11201
(718) 488-5902

Name of Project Director:

CATHERINE CAHILL

Purpose of Project:

FUNDS WILL BE USED TO ENABLE CHILDREN AND THE COMMUNITY TO EXPERIENCE ORCHESTRAL MUSIC, DURING SCHOOL AND AFTER SCHOOL HOURS. THE PROGRAM PROVIDES A SAFE AND SECURE ENVIRONMENT WHERE YOUNG PEOPLE CAN STUDY, PRACTICE OR PARTICIPATE IN A WIDE VARIETY OF MUSIC, CULTURAL ARTS, ACADEMIC AND SOCIAL PROGRAMS.

Funded Amount:

$3,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY 11201
(718) 488-5700

Name of Project Director:

ROB DAVIDSON

Purpose of Project:

FUNDS WILL BE USED TO DELIVER CRITICAL PROGRAMMING TO BROOKLYN'S NEEDIEST NEIGHBORHOODS, WITH THE GOAL OF PROMOTING THE WELL-BEING, ACADEMIC ACHIEVEMENT, AND SOCIAL SUCCESS OF CHILDREN AND FAMILIES THROUGH A VARIETY OF CULTURAL, ACADEMIC AND SOCIAL ACTIVITIES.

Funded Amount:

$3,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY 11201
(718) 488-5700

Name of Project Director:

CATHERINE CAHILL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MENTORING PROGRAMS FOR YOUNG MUSICIANS AND PROFESSIONALS AFTER SCHOOL AS WELL AS TO PROVIDE SPECIAL PROJECTS WITH A LOCAL SOCIAL SERVICE AGENCY.

Funded Amount:

$2,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY 11201
(718) 488-5700

Name of Project Director:

MICHAEL CHRISTIE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A RANGE OF EDUCATION AND COMMUNITY OUTREACH PROGRAM SERVING A DIVERSE POPULATION OF STUDENTS, SENIOR CITIZENS, AND UNDERSERVED CONSTITUENCIES IN THE BOROUGH OF BROOKLYN.

Funded Amount:

$5,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BROOKLYN PHILHARMONIC SYMPHONY ORCHESTRA, INC.
138A COURT STREET
BROOKLYN, NY  11201
(718) 488-5700

Name of Project Director:

CATHERINE M. CAHILL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE CONCERT TICKETS TO COMMUNITY GROUPS, TO ENSURE THAT ALL MEMBERS OF THE COMMUNITY CAN ATTEND LIVE CONCERTS. CONCERT TICKETS ARE MADE AVAILABLE TO SENIOR CITIZENS AND SPECIAL VISITS TO SENIOR CITIZEN CENTERS WILL BE PROVIDED BY MUSICIANS AND TEACHING ARTISTS.

Funded Amount:

$5,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BUFFALO INNER CITY BALLET CO., INC.
2495 MAIN STREET, SUITE 351
BUFFALO, NY 14214
(716) 864-1832

Name of Project Director:

MARVIN ASKEW

Purpose of Project:

FUNDS WILL BE USED FOR RECREATIONAL AND CULTURAL PERFORMANCES AND FOR SERVICES FOR YOUTH AFTER SCHOOL AND DURING THE SUMMER.

Funded Amount:

$4,500

Requested By:

PEOPLES

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007 – 2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BUFFALO NAVAL PARK COMMITTEE, INC.
ONE NAVAL PARK COVE
BUFFALO, NY 14202
(716) 847-1773

Name of Project Director:

PATRICK CUNNINGHAM

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL OPERATING SUPPORT.

Funded Amount:

$50,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

BUFFALO PHILHARMONIC ORCHESTRA
499 FRANKLIN STREET
BUFFALO, NY  14202
(716) 885 – 0331

Name of Project Director:

KAREN COX

Purpose of Project:

FUNDS WILL BE USED TO OFFSET GENERAL OPERATING EXPENSES OF THE PHILHARMONIC ORCHESTRA.

Funded Amount:

$50,000

Requested By:

GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CAN YOU DIG IT, INC.
48 NARRANGANSETT ROAD
BUFFALO, NY 14220
(716) 983-8094

Name of Project Director:

RAYMOND MCGURN

Purpose of Project:

FUNDS WILL BE USED FOR A CULTURAL ENRICHMENT PROGRAM WHICH WILL INCLUDE LIVE MUSIC AND FIREWORKS FOR APPROXIMATELY 2,000 PEOPLE.

Funded Amount:

$14,000

Requested By:

SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CANARSIE HISTORY MUSEUM
1130 EAST 92ND STREET
BROOKLYN, NY  11236
(718) 649-5083

Name of Project Director:

RAMON MARTINEZ

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS ASSOCIATED WITH MUSEUM EXHIBITIONS.

Funded Amount:

$4,500

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CANARSIE HISTORY MUSEUM
1130 EAST 92ND STREET
BROOKLYN, NY  11236
(917) 880-5676

Name of Project Director:

RAMON MARTINEZ

Purpose of Project:

FUNDS WILL BE USED TO REPLACE SHELVES AND HARDWOOD FLOORS.

Funded Amount:

$3,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CAPITAL CULTURE, INC.
C/O CAPITAL REPERTORY THEATRE
111 N. PEARL STREET, ALBANY, NY 12207
(518) 462–4531

Name of Project Director:

JOHN PRIVITERA, PRESIDENT

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT ARTS AND CULTURE ORGANIZATIONS WITHIN THE CAPITAL DISTRICT AREA.

Funded Amount:

$150,000

Requested By:

CANESTRARI, MCENENY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CARIBBEAN CULTURAL THEATER, INC.
138 SOUTH OXFORD STREET, SUITE 4A
BROOKLYN, NY 11217
(718) 783-8345

Name of Project Director:

E. WAYNE MCDONALD

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SPOKEN WORD AND DRAMATIC PRESENTATIONS FOR BROOKLYN'S DIVERSE COMMUNITIES WITH A SPECIFIC FOCUS ON THE BOROUGHS' CARIBBEAN POPULATION.

Funded Amount:

$10,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CATTARAUGUS COUNTY ARTS COUNCIL  
P.O. BOX 406  
OLEAN, NY 14760  
(716) 372-7455

Name of Project Director:

ANN CONROY-BAITER

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT CULTURAL TOURISM INITIATIVE

Funded Amount:

$5,000

Requested By:

GIGLIO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CATTARAUGUS COUNTY YOUTH BUREAU
200 ERIE STREET
LITTLE VALLEY, NY 14755
(716) 938-9111  2611

Name of Project Director:

DR. ANTHONY EVANS

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH BUREAU PROGRAM SUPPORT

Funded Amount:

$6,000

Requested By:

GIGLIO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CENTER FOR EXPLORATORY AND PERCEPTUAL ARTS, INC.
617 MAIN STREET, RM. 201
BUFFALO, NY  14203
(716) 856-2717  13

Name of Project Director:

LAWRENCE BROSE

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET COSTS ASSOCIATED WITH THE TECHNOLOGY ENHANCEMENT PROGRAM.

Funded Amount:

$4,500

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CENTER FOR JEWISH HISTORY, INC.
15 WEST 16TH STREET
NEW YORK, NY 10011
(212) 254 – 8301

Name of Project Director:

BRUCE SLOVIN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE GENERAL OPERATING SUPPORT OF THE CENTER AND ITS EDUCATION, OUTREACH PROGRAMS RELATED TO THE PRESERVATION OF THE JEWISH HERITAGE.

Funded Amount:

$50,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CENTRAL NEW YORK COMMUNITY ARTS COUNCIL
261 GENESEE STREET
UTICA, NY 13501
(315) 724-1113

Name of Project Director:

LESLEY TILLOTSON

Purpose of Project:

FUNDS WILL BE USED FOR ARTS IN EDUCATION INSTITUTE PROGRAM FOR 2007 IN CLINTON CENTRAL SCHOOL DISTRICT

Funded Amount:

$10,000

Requested By:

TOWNSEND

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CENTRAL QUEENS HISTORICAL ASSOCIATION, INC.
P.O. BOX N
KEW GARDENS, NY  11415
(718) 896-4416

Name of Project Director:

JEFFREY GOTTLIEB

Purpose of Project:

FUNDS WILL BE USED TO RAISE THE CONSCIOUSNESS OF THE RESIDENTS OF CENTRAL QUEENS TO THE HISTORICAL BACKGROUND OF THEIR NEIGHBORHOOD.

Funded Amount:

$2,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CENTRAL QUEENS HISTORICAL ASSOCIATION, INC.
P.O. BOX N
KEW GARDENS, NY  11415
(718) 896-4416

Name of Project Director:

JEFF GOTTlieb

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AN ARCHIVE OF QUEENS HISTORY BY REPRODUCING OLD PHOTOS, ARTICLES, DIARY AND JOURNAL ENTRIES FOR THE ARCHIVES, AS WELL AS POSTAGE FOR MAILINGS.

Funded Amount:

$1,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CENTRO CULTURAL BALLET QUISQUEYA, INC.
P.O. BOX 500 AUDUBON STATION
NEW YORK, NY 10032
(212) 795-0107

Name of Project Director:

NORMANDIA MALDONADO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CULTURAL AND RECREATIONAL SERVICES TO COMMUNITY YOUTH WITH A SPECIAL EMPHASIS GIVEN TO UNDERPRIVILEGED YOUTH. PROGRAMS INCLUDE DANCING, PHYSICAL EXERCISE, MARTIAL ARTS, MUSIC LESSONS, DANCE, AND CHOIR.

Funded Amount:

$3,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CHARLOTTE GENESSEE LIGHTHOUSE HISTORICAL SOCIETY
70 LIGHTHOUSE STREET
ROCHESTER, NY  14612
(585) 621-6179

Name of Project Director:

FRED AMATO

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE CLIMATE CONTROL AND SECURITY SYSTEMS WITHIN THE MUSEUM.

Funded Amount:

$2,500

Requested By:

MORELLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CHATHAM SPORTS COMPLEX
3540 ROUTE 9
EAST CHATHAM, NY 12060
(518) 794-7244

Name of Project Director:

BRIAN LOSSOW

Purpose of Project:

FUNDS WILL BE USED FOR THE COSTS OF BUILDING INSTALLATION FOR A NEW SPORTS FACILITY

Funded Amount:

$5,000

Requested By:

MOLINARO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CHERRY LANE THEATRE ALTERNATIVE, INC.
38 COMMERCE STREET
NEW YORK, NY 10014
(212) 989-2020

Name of Project Director:

JEFFREY SOLIS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE MENTOR PROJECT, WHICH ENGAGES PRE-EMINANT DRAMATISTS IN ONE-TO-ONE MENTORING RELATIONSHIPS WITH ASPIRING PLAYWRIGHTS FOR AN ENTIRE THEATRE SEASON.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CHILDREN’S MUSEUM OF SCIENCE AND TECHNOLOGY
250 JORDAN ROAD
TROY, NY 12180
(518) 235-2120 205

Name of Project Director:

JOHN GRAYDON SMITH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE OPERATING AND PROGRAM SUPPORT AROUND THE NATURAL AND PHYSICAL SCIENCES GALLERIES DURING 2007. THE PROJECT WILL HELP PROVIDE CONTINUED PROGRAMMING TO 40,000 VISITORS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CHILDREN’S MUSEUM OF THE EAST END
P.O. BOX 316
BRIDGEHAMPTON, NY 11932
(631) 537-8250

Name of Project Director:

ADRIENNE KITAEFF

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH PROGRAMS

Funded Amount:

$10,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CHINESE-AMERICAN ARTS COUNCIL, INC.
456 BROADWAY - 3RD FLOOR
NEW YORK, NY  10013
(212) 431-9740

Name of Project Director:

ALAN CHOW

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE: OUTDOOR PERFORMANCES OF TRADITIONAL ASIAN MUSIC, DANCE, AND THEATER IN MANHATTAN, BROOKLYN, QUEENS, AND CHINATOWN; VISUAL ART MULTI-MEDIA SHOWS OF EMERGING AND ESTABLISHED ASIAN AMERICAN ARTISTS; FREE PERFORMANCES FOR SENIOR CITIZEN CENTERS, HOSPITALS, AND PUBLIC SCHOOLS.

Funded Amount:

$36,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CINEMA ARTS CENTRE
423 PARK AVENUE
HUNTINGTON, NY 11743
(631) 423-5411

Name of Project Director:

JUD NEWBORN

Purpose of Project:

FUNDS WILL BE USED FOR A DOLBY DIGITAL SOUND SYSTEM

Funded Amount:

$5,000

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CINEMA ARTS CENTRE
423 PARK AVENUE, P.O. BOX 498
HUNTINGTON, NY 11743
(631) 423-7611

Name of Project Director:

JUD NEWBORN

Purpose of Project:

FUNDS WILL BE USED FOR VARIOUS ARTS PROGRAMS

Funded Amount:

$5,000

Requested By:

CONTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CITY OF AUBURN DEPARTMENT OF PUBLIC WORKS/RECREATION
358 GENESEE STREET
AUBURN, NY 13021
(315) 255-4737

Name of Project Director:

JERRY DELFAVERO

Purpose of Project:

FUNDS WILL BE USED FOR HOOPES PARK CONCERTS

Funded Amount:

$2,500

Requested By:

FINCH

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
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 TO PROVIDE FOR A CULTURAL AND HERITAGE FESTIVAL CELEBRATING THE CITY’S HUNDREDTH YEAR ANNIVERSARY.

Funded Amount:

$10,000

Requested By:

SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CITY OF NORTH TONAWANDA
216 PAYNE AVENUE
NORTH TONAWANDA, NY  14120
(716) 695-8540

Name of Project Director:

JERRY WHITEHEAD

Purpose of Project:

FUNDS WILL BE USED FOR IMPROVEMENTS TO THE FELTON FIELD
MUNICIPAL RECREATION FACILITY, INCLUDING NEW DUGOUTS AND
FENCING, A NEW PARK SHELTER AND BENCHES, ENTRANCE
IMPROVEMENTS, NEW ICE RINKS AND NEW BLEACHERS.

Funded Amount:

$33,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CITY OF NORTH TONAWANDA  
216 PAYNE AVENUE  
NORTH TONAWANDA, NY  14120  
(716) 695-8540

Name of Project Director:

JERRY WHITEHEAD

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS TO PINEWOODS PARK RESTROOM FACILITIES, INCLUDING PLUMBING AND DRAINAGE AND NEW HANDICAP ACCESSIBLE ENTRANCE DOORS AND RAMPS.

Funded Amount:

$16,500

Requested By:

SCHIMMINGER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CITY OF YONKERS (YONKERS COLUMBUS DAY COMMITTEE)
CITY HALL, 40 SOUTH BROADWAY
YONKERS, NY 10701
(914) 377-6160

Name of Project Director:

JAMES LAPERCHE

Purpose of Project:

FUNDS WILL BE USED FOR THE COLUMBUS PARADE AND ITALIAN HERITAGE PROGRAMS

Funded Amount:

$10,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CITY OF YONKERS (YONKERS PUERTO RICAN DAY PARADE)
285 NEPPHERAN AVENUE
YONKERS, NY 10701
(914) 377-6430

Name of Project Director:

AUGIE CAMBRIA

Purpose of Project:

FUNDS WILL BE USED FOR PROMOTING PUERTO RICAN HERITAGE

Funded Amount:

$2,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CITY OF YONKERS PARKS DEPARTMENT (NODINE HILL COMMUNITY
285 NEPPPERHAN AVENUE
YONKERS, NY 10701
(914) 377-6430

Name of Project Director:

AUGIE CAMBRIA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OF NEW DESKS, COMPUTERS, CHAIRS, CABINETS, LOUD SPEAKER SYSTEM, BLINDS AND COFFEE POT

Funded Amount:

$5,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CIVIC HERITAGE
P.O. BOX 389
CATO, NY 13033
(315) 626-2316

Name of Project Director:

DONALD THOMPSON

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT TO STORE HISTORIC RECORDS,
DOCUMENTS, ETC. AT NEWLY CONSTRUCTED SITE

Funded Amount:

$2,500

Requested By:

OAKS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CLADDAGH COMMISSIONS, INC.
7030 ERIE ROAD, P.O. BOX 266
DERBY, NY 14047
(716) 947-5857

Name of Project Director:

PATRICK GUERIN

Purpose of Project:

FUNDS WILL BE USED FOR THE REFURBISHMENT OF A THEATRE THAT IS USED BY THE COMMUNITY FOR VARIOUS EVENTS

Funded Amount:

$4,000

Requested By:

QUINN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
P.O. BOX 10063
BROOKLYN, NY  11210-0163
(718) 951-4600

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ENTERTAINMENT SUCH AS PLAYS, OPERAS, ETC., TO THE PUBLIC.

Funded Amount:

$2,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
P.O. BOX 100163
BROOKLYN, NY  11210
(718) 951-4600

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PERFORMING ARTS EDUCATIONAL PROGRAMS FOR ELEMENTARY STUDENTS IN BROOKLYN.

Funded Amount:

$7,500

Requested By:

JACOBS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
BROOKLYN CENTER FOR THE PERFORMING ARTS, P.O. BOX 100163
BROOKLYN, NY 11210-0163
(718) 951-4600

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF PRESENTING INTERNATIONAL ARTISTS AT THE CENTER.

Funded Amount:

$4,250

Requested By:

BOYLAND

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
P.O. BOX 100163
BROOKLYN, NY 11210
(718) 951-4600 20

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ANNUAL PRODUCTION OF THE "CARRIBEAN CELEBRATION" SERIES CONCERTS AT THE BROOKLYN CENTER OF THE PERFORMING ARTS.

Funded Amount:

$3,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
P.O. BOX 100163
BROOKLYN, NY 11210
(718) 951-4600

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TO INCREASE PROGRAMMING, OUTREACH AND PUBLIC ACCESS FOR BROOKLYN’S DIVERSE COMMUNITIES WITH A SPECIFIC FOCUS ON THE BOROUGH’S CARRIBEAN POPULATION.

Funded Amount:

$10,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
BROOKLYN COLLEGE/WALT WHITMAN AUDITORIUM
BROOKLYN, NY 11210
(718) 951-4600 20

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TOWARD A COMMUNITY BASED ARTS CENTER AND BOROUGHS LARGEST PRESENTER OF ARTS EDUCATION PROGRAMS.

Funded Amount:

$10,000

Requested By:

TOWNS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
2900 CAMPUS ROAD, SUITE 154
BROOKLYN, NY 11210
(718) 951-4600 20

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS TO SUPPORT THE PERFORMING ARTS.

Funded Amount:

$5,000

Requested By:

GORDON-D

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
P.O. BOX 100163
BROOKLYN, NY  11210
(718) 951-4600

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED FOR THE PRESENTATION OF INTERNATIONAL ARTISTS.

Funded Amount:

$1,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
P.O. BOX 100163
BROOKLYN, NY 11210
(718) 951-4600

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE CENTER’S ARTS EDUCATION PROGRESS.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
COLLEGE COMMUNITY SERVICES, INC.
P.O. BOX 100163
BROOKLYN, NY 11210
(718) 951-4600

CHERI WALSH

FUNDS WILL BE USED TO INCREASE PROGRAMMING, OUTREACH AND PUBLIC ACCESS FOR BROOKLYN'S DIVERSE COMMUNITIES WITH A SPECIFIC FOCUS ON THE BOROUGH'S CARIBBEAN POPULATION.

$2,000

PERRY

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
BROOKLYN CENTER FOR THE PERFORMING ARTS, P.O. BOX 100163
BROOKLYN, NY 11210-0163
(718) 951-4600

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE BROOKLYN CENTER FOR
PERFORMING ARTS SCHOOL/TIME ARTS EDUCATION SERIES.

Funded Amount:

$3,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
P.O. BOX 100163
BROOKLYN, NY 11210
(718) 951-4600

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TO PRESENT THE 2007-2008 SEASON AND TO HELP BRING PROGRAMS TO MORE PEOPLE.

Funded Amount:

$3,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLLEGE COMMUNITY SERVICES, INC.
P.O. BOX 100163
BROOKLYN, NY 11210
(718) 951-4600

Name of Project Director:

CHERI WALSH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE COMMUNITY WITH CULTURAL ARTS EDUCATION PROGRAM.

Funded Amount:

$1,458

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLONIAL FARMHOUSE RESTORATION SOCIETY OF BELLEROSE, INC.
73-50 LITTLE NECK PARKWAY
FLORAL PARK, NY 11004
(718) 347-3276

Name of Project Director:

AMY FISCHETTI

Purpose of Project:

FUNDS WILL BE USED TO OFFER A VARIETY OF PROGRAMS, TOURS, EXHIBITS, AND SPECIAL EVENTS ON THE AGRICULTURAL HISTORY OF QUEENS COUNTY.

Funded Amount:

$5,500

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLUMBIA COUNTY ARTS COUNCIL
209 WARREN STREET
HUDSON, NY 12534
(518) 671-6213

Name of Project Director:

JAN HANVIK

Purpose of Project:

FUNDS WILL BE USED TO ASSIST THE COLUMBIA COUNTY ARTS MENTORING PROGRAM AS WELL AS THE DIATA DIATA INTERNATIONAL FOLKLORIC THEATRE

Funded Amount:

$6,500

Requested By:

MOLINARO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLUMBUS PARADE & ITALIAN FESTIVAL, INC.
200 SOUTH PEARL STREET
ALBANY, NY 12202
(518) 641-7511

Name of Project Director:

STEVEN LONGO

Purpose of Project:

FUNDS WILL BE USED FOR THE COLUMBUS DAY PARADE & ITALIAN FESTIVAL WHICH ARE HELD IN CONJUNCTION WITH THE NATIONAL HOLIDAY CELEBRATING THE DISCOVERY OF AMERICA BY CHRISTOPHER COLUMBUS UNDER THE SPONSORSHIP OF THE CITY OF ALBANY, ITALIAN AMERICAN COMMUNITY CENTER, WEST ALBANY ITALIAN BENEVOLENT SOCIETY AND ROMA INTANGIBLE LODGE #215 ORDER SONS OF ITALY.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COLUMCILLE CULTURAL CENTER, INC.
1000 RICHMOND TERRACE
STATEN ISLAND, NY  10301
(718) 667-8842

Name of Project Director:

JACK MEADE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE RESIDENTS OF STATEN ISLAND & NEW YORK CITY AN OPPORTUNITY TO LEARN OF THE HISTORY, CULTURE, AND ACHIEVEMENTS OF ALL THINGS IRISH. TWO PLAYS WILL BE PERFORMED IN COOPERATION WITH THE SNUG HARBOR THEATRE GROUP AND THE SAINT JOHN UNIVERSITY (STATEN ISLAND) STUDENT THEATRE GROUP.

Funded Amount:

$5,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CONRAD POPPENHUSEN ASSOCIATION
114-04 14 ROAD
COLLEGE POINT, NY 11356
(718) 358-0067

Name of Project Director:

SUSAN BRUSTMANN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMMUNITY, CULTURAL AND HISTORICAL PROGRAMS TO THE COMMUNITY.

Funded Amount:

$2,500

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

COUNCIL OF JEWISH ÉMIGRÉ COMMUNITY ORGANIZATIONS, INC. COJECO
100 CHURCH STREET, 1608
NEW YORK, NY 10007
(212) 566-2120

Name of Project Director:

MICHAEL KHANAAN

Purpose of Project:

FUNDS WILL BE USED TO FACILITATE THE SUCCESSFUL INTEGRATION OF YOUNG RUSSIAN-SPEAKING IMMIGRANTS INTO AMERICAN SOCIETY, BY INTRODUCING THEM TO CIVICS AND COMMUNITY INVOLVEMENT.

Funded Amount:

$5,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

C-R PRODUCTIONS, INC.
COHOES MUSIC HALL, 58 REMSEN STREET
COHOES, NY  12047
(518) 237-5858  3

Name of Project Director:

TONY RIVERA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TECHNICALLY SPECIFIC ITEMS SUCH AS COMPUTERS, MONITORS, PRINTERS, COPIERS, AND FAX MACHINES TO ASSIST WITH OPERATIONS AT THE COHOES MUSIC HALL. FUNDS WILL BE ALSO BE USED FOR TECHNICAL SUPPORT WITH MAINTENANCE AND INSTALLATION.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CRADLE OF AVIATION
ONE DAVIS AVENUE
GARDEN CITY, NY 11530
(516) 572-4038

Name of Project Director:

ANDY PARTON

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAMS

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CREATIVE MINISTRIES, INC.
931 MONTAUK HIGHWAY
OAKDALE, NY 11769
(631) 218-2812

Name of Project Director:

NOEL RUIZ

Purpose of Project:

FUNDS WILL BE USED FOR PRODUCTION AND THEATER COSTS.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CREATIVE OUTLET DANCE THEATRE OF BROOKLYN, INC.
80 HANSON PLACE
BROOKLYN, NY  11217
(718) 636-9312

Name of Project Director:

JAMEL GAINS

Purpose of Project:

FUNDS WILL BE USED FOR CULTURAL AND ARTS PROGRAMS IN DISTRICT SCHOOLS.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CREATIVE OUTLET DANCE THEATRE OF BROOKLYN, INC.
80 HANSON PLACE, SUITE 303
BROOKLYN, NY  11217
(718) 636-9312

Name of Project Director:

JEFFREY ARONOWITZ

Purpose of Project:

FUNDS WILL BE USED TO CREATE AN ENVIRONMENT FOR YOUNG ARTISTS TO DEVELOP AND PRESENT THEIR WORK AND VISION.

Funded Amount:

$3,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

CRESTWOOD HISTORICAL SOCIETY
P.O. BOX 81
TUCKAHOE, NY 10707
(718) 543-3583

Name of Project Director:

ELIZABETH MCFADDEN

Purpose of Project:

FUNDS WILL BE USED FOR ARCHIVING HISTORICAL DOCUMENTS

Funded Amount:

$5,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CUSTER INSTITUTE, INC.
P.O. BOX 1204 MAIN BAY VIEW ROAD
SOUTHOLD, NY  11971
(631) 765-2626

Name of Project Director:

DONNA MCKORMICK

Purpose of Project:

FUNDS WILL BE USED TO BUILD NEW STAIRS FOR THE PURPOSE OF OBSERVING THE HISTORICAL PRESENCE OF THE INSTITUTE.

Funded Amount:

$5,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

CYPRECO OF AMERICA, INC.
23-50 27TH STREET
LONG ISLAND CITY, NY 11105
(718) 545-1151

Name of Project Director:

ELENA NAROULLETI

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THE BILINGUAL RADIO PROGRAM FOR GREEK AND ENGLISH SPEAKING AUDIENCES IN THE METRO AREA AND TO ACQUAINT THEM WITH THE RICH CULTURE AND HERITAGE OF GREECE AND CYPRUS.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

DANCE NEW AMSTERDAM, INC.
280 BROADWAY, 2ND FLOOR
NEW YORK, NY 10007
(212) 625-8369 231

Name of Project Director:

ERNEST A. HOOD

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT EXHIBITS IN THE DNA GALLERY TO WHICH THE COMMUNITY IS INVITED AND AID IN THE IDENTIFICATION OF CURATORIAL DECISIONS TO PROMOTE DNA’S ARTISTIC VISION.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

DANCE THEATRE OF HARLEM, INC.
466 WEST 152ND STREET
NEW YORK, NY   10031
(212) 690-2800

Name of Project Director:

PEGGY MORALES

Purpose of Project:

FUNDS WILL BE USED TO OVERHAUL AND IMPROVE THE BASEMENT AREA, INCLUDING NEW EQUIPMENT FOR DRESSING ROOMS, COMPUTER EQUIPMENT FOR THE COMPUTER LAB AND IMPROVEMENTS TO FACULTY LOUNGE.

Funded Amount:

$25,000

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

DANISAR PRODUCTIONS, INC.
ONE UNION SQUARE, SUITE 17M
NEW YORK, NY 10003
(212) 561-0191

Name of Project Director:

ALICIA KAPLAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE PLAYS AND OTHER EVENTS IN ENGLISH AND SPANISH, FREE OF CHARGE FOR THE HARLEM COMMUNITY.

Funded Amount:

$10,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

DRESDEN PLAQUE DEDICATION
232 GOLD COURSE ROAD EXTENSION, P.O. BOX 220
WARRENSBURG, NY 12885
(518) 623-1213

Name of Project Director:

RON MONTESI

Purpose of Project:

FUNDS WILL BE USED FOR FISHING PIER PLAQUE DEDICATION

Funded Amount:

$1,000

Requested By:

MCDONALD

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

DUTCHESS COUNTY ARTS COUNCIL
9 VASSAR STREET
POUGHKEEPSIE, NY 12601
(845) 454-3222

Name of Project Director:

BENJAMIN KREVOLIN

Purpose of Project:

FUNDS WILL BE USED TO BRING TOGETHER THE AREAS CULTURAL, HISTORICAL, ENVIRONMENTAL AND RECREATIONAL LEADERS TO PROMOTE THE UNIQUE CULTURAL CHARACTER OF THE HUDSON VALLEY TO RESIDENTS AND TOURISTS

Funded Amount:

$5,500

Requested By:

MOLINARO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

EAST END AFRICAN-AMERICAN MUSEUM & CENTER FOR EXCELLENCE
54 MILLER ROAD
SOUTHAMPTON, NY 11968
(631) 287-1271

Name of Project Director:

BONNIE CANNON

Purpose of Project:

FUNDS WILL BE USED FOR CULTURAL EDUCATION PROGRAMS AND COMMUNITY DEVELOPMENT

Funded Amount:

$2,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

EAST END ARTS COUNCIL
133 EAST MAIN STREET
RIVERHEAD, NY 11901
(631) 727-0900

Name of Project Director:

TONI MUNNA

Purpose of Project:

FUNDS WILL BE USED FOR STUDENT ARTS PROGRAM

Funded Amount:

$2,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

EAST FLATBUSH ECUMENICAL COUNCIL
5412 CLARENDON ROAD
BROOKLYN, NY 11203
(718) 629-5374

Name of Project Director:

FRANCIS CLARKE

Purpose of Project:

FUNDS WILL BE USED FOR THE SPRING COMMUNITY FESTIVAL HONORING RESIDENTS WHO PERFORMED COMMUNITY SERVICE - CULTURE FORUM.

Funded Amount:

$1,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

EAST ROCKAWAY/LYNBROOK COOPERSTOWN BASEBALL TEAM, INC.
216 BIXLEY HEATH
LYNBROOK, NY 11563
(516) 887-5590

Name of Project Director:

RICHARD PIANO

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH BASEBALL PROGRAM

Funded Amount:

$5,000

Requested By:

BARRA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ELAINE KAUFMAN CULTURAL CENTER/LUCY MOSES SCHOOL FOR MUSIC
129 WEST 67TH STREET
NEW YORK, NY 10023
(212) 501-3357

Name of Project Director:

LYDIA KONTOS

Purpose of Project:

FUNDS WILL BE USED FOR FIVE-WEEK SUMMER WORKSHOPS TO TEACH THEATER TO CHILDREN.

Funded Amount:

$7,500

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ELDRIDGE STREET PROJECT
12 ELDRIDGE STREET
NEW YORK, NY  10002
(212) 219-0888

Name of Project Director:

AMY WATERMAN

Purpose of Project:

FUNDS WILL BE USED TO HELP TO PRESERVE THE HISTORIC (NYS LANDMARK AND LISTED ON NATIONAL REGISTRAR OF HISTORIC PLACES) SYNAGOGUE AND TO RENEW IT WITH PUBLIC CULTURAL AND EDUCATIONAL ACTIVITIES.

Funded Amount:

$41,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ELECTRONIC BODY ARTS, INC.
351 HUDSON AVENUE
ALBANY, NY 12210
(518) 465-9916

Name of Project Director:

JENNIFER NEWMAN

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COST OF REPLACING THE ORGANIZATION’S BOILER (HEATING UNIT).

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ELMWOOD AVENUE FESTIVAL OF THE ARTS, INC.
P.O. BOX 786
BUFFALO, NY  14213
(716) 830-2484

Name of Project Director:

JOSEPH DIPASQUALE

Purpose of Project:

FUNDS WILL BE USED TO OPERATE AND HELP OFFSET COSTS OF THE ELMWOOD AVENUE FESTIVAL OF THE ARTS.

Funded Amount:

$4,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

EUGENIO MARIA DE HOSTOS COMMUNITY COLLEGE FOUNDATION
450 GRAND CONCOURSE
BRONX, NY  10451
(718) 518-6700

Name of Project Director:

WALLACE I. EDGEcombe

Purpose of Project:

FUNDS WILL BE USED FOR A ONE DAY SYMPOSIUM ON "THE IMPACT OF DEVELOPMENT & GLOBALIZATION ON TRADITIONAL CULTURES IN LATIN AMERICAN AND THE CARIBBEAN".

Funded Amount:

$10,000

Requested By:

RIVERA-J

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

EUGENIO MARIA DE HOSTOS COMMUNITY COLLEGE FOUNDATION
450 GRAND CONCOURSE
BRONX, NY 10451
(718) 518-6700

Name of Project Director:

WALLACE I. EDGECOMBE

Purpose of Project:

TWO CONCERTS CELEBRATING PUERTO RICAN CULTURE & MUSIC,
TRADITIONS OF PUERTO RICO, CELEBRATE ANNIVERSARY OF THE CUBAN &
PUERTO RICAN FLAGS; SECOND CONCERT WILL BE TITLED "A SOUTH
BRONX SALUTE TO EAST HARLEM".

Funded Amount:

$50,000

Requested By:

RIVERA-J

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FARMINGDALE SOCCER CLUB
700 MAIN STREET
FARMINGDALE, NY 11735
(516) 420-1149

Name of Project Director:

RAY FETTIG

Purpose of Project:

FUNDS WILL BE USED FOR CHILDRENS SAFETY EQUIPMENT

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FARMINGDALE YOUTH FOOTBALL, INC.
975 MAIN STREET
FARMINGDALE, NY 11735
(516) 777-3700

Name of Project Director:

ROBERT THOMPSON

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT UPGRADE

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FEDERATION OF HELLENIC SOCIETIES OF GREATER NEW YORK, INC.
22-51 29TH STREET
ASTORIA, NY 11105
(718) 204-6500

Name of Project Director:

NIKOS DIAMENTIDES

Purpose of Project:

FUNDS WILL BE USED FOR THEATRICAL PERFORMANCES FOR THE WESTERN QUEENS COMMUNITY.

Funded Amount:

$10,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FLUSHING JEWISH COMMUNITY COUNCIL, INC.
43-43 BOWNE STREET
FLUSHING, NY 11355
(718) 463-0434

Name of Project Director:

PAUL ENGEL

Purpose of Project:

FUNDS WILL BE USED TO BRING TOGETHER YOUTH AND SENIORS THROUGH STORY SHARING WORKSHOPS AND OTHER MULTICULTURAL EXPERIENCES (I.E. DANCE, MUSIC AND OTHER FORMS OF ART) AT TEMPLE BETH SHOLOM. OPEN TO ALL ON A NON-SECTARIAN BASIS.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FLUSHING MEADOWS CORONA PARK CONSERVATORY
P.O. BOX 670085
FLUSHING, NY 11367
(718) 263-1760

Name of Project Director:

PATRICIA DOLAN

Purpose of Project:

FUNDS WILL BE USED TO UNDERTAKE A MODEL SHORELINE RESTORATION OF THE MEADOW LAKE AREA WITH FLUSHING MEADOWS CORONA PARK.

Funded Amount:

$1,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FORT GREENE PARK CONSERVANCY, INC.
85 SOUTH OXFORD STREET
BROOKLYN, NY  11217
(718) 222-1461

Name of Project Director:

RUTH GOLDSTEIN

Purpose of Project:

FUNDS WILL BE USED FOR CULTURAL AND EDUCATIONAL PROGRAMMING.

Funded Amount:

$2,500

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FORT GREENE SENIOR CITIZENS COUNCIL, INC.
966 FULTON STREET
BROOKLYN, NY 11238
(718) 638-6910

Name of Project Director:

SAM PINN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE COST OF JAZZ MUSICIANS FOR THE RENAISSANCE OF JAZZ SPRING CONCERTS.

Funded Amount:

$20,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FOUNDATION FOR FILIPINO ARTISTS
34-67 60TH STREET
WOODSIDE, NY  11377
(718) 565-8852

Name of Project Director:

AIDA BARTOLOME

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CULTURAL AND PERFORMING ARTS IN THE COMMUNITY.

Funded Amount:

$2,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRACTURED ATLAS PRODUCTION, INC.
248 WEST 35TH STREET, SUITE 1202
NEW YORK, NY 10001
(212) 277-8020

Name of Project Director:

ADAM FOREST HUTTLER

Purpose of Project:

CHAPTER OFFICE OPENING IN BROOKLYN IN 2007 TO PROVIDE EXPANDED SERVICES TO BROOKLYN ARTISTS. THE OFFICE WILL ACT AS A CENTRALIZED INFORMATION RESOURCE FOR THE ARTS COMMUNITY, HELPING ARTISTS LEARN ABOUT EVERYTHING FROM HEALTH CARE TO REHEARSAL SPACE. FRACTURED ATLAS: BROOKLYN WILL HOST MONTHLY OUTREACH EVENTS AND RESPOND TO COMMUNITY NEEDS THAT IT LEARNS OF THROUGH THOSE MEETINGS.

Funded Amount:

$20,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRANKFORT HILL HISTORICAL COMMITTEE
2338 ALBANY ROAD
FRANKFORT, NY 13340
(315) 733-8040

Name of Project Director:

KEITH R. MCNALLY

Purpose of Project:

FUNDS WILL BE USED TOWARDS RESTORATION OF THE ONLY REMAINING ONE ROOM SCHOOL HOUSE IN THE TOWN OF FRANKFORT

Funded Amount:

$5,000

Requested By:

BUTLER-M

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FREEPORT COMMUNITY CONCERT ASSOCIATION
117 MAXSON STREET
FREEPORT, NY 11520
(516) 379-8922

Name of Project Director:

BELLE SYLVESTER

Purpose of Project:

FUNDS WILL BE USED FOR THE PRESENTATION OF MUSICAL ATTRACTIONS FOR THE FREEPORT COMMUNITY: CLASSICAL BALLET.

Funded Amount:

$12,000

Requested By:

HOOPER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF ALICE AUSTIN HOUSE, INC.
2 NYLAN BOULEVARD
STATEN ISLAND, NY 10305
(718) 816-4506

Name of Project Director:

JOHN SALAZZO

Purpose of Project:

 FUNDS WILL BE USED TO ENSURE THE CARE AND UPKEEP OF THE MUSEUM AND GROUNDS.

Funded Amount:

$5,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF BENNINGTON BATTLEFIELD
81 MAPLE STREET
HUDSON FALLS, NY 12839
(518) 747-4606

Name of Project Director:

PAUL LOADING

Purpose of Project:

FUNDS WILL BE USED FOR HISTORIC PRESERVATION

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF CLARENCE BICENTENNIAL
ONE TOWN PLACE
CLARENCE, NY 14031
(716) 741-8930

Name of Project Director:

LINDA NASTASI

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL PROGRAM FUNDS FOR THE TOWN OF CLARENCE’S BICENTENNIAL CELEBRATION

Funded Amount:

$20,000

Requested By:

COLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF CLARENCE/ARBORETUM
ONE TOWN PLACE
CLARENCE, NY 14031
(716) 741-8930

Name of Project Director:

STEVEN MURTAUGH

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF NEW TREES AT THE
CLARENCE TOWN HALL AND AT OTHER TOWN FACILITIES

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF FORT TOTTEN PARKS, INC.
P.O. BOX 604984
BAYSIDE, NY  11360
(718) 670-3684

Name of Project Director:

LUCILLE J. KERNAHAN

Purpose of Project:

FUNDS WILL BE USED FOR SENIOR PROGRAMS AND ALSO TO PURCHASE MORE BENCHES FOR THE FT. TOTTEN PARKS.

Funded Amount:

$2,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF GANTRY PLAZA STATE PARK, INC.
4-74 48TH AVENUE #124
LONG ISLAND CITY, NY  11109
(718) 340-1836

Name of Project Director:

JENNIE NYULASI

Purpose of Project:

FUNDS WILL BE USED FOR SIGNAGE IN GANTRY PARK THAT WILL INFORM ITS VISITORS OF THE HORTICULTURAL, HISTORICAL AND GEOGRAPHIC ASPECTS OF THE PARK.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF HUDSON RIVER PARK, INC.
311 WEST 43RD STREET, SUITE 300
NEW YORK, NY 10036
(212) 757-0981

Name of Project Director:

ALBERT K. BUTZEL

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT FRIENDS’ PROGRAMMING IN HUDSON RIVER PARK, INCLUDING WEEKEND WALKING TOURS IN THE VILLAGE SECTION OF THE PARK, A SPRING FESTIVAL FOR FAMILIES, AN INSTRUMENT MAKING WORKSHOP FOR ADULTS AND CHILDREN ON PIER 45, AND SUPPORT FOR LOW-COST BOAT RIDES.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF HUDSON RIVER PARK, INC.
311 WEST 43RD STREET, SUITE 300
NEW YORK, NY 10036
(212) 757-0981

Name of Project Director:

AL BUTZEL

Purpose of Project:

FUNDS WILL BE USED TO PROTECT AND IMPROVE HUDSON RIVER PARK.

Funded Amount:

$2,500

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF HUDSON RIVER PARK, INC.
311 WEST 43RD STREET, SUITE 300
NEW YORK, NY 10036
(212) 757-0981 203

Name of Project Director:

ALBERT K. BUTZEL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL PROGRAMS FOR CHILDREN AND YOUTH IN HUDSON RIVER PARK.

Funded Amount:

$4,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

FRIENDS OF KAISER PARK, INC.
2703 WEST 36TH STREET
BROOKLYN, NY  11224
(917) 873-9261

Name of Project Director:

ROCCO BRESCIA

Purpose of Project:

FUNDS WILL BE USED TOWARDS RENTING THE EQUIPMENT FOR THE SOUND SYSTEM.

Funded Amount:

$3,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF MORNINGSIDE PARK, INC.
P.O. BOX 250228
NEW YORK, NY  10025
(212) 937-3883

Name of Project Director:

BRAD TAYLOR

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A SERIES OF FOUR CONCERTS IN THE PARK DURING THE SUMMER.

Funded Amount:

$2,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FRIENDS OF QUEENSBRIDGE PARK
10-25 41ST AVENUE
LONG ISLAND CITY, NY  11101
(718) 784-7447

Name of Project Director:

WILLIAM NEWLIN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURPOSE OF SUPPLIES AND EQUIPMENT AND TOWARD PERFORMANCE'S FEES FOR EVENTS IN QUEENSBRIDGE PARK.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FUND FOR PARK AVENUE NEW YORK, INC.
110 EAST 42ND STREET, ROOM 1300
NEW YORK, NY 10017
(212) 876-3322

Name of Project Director:

MARGARET TARNES

Purpose of Project:

FUNDS WILL BE USED TO PLANT AND MAINTAIN FLOWER BEDS THAT ARE DESTROYED.

Funded Amount:

$2,500

Requested By:

BING

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

FUNDACION DOMINICANA CULTURARTE DE NEW YORK, INC.
260 AUDUBON AVENUE, SUITE 100-S, 1ST FLOOR
NEW YORK, NY 10033
(212) 928-8100

Name of Project Director:

JORGE PINA

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE WEEKLY ENCOUNTERS WITH ARTISTS, WRITERS, AND PROFESSIONALS. CULTURARTE ORGANIZES PERIODIC CONVENTIONS, CONGRESSES, FORUMS, AND SYMPOSIA OF HISPANIC CULTURE.

Funded Amount:

$5,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GALLERY NORTH, INC.
90 NORTH COUNTRY ROAD
SETAUKET, NY 11733
(631) 751-2676

Name of Project Director:

COLLEEN HANSON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PROFESSIONAL STAFF INCLUDING DIRECTOR, TO MAINTAIN AND EXPAND THE GALLERY’S CREATIVE PROGRAMMING AND EDUCATIONAL ACTIVITIES.

Funded Amount:

$23,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GENESEE VALLEY COUNCIL ON THE ARTS
BUILDING 4, APARTMENT 1, LIVINGSTON COUNTY CAMPUS
MT. MORRIS, NY 14510
(585) 243-6785

Name of Project Director:

KATHRYN HOLLINGER

Purpose of Project:

FUNDS WILL BE USED FOR RESTORATION OF ARTWORK

Funded Amount:

$7,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GEORGE EASTMAN HOUSE
900 EAST AVENUE
ROCHESTER, NY  14607-2298
(585) 271-3361

Name of Project Director:

ANTHONY BANNON

Purpose of Project:

FUNDS WILL BE USED TO MAKE A DISCOVERY ROOM TO OFFER THE YOUNGEST MUSEUM VISITORS AN INTRODUCTION TO THE FUNDAMENTAL CONCEPT IN IMAGING TECHNOLOGY, INCLUDING ANIMATION AND CAMERAS.

Funded Amount:

$5,000

Requested By:

KOON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GERRITSEN BEACH CARES, INC.
P.O. BOX 340-505
BROOKLYN, NY  11234
(718) 648-3745

Name of Project Director:

MICHAEL TAYLOR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EQUIPMENT FOR A VOLUNTEER CLEANUP OF PARKS AND BEACHES, AS WELL AS FOR GRAFFITI REMOVAL IN THE GERRITSEN BEACH COMMUNITY.

Funded Amount:

$6,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF PARKS, REcreation AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GLIMMERGLASS OPERA
BOX 191
COOPERSTOWN, NY 13326
(607) 547-2255

Name of Project Director:

JOANNE TOBEY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE CONCERT PROGRAMMING IN THE RURAL TOWNS OF CHERRY VALLEY AND ROSEBOOM IN OTSEGO COUNTY

Funded Amount:

$10,000

Requested By:

BUTLER-M

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GORGEOUS WASHINGTON STREET ASSOCIATION  
116 WASHINGTON STREET #1F  
BINGHAMTON, NY  13901  
(607) 723-5172

Name of Project Director:

SHERRY EATON

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND MAINTAIN PLANTS, FLOWER BEDS AND PLANTERS.

Funded Amount:

$5,000

Requested By:

LUPARDO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GOWANDA HOLLYWOOD THEATER
28 JAMESTOWN STREET, P.O. BOX 164
GOWANDA, NY 14070
(716) 713-9395

Name of Project Director:

MARK C. BURR

Purpose of Project:

FUNDS WILL BE USED FOR CONTINUED RESTORATION EFFORTS/EXIT DOORS

Funded Amount:

$10,000

Requested By:

GIGLIO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GREATER BUFFALO ITALIAN HERITAGE & FOOD FESTIVAL, INC.
P.O. BOX 39
BUFFALO, NY 14207
(716) 874-6133

Name of Project Director:

CARMEN PALMA

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE ITALIAN HERITAGE FESTIVAL.

Funded Amount:

$4,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
GREATER LONG ISLAND ROAD RUNNERS CLUB
101 DUPONT STREET
PLAINVIEW, NY 11803
(516) 937-3571

MICHAEL POLANSKY

FUNDS WILL BE USED FOR VARIOUS ROAD RUNNING EVENTS, TRACK AND FIELD PROGRAMS AND RUNNING RELATED PROGRAMS THROUGHOUT THE REGION

$4,000

WALKER

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GREATER LONG ISLAND RUNNING CLUB
101-24 DUPONT STREET
PLAINVIEW, NY 11803
(516) 349-7646

Name of Project Director:

MIKE POLANSKY

Purpose of Project:

FUNDS WILL BE USED FOR WHEEL CHAIR SPORTS PROGRAM

Funded Amount:

$1,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GREATER PORT JEFFERSON ARTS COUNCIL, INC.
P.O. BOX 204
PORT JEFFERSON, NY 11777
(631) 473-5220

Name of Project Director:

ALAN VARELLA

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT TECHNICAL STAFF TO DIGITIZE PHOTOGRAPHS AND OTHER DOCUMENTS FROM LOCAL HISTORICAL SOCIETIES, MUSEUMS AND PRIVATE COLLECTIONS TO PROVIDE AN ACCESSIBLE VISUAL RECORD OF SUFFOLK COUNTY’S RICH CULTURE AND HISTORY.

Funded Amount:

$20,000

Requested By:

INGLEBRIGHT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GREATER RIDGEWOOD HISTORICAL SOCIETY, INC.
1820 FLUSHING AVENUE
RIDGEWOOD, NY 11385
(718) 456-1776

Name of Project Director:

LINDA MONTZ

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN EDUCATIONAL AND CULTURAL PROGRAM FOR SCHOOL CHILDREN AT THE ONDERDONK HOUSE TO EXPLAIN AND DEMONSTRATE THE CULTURAL AND HISTORICAL HERITAGE OF THE RIDGEWOOD AREA.

Funded Amount:

$1,250

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GREATER SAYVILLE CHAMBER OF COMMERCE, INC.
P.O. BOX 235
SAYVILLE, NY 11782
(631) 567-5257

Name of Project Director:

KAY CAMERON

Purpose of Project:

FUNDS WILL BE USED TO REPLACE AND MAINTAIN FLOWER BASKETS THROUGHOUT DOWNTOWN HAMLET BUSINESS AREA OF SAYVILLE.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GREEK-AMERICAN EDUCATIONAL PUBLIC INFORMATIONS SYSTEM, INC.
59 SCHERMERHORN STREET
BROOKLYN, NY 11201
(718) 274-0439

Name of Project Director:

LORRIS SIMONEDES

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT BILINGUAL RADIO PROGRAMS FOR GREEK AND ENGLISH SPEAKING AUDIENCES TO ACQUAINT THEM WITH GREEK AND CYPRIOT CULTURE AND HERITAGE THROUGH DAILY RADIO BROADCASTS.

Funded Amount:

$3,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GREENBELT CONSERVANCY, INC.
200 NEVADA AVENUE
STATEN ISLAND, NY   10306
(718) 667-2165

Name of Project Director:

ADENA LONG

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE 2007-08 PUBLIC EDUCATION PROGRAMMING AND COMMUNITY EVENTS.

Funded Amount:

$10,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GREENBELT CONSERVANCY, INC.
200 NEVADA AVENUE
STATEN ISLAND, NY 10306
(718) 667-2165

Name of Project Director:

JAMES FITZPATRICK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TOOLS, SUPPLIES, AND PLANT MATERIAL.

Funded Amount:

$5,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GREENPOINT WATERFRONT ASSOCIATION FOR PARKS & PLANNING, INC.
108 HURON STREET
BROOKLYN, NY 11222
(718) 228-2595

Name of Project Director:

CHRISTINE HOLOWACZ

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN OVERSIGHT ACTIVITIES DURING THE IMPLEMENTATION OF THE NEW ZONING REQUIREMENTS.

Funded Amount:

$5,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

GREENVILLE EDUCATIONAL FOUNDATION  
P.O. BOX 129  
GREENVILLE, NY  12083  
(518) 239-4748

Name of Project Director:

SUSAN LYNCH

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE AND REHAB THE HISTORIC POTTER HOLLOW SCHOOL BUILDING AND PRESERVE IT FOR FUTURE GENERATIONS.

Funded Amount:

$10,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GREENWICH VILLAGE SOCIETY FOR HISTORIC PRESERVATION
232 EAST 11TH STREET
NEW YORK, NY 10003
(212) 475-9585

Name of Project Director:

ANDREW BERMAN

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL EXPENSES INCLUDING OUTREACH, MAILING AND PRINTING COSTS, RESEARCH COSTS, HONORARIA AND GENERAL EXPENSES FOR THE SOUTH VILLAGE PRESERVATION PROJECT, EAST VILLAGE DOCUMENTATION AND PRESERVATION PROJECT, AND WEST VILLAGE PRESERVATION EFFORTS.

Funded Amount:

$2,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

GRUMMAN MEMORIAL PARK
P.O. BOX 147
CALVERTON, NY 11933
(516) 369-9488

Name of Project Director:

JOE VAN DE WETERING

Purpose of Project:

FUNDS WILL BE USED TO HELP WITH AN IRRIGATION SYSTEM FOR DRAINING WATER IN THE PARK.

Funded Amount:

$3,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HALEAKALA, INC.
512 WEST 19TH STREET
NEW YORK, NY  10011
(212) 255-5793

Name of Project Director:

RACHAEL DORSEY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATION AND OUTREACH PROGRAMS AND ACCESS TO THE PERFORMING ARTS FOR LOCAL SCHOOLS IN THE COMMUNITY.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
HAMMOND MUSEUM & JAPANESE STROLL GARDEN
P.O. BOX 326
NORTH SALEM, NY 10560
(914) 669-5033

JUDITH SCHUMACHER

FUNDS WILL BE USED FOR DEVELOPMENT OF AFTER SCHOOL PROGRAMS

$2,500

BALL

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HAMPTON BAYS HISTORICAL SOCIETY
P.O. BOX 588
HAMPTON BAYS, NY 11946
(631) 728-4449

Name of Project Director:

ANNA CRANKSHAW DEPALMA

Purpose of Project:

FUNDS WILL BE USED FOR HISTORIC RESTORATION PROGRAM

Funded Amount:

$2,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HAMPTON YOUTH ATHLETIC LEAGUE
P.O. BOX 578
WESTHAMPTON BEACH, NY 11978
(631) 288-0902

Name of Project Director:

NOEL LAUBE

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH ATHLETIC PROGRAMS AND EQUIPMENT

Funded Amount:

$1,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
HAMPTONIANS NEW YORK
C/O MAXINE HAMILTON ALEXANDER, 1562 ROCKAWAY PARKWAY
BROOKLYN, NY  11236
(718) 927-6817

MAXINE HAMILTON ALEXANDER

FUNDS WILL BE USED TO SUPPORT THE BROOKLYN CARRIBEAN YOUTH FEST 2007 TO BE HELD IN PROSPECT PARK, BROOKLYN.

$1,000

MAISEL

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HAMPTONIANS NEW YORK
1562 ROCKAWAY PARKWAY
BROOKLYN, NY 11236
(718) 927-6817

Name of Project Director:

MAXINE HAMILTON - ALEXANDER

Purpose of Project:

FUNDS WILL BE USED FOR THE BROOKLYN CARRIBEAN YOUTH FEST 2007, TO BE HELD IN PROSPECT PARK, BROOKLYN.

Funded Amount:

$4,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HARLEM WEEK, INC.
200 A WEST 136 STREET
NEW YORK, NY  10030
(212) 862-7200

Name of Project Director:

TAMARA SMALLING

Purpose of Project:

FUNDS WILL BE USED TO HIGHLIGHT THE MANY POSITIVE AND RELEVANT ASPECTS OF AFRICAN-AMERICAN, LATINO, CARIBBEAN-AMERICAN, AND EUROPEAN-AMERICAN CULTURES OF HARLEM THROUGH SEMINARS, BOOK FAIRS AND OTHER ACTIVITIES.

Funded Amount:

$20,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HEBREW HOME FOR THE AGED
5961 PALISADE AVENUE
BRONX, NY  10471
(718) 549-8700

Name of Project Director:

KAREN FRANKLIN/SUSAN PUTTERMAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT AN ETHNICALLY CENTERED MUSEUM
THAT SERVES AS A POSITIVE COMMUNITY CATALYST AMONG AT-RISK
ELEMENTARY SCHOOL STUDENTS FROM ECONOMICALLY
DISADVANTAGED FAMILIES.

Funded Amount:

$2,500

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HECKSCHER MUSEUM
2 PRIME AVENUE
HUNTINGTON, NY 11743
(631) 351-3215

Name of Project Director:

ELIZABETH WAYLAND

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS AND EDUCATIONAL PROGRAMS

Funded Amount:

$10,000

Requested By:

CONTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HECKSCHER MUSEUM OF ART
2 PRIME AVENUE
HUNTINGTON, NY 11743
(631) 351-3215

Name of Project Director:

ELIZABETH WAYLAND

Purpose of Project:

FUNDS WILL BE USED FOR EXHIBITIONS AND EDUCATIONAL PROGRAMS

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HELLENIC CULTURAL CENTER, INC.
27-09 CRESCENT STREET
ASTORIA, NY 11102
(718) 626-5293

Name of Project Director:

BISHOP VIKENTIOS

Purpose of Project:

FUNDS WILL BE USED TO SHARE THE CUSTOMS AND CULTURE OF GREECE WITH THE PUBLIC THROUGH LECTURES, PERFORMANCES, EXHIBITS, AND OTHER CULTURAL EVENTS.

Funded Amount:

$3,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HELL'S KITCHEN NEIGHBORHOOD ASSOCIATION, INC.
454 WEST 35TH STREET
NEW YORK, NY 10001
(212) 714-0186

Name of Project Director:

VERA LIGHTSTONE

Purpose of Project:

FUNDS WILL BE USED TO PLANT AND SAFEGUARD A THOUSAND STREET TREES IN CLINTON/HELL'S KITCHEN.

Funded Amount:

$2,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HENDRICK I. LOTT HOUSE PRESERVATION ASSOCIATION
1964 EAST 36TH STREET
BROOKLYN, NY 11234
(917) 440-7886

Name of Project Director:

GREG BORUSSO

Purpose of Project:

FUNDS WILL BE USED TO RESTORE AND PRESERVE A HISTORIC BUILDING.

Funded Amount:

$5,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HICKSVILLE-JERICHO ROTARY CLUB
21 BOBWHITE LANE
HICKSVILLE, NY 11801
(516) 805-5105

Name of Project Director:

WILLIAM SCHUCKMANN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMMUNITY BASED PROJECTS SUCH AS FOOD DRIVES, THANKSGIVING BASKETS FOR THE LESS FORTUNATE, BOOK PROGRAMS AND OTHER SERVICE RELATED PROGRAMS

Funded Amount:

$2,500

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

HIGHLAND COMMUNITY REVITALIZATION COMMITTEE, INC.
1750 TENNESSEE AVENUE
NIAGARA FALLS, NY  14305
(716) 282-2325

Name of Project Director:

WILLIE DUNN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE BEAUTIFICATION AND CLEANUP EFFORTS, AS WELL AS, YOUTH LEADERSHIP AND CRIME PREVENTION EVENTS.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HILLCREST ESTATES CIVIC ASSOCIATION, INC.
82-36 166TH STREET
HILLCREST ESTATES, NY 11432
(917) 597-6339

Name of Project Director:

KEVIN J. FORRESTAL

Purpose of Project:

FUNDS WILL BE USED TO REMOVE CONCRETE AND CREATE PLANT/GREEN STREET GARDEN.

Funded Amount:

$2,500

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HISTORIC DISTRICTS COUNCIL, INC.
232 EAST 11TH STREET
NEW YORK, NY 10003
(212) 614-9107

Name of Project Director:

SIMEON BANKOFF

Purpose of Project:

FUNDS WILL BE USED TO DESIGN AND PRINT A NEW HDC BROCHURE AND PROVIDE TECHNICAL ASSISTANCE TO COMMUNITY-BASED ORGANIZATIONS.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HISTORICAL ASSOCIATION OF SOUTH JEFFERSON
9 EAST CHURCH STREET
ADAMS, NY 13605
(315) 232-2616

Name of Project Director:

DEBBIE QUICK

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH MOVING A ONE ROOM SCHOOLHOUSE TO A SITE IN THE VILLAGE OF ADAMS

Funded Amount:

$5,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HORSEHEADS GIRLS SOFTBALL ASSOCIATION
179 LANCELOT DRIVE
ELMIRA, NY 14903
(607) 739-9368

Name of Project Director:

TERRY CROZIER

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION OF BUILDINGS FOR NEW RESTROOMS, EQUIPMENT STORAGE AND CONCESSION AT GARDNER ROAD PARK

Funded Amount:

$15,000

Requested By:

O'MARA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HUDSON MOHAWK TRADITIONAL DANCES, INC. DBA DANCE FLURRY ORGANIZATION
4 ST. JUDE COURT
SARATOGA SPRINGS, NY 12866
(518) 577-0289

Name of Project Director:

DOUGLAS HALLER

Purpose of Project:

FUNDS WILL BE USED FOR WORKSHOPS, ACTIVITIES FOR ALL AGES FOR A THREE DAY FESTIVAL OF TRADITIONAL MUSIC

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HUDSON MOHAWK URBAN CULTURAL PARK (RIVERSPARK)
251 RIVER STREET
COHOES, NY  12047
(518) 233-2119

Name of Project Director:

TOM CARROLL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMMEMORATIVE AND EDUCATIONAL ACTIVITIES RELATED TO THE 30TH ANNIVERSARY OF INTER-MUNICIPAL RIVERSPARK HERITAGE AREA AND THE 25TH ANNIVERSARY OF THE STATEWIDE PROGRAM.

Funded Amount:

$4,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HUDSON WATERFRONT MUSEUM, INC.
290 CONOVER STREET, PIER #44
BROOKLYN, NY 11231
(718) 624-4719

Name of Project Director:

DAVID E. SHARPS

Purpose of Project:

FUNDS WILL BE USED FOR THE WATERFRONT MUSEUM MARITIME EDUCATION INITIATIVE.

Funded Amount:

$2,500

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HULL HOUSE FOUNDATION
5976 GENESEE STREET
LANCASTER, NY 14086
(716) 837-0893

Name of Project Director:

GARY N. COSTELLO

Purpose of Project:

FUNDS WILL BE USED FOR THE SUPPORT OF INTERIOR RESTORATION PROJECTS AT THE POLY HULL HOUSE.

Funded Amount:

$12,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HUNTINGTON ARTS COUNCIL
213 MAIN STREET
HUNTINGTON, NY 11743
(631) 271-8423

Name of Project Director:

DIANA CHERRYHOMES

Purpose of Project:

FUNDS WILL BE USED FOR ART PROGRAMS THROUGHOUT HUNTINGTON

Funded Amount:

$7,500

Requested By:

CONTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HUNTINGTON ARTS COUNCIL, INC.
213 MAIN STREET
HUNTINGTON, NY 11743
(631) 271-8423

Name of Project Director:

DIANA CHERRYHOMES

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM DEVELOPMENT

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HUNTINGTON BLUE DEVILS BOOSTER CLUB
P.O. BOX 2294
HUNTINGTON, NY 11743
(631) 223-2296

Name of Project Director:

CHRIS DUFFY

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS AND EQUIPMENT

Funded Amount:

$5,000

Requested By:

CONTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

HUNTINGTON HISTORICAL SOCIETY
209 MAIN STREET
HUNTINGTON, NY 11743
(631) 427-7045

Name of Project Director:

CAROL A. MAGUIRE

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL PROGRAMS

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

INFINITY PERFORMING ARTS PROGRAM, INC.
116 EAST THIRD STREET
JAMESTOWN, NY  14701
(716) 664-0991

Name of Project Director:

RON GRAHAM

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF INSTRUMENTS FOR THE MUSIC PROGRAM.

Funded Amount:

$21,000

Requested By:

PARMENT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

INTERNATIONAL AFRICAN ARTS FESTIVAL  
P.O. BOX 47-1730  
BROOKLYN, NY 11247  
(718) 638-6700

Name of Project Director:

BASIR MCHAWI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CULTURAL AND EDUCATIONAL PROGRAMMING AND ACTIVITIES.

Funded Amount:

$5,000

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

INTERNATIONAL AGENCY FOR MINORITY ARTIST AFFAIRS
POWELL, JR. STATE OFFICE BUILDING, 163 WEST 125 STREET, SUITE 909
NEW YORK, NY 10027
(212) 749-5298

Name of Project Director:

GREGORY JAVAN MILLS

Purpose of Project:

FUNDS WILL BE USED TO ENABLE COMMUNITY EXPOSURE TO ARTISTS OF COLOR.

Funded Amount:

$7,500

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

IRISH-AMERICAN HERITAGE MUSEUM
991 BROADWAY, SUITE 101
ALBANY, NY  12204
(518) 432-6598

Name of Project Director:

JOSEPH J. DOLAN

Purpose of Project:

FUNDS WILL BE USED TOWARD THE CONTINUING DEVELOPMENT OF EXHIBITS AND PROGRAMS.

Funded Amount:

$4,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

IRISH-AMERICAN HERITAGE MUSEUM
991 BROADWAY - 101
ALBANY, NY  12204
(518) 432-6598

Name of Project Director:

JOSEPH P. DOLAN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE OPERATIONS AND EXHIBITIONS OF THE IRISH-AMERICAN HERITAGE MUSEUM. THE MUSEUM'S OBJECTIVE IS TO PRESERVE AND DOCUMENT THE INFLUENCE AND IMPORTANCE OF IRISH CULTURE IN NEW YORK STATE.

Funded Amount:

$14,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ISLAND TREES BASEBALL
3813 JACQUELINE STREET
BETHPAGE, NY 11714
(516) 735-1841

Name of Project Director:

NICK SQUIGNA

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT UPGRADE

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ISLIP ARTS COUNCIL, INC.
50 IRISH LANE
EAST ISLIP, NY 11730
(631) 224-5420

Name of Project Director:

LILLIAN BARBASH

Purpose of Project:

FUNDS WILL BE USED IN THE PRODUCTION OF A NEWSLETTER.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ISLIP TOWN FIREFIGHTERS' MUSEUM AND EDUCATION CENTER  
P.O. BOX 674  
SAYVILLE, NY 11782  
(631) 273-3691

Name of Project Director:

EDWARD TULLY

Purpose of Project:

FUNDS WILL BE USED FOR EXPENSES RELATING TO THE MUSEUM’S START-UP

Funded Amount:

$5,000

Requested By:

BOYLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
IT'S A ZOO 2007-2008 THEATER COMPETITION CABINET
267 GENESEE STREET
UTICA, NY 13501
(315) 724-1113

MARIA K. PAVELOCK

FUNDS WILL BE USED TO PROMOTE LITERACY, CRITICAL THINKING AND PROBLEM SOLVING SKILLS FOR STRONGER STUDENT SELF-CONFIDENCE AND EDUCATIONAL ACCOMPLISHMENT

TOWNSEND

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

JACKSON HEIGHTS ART CLUB, INC.
P.O. BOX 720335
JACKSON HEIGHTS, NY 11372
(718) 899-0065

Name of Project Director:

ALEXIS DANIELS

Purpose of Project:

FUNDS WILL BE USED FOR THE CLUB’S PROGRAM FOR GALLERY EXHIBITS, SPECIAL SHOWS AND INSTRUCTIONAL CLASSES FOR CHILDREN AND ADULTS. FUNDS WILL ALSO BE USED FOR PAINTING DEMONSTRATIONS, LECTURES, OUTDOOR EXHIBITS, SPECIAL TEACHING IN LOCAL SCHOOLS AND A SUMMER PROGRAM FOR CHILDREN.

Funded Amount:

$3,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

JACQUES MARCAIS CENTER OF TIBETAN ARTS, INC.
338 LIGHTHOUSE AVENUE
STATEN ISLAND, NY 10306
(718) 987-3500

Name of Project Director:

MEG VENTRUDO

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE INTEREST AND APPRECIATION OF TIBETAN AND HIMALAYAN ART AND CULTURE THROUGH EXHIBITS, LECTURES, MUSIC PROGRAMS AND SPECIAL ART PROGRAMS FOR CHILDREN AND FAMILIES.

Funded Amount:

$10,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

JAVA HISTORICAL SOCIETY  
P.O. BX 36  
JAVA VILLAGE, NY 14083  
(585) 457-9537

Name of Project Director:

DAVID A. CARLSON

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING RENOVATION

Funded Amount:

$5,000

Requested By:

BURLING

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

JEWISH CHILDREN’S MUSEUM  
792 EASTERN PARKWAY  
BROOKLYN, NY  11213  
(718) 907-8854

Name of Project Director:

DEVORAH HALBERSTAM

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMMUNITY OUTREACH AND EDUCATION TO CHILDREN FROM THE CROWN HEIGHTS COMMUNITY AND BEYOND.

Funded Amount:

$3,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

JEWISH THEATER OF NEW YORK INCORPORATED
P.O. BOX 845
NEW YORK, NY  10108
(212) 494-0050

Name of Project Director:

TURIA TENEBOM

Purpose of Project:

FUNDS WILL BE USED FOR A COMPUTER UPGRADE.

Funded Amount:

$2,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

JUNIOR LEAGUE OF PELHAM, INC.
533 Highbrook Avenue
Pelham, NY 10803
(914) 738-6899

Name of Project Director:

KATIE STEVENS

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF WROUGHT IRON BENCHES AND CHESS TABLE SETS FOR THE WEIHMAN PARK BEAUTIFICATION PROJECT.

Funded Amount:

$9,000

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

JUNIPER VALLEY PARK CONSERVANCY, INC.
P.O. BOX 790275
MIDDLE VILLAGE, NY  11379
(718) 651-5865

Name of Project Director:

ROBERT HOLDEN

Purpose of Project:

FUNDS WILL BE USED TO FACILITATE PARK REHABILITATION EFFORTS BY LOCAL VOLUNTEERS.

Funded Amount:

$4,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LA CASA DE LA HERENCIA CULTURAL PUERTORRIQUEÑA, INC.
1230 FIFTH AVENUE, SUITE 458
NEW YORK, NY 10029
(212) 722-2600

Name of Project Director:

ELI ALVARADO

Purpose of Project:

FUNDS WILL BE USED TO PRESERVE AND DISSEMINATE THE RICH LITERARY AND CULTURAL HERITAGE OF PUERTO RICANS.

Funded Amount:

$10,000

Requested By:

POWELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LAKE GEORGE OPERA FESTIVAL, INC.
480 BROADWAY, SUITE 336
SARATOGA SPRINGS, NY 12866
(518) 584-6018

Name of Project Director:

ELIZABETH GIBLIN

Purpose of Project:

FUNDS WILL BE USED TO BRING A 45 MINUTE CHILDREN'S OPERA TO AREA SCHOOLS

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LANCASTER NEW YORK OPERA HOUSE, INC.
21 CENTRAL AVENUE
LANCASTER, NY  14086
(716) 683-1776

Name of Project Director:

THOMAS KAZMIERCZAK III

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL EXPENSES FOR DIVERSE ENTERTAINMENT VENUE SERVING WESTERN NEW YORK.

Funded Amount:

$3,200

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LANDMARK WEST, INC.
45 WEST 67TH STREET
NEW YORK, NY  10023
(212) 496-8110

Name of Project Director:

KATE WOOD

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH EDUCATION PROGRAMS, TO SUPPORT THE CERTIFICATE OF APPROPRIATENESS COMMITTEE AND THE PRESERVATION HOTLINE.

Funded Amount:

$3,000

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

    LANDMARK WEST, INC.
    45 WEST 67TH STREET
    NEW YORK, NY  10023
    (212) 446-8110

Name of Project Director:

    KATE WOOD

Purpose of Project:

    FUNDS WILL BE USED TO SUPPORT LW’S PUBLIC EDUCATION AND
    OUTREACH EFFORTS INCLUDING A NEWSLETTER, WEBSITE, WALKING
    TOURS, LECTURES, WORKSHOPS AND A YOUTH EDUCATION PROGRAM.

Funded Amount:

    $2,500

Requested By:

    GOTTFRIED

Name of Administering State Agency:

    OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LATIN AMERICAN CULTURAL CENTER OF QUEENS, INC.
120-55 QUEENS BOULEVARD
KEW GARDENS, NY 11424
(718) 261-7664

Name of Project Director:

NAYIBE NUNEZ-BERGER

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP INTERCULTURAL AWARENESS WITHIN THE LATINO COMMUNITY, AS WELL AS, TO TEACH MUTUAL TOLERANCE AND COOPERATION ACROSS THE LINES OF AGE, RACE, GENDER, ETHNICITY AND SOCIAL STATUS. FUNDS WILL ALSO BE USED FOR CULTURAL EVENTS.

Funded Amount:

$17,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LATIN AMERICAN CULTURAL CENTER OF QUEENS, INC.
120−55 QUEENS BLVD.
KEW GARDENS, NY 11424
(718) 261−7664

Name of Project Director:

NAYIBE NUNEZ BERGER

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL OPERATIONS OF THE CULTURAL CENTER.

Funded Amount:

$30,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LEVITTOWN ATHLETICS GIRLS SOFTBALL
P.O. BOX 142
LEVITTOWN, NY 11756
(516) 351-0963

Name of Project Director:

JOEL BEARMAN

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT AND SUPPLIES

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LEWISTON COUNCIL ON THE ARTS, INC.
P.O. BOX 1
LEWISTON, NY 14092
(716) 754-0166

Name of Project Director:

IRENE RYKASZEWSKI

Purpose of Project:

FUNDS WILL BE USED TO RESTORE BROKEN GRAVESTONES, TAKING RUBBINGS OF THE DECAYING STONES TO ARCHIVE INFORMATION AND RECORD THE PROGRESS WITH A DOCUMENTARY VIDEOGRAPHER.

Funded Amount:

$7,500

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LIGHT IN WINTER FESTIVAL, INC.  
P.O. BOX 4193  
ITHACA, NY 14851  
(607) 227-6290

Name of Project Director:

BARBARA MINK

Purpose of Project:

FUNDS WILL BE USED FOR COSTS OF THE ANNUAL COUNTY-WIDE ART PROGRAM CALLED LIGHT IN WINTER. FUNDS WILL BE USED FOR SOUND, LIGHTING, VIDEO, AND FILM PRODUCTIONS, AND ADVERTISING COSTS.

Funded Amount:

$10,000

Requested By:

LIFTON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LILAC FESTIVAL
333 NORTH PLYMOUTH AVENUE
ROCHESTER, NY 14608
(585) 262-2117

Name of Project Director:

JIM LEBEAU

Purpose of Project:

FUNDS WILL BE USED FOR SPONSORING LUNCHEON AND FESTIVITIES FOR SENIORS FROM THE 134TH DISTRICT AT ROCHESTER'S HISTORIC LILAC FESTIVAL

Funded Amount:

$5,000

Requested By:

REILICH

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
LINCOLN CENTER FOR THE PERFORMING ARTS, INC.
70 LINCOLN CENTER PLAZA, 9TH FLOOR
NEW YORK, NY 10023
(212) 875-5425

MELISSA THORNTON

FUNDS WILL BE USED TO SUPPORT ARTS EDUCATION PROGRAMMING FOR ADULTS AND YOUTH.

$5,000

ROSENTHAL

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LITTLE THEATRE FILM SOCIETY, INC.
240 EAST AVENUE
ROCHESTER, NY 14604
(585) 258-0400

Name of Project Director:

BOB RUSSELL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE THE LITTLE PROGRAMS WHICH ARE OFFERED AT A REDUCED RATE FOR RENTALS, INCLUDING AREA FILM FESTIVALS; FREE LIVE MUSIC PROGRAM INCLUDING ROCHESTER BASED BANDS AND MUSICIANS; AND FREE MONTHLY ART EXHIBITS.

Funded Amount:

$10,000

Requested By:

MORELLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
LOGUEN PARK ASSOCIATION
P.O. BOX 6466
SYRACUSE, NY 13217
(315) 448-4701

PATRICK DRISCOLL

FUNDS WILL BE USED TO SUPPORT IMPROVEMENTS AT LOGUEN PARK INCLUDING A PATH, ACCESSIBLE ENTRY, BENCHES AND GAME TABLES FOR SENIORS AND PERSONS WITH DISABILITIES.

$5,000

CHRISTENSEN

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LONG ISLAND CHILDREN'S MUSEUM
11 DAVIS AVENUE
GARDEN CITY, NY 11530
(516) 224-5800

Name of Project Director:

SUZANNE LEBLANC

Purpose of Project:

FUNDS WILL BE USED FOR GUIDED SCHOOL GROUP VISIT PROGRAM

Funded Amount:

$5,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LONG ISLAND PHILHARMONIC
1 HUNTINGTON QUADRANGLE, SUITE 2C21
MELVILLE, NY 11747
(631) 293-2223

Name of Project Director:

STEPHEN BELTH

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM DEVELOPMENT

Funded Amount:

$2,500

Requested By:

RAIA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LONG ISLAND PHILHARMONIC, INC.
1 HUNTINGTON QUADRANGLE, SUITE 2C21
MELVILLE, NY 11747-4401
(631) 293-2223

Name of Project Director:

STEPHEN BELTH

Purpose of Project:

FUNDS WILL BE USED FOR MUSIC EDUCATION AND COMMUNITY OUTREACH.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LONG ISLAND PHILHARMONIC, INC.
ONE HUNTINGTON QUADRAR
MELVILLE, NY  11747
(631) 293-2223

Name of Project Director:

LINDA MORISSEY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ASSISTANCE WITH TEACHING MUSICAL ARTS TO CHILDREN.

Funded Amount:

$3,000

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

LOU GEHRIG YOUTH BASEBALL/SOFTBALL
50 DANN ROAD
EAST AMHERST, NY 14051
(716) 689-6027

Name of Project Director:

ROBIN PENBERTHY

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE DRAINAGE SYSTEM AT THE COMPLEX

Funded Amount:

$10,000

Requested By:

HAYES

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LOWER MANHATTAN CULTURAL COUNCIL
145 HUDSON STREET - SUITE 801
NEW YORK, NY  10013
(212) 219-9401

Name of Project Director:

LIZ THOMPSON

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET COSTS OF PRINTING AND DISTRIBUTING "DOWNTOWN," A MONTHLY ARTS AND ACTIVITIES CALENDAR. ALSO, TO HELP EXPAND SERVICES PROVIDED TO ARTS AND CULTURAL GROUPS (SOUTH OF HOUSTON TO THE BATTERY).

Funded Amount:

$52,000

Requested By:

SILVER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LUMBER JACK LOU’S COMMUNITY BOXING ACADEMY
40-G CORBIN AVENUE
BAY SHORE, NY 11706
(631) 981-7533

Name of Project Director:

ROB MOSCHETTI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT LUMBER JACK LOU’S COMMUNITY BOXING ACADEMY PROVIDES

Funded Amount:

$5,000

Requested By:

BOYLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

LYONS COMMUNITY CENTER  
P.O. BOX 70  
LYONS, NY 14489  
(315) 946-6202

Name of Project Director:

JAN KOWALSKI

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION OF AN ICE RINK AND PAVILION ON LYONS COMMUNITY CENTER GROUNDS FOR USE OF AREA RESIDENTS

Funded Amount:

$8,000

Requested By:

OAKS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MAHOPAC SPORTS ASSOCIATION  
P.O. BOX 955  
MAHOPAC, NY 10541  
(914) 490-5757

Name of Project Director:

DAVID FURFARO

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT FOR SPORTS FIELDS

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MAMARONECK ARTISTS' GUILD, INC.
2120 BOSTON POST ROAD
LARCHMONT, NY  10538
(914) 834-1117

Name of Project Director:

VIRGINIA ZELMAN

Purpose of Project:

FUNDS WILL BE USED TO IMPROVE THE STRUCTURAL INTEGRITY OF DETERIORATING GALLERY SPACE FOR PUBLIC SAFETY AND ACCESS.

Funded Amount:

$5,000

Requested By:

LATIMER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MANHATTAN BEACH COMMUNITY GROUP, INC.
229 AMHERST STREET
BROOKLYN, NY 11235
(718) 332-3466

Name of Project Director:

DR. RON BIONDO

Purpose of Project:

FUNDS WILL BE USED TO ELIMINATE ALL GRAFFITI IN MANHATTAN BEACH/BROOKLYN BY CONTINUALLY REPAINING SURFACES, REMOVING TRASH AND LITTER ON THE STREET. KITS WILL BE MADE UP FOR BUILDING SUPERINTENDENTS TO ERASE GRAFFITI AND REPAINT.

Funded Amount:

$5,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MAPLEWOOD NEIGHBORHOOD ASSOCIATION OF ROCHESTER, INC.
P.O. BOX 13529
ROCHESTER, NY  14613
(585) 232-8420

Name of Project Director:

CYNTHIA KALEH

Purpose of Project:

FUNDS WILL BE USED FOR THE FINAL PHASE OF THE DEWEY AVENUE CHARETTE.

Funded Amount:

$5,000

Requested By:

MORELLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MARTIN LUTHER KING, JR. CONCERT SERIES, INC.
31 PROSPECT PARK WEST
BROOKLYN, NY  11215
(718) 469-1912

Name of Project Director:

DEBRA GARCIA

Purpose of Project:

FUNDS WILL BE USED TO PRESENT FREE SUMMER CONCERTS.

Funded Amount:

$1,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MARTIN LUTHER KING, JR. CONCERT SERIES, INC.
31 PROSPECT PARK WEST, SUITE 15C
BROOKLYN, NY 11215
(718) 297-4888

Name of Project Director:

DEBRA GARCIA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE CONCERTS AT WINGATE PARK FOR LOW-INCOME COMMUNITY RESIDENTS.

Funded Amount:

$2,500

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MARTIN LUTHER KING, JR. CONCERT SERIES, INC.
31 PROSPECT PARK WEST
BROOKLYN, NY 11215
(212) 297-4888

Name of Project Director:

DEBRA GARCIA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TOP LEVEL ENTERTAINMENT TO BROOKLYN RESIDENTS WITH JAZZ, R&B, GOSPEL, FUNK, CLASSIC, SOUL AND CONTEMPORARY MUSIC. CONCERTS ARE HELD ON SEVEN CONSECUTIVE MONDAYS IN JULY AND AUGUST.

Funded Amount:

$2,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MARTIN LUTHER KING, JR. CONCERT SERIES, INC.
31 PROSPECT PARK WEST
BROOKLYN, NY 11215
(718) 297-4888

Name of Project Director:

DEBRA GARCIA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TOP LEVEL ENTERTAINMENT TO HUNDREDS OF THOUSANDS OF BROOKLYN RESIDENTS, INCLUDING JAZZ, R&B, GOSPEL, FUNK, CLASSICAL, SOUL AND CONTEMPORARY.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MASPETH CHAMBER OF COMMERCE, INC.
P.O. BOX 780265
MASPETH, NY  11378
(718) 326-2400

Name of Project Director:

MARYANNE ZERO

Purpose of Project:

FUNDS WILL BE USED FOR THE GRAND AVENUE BEAUTIFICATION PROGRAM INCLUDING, BUT NOT LIMITED TO, PLANTING AND MAINTENANCE.

Funded Amount:

$25,000

Requested By:

MARKEY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MASSAPEQUA COAST LITTLE LEAGUE
P.O. BOX 108
MASSAPEQUA PARK, NY 11762
(516) 795-7809

Name of Project Director:

TOM BURNS

Purpose of Project:

FUNDS WILL BE USED FOR CHILDRENS SAFETY EQUIPMENT

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
MASSAPEQUA FOOTBALL FOUNDATION
31 ATWATER PLACE
MASSAPEQUA, NY 11758
(516) 799-6739

STEPHEN KROLIKOWSKI

FUNDs WILL BE USED FOR EQUIPMENT UPGRADE

$3,000

SALADINO

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MASSAPEQUA INTERNATIONAL LITTLE LEAGUE
P.O. BOX 103
MASSAPEQUA, NY 11758
(516) 798-5930

Name of Project Director:

TOM JOACHIM

Purpose of Project:

FUNDS WILL BE USED FOR CHILDRENS SAFETY EQUIPMENT

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MASSAPEQUA PHILHARMONIC
P.O. BOX 52
MASSAPEQUA PARK, NY 11762
(516) 795-4071

Name of Project Director:

ROBERT ACKBERG

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAM

Funded Amount:

$1,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
MASSAPEQUA SOCCER CLUB
73 RIPPLEWATER AVENUE
MASSAPEQUA, NY 11758
(516) 799-3743

ROB SNYDER

FUNDS WILL BE USED FOR CHILDRENS SAFETY EQUIPMENT

$2,000

SALADINO

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MEDFORD TAXPAYERS & CIVIC ASS., INC.
P.O. BOX 267
MEDFORD, NY 11763
(631) 475-4783

Name of Project Director:

DON SEUBERT

Purpose of Project:

FUNDS WILL BE USED TO MAINTAIN GARDENS PLANTED BY THE ASSOCIATION.

Funded Amount:

$1,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MERRICK JEWISH CENTER
225 FOX BOULEVARD
MERRICK, NY 11566
(516) 546-3535

Name of Project Director:

CHARLES KLEIN

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE THEIR ONGOING MUSICAL PROGRAMS FOR THE COMMUNITY

Funded Amount:

$5,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

    MERRY-GO-ROUND PLAYHOUSE
    17 WILLIAM STREET
    AUBURN, NY 13021
    (315) 255-1785

Name of Project Director:

    KATHLEEN CARR

Purpose of Project:

    FUNDS WILL BE USED FOR THE CONSTRUCTION OF A SCENE SHOP

Funded Amount:

    $5,000

Requested By:

    FINCH

Name of Administering State Agency:

    OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

METROPOLITAN MUSEUM OF ART
1000 FIFTH AVENUE
NEW YORK, NY  10028
(212) 650-2122

Name of Project Director:

TOM SCHULER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE STANDARD/DDOUBLE WIDE WHEELCHAIRS AND BABY BACK CARRIERS FOR FREE USE OF THE PUBLIC WHEN VISITING THE MET. THESE NEW PIECES OF EQUIPMENT WILL REPLACE OUTDATED/BROKEN UNITS.

Funded Amount:

$3,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDDLEBURY HISTORICAL SOCIETY
ACADEMY STREET
WYOMING, NY 14591
(585) 495-6384

Name of Project Director:

SALLY J. HERENDEEN

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING RESTORATION

Funded Amount:

$3,000

Requested By:

BURLING

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDTOWN MANAGEMENT GROUP, INC.
630 NINTH AVENUE, SUITE 802
NEW YORK, NY  10036
(212) 245-0710

Name of Project Director:

MICHAEL PRESSER

Purpose of Project:

FUNDS WILL BE USED TO PRODUCE AND EXPOSE SOME OF BROADWAY’S CLASSIC MUSICALS FOR CULTURALLY UNDERSERVED PUBLIC SCHOOL STUDENTS.

Funded Amount:

$5,000

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDTOWN MANAGEMENT GROUP, INC.
630 NINTH AVENUE, SUITE 802
NEW YORK, NY  10036
(212) 245-0710

Name of Project Director:

MICHAEL PRESSER

Purpose of Project:

FUNDS WILL BE USED TO BRING A BROADWAY SHOW TO THE SCHOOLS IN THE BRONX.

Funded Amount:

$5,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDTOWN MANAGEMENT GROUP, INC.
630 NINTH AVENUE, SUITE 802
NEW YORK, NY  10036
(212) 245-0710

Name of Project Director:

MICHAEL PRESSER

Purpose of Project:

FUNDS WILL BE USED TOWARDS THE PERFORMANCE OF "YOU’RE A GOOD MAN CHARLIE BROWN" AT A DISTRICT SCHOOL OR AUDITORIUM, AND TO TEACH AN ARTIST RENDERING PROGRAM AT A DISTRICT SCHOOL AUDITORIUM.

Funded Amount:

$5,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDTOWN MANAGEMENT GROUP, INC.
630 NINTH AVENUE, SUITE 802
NEW YORK, NY 10036
(212) 245-0710

Name of Project Director:

MICHAEL PRESSER

Purpose of Project:

FUNDS WILL BE USED TO PRODUCE BROADWAY’S CLASSIC MUSICALS IN A CONTEMPORARY LIGHT FOR CULTURALLY UNDERSERVED PUBLIC SCHOOL STUDENTS AND TO HAVE THEM EXPERIENCE THE JOB OF THEATER.

Funded Amount:

$2,500

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDTOWN MANAGEMENT GROUP, INC.
630 NINTH AVENUE, SUITE 802
NEW YORK, NY 10036
(212) 245-0710

Name of Project Director:

MICHAEL PRESSER

Purpose of Project:

FUNDS WILL BE USED FOR MUSICAL ADAPTATIONS AND IN SCHOOL TEACHING ARTISTS RESIDENCY PROGRAMS. INSIDE BROADWAY ENABLES CULTURALLY UNDERSERVED PUBLIC SCHOOL STUDENTS A CHANCE TO ENJOY LIVE THEATRE.

Funded Amount:

$5,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDTOWN MANAGEMENT GROUP, INC. (DBA INSIDE BROADWAY)
630 NINTH AVENUE, SUITE 802
NEW YORK, NY 10036
(212) 245-0710

Name of Project Director:

MICHAEL PRESSER

Purpose of Project:

FUNDS WILL BE USED TO ENABLE CULTURALLY UNDERSERVED PUBLIC SCHOOL STUDENTS TO EXPERIENCE THE JOY AND INSPIRATION OF LIVE MUSICAL THEATRE, THROUGH ITS TEACHING ARTIST RESIDENCY PROGRAM AND ITS PROFESSIONAL EQUITY PRODUCTIONS OF AMERICAN MUSICALS.

Funded Amount:

$3,710

Requested By:

ABBATE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDTOWN MANAGEMENT GROUP, INC. (DBA INSIDE BROADWAY)
630 NINTH AVENUE, SUITE 802
NEW YORK, NY 10036
(212) 245-0710

Name of Project Director:

MICHAEL PRESSER

Purpose of Project:

FUNDS WILL BE USED TO PRODUCE PLAYS AT AN AREA PUBLIC SCHOOL.

Funded Amount:

$5,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDTOWN MANAGEMENT GROUP, INC. (DBA INSIDE BROADWAY)
630 NINTH AVENUE, SUITE 802
NEW YORK, NY  10036
(212) 245-0710

Name of Project Director:

MICHAEL PRESSER

Purpose of Project:

FUNDS WILL BE USED FOR INSIDE BROADWAY, A NEW YORK CITY CHILDREN’S THEATRE COMPANY THAT PRODUCES BROADWAY’S CLASSIC MUSICALS IN CONTEMPORARY LIGHT FOR YOUNG AUDIENCES. ITS TEACHING ARTISTS RESIDENCY PROGRAM GIVES UNDERSERVED PUBLIC SCHOOL STUDENTS A CHANCE TO ENJOY LIVE THEATRE. ANNUALLY IT

Funded Amount:

$5,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDTOWN MANAGEMENT GROUP, INC. (DBA INSIDE BROADWAY)
630 NINTH AVENUE, SUITE 802
NEW YORK, NY 10036
(212) 245-0710

Name of Project Director:

MICHAEL PRESSER

Purpose of Project:

FUNDS WILL BE USED FOR BROADWAY ADVENTURE, A PROFESSIONAL, NYC BASED THEATER PRODUCTION COMMITTED TO PRODUCING BROADWAY’S CLASSIC MUSICALS IN A CONTEMPORARY LIGHT FOR YOUNG AUDIENCES. THROUGH ITS MUSICAL ADAPTATIONS AND IN-SCHOOL TEACHING ARTISTS RESIDENCY PROGRAMS, BROADWAY DVENTURE WILL ENABLE TWELVE DISTRICT ELEMENTARY SCHOOL STUDENTS TO EXPERIENCE THE JOY AND INSPIRATION OF LIVE THEATER.

Funded Amount:

$60,000

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIDTOWN MANAGEMENT GROUP, INC. (DBA INSIDE BROADWAY)
630 9TH AVENUE, SUITE 802
NEW YORK, NY 10036
(212) 245-0710

Name of Project Director:

MICHAEL PRESSER

Purpose of Project:

FUNDS WILL BE USED TO BRING A PROFESSIONAL ADAPTATION OF "YOU'RE A GOOD MAN, CHARLIE BROWN" TO A LOCAL SCHOOL, INCLUDING STUDY GUIDES, TEACHER CURRICULUM AND PRE-PERFORMANCE WORKSHOP.

Funded Amount:

$1,500

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MILLENIUM DANCE COMPANY, INC.
138 WEST 180 STREET
BRONX, NY 10453
(212) 234-1400

Name of Project Director:

DENISE BERRY

Purpose of Project:

FUNDS WILL BE USED FOR A SUMMER DANCE CAMP TO COUNTER YOUTH OBESITY.

Funded Amount:

$5,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MIND BUILDERS CREATIVE ARTS CO.
3415 OLINVILLE AVENUE
BRONX, NY 10467
(718) 652-6256

Name of Project Director:

MADAHA KINSEY-LAMB

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE MATERIALS AND SUPPLIES FOR THE COMMUNITY FOLK CULTURE PROGRAM. THIS PROGRAM OFFERS AN OPPORTUNITY FOR YOUNG ADULTS TO HAVE HANDS ON EXPERIENCE WITH SHARED CULTURAL ARTS AND ACTIVITIES WHILE DOCUMENTING AND ARCHIVING THIS HERITAGE.

Funded Amount:

$10,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MINISINK VALLEY HISTORICAL SOCIETY
127-131 WEST MAIN STREET, P.O. BOX 659
PORT JERVIS, NY 12771
(845) 856-2375

Name of Project Director:

PETER OSBORNE

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAM OUTREACH AND EDUCATION.

Funded Amount:

$5,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MOOSE HILL THEATRE COMPANY
25 INDIAN ROAD, APT. 4B
NEW YORK, NY 10034
(917) 918-0394

Name of Project Director:

TED R. BRUCE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FULL LENGTH PRODUCTIONS IN INWOOD HILL PARK DURING THE SUMMER SESSION.

Funded Amount:

$3,000

Requested By:

ESPAILLAT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MOSHOLU-WOODLAWN SOUTH COALITION
103 EAST 196TH STREET
BRONX, NY 10468
(718) 584-0515

Name of Project Director:

ABBY BELLows

Purpose of Project:

FUNDS WILL BE USED TO BRING CONCERTS AND ENTERTAINMENT PROGRAMS FOR SENIORS AND YOUTH IN PARKS IN THE GREATER NORWOOD COMMUNITY.

Funded Amount:

$5,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MOUNT VERNON PARENTS AND COMMUNITY FORUM ON EDUCATION
P.O. BOX 3417
MOUNT VERNON, NY 10550
(914) 667-5787

Name of Project Director:

JOAN P. HORTON

Purpose of Project:

FUNDS WILL BE USED TO BRING A UNIQUE MUSIC AND ART EXPERIENCE TO THE RESIDENTS OF WESTCHESTER AND MT. VERNON.

Funded Amount:

$5,000

Requested By:

PRETLOW

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MOUNT VERNON RECREATION DEPARTMENT
1 ROOSEVELT SQUARE, ROOM 3
MOUNT VERNON, NY 10550
(914) 665-2420

Name of Project Director:

KAREN WATTS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF FEES FOR PERFORMERS FOR THE SUMMER BREEZE CONCERTS.

Funded Amount:

$10,000

Requested By:

PRETLOW

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MOVING IMAGE, INC.
209 WEST HOUSTON STREET
NEW YORK, NY 10014
(212) 627-2035

Name of Project Director:

KAREN COOPER

Purpose of Project:

FUNDS WILL BE USED FOR THE PRESENTATION OF NEW DOCUMENTARIES FROM AROUND THE WORLD.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MUDPIES CHILDRENS MUSEUM FOUNDATION
26 LINCOLN WOODS LANE
BUFFALO, NY  14222
(716) 854-7437

Name of Project Director:

PATRICK E. MARTIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT 2007 PUBLIC EDUCATION PROGRAMS
IN WNY ON IRISH-AMERICAN CULTURE, ARTS AND SOCIETY.

Funded Amount:

$4,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MUSEUM OF AFRICAN AMERICAN HISTORY
231 WEST 142ND STREET
NEW YORK, NY 10030
(212) 234-4926

Name of Project Director:

DR. ADOLPH ROBERTS

Purpose of Project:

FUNDS WILL BE USED TO TRAIN YOUTH TO BECOME EFFECTIVE, COMPUTER LITERATE RESEARCH PERSONNEL.

Funded Amount:

$15,000

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MUSEUM OF CONTEMPORARY AFRICAN DIASPORIAN ARTS
80 HANSON PLACE
BROOKLYN, NY 11217
(718) 230-0492

Name of Project Director:

LAURIE A. CUMBO

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY COSTS OF THE MUSEUM'S EXHIBITION.

Funded Amount:

$20,000

Requested By:

BOYLAND

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MUSEUM OF CONTEMPORARY AFRICAN DIASPORIAN ARTS
80 HANSON PLACE
BROOKLYN, NY 11217
(718) 230-0492

Name of Project Director:

LAURIE CUMBO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CULTURAL AND ARTS EDUCATION FOR YOUTHS.

Funded Amount:

$5,000

Requested By:

JEFFRIES

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MUSEUM OF CONTEMPORARY AFRICAN DIASPORIAN ARTS
80 HANSON PLACE
BROOKLYN, NY  11217
(718) 230-0492

Name of Project Director:

LAURIE A. COMBO

Purpose of Project:

FUNDS WILL BE USED TO COVER EXHIBITION COSTS ASSOCIATED WITH MOUNTING FOUR EDUCATIONAL EXHIBITIONS FOCUSED ON THE AFRICAN DIASPORA.

Funded Amount:

$4,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MUSEUM OF CONTEMPORARY AFRICAN DIASPORIAN ARTS
80 HANSON PLACE
BROOKLYN, NY 11217
(718) 230-0492

Name of Project Director:

LAURIE A. CUMBO

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A FREE OUTDOOR FILM FESTIVAL IN BEDFORD STUYVESANT’S HISTORIC FULTON PARK, EVERY FRIDAY IN AUGUST. FILMS WILL DEPICT IMPORTANT STORIES MEANT TO EMPOWER AND INFORM OUR CHILDREN.

Funded Amount:

$4,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

MUSEUM OF CONTEMPORARY AFRICAN DIASPORIAN ARTS
80 HANSON PLACE
BROOKLYN, NY  11217
(718) 230-0492

Name of Project Director:

LAUIRE A. CUMBO

Purpose of Project:

FUNDS WILL BE USED FOR THE MOCADA’S EXHIBITION PROGRAM.

Funded Amount:

$5,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

MUSIC MOBILE, INC.
P.O. BOX 6024
ALBANY, NY  12206
(518) 462-8714

Name of Project Director:

RUTH PELHAM

Purpose of Project:

FUNDS WILL BE USED FOR THE CREATION OF AN ARCHIVE TO PRESERVE THE HISTORY AND DOCUMENTS RELATED TO THE MUSIC MOBILE.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NARROWS COMMUNITY THEATRE, INC.
9728 THIRD AVENUE
BROOKLYN, NY 11209
(718) 482-3137

Name of Project Director:

SUSAN HUIZINGA

Purpose of Project:

FUNDS WILL BE USED FOR A MUSICAL PRESENTATION - SPRING FLING - TO BE PRESENTED AT SHORE HILLS SENIOR CENTER.

Funded Amount:

$3,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NASSAU COUNTY FIREFIGHTERS MUSEUM AND EDUCATION CENTER
ONE DAVIS AVENUE
GARDEN CITY, NY 11530
(516) 572-4177

Name of Project Director:

ALANA PETROCELLI

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL PURPOSES

Funded Amount:

$2,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NASSAU SHORES CIVIC ASSOCIATION
P.O. BOX 171
MASSAPEQUA, NY 11758
(516) 799-4951

Name of Project Director:

WALLY D'AMATO

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAMS

Funded Amount:

$1,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE
82 PARTRIDGE STREET
ALBANY, NY  12206
(518) 482-7324

Name of Project Director:

MCKINLEY JONES

Purpose of Project:

FUNDS WILL BE USED FOR THE CREATION OF A CAPITAL DISTRICT AFRICAN-AMERICAN HISTORICAL SOCIETY TO COLLECT DATA AND DOCUMENT THE HISTORY OF AFRICAN AMERICAN PEOPLE IN THE CAPITAL DISTRICT.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEVERSINK VALLEY AREA MUSEUM
P.O. BOX 263, 26 HOAG ROAD
CUDDYBACKVILLE, NY 12729
(845) 754-8870

Name of Project Director:

SETH GOLDMAN

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH TO THE COMMUNITY AND PROMOTION OF MUSEUM ACTIVITIES.

Funded Amount:

$5,000

Requested By:

GUNThER-A

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW 42ND STREET, INC.
229 WEST 42ND STREET, 10TH FLOOR
NEW YORK, NY  10036
(646) 223-3000

Name of Project Director:

CHERYL KOHN

Purpose of Project:

THE FUNDS WILL CONTINUE TO PROVIDE CLASSES IN THEATER EDUCATION FOR THE YOUTH.

Funded Amount:

$5,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW 42ND STREET, INC.
229 WEST 42ND STREET, 10TH FLOOR
NEW YORK, NY 10036
(646) 223-3000

Name of Project Director:

CORA COHAN

Purpose of Project:

FUNDS WILL BE USED FOR A MODEL ARTS EDUCATION PROGRAM.

Funded Amount:

$2,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW NETHERLAND ROUTES, INC.
P.O. BOX 1710
SCHENECTADY, NY   12301
(518) 479-9256

Name of Project Director:

DON RITTNER

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A FULL SIZE REPLICA OF THE 17TH CENTURY SHIP WHICH WILL ACT AS A MUSEUM AND INVOLVE THE PUBLIC IN LEARNING ABOUT SHIP BUILDING METHODS, LOCAL HISTORY AND ITS IMPACT.

Funded Amount:

$5,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW ROCHELLE OPERA, INC.
P.O. BOX 112
NEW ROCHELLE, NY  10802
(914) 576-0365

Name of Project Director:

BILL TUCKER

Purpose of Project:

FUNDS WILL BE USED TO BRING LIVE OPERA TO THE COMMUNITY AND TO
ENGAGE MEMBERS OF THE COMMUNITY IN ALL PHASES OF THE
PRODUCTION (ON STAGE AND BEHIND THE SCENES).

Funded Amount:

$2,500

Requested By:

LATIMER, PAULIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW ROCHELLE OPERA, INC.
P.O. BOX 112
NEW ROCHELLE, NY  10802
(914) 576-0365

Name of Project Director:

BILLIE TUCKER

Purpose of Project:

FUNDS WILL BE USED TO UNDERWRITE THE PRODUCTION OF RIGOLETTO INCLUDING FUNDING OF ORCHESTRA MEMBERS AND OPERA SINGERS.

Funded Amount:

$2,500

Requested By:

LATIMER, PAULIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEW YORK AQUARIUM
SURF AVENUE AND WEST 18TH STREET
BROOKLYN, NY 11224
(718) 265-3438

Name of Project Director:

CYNTHIA REICH

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE EDUCATIONAL OUTREACH VIA
CLASSROOM INSTRUCTION TO SCHOOL CHILDREN, AS WELL AS ADULTS IN
WILDLIFE BIOLOGY AND OCEANOGRAPHY.

Funded Amount:

$18,664

Requested By:

ABBATE, BOYLAND, BRENNAN, BROOK-KRASNY, CAMARA, COLTON,
CYMBROWITZ-S, GORDON-D, HIKIND, JACOBS, JEFFRIES, LENTOL, LOPEZ-V,
MAISEL, MILLMAN, ORTIZ, PERRY, ROBINSON, TOWNS, WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEW YORK AQUARIUM
BOARDWALK AT WEST 8TH STREET
BROOKLYN, NY 11224
(718) 265-3400

Name of Project Director:

CYNTHIA REICH

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL PROGRAMS AT THE AQUARIUM FOR WILDLIFE CONSERVATION SOCIETY FOR SCHOOL AGE CHILDREN FROM LOCAL ELEMENTARY AND JUNIOR HIGH SCHOOLS. SCHOOLS P.S. 84 AND 116 WILL PARTICIPATE IN THIS PROGRAM THIS YEAR.

Funded Amount:

$6,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW YORK AQUARIUM
SURF AVENUE AND WEST 8TH STREET
BROOKLYN, NY  11224
(718) 265-3400

Name of Project Director:

CYNTHIA REICH

Purpose of Project:

FUNDS WILL BE USED FOR CHILDREN'S PROGRAMS, IN-STATE FIELD TRIPS AND RENTAL OF ROOMS AT AQUARIUM.

Funded Amount:

$4,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW YORK CLASSICAL THEATRE, INC.
741 WEST END AVENUE, SUITE 1E
NEW YORK, NY 10025
(212) 252-4531

Name of Project Director:

STEPHEN BURDMAN

Purpose of Project:

FUNDS WILL SUPPORT THE UPCOMING SEASON OF FREE CLASSICAL THEATRE ACROSS MANHATTAN.

Funded Amount:

$4,500

Requested By:

O’DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW YORK HALL OF SCIENCE
47–01 111 STREET
QUEENS, NY 11368 – 2950
(718) 699–0005

Name of Project Director:

ALAN J. FRIEDMAN

Purpose of Project:

FOR THEIR TEACHER TRAINING INITIATIVE.

Funded Amount:

$20,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW YORK INSTITUTE OF DANCE AND EDUCATION
BOX 1101, 93 NORTH STREET
AUBURN, NY 13021
(315) 252-4420

Name of Project Director:

SEAN MCLEOD

Purpose of Project:

FUNDS WILL BE USED FOR THE NEW YORK DANCE FESTIVAL

Funded Amount:

$5,000

Requested By:

FINCH

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
CSF 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEW YORK IRISH CENTER
104 JACKSON AVENUE
LONG ISLAND CITY, NY 11101
(718) 482-0909

Name of Project Director:

COLIN CAMPBELL

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE COMMUNITY AND CULTURAL PROGRAMS INCLUDING CLASSES ABOUT IRISH TRADITION AND CULTURE, SENIOR CITIZENS SERVICES AND OTHER PROGRAMS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW YORK STATE SPORTSMEN’S EDUCATION FOUNDATION,
56 GERMAN BOULEVARD
YAPHANK, NY 11980
(631) 924-8210

Name of Project Director:

GERALD GIAMMATTEO

Purpose of Project:

FUNDS WILL BE USED FOR A RETREAT, TEACHING SPORTS IN OUTDOORS SKILLS TO WOMEN.

Funded Amount:

$3,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEW YORK THEATRE WORKSHOP, INC.
70 EAST 4TH STREET
NEW YORK, NY 10003
(212) 780-9037 108

Name of Project Director:

CARL SYLVESTRE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SUPPORT FOR NYTW’S SEASON AND ARTISTIC (AUTHOR) FEES FOR PLAYWRIGHTS.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NEW YORK ZOOLOGICAL SOCIETY
2300 SOUTHERN BOULEVARD
BRONX, NY  10460
(718) 220-7139

Name of Project Director:

JOHN CALVELLI

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATION INSTRUCTORS AND TEACHER TRAINERS, TEACHING STRATEGIES AND MODEL ACTIVITIES TO ENHANCE CLASSROOM LIFE SCIENCE INSTRUCTION.

Funded Amount:

$73,059

Requested By:

ARROYO, BENEDETTO, BENJAMIN, DIAZ-L, DIAZ-R, DINOWITZ, GREENE, HEASTIE, RIVERA-J, RIVERA-N, RIVERA-P

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NEWBURGH NUCLEARS AMERICAN LEGION BASEBALL
3 MARLENE COURT
NEWBURGH, NY 12550
(845) 566-0929

Name of Project Director:

DON BECKER

Purpose of Project:

FUNDS WILL BE USED TO DEFRAY COST OF STATE JUNIOR AMERICAN TOURNEY TO BE HELD IN NEWBURGH

Funded Amount:

$5,000

Requested By:

KIRWAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NIAGARA AQUARIUM FOUNDATION, INC.
701 WHIRLPOOL STREET
NIAGARA FALLS, NY 14301
(716) 285-3575

Name of Project Director:

GAY B. MOLNAR

Purpose of Project:

FUNDS WILL BE USED TOWARD FACILITY UPGRADES AND REPAIRS.

Funded Amount:

$5,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
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 RENOVATE AND MAKE A HANDICAPPED ACCESSIBLE BATHROOM ON THE FIRST FLOOR OF THE FACILITY.

Funded Amount:

$4,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NIAGARA COUNTY HISTORICAL SOCIETY
215 NIAGARA STREET
LOCKPORT, NY 14094
(716) 434-7433

Name of Project Director:

DOUGLAS FARLEY

Purpose of Project:

FUNDS WILL BE USED FOR GENERAL PROGRAM FUNDS FOR NIAGARA COUNTY’S BICENTENNIAL CELEBRATION

Funded Amount:

$10,000

Requested By:

COLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NIAGARA COUNTY HISTORICAL SOCIETY, INCORPORATED
215 NIAGARA STREET
LOCKPORT, NY  14094
(716) 434-7433

Name of Project Director:

ANN MARIE LINNABERRY

Purpose of Project:

FUNDS WILL BE USED TO HIGHLIGHT THE RESEARCH, ARTIFACTS AND LOCAL HISTORY OF THE POW’S WHO WERE HELD AT OLD FORT NIAGARA FROM 1944-1946.

Funded Amount:

$3,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NIAGARA FALLS LITTLE THEATRE, INC.
P.O. BOX 160
NORTH TONAWANDA, NY  14120
(716) 284-6358

Name of Project Director:

FRAN NEWTON

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE LIGHTING AND SOUND EQUIPMENT.

Funded Amount:

$13,200

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NIAGARA SUMMER FINE ARTS PROGRAM, INC.
954 RANKINE ROAD
NIAGARA FALLS, NY 14305
(716) 284-5456

Name of Project Director:

PATRICK KUCIEWSKI

Purpose of Project:

FUNDS WILL BE USED FOR PROMOTION AND PRODUCTION OF THE SUMMER THEATER SERIES.

Funded Amount:

$5,000

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NIEUW AMERSFORT COMMUNITY ASSOCIATION, INC.
P.O. BOX 100-039
BROOKLYN, NY  11210
(718) 338-5774

Name of Project Director:

STEVE YAMIN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT ANNUAL SUMMER NIEUW AMERSFORT FREE CONCERT IN THE PARK PERFORMANCES AND CIVIC OUTREACH PROGRAMS IN THE COMMUNITY.

Funded Amount:

$1,500

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NORTH BELLMORE CIVIC ASSOCIATION
P.O. BOX 569
NORTH BELLMORE, NY 11710
(516) 680-2226

Name of Project Director:

CRISTINE A. COOK

Purpose of Project:

FUNDS WILL BE USED TO REPLACE "WELCOME TO NORTH BELLMORE" SIGN

Funded Amount:

$2,000

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NORTH BELLMORE NORTH MERRICK LITTLE LEAGUE
707 VIRGINIA AVENUE
NORTH BELLMORE, NY 11710
(516) 781-7220

Name of Project Director:

JERRY MARINO

Purpose of Project:

FUNDS WILL BE USED FOR TWO NEW SCOREBOARDS FOR THE LITTLE LEAGUE

Funded Amount:

$7,500

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NORWOOD HISTORICAL MUSEUM SOCIETY, ASSN.
39 NORTH MAIN STREET
NORWOOD, NY 13668
(315) 353-2751

Name of Project Director:

SUSAN BARTLETT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE WINDOW REPLACEMENT AND IMPLEMENT OTHER ENERGY CONSERVATION RELATED PROJECTS AT MUSEUM.

Funded Amount:

$15,000

Requested By:

AUBERTINE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYC KIDS FEST  
300 WEST 112TH STREET, 5B  
NEW YORK, NY 10026  
(646) 229-1900

Name of Project Director:

JESSICA CHORNESKY

Purpose of Project:

FUNDS WILL BE USED FOR THE FREE PERFORMING ARTS FESTIVAL THAT BRINGS PERFORMANCES TO THE DIVERSE YOUTH COMMUNITIES OF NEW YORK CITY.

Funded Amount:

$2,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

NYC PARK ADVOCATES, INC.
222 EAST 93RD STREET, SUITE 40H
NEW YORK, NY 10128
(212) 987-0565

Name of Project Director:

GEOFFREY CROFT

Purpose of Project:

FUNDS WILL BE USED TOWARDS EXPENSES ASSOCIATED WITH ONGOING COMMUNITY AND VOLUNTEER ORGANIZING AND RESEARCH REGARDING PARK FUNDING, MAINTENANCE, DISABLED ACCESS AND OTHER PARK ISSUES.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

NYC PARK ADVOCATES, INC.
223 EAST 93RD STREET, SUITE 40H
NEW YORK, NY  10128
(212) 987-0565

Name of Project Director:

GEOFFREY CROFT

Purpose of Project:

FUNDS WILL BE USED FOR COMMUNITY/VOLUNTEER ORGANIZING AND RESEARCH. RESEARCH INCLUDES PARK AGENCY FUNDING, MAINTENANCE AND OPERATION, PUBLIC/PRIVATE PARTNERSHIPS, ACCESS FOR PEOPLE WITH DISABILITIES, PUBLIC SAFETY, THE WATERFRONT, RECREATION AND THE EQUITABLE DISTRIBUTION OF PARKS AND RELATED SERVICES.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

OAKDALE IMPROVEMENT SOCIETY, LTD.
P.O. BOX 291
OAKDALE, NY 11769
(631) 589-4833

Name of Project Director:

LINDA HART

Purpose of Project:

FUNDS WILL BE USED TO PLANT FLOWERS AND TREES THROUGHOUT MAIN STREET IN THE HAMLET OF OAKDALE.

Funded Amount:

$2,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ODA COMMUNITY DEVELOPMENT CORP.
12 HEYWARD STREET
BROOKLYN, NY  11211
(718) 522-5620

Name of Project Director:

RABBI ZVI KESTENBAUM

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT NEIGHBORHOOD BEAUTIFICATION AND IMPROVEMENT.

Funded Amount:

$12,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

OFFICE OF THE PUTNAM COUNTY HISTORIAN
68 MARVIN AVENUE
BREWSTER, NY 10509
(845) 728-7209

Name of Project Director:

ALAN WARNECKE

Purpose of Project:

FUNDS WILL BE USED FOR A HISTORICAL PLANNER FOR THE HILL/AGREE FARM

Funded Amount:

$2,500

Requested By:

BALL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

OLD FORT NIAGARA ASSOCIATION, INC.
P.O. BOX 169
YOUNGSTOWN, NY  14174
(716) 745-7611

Name of Project Director:

ROBERT EMERSON

Purpose of Project:

FUNDS WILL BE USED FOR SUPPORT OF PUBLIC PROGRAMMING, MAINTENANCE AND HISTORIC PRESERVATION PROJECTS AT THIS HISTORIC TOURIST DESTINATION.

Funded Amount:

$4,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

OLD FORT NIAGARA ASSOCIATION, INC.
P.O. BOX 169
YOUNGSTOWN, NY  14174
(716) 745-7611

Name of Project Director:

ROBERT EMERSON

Purpose of Project:

FUNDS WILL BE USED FOR THE SUPPORT OF PUBLIC PROGRAMMING, MAINTENANCE AND HISTORIC PRESERVATION PROJECTS AT THIS HISTORICAL TOURIST SITE.

Funded Amount:

$5,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

OPEN CHANNELS NY, INC.
258 BOWERY, 2ND FLOOR
NEW YORK, NY 10012
(212) 219-0736 109

Name of Project Director:

CATHERINE PORTER

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE CURRENT SENIOR CITIZEN PROGRAM AND RESUME THE YOUTH COMPONENT OF CECO, WHICH OFFERS FREE CREATIVE WORKSHOPS FOR CULTURALLY UNDER-SERVED SENIOR CITIZENS ON THE LOWER EAST SIDE OF MANHATTAN.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

OPEN EYE THEATRE
960 MAIN STREET, P.O. BOX 959
MARGARETVILLE, NY 12455
(845) 586-1660

Name of Project Director:

ANNIE BROCKWAY

Purpose of Project:

FUNDS WILL BE USED FOR SEATING AND STORAGE

Funded Amount:

$4,000

Requested By:

CROUCH

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ORANGE COUNTY FIREFIGHTERS MUSEUM
P.O. BOX 388
MONTGOMERY, NY 12549
(914) 457-9654

Name of Project Director:

JAMES BAIR

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF PROGRAMS THAT THE
ORANGE COUNTY FIREFIGHTERS MUSEUM PROVIDES

Funded Amount:

$5,000

Requested By:

CALHOUN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ORATORIO SOCIETY OF QUEENS, INC.
25-33 154TH STREET
FLUSHING, NY  11354
(718) 460-0726

Name of Project Director:

PATTY DECICCCIO-FRANKE

Purpose of Project:

FUNDS WILL BE USED TO ORGANIZE PRESENTATIONS OF AMATEUR
PERFORMANCES OF CLASSICAL AND SACRED MUSIC. FUNDS WILL ALSO
PROVIDE PERFORMANCES AND CONCERTS AT LOWER COSTS TO STUDENTS.

Funded Amount:

$1,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ORCHESTRA OF THE BRONX, INC.
5 MINERVA PLACE
BRONX, NY 10468
(718) 365-4209

Name of Project Director:

MICHAEL SPIERMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HIGH QUALITY PROFESSIONAL ORCHESTRAL CONCERTS TO BRONX RESIDENTS, FREE OF CHARGE.

Funded Amount:

$10,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

OYSTER BAY HISTORICAL SOCIETY
20 SUMMIT STREET, P.O. BOX 297
OYSTER BAY, NY  11771
(516) 922-5032

Name of Project Director:

THOMAS A. KUEHHAS

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE INNOVATIVE HANDS-ON EDUCATIONAL PROGRAMS FOR THE COMMUNITY.

Funded Amount:

$1,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PARK PLAYHOUSE, INC.
ONE STEUBEN PLACE, STEUBEN EXECUTIVE SUITES, P.O. BOX 525
ALBANY, NY  12201
(518) 434-2035

Name of Project Director:

SHIRLEY ARENSBERG

Purpose of Project:

FUNDS WILL BE USED FOR THEATRE PRODUCTION IN RIVERLINK PARK IN AMSTERDAM.

Funded Amount:

$4,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PARKWAY VILLAGE HISTORICAL SOCIETY  
C/O GUTTMAN 147-51 CHARLES ROAD, SUITE 23A  
KEW GARDENS, NY  11435  
(718) 591-0361

Name of Project Director:

JUDITH GUTTMAN

Purpose of Project:

FUNDS WILL BE USED FOR ACTIVITIES WHICH PRESERVE AND PUBLISH  
PARKWAY AND BRIARWOOD HISTORY THROUGH THE PRODUCTION OF  
A HISTORIC NEWSLETTER, PUBLICATION OF THE NATIONAL REGISTER  
ESSAY, SHOOTING HISTORIC PHOTOS, PRODUCTION OF PHOTO ARCHIVE  
DISPLAY, SPONSORSHIP OF NOT-FOR-PROFIT PARTICIPATION IN 60TH  
ANNIVERSARY EVENT.

Funded Amount:

$1,500

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PIPER THEATRE PRODUCTIONS, INC.
P.O. BOX 150613
BROOKLYN, NY 11215
(718) 499-5271

Name of Project Director:

JOHN P. MCENEMY

Purpose of Project:

FUNDS WILL BE USED TO EXPAND PROGRAM TO THREE ADDITIONAL WEEKENDS OF J.J. BYRNE PARK AND TO EXPAND VIEWING OPPORTUNITIES FOR THE COMMUNITY.

Funded Amount:

$3,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PLAINEDGE FOOTBALL LEAGUE, INC.
P.O. BOX 161
BETHPAGE, NY 11714
(516) 799-4351

Name of Project Director:

MICHAEL LORDI

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE SAFETY EQUIPMENT

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PLAINEDGE PARENTS ATHLETIC ASSOCIATION
52A CEDAR DRIVE
FARMINGDALE, NY 11735
(516) 835-8986

Name of Project Director:

JOHN HANRAHAN

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH ATHLETIC ASSOCIATION

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PLAINEDGE ROBOTICS CLUB
241 NORTH WYNGATE DRIVE
MASSAPEQUA, NY 11758
(516) 992-7550

Name of Project Director:

ROBERT GANDOLFO

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAM

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PLAINEDGE SOCCER
P.O. BOX 129
NORTH MASSAPEQUA, NY 11758
(516) 650-4019

Name of Project Director:

JOE KORAN

Purpose of Project:

FUNDS WILL BE USED FOR THE CONTINUATION OF PROGRAM

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PLAINEDGE YOUTH BASEBALL
1079 HICKSVILLE ROAD
MASSAPEQUA, NY 11758
(516) 579-7255

Name of Project Director:

JOHN FIORE

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT UPGRADE

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

POLICE ATHLETIC LEAGUE
510 PARKSIDE BOULEVARD
MASSAPEQUA, NY 11758
(516) 541-3621

Name of Project Director:

MAUREEN ROACH

Purpose of Project:

FUNDS WILL BE USED FOR A SCOREBOARD

Funded Amount:

$1,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PROMOTE ART WORKS, INC.
123 SMITH STREET
BROOKLYN, NY 11201
(718) 797-3116

Name of Project Director:

KATHLEEN LAZIZA

Purpose of Project:

FUNDS WILL BE USED TO ALLOW THE MUSEUM TO CONTINUE TO SERVE THE PUBLIC BY EXPANDING ITS HOURS.

Funded Amount:

$2,500

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PROSPECT PARK ALLIANCE, INC.
95 PROSPECT PARK WEST
BROOKLYN, NY 11215
(718) 284-3763

Name of Project Director:

TUPPER THOMAS

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE RECREATIONAL, ENTERTAINMENT, AND EDUCATIONAL PROGRAMS AT THE PARK.

Funded Amount:

$5,000

Requested By:

BRENNAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PROSPECT PARK ALLIANCE, INC.
95 PROSPECT PARK WEST
BROOKLYN, NY 11215
(718) 965-8951

Name of Project Director:

LESLIE WEBER

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE HIGH QUALITY EDUCATIONAL PROGRAMS AT THE PROSPECT PARK’S YOUTH AND EDUCATION PROGRAM AUDUBON CENTER, LEFFERTS HISTORIC HOUSE, AND THROUGH THE ALLIANCE PARTNERSHIP AT THE BROOKLYN ACADEMY OF SCIENCE AND THE ENVIRONMENT.

Funded Amount:

$4,000

Requested By:

MILLMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PROSPECT PARK ALLIANCE, INC.
95 PROSPECT PARK WEST
BROOKLYN, NY 11215
(718) 965-8951

Name of Project Director:

RACHEL AMAR

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH AND EDUCATION PROGRAMMING IN PROSPECT PARK, PROVIDING LEADERSHIP, COMMUNITY INVOLVEMENT AND ENVIRONMENTAL STEWARDSHIP FOR THE YOUTH IN THE COMMUNITY.

Funded Amount:

$4,000

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PROSPECT PARK ALLIANCE, INC.
95 PROSPECT PARK WEST
BROOKLYN, NY 11215
(718) 965-8951

Name of Project Director:

TUPPER THOMAS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT YOUTH AND EDUCATION PROGRAMS IN THE PARK.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PROSPECT PARK ALLIANCE, INC.
95 PROSPECT PARK WEST
BROOKLYN, NY  11215
(718) 965-6392

Name of Project Director:

IBRAHIM ABDUL-MATIN

Purpose of Project:

FUNDS WILL BE USED FOR YOUNG PEOPLE LEADERSHIP TRAINING IN TEAMWORK AND COMMUNITY SERVICE. THESE PROGRAMS OFFER TEENS THE OPPORTUNITY TO BECOME MORE INVOLVED IN COMMUNITY OUTREACH.

Funded Amount:

$2,000

Requested By:

PERRY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PROSPECT PARK ALLIANCE, INC.
95 PROSPECT PARK WEST
BROOKLYN, NY 11215
(718) 965-8953

Name of Project Director:

TUPPER THOMAS

Purpose of Project:

FUNDS WILL BE USED TO EDUCATE AND ENRICH YOUTH. CHILDREN AND YOUNG ADULTS WILL PARTICIPATE IN YOUTH LEADERSHIP INITIATIVES, SUCH AS ENVIRONMENTAL, AND COMMUNITY EDUCATION.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PUERTO RICAN DAY PARADE OF WESTERN NEW YORK ASSOCIATION
P.O. BOX 166
BUFFALO, NY  14202
(718) 583-3291

Name of Project Director:

CHARLES TORRES

Purpose of Project:

FUNDS WILL BE USED FOR A CULTURAL PARADE AND ASSOCIATED ACTIVITIES, INCLUDING A LEADERSHIP PAGEANT AND WORKSHOP.

Funded Amount:

$3,000

Requested By:

DIAZ-L

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

PUERTO RICAN DAY PARADE OF WESTERN NEW YORK ASSOCIATION
ELLIOT SQUARE STATION, P.O. BOX 166
BUFFALO, NY 14202
(716) 857-4231

Name of Project Director:

MIGUEL SANTOS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE PUERTO RICAN DAY PARADE.

Funded Amount:

$8,500

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

PUTNAM ARTS COUNCIL
P.O. BOX 156
MAHOPAC, NY 10541
(845) 216-0636

Name of Project Director:

JOYCE PICONE

Purpose of Project:

FUNDS WILL BE USED FOR TECHNOLOGY UPGRADE

Funded Amount:

$5,000

Requested By:

BALL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS BOTANICAL GARDEN SOCIETY, INC.
43-50 MAIN STREET
FLUSHING, NY 11355
(718) 886-3800

Name of Project Director:

SUSAN LACERTE

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS FOR CHILDREN FROM PUBLIC SCHOOLS 12, 148, 149, 152, 212, 222, 228 AND IS 145 AND IS 230. THIS WILL INCLUDE IN-STATE TRIPS TO THE GARDENS OFFERING HANDS ON EDUCATIONAL PROGRAMS, WORKSHOPS, ETC. FUNDS ARE TO BE DIVIDED EQUALLY BETWEEN THESE SCHOOLS.

Funded Amount:

$13,500

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS BOTANICAL GARDEN SOCIETY, INC.
40-50 MAIN STREET
FLUSHING, NY 11355
(718) 886-3800

Name of Project Director:

SUSAN LACERTE

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE MASTER PLAN UPDATE WHICH WILL ADDRESS INFRASTRUCTURE OPERATION AND PROGRAM NEEDS OF THE GARDENS THROUGH CREATIVE DESIGN SOLUTIONS TO DEVELOP THE GARDENS AS A MODEL OF ECOLOGICAL AND INTERPRETIVE DESIGN.

Funded Amount:

$1,000

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS BOTANICAL GARDEN SOCIETY, INC.
40-50 MAIN STREET
FLUSHING, NY  11355
(718) 886-3800

Name of Project Director:

SUSAN LIACERK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT MASTER PLAN UPDATE WHICH WILL ADDRESS INFRASTRUCTURE, OPERATIONS AND PROGRAM NEEDS OF GARDENS THROUGH DESIGN SOLUTIONS AND DEVELOP GARDENS AS A MODEL OF ECOLOGICAL DESIGN AND INTERPRETIVE DESIGN.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS BOTANICAL GARDEN SOCIETY, INC.
43-50 MAIN STREET
FLUSHING, NY 11355
(718) 886-3800

Name of Project Director:

SUSAN LACERTE

Purpose of Project:

FUNDS WILL BE USED TO CELEBRATE THE OPENING OF THE GARDEN'S FACILITIES AND TO EDUCATE VISITORS ON THE BENEFITS OF ENVIRONMENTAL STEWARDSHIP.

Funded Amount:

$3,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS BOTANICAL GARDEN SOCIETY, INC.
43-50 MAIN STREET
FLUSHING, NY 11355
(718) 886-3800

Name of Project Director:

SUSAN LACERTE

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE MASTER PLAN UPDATE WHICH WILL ADDRESS INFRASTRUCTURE OPERATIONS AND PROGRAM NEEDS OF THE GARDENS THROUGH CREATIVE DESIGN SOLUTIONS AND DEVELOP THE GARDENS AS A MODEL OF ECOLOGICAL AND INTERPRETIVE DESIGN.

Funded Amount:

$1,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS CIVIC CONGRESS FOUNDATION
P.O. BOX 238
FLUSHING, NY 11363
(718) 358-2535

Name of Project Director:

PAUL GRAJIANO

Purpose of Project:

FUNDS WILL BE USED TO SURVEY CATALOG AND FILE APPLICATION TO REGISTER A PORTION OF LAURELTON, QUEENS AS AN ELIGIBLE NATIONAL/STATE HISTORIC PRESERVATION DISTRICT.

Funded Amount:

$2,000

Requested By:

SCARBOROUGH

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS COLLEGE FOUNDATION, INC.
6530 KISSENA BOULEVARD
FLUSHING, NY  11367
(718) 261-7664

Name of Project Director:

MICHAEL COGSWELL

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE LOUIS ARMSTRONG HOUSE/ARCHIVE RESEARCH FOUNDATION.

Funded Amount:

$2,000

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS COUNCIL ON THE ARTS, INC.
79-01 PARK LANE SOUTH
WOODHAVEN, NY 11421-1166
(718) 647-3377

Name of Project Director:

HOONG YEE LEE KRAKAUER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF CULTURAL ACTIVITIES.

Funded Amount:

$2,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS COUNCIL ON THE ARTS, INC.
70-01 PARK LANE SOUTH
WOODHAVEN, NY  11421-1166
(718) 647-3377

Name of Project Director:

HOONG YEE LEE KRAKAUER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT ARTISTS, CURATOR, GRAPHIC DESIGN AND OTHER PROFESSIONAL SERVICES NECESSARY FOR THE PRESENTATION OF THE COUNCIL'S ARTS PROGRAMS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS COUNCIL ON THE ARTS, INC.
ONE FOREST PARK AT OAK RIDGE
WOODHAVEN, NY 11421
(718) 647-3377 18

Name of Project Director:

LISA GUTTING

Purpose of Project:

FUNDS WILL BE USED TO WORK WITH SCHOOLS IN DEVELOPING A MEANINGFUL ARTS COMPONENT IN THEIR SCHOOLS' CURRICULUM.

Funded Amount:

$2,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS MUSEUM OF ART
NEW YORK CITY BUILDING
FLUSHING MEADOWS/CORONA PARK, NY  11368
(718) 592-9700

Name of Project Director:

TOM FINKELPEARL

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF PROGRAMS AND EXHIBITS AT THE MUSEUM.

Funded Amount:

$12,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS MUSEUM OF ART
NEW YORK CITY BUILDING, FLUSHING MEADOWS CORONA PARK
QUEENS, NY  11368
(718) 592-9700

Name of Project Director:

DAVID STRAUSS

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATION PROGRAMMING FOR PANORAMA TOURS FOR PUBLIC SCHOOLS.

Funded Amount:

$2,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS MUSEUM OF ART
NEW YORK CITY BUILDING
FLUSHING MEADOWS/CORONA PARK, NY 11368
(718) 592-9700

Name of Project Director:

CORA C. FAUNTLEY

Purpose of Project:

FUNDS WILL BE USED FOR CURATORIAL, EDUCATION AND PUBLIC PROGRAMMING INCLUDING CONTEMPORARY AND HISTORICAL ART EXHIBITIONS, MULTIDISCIPLINARY PUBLIC EVENTS AND EDUCATION PROGRAMS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS MUSEUM OF ART
NYC BLDG. FLUSHING MEADOWS/CORONO PARK
CORONA, NY  11368
(718) 592 – 9700

Name of Project Director:

TOM FINKELPEARL

Purpose of Project:

FUNDS WILL BE USED TO OFFSET ADMINISTRATIVE COSTS FOR THE FLUSHING MEADOWS CORONA PARK, WHICH INCLUDES THE QUEENS THEATER IN THE PARK, THE QUEENS MUSEUM, QUEENS BOTANICAL GARDEN AND QUEENS HALL OF SCIENCE.

Funded Amount:

$20,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS SYMPHONY ORCHESTRA, INC
70-31 84TH STREET, BUILDING 38
GLENDALE, NY 11385
(718) 326-4455

Name of Project Director:

LYNDE HERNDON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE QUEENS SYMPHONY ORCHESTRA IN THEIR EFFORTS TO PROVIDE MUSICAL ENRICHING CONCERTS AND PROGRAMS.

Funded Amount:

$3,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS SYMPHONY ORCHESTRA, INC.
70-31 84TH STREET, BUILDING 38
GLENDALE, NY  11385
(718) 326-4455

Name of Project Director:

LYNDA HERNDON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ORCHESTRA AND ITS PERFORMANCE COSTS.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS THEATER IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY 11352
(718) 760-0064

Name of Project Director:

JEFFREY ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH, SENIORS, AND OTHER UNDERSERVED POPULATIONS IN THE BOROUGH, QUALITY CULTURAL PROGRAMS AT REDUCED TICKET PRICES.

Funded Amount:

$5,000

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS THEATER IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY 11352
(718) 760-0064

Name of Project Director:

JEFFREY ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO CREATE A THEATER PROGRAM TO ALLOW STUDENTS TO LEARN THE ESSENTIAL TOOLS OF THEATER AND DEVELOP CHARACTERS AND SCRIPTS, AS WELL AS THE COMMUNICATION OF EMOTION AND IMAGE CULMINATING IN THE PRESENTATION OF A PRODUCTION.

Funded Amount:

$20,000

Requested By:

WEPRIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS THEATER IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY 11368
(718) 760-0686

Name of Project Director:

JEFF ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE YOUTH, SENIORS, AND OTHER UNDERSERVED POPULATIONS IN THE BOROUGH, QUALITY CULTURAL PROGRAMS AT REDUCED TICKET PRICES.

Funded Amount:

$5,000

Requested By:

GIANARIS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS THEATRE IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY  11352
(718) 760-0064

Name of Project Director:

JEFFREY ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE STAFF POSITION OF A COMMUNITY AFFAIRS REPRESENTATIVE, AS WELL AS, TO HELP OFFSET GENERAL OPERATING EXPENSES OF THE THEATRE.

Funded Amount:

$2,500

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS THEATRE IN THE PARK, INC.
FLUSHING MEADOWS CORONA PARK, P.O. BOX 520069
FLUSHING, NY 11352
(718) 760-0686

Name of Project Director:

JEFF ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO HOST VARIOUS FESTIVALS AND CULTURAL INITIATIVES.

Funded Amount:

$2,000

Requested By:

YOUNG

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS THEATRE IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY 11352
(718) 760-0064

Name of Project Director:

JEFFREY ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE STAFF POSITION OF A COMMUNITY AFFAIRS REPRESENTATIVE, AS WELL AS, TO HELP OFFSET GENERAL OPERATING EXPENSES OF THE THEATRE.

Funded Amount:

$9,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS THEATRE IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY  11352
(718) 760-0686

Name of Project Director:

JEFF ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED FOR THE PURPOSE OF ARTISTIC DIRECTOR EDUCATION.

Funded Amount:

$1,000

Requested By:

HEVESI-A

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

QUEENS THEATRE IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY 11352
(718) 760-0686

Name of Project Director:

JEFFREY ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET THE COST ASSOCIATED WITH PROVIDING THEATRICAL SHOWS AND PROGRAMS.

Funded Amount:

$1,000

Requested By:

CARROZZA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS THEATRE IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY 11352
(718) 760-0686

Name of Project Director:

JEFFREY ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT STAFF POSITION FOR A COMMUNITY AFFAIRS REPRESENTATIVE AND HELP OFFSET OPERATING EXPENSES OF THEATRE.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS THEATRE IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY  11352
(718) 760-0064

Name of Project Director:

JEFFREY ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE STAFF POSITION OF A COMMUNITY AFFAIRS REPRESENTATIVE, AS WELL AS TO HELP OFFSET THE GENERAL EXPENSE OF THE THEATRE.

Funded Amount:

$4,500

Requested By:

AUBRY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS THEATRE IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY 11352
(718) 760-0064

Name of Project Director:

JEFFREY ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE STAFF POSITION OF A COMMUNITY AFFAIRS REPRESENTATIVE, AS WELL AS TO HELP OFFSET GENERAL OPERATING EXPENSES OF THE THEATRE.

Funded Amount:

$2,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

QUEENS THEATRE IN THE PARK, INC.
P.O. BOX 520069
FLUSHING, NY 11352
(718) 760–0064

Name of Project Director:

JEFFREY ROSENSTOCK

Purpose of Project:

FUNDS WILL BE USED TO HELP OFFSET THE OPERATING COSTS OF THE THEATER.

Funded Amount:

$35,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
QUITMAN RESOURCE CENTER FOR PRESERVATION, INC.
70115 ROUTE 9
RHINEBECK, NY 12572
(845) 871-1798

MARILYN HATCH

FUNDS WILL BE USED TO AID IN ONGOING COMMUNITY REHABILITATION PROJECT AT THE HISTORIC PALATINE FARMSTEAD UNDER THE JOINT AUSPICIES OF THE RHINEBECK HISTORICAL SOCIETY AND THE QUITMAN RESOURCE CENTER FOR PRESERVATION.

$5,000

CAHILL

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

REFLECTIVE GARDEN AT THE COMMON GROUND, INC.
P.O. BOX 142
SAYVILLE, NY 11782
(631) 513-1162

Name of Project Director:

TINA ANNIBELL

Purpose of Project:

FUNDS WILL BE USED FOR THE PRESENTATION OF FREE CONCERTS AND EVENTS TO THE PUBLIC.

Funded Amount:

$5,000

Requested By:

FIELDS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

RENAISSANCE EMS
3251 THIRD AVENUE
BRONX, NY 10456
(718) 450-3466

Name of Project Director:

BERVINE HARRIS

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE RENAISSANCE EMS MUSIC PROGRAM WHICH STRIVES TO PROMOTE INDIVIDUAL GIFTS AND TALENTS AND RAISE SELF-ESTEEM BY TEACHING OVER 130 YOUNG PEOPLE EACH SATURDAY TO PLAY MUSICAL INSTRUMENTS, VOCAL PERFORMANCES AND/OR LEARN ENGINEERING AND PRODUCTION. THE PROGRAM PROVIDES MUSIC INSTRUCTION FOR BEGINNERS, INTERMEDIATE AND ADVANCED STUDENTS.

Funded Amount:

$5,000

Requested By:

GREENE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RENSSELAER COUNTY HISTORICAL SOCIETY
57 SECOND STREET
TROY, NY  12180
(518) 273-7232 13

Name of Project Director:

ROBERT ENGEL

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE THE COMPUTER SYSTEM AND OTHER TECHNOLOGY TO FACILITATE THE EDUCATIONAL PROGRAM.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

RIVERDALE CHORAL SOCIETY
P.O. BOX 436
BRONX, NY 10471
(718) 543-9091

Name of Project Director:

MARCY TAITZ

Purpose of Project:

FUNDS WILL BE USED TO ENABLE THE RIVERDALE CHORAL SOCIETY TO CONTINUE TO CONDUCT ITS CONCERTS IN THE RIVERDALE COMMUNITY.

Funded Amount:

$5,000

Requested By:

DINOWITZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

RIVERSIDE PARK FUND, INC.
475 RIVERSIDE DRIVE, SUITE 455
NEW YORK, NY  10115
(212) 870-3070

Name of Project Director:

JAMES DOWELL

Purpose of Project:

FUNDS WILL BE USED FOR SUPPLIES AND PLANT MATERIALS FOR VOLUNTEERS TO MAINTAIN THE PARK.

Funded Amount:

$5,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

RIVERVIEW PARK ASSOCIATION
104 CLINTON STREET
GOUVERNEUR, NY 13642
(315) 287-4838

Name of Project Director:

ROBERT PORTER

Purpose of Project:

FUNDS WILL BE USED TO PLACE CONCRETE PADS UNDER BLEACHERS AND MAKE AVAILABLE ADDITIONAL RECREATIONAL OPTIONS AT THE PARK

Funded Amount:

$3,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

RIVIERA THEATRE AND ORGAN PRESERVATION SOCIETY, INC.
67 WEBSTER STREET
NORTH TONAWANDA, NY  14120
(716) 692-2413

Name of Project Director:

FRANK CANNATA

Purpose of Project:

FUNDS WILL BE USED FOR UPGRADES TO THE SOUND EQUIPMENT AT THIS HISTORIC THEATRE.

Funded Amount:

$12,500

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ROCHESTER CHAPTER OF YOUNG AUDIENCES, INC.
400 ANDREWS STREET, SUITE 500
ROCHESTER, NY  14604
(585) 530-2060

Name of Project Director:

JUDITH LEMONCELLI

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT ARTS-IN-EDUCATION PROGRAMS SERVING 100,000 STUDENTS AND THEIR FAMILIES. THE ORGANIZATION’S MISSION IS TO MAKE THE ARTS AN ESSENTIAL PART OF EVERY CHILD’S EDUCATION.

Funded Amount:

$10,000

Requested By:

KOON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ROCHESTER CONTEMPORARY, INC.
137 EAST AVENUE
ROCHESTER, NY 14604
(585) 461-2222

Name of Project Director:

ELIZABETH SWITZER

Purpose of Project:

FUNDS WILL BE USED FOR THE CREATION OF AN ARTIST LECTURE SERIES.

Funded Amount:

$10,000

Requested By:

MORELLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ROCKAWAY MUSIC AND ARTS COUNCIL, INC.
1 BEACH 105TH STREET, #1-G
ROCKAWAY PARK, NY 11694
(718) 474-8623

Name of Project Director:

HAROLD CORNELL

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE TO BRING DIVERSIFIED MUSICAL PROGRAMS, WRITER’S WORKSHOPS, AND ARTS FESTIVALs TO THE ROCKAWAY PENINSULA. THERE ARE SIX CONCERTS, ALL FREE.

Funded Amount:

$5,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ROCKAWAY THEATRE COMPANY, INC.
P.O. BOX 398
FT. TILDEN, NY  11695-0398
(718) 634-6903

Name of Project Director:

JOHN GILLEECE

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN PRESENTING LIVE COMMUNITY EVENTS AT AREA VENUES. FUNDS WILL ALSO BE USED FOR THE CONSTRUCTION OF PLATFORMS, BACKDROPS, SCENERY, ETC.

Funded Amount:

$5,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ROUNDABOUT THEATRE COMPANY, INC.
231 WEST 39TH STREET, SUITE 1200
NEW YORK, NY  10018
(212) 719-9393

Name of Project Director:

JULIA C. LEVY

Purpose of Project:

FUNDS WILL BE USED FOR EDUCATIONAL PROGRAMMING.

Funded Amount:

$2,500

Requested By:

FARRELL, SILVER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ROUNDBOUGHT THEATRE COMPANY, INC.
231 WEST 39TH STREET
NEW YORK, NY 10018
(212) 719-9393

Name of Project Director:

JULIA C. LEVY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TICKETS FOR PUBLIC HIGH SCHOOL STUDENTS, AS WELL AS, SUPPORT FOR THE ARTS IN EDUCATION PROGRAMS AND THEATRE PLUS PROGRAMS.

Funded Amount:

$2,500

Requested By:

FARRELL, SILVER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

ROUNDABOUT THEATRE COMPANY, INC.
231 WEST 39TH STREET, SUITE 1200
NEW YORK, NY  10018
(212) 719-9393

Name of Project Director:

JULIA LEVY

Purpose of Project:

FUNDS WILL BE USED FOR ROUNDABOUT'S ARTISTIC AND EDUCATIONAL
PROGRAMS FOR NEW YORK CITY STUDENTS.

Funded Amount:

$4,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ROUNDABOUT THEATRE COMPANY, INC.
231 WEST 39TH STREET
NEW YORK, NY  10018
(212) 719-9393

Name of Project Director:

JULIA C. LEVY

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TICKETS FOR PUBLIC HIGH SCHOOL STUDENTS IN THE ARTS IN EDUCATION PROGRAMS AND THEATRE PLUS PROGRAMS.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

RUSSIAN-AMERICAN ARTS FOUNDATION, INC.
70 WEST 36 STREET, SUITE 701
NEW YORK, NY 10018
(212) 687-6118

Name of Project Director:

MARINA KOVALYOV

Purpose of Project:

FUNDS WILL BE USED TO ORGANIZE A SERIES OF EVENTS THROUGHOUT NEW YORK SHOWCASING RUSSIAN CULTURE.

Funded Amount:

$2,500

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

RYAN REPERTORY COMPANY, INC.
2445 BATH AVENUE
BROOKLYN, NY  11214
(718) 996-4800

Name of Project Director:

BARBARA PARISI

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE QUALITY CHILDREN’S PROGRAMMING TO AN AREA OF BROOKLYN THAT DOES NOT HAVE PROFESSIONAL THEATRE. ADULTS PERFORM FOR ELEMENTARY CHILDREN.

Funded Amount:

$2,000

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

RYAN REPERTORY COMPANY, INC.
HARRY WARREN THEATRE - 2545 BATH AVENUE
BROOKLYN, NY   11214
(718) 996-4800

Name of Project Director:

BARBARA PARISI

Purpose of Project:

FUNDS WILL BE USED TO PRODUCE ORIGINAL ADULT AND CHILDREN'S PERFORMANCES AT LOCAL SCHOOLS, WHICH WILL ENRICH THE CULTURAL AND ARTISTIC APPRECIATION OF LIVE THEATRE.

Funded Amount:

$2,000

Requested By:

ABBATE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SAG HARBOR HISTORICAL SOCIETY
P.O. BOX 1709
SAG HARBOR, NY 11963
(631) 725-1921

Name of Project Director:

JOAN TRIPP

Purpose of Project:

FUNDS WILL BE USED FOR HISTORICAL RENOVATION

Funded Amount:

$5,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SAINT PAUL'S CHURCH NATIONAL HISTORIC SITE
897 SOUTH COLUMBUS AVENUE
MT. VERNON, NY  10550
(914) 667-4116

Name of Project Director:

DAVID OSBORN

Purpose of Project:

FUNDS WILL BE USED TO HELP PRESERVE HISTORIC GRAVESTONES LOCATED AT ST. PAUL'S CHURCH IN WESTCHESTER COUNTY.

Funded Amount:

$5,000

Requested By:

PRETLOW

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SAND LAKE CENTER FOR THE ARTS
2880 NY 43, P.O. BOX 179
AVERILL PARK, NY 12018
(518) 674-2007

Name of Project Director:

JOYCE GREENBERG

Purpose of Project:

FUNDS WILL BE USED FOR THE SQUIRE JACOB COFFEEHOUSE SERIES, THE MUSICAL COMPONENT OF THE SAND LAKE CENTER FOR THE ARTS. FUNDS WILL ALLOW FOR EXPANDED OUTREACH TO THE GREATER CAPITAL REGION AREA OF NEW YORK STATE.

Funded Amount:

$2,500

Requested By:

GORDON-T

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SARATOGA COUNTY FAIR
59 OUTLOOK AVENUE
SARATOGA SPRINGS, NY 12866
(518) 584-4715

Name of Project Director:

EUGENE CORSALE

Purpose of Project:

FUNDS WILL BE USED TO INSTALL ON A PERMANENT BASIS RAILROAD CARS, TRACKS, RR CROSSING AND FLASHING LIGHTS AS AN EDUCATIONAL AND HISTORIC EXHIBIT

Funded Amount:

$20,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SARATOGA COUNTY HISTORICAL SOCIETY
6 CHARLTON STREET
BALLSTON SPA, NY 12020
(518) 885-4000

JOY HOULE

FUNDS WILL BE USED TO REINTERPRET AND INSTALL (BOTH ONSITE AND ONLINE) AN INTERACTIVE EXHIBIT THAT TRACES MUSEUM'S 215-YEAR HISTORY

$10,000

TEDISCO

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SARATOGA SPRINGS UNIVERSAL PRESERVATION HALL
25 WASHINGTON STREET
SARATOGA SPRINGS, NY 12866
(518) 584-2627

Name of Project Director:

MATT KOPANS

Purpose of Project:

FUNDS WILL BE USED TO INSTALL AN ELEVATOR, MAKING MAIN SPACE ACCESSIBLE TO ALL

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SAUGERTIES HISTORICAL SOCIETY
119 MAIN STREET
SAUGERTIES, NY 12477
(845) 246-0784

Name of Project Director:

MARJORIE BLOCK

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH EDUCATIONAL PROGRAM COSTS

Funded Amount:

$2,500

Requested By:

LOPEZ-P

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:
SCHENECTADY ROWING CLUB, INC.
1118 GLENWOOD BOULEVARD
SCHENECTADY, NY 12308
(518) 377-6735

Name of Project Director:
EDWARD J. BUTZ

Purpose of Project:
FUNDS WILL BE USED TO TEACH INNER CITY YOUTH GRADES 7-12 ROWING SKILLS AND THE OPPORTUNITY TO PARTICIPATE IN COMPETITIVE ROWING

Funded Amount:
$700

Requested By:
TEDISCO

Name of Administering State Agency:
OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SCHENECTADY SYMPHONY ORCHESTRA
432 STATE STREET
SCHENECTADY, NY 12305
(518) 372-2500

Name of Project Director:

CHRISTINE MASON

Purpose of Project:

FUNDS WILL BE USED FOR FUNDING OF THE PRODUCTION OF SHOWS

Funded Amount:

$6,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SCHENECTADY SYMPHONY ORCHESTRA ASSOCIATION, INC.
432 STATE STREET
SCHENECTADY, NY  12305
(518) 372-2500

Name of Project Director:

CHRISTINE R. MASON

Purpose of Project:

FUNDS WILL BE USED TO PRESENT TWO CONCERTS AT RIVERLINK PARK IN AMSTERDAM AND TO PURCHASE ONE SET OF NEW TYMPANI FOR THE SCHENECTADY SYMPHONY ORCHESTRA.

Funded Amount:

$6,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SCOTIA DISTRICT MANAGEMENT ASSOCIATION, INC.
110 MOHAWK AVENUE
SCOTIA, NY 12302
(518) 374-6274

Name of Project Director:

TINA KOEHLER

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE HARDWARE, POLES AND DECORATIVE FLAGS FOR MOHAWK AVENUE

Funded Amount:

$10,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SCOTIA-GLENVILLE CHILDREN'S MUSEUM
303 MOHAWK AVENUE
SCOTIA, NY 12302
(518) 346-1764

Name of Project Director:

DIANA BENNETT

Purpose of Project:

FUNDS WILL BE USED FOR UPDATING OFFICE EQUIPMENT AT THE MUSEUM

Funded Amount:

$5,000

Requested By:

TEDISCO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SEA CLIFF CHAMBER PLAYERS
45 CROSSWAYS PARK DRIVE
WOODBURY, NY 11797
(877) 444-4488

Name of Project Director:

DAVID WINKLER

Purpose of Project:

FUNDS WILL BE USED FOR FREE PROGRAMS FOR SENIORS AND DISABLED

Funded Amount:

$2,000

Requested By:

WALKER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SEAFORD HISTORICAL SOCIETY
2234 JACKSON AVENUE
SEAFORD, NY 11783
(516) 735-9119

Name of Project Director:

JOHN SOREN

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF THE SEAFORD SCHOOL THAT SERVES AS THEIR MUSEUM

Funded Amount:

$3,000

Requested By:

MCDONOUGH

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SEASIDE SUMMER CONCERT SERIES, INC.
31 PROSPECT PARK WEST, APT. 15C
BROOKLYN, NY 11215
(718) 469-1912

Name of Project Director:

DEBRA GARCIA

Purpose of Project:

FUNDS WILL BE USED TO HELP PROVIDE FOR FREE SUMMER CONCERTS AT SEASIDE PARK.

Funded Amount:

$4,000

Requested By:

MAISEL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SEASIDE SUMMER CONCERT SERIES, INC.
35 PROSPECT PARK WEST, APT. #15C
BROOKLYN, NY  11215
(718) 469-1912

Name of Project Director:

DEBRA GARCIA

Purpose of Project:

Funds will be used to offset the costs of providing the concert series for the community.

Funded Amount:

$5,000

Requested By:

BROOK-KRASNY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SEASIDE SUMMER CONCERT SERIES, INC.
31 PROSPECT PARK WEST
BROOKLYN, NY 11215
(718) 469-1912

Name of Project Director:

DEBRA GARCIA

Purpose of Project:

FUNDS WILL BE USED TO PRESENT FREE SUMMER CONCERTS.

Funded Amount:

$1,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SEASIDE SUMMER CONCERT SERIES, INC.
31 PROSPECT PARK WEST, APT. 15C
BROOKLYN, NY  11215
(718) 469-1912

Name of Project Director:

DEBRA GARCIA

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE TOP LEVEL ENTERTAINMENT TO HUNDREDS OF THOUSANDS OF BROOKLYN RESIDENTS.

Funded Amount:

$1,500

Requested By:

COLTON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SEASIDE SUMMER CONCERT SERIES, INC.
31 PROSPECT PARK WEST
BROOKLYN, NY  11215
(718) 284-4700

Name of Project Director:

DEBRA GARCIA

Purpose of Project:

FUNDS WILL BE USED TO PRESENT FREE SUMMER CONCERTS IN THE PARK.

Funded Amount:

$3,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SEAWAY TRAIL, INC.
CORNER OF RAY & W. MAIN STREET
SACKETS HARBOR, NY  13685
(315) 646 – 1000

Name of Project Director:

TERESA MITCHELL

Purpose of Project:

FUNDS WILL BE USED TO CONTINUE TO SUPPORT TOURISM INITIATIVES ALONG THE ST. LAWRENCE SEAWAY AND TO IMPLEMENT PROJECTS ALONG THE GREAT LAKES.

Funded Amount:

$250,000

Requested By:

AUBERTINE, DELMONTE, HOYT, JOHN, KOON, MORELLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SHAKESPEARE IN DELAWARE PARK, INC.
P.O. BOX 716
BUFFALO, NY 14205
(716) 856-4533

Name of Project Director:

LISA LUDWIG-KRAMER

Purpose of Project:

FUNDS WILL BE USED TO UPGRADE FACILITIES AT THIS UNIQUE CULTURAL ASSET IN WNY.

Funded Amount:

$5,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SHEAS OCONNEL PRESERVATION GUILD, LTD.
646 MAIN STREET
BUFFALO, NY 14202
(716) 847-1410

Name of Project Director:

LISA GRISANTI

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS FOR SHEA'S FREE FILM SERIES.

Funded Amount:

$4,000

Requested By:

HOYT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SHEEPSHEAD BAY BEAUTIFICATION PROGRAM, INC.
437 ROCKAWAY AVENUE, 2ND FLOOR
VALLEY STREAM, NY 11581
(516) 825-1734

CAROL ROMEO

FUNDS WILL BE USED FOR STREET AND RECEPTACLE MAINTENANCE

$2,000

CYMBROWITZ-S

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SIGNATURE THEATRE COMPANY
630 NINTH AVENUE, SUITE 1106
NEW YORK, NY  10036
(212) 967-1913  42

Name of Project Director:

BROOKE MCCARTHY

Purpose of Project:

FUNDS WILL BE USED TO MAKE THE THEATRE AFFORDABLE TO A DIVERSE AUDIENCE OF DIFFERENT AGES AND FINANCIAL MEANS.

Funded Amount:

$2,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SLATE VALLEY MUSEUM
17 WATER STREET
GRANVILLE, NY 12832
(518) 642-1417

Name of Project Director:

MARY LOU WILLITS

Purpose of Project:

FUNDS WILL BE USED FOR MUSEUM PROJECTS

Funded Amount:

$5,000

Requested By:

MCDONALD

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SMITHTOWN HISTORICAL SOCIETY
5 NORTH COUNTRY ROAD
SMITHTOWN, NY 11787
(631) 265-6768

Name of Project Director:
BRAD HARRIS

Purpose of Project:
FUNDS WILL BE USED TO PURCHASE A TRACTOR TO PLOW AND MAINTAIN 20 ACRES OF PROPERTY

Funded Amount:
$18,000

Requested By:
FITZPATRICK

Name of Administering State Agency:
OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SOCIETY FOR THE PRESERVATION OF WEEKSVILLE AND BEDFORD STUYVESANT HISTORY
P.O. BOX 130120 - ST. JOHN'S STATION
BROOKLYN, NY 11213
(718) 623-0600

Name of Project Director:

PAMELA GREEN

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE AN APPRECIATION OF THE AFRICAN-AMERICAN LEGACY IN BROOKLYN AND TO FOSTER COMMUNITY EMPOWERMENT AND LIFE LONG LEARNING THROUGH RESEARCH, INTERPRETATION AND PRESENTATION OF WEEKSVILLE HISTORY.

Funded Amount:

$5,000

Requested By:

ROBINSON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SOCRATES SCULPTURE PARK, INC.
P.O. BOX 6259, 32-01 VERNON BOULEVARD
LONG ISLAND CITY, NY 11101
(718) 956-1819

Name of Project Director:

TARA SANDONE

Purpose of Project:

FUNDS WILL BE USED FOR CULTURAL ENHANCEMENT, INCLUDING AN ART MAKING PROGRAM, PERFORMANCES AND LIVE MUSIC.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SOUTH BUFFALO ALIVE
12 COOLIDGE ROAD
BUFFALO, NY 14220
(716) 822-2736

Name of Project Director:

MAUREEN KRAUSE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE LANDSCAPING AND BEAUTIFICATION SERVICES TO PUBLIC PARKS, CIRCLES, ETC.

Funded Amount:

$10,000

Requested By:

SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SOUTHEAST MUSEUM
63 MAIN STREET
BREWSTER, NY 10509
(845) 279-7500

Name of Project Director:

AMY CAMPANARO

Purpose of Project:

FUNDS WILL BE USED FOR AN EXHIBIT ON THE BREWSTER RAILROAD

Funded Amount:

$2,000

Requested By:

BALL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SPRINGFIELD/ROSEDALE COMMUNITY ACTION ASSOCIATION, INC.  
P.O. BOX 220219  
ROSEDALE, NY  11422  
(718) 525-4399

Name of Project Director:

BARBARA BROWN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE COMMUNITY BEAUTIFICATION PROJECT INCLUDING NEWSLETTERS, EXHIBITS, CULTURAL FESTIVAL AND GARDEN RECOGNITION.

Funded Amount:

$5,000

Requested By:

TITUS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ST. GEORGE THEATRE
35 HYATT STREET
STATEN ISLAND, NY 10301
(718) 442-2900

Name of Project Director:

LUANNE SORRENTINO

Purpose of Project:

FUNDS WILL BE USED FOR THE NIGHT OUT AT THE THEATRE WHICH ENABLES COMMUNITY RESIDENTS AND SENIOR CITIZENS TO ENJOY FREE THEATRE PASSES AND THEATRE EVENTS AND PROVIDE FOR THE ONGOING RESTORATION AND UPKEEP OF THE ST. GEORGE THEATRE.

Funded Amount:

$4,500

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ST. JAMES A.M.E. ZION CHURCH
116 CLEVELAND AVENUE
ITHACA, NY 14850
(315) 383-8973

Name of Project Director:

ROYAL LIPSCOMB

Purpose of Project:

FUNDS WILL BE USED TO REPLACE WINDOWS, DOWNSPOUTS, AND GUTTERS FOR ITHACA'S OLDEST ORIGINAL CHURCH AND HISTORIC LANDMARK WHICH REQUIRES ADDITIONAL PRESERVATION OF THE BUILDING'S STRUCTURE.

Funded Amount:

$11,000

Requested By:

LIFTON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

ST. JOHN'S UNIVERSITY  
OFFICE OF COMMUNITY RELATIONS - 8000 UTOPIA PARKWAY  
QUEENS, NY  11439  
(718) 990-1914

Name of Project Director:

JOE SCIAME

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE A LARGE SCALE SUMMER CONCERT.

Funded Amount:

$3,000

Requested By:

LANCMAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

STAR OF BETHLEHEM BAPTIST CHURCH
513 CLINTON AVENUE
ALBANY, NY 12206
(518) 436-6710

Name of Project Director:

REV. BERESFORD BAILEY

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COST OF REPLACING THE ROOF ON THE CHURCH’S HISTORICALLY SIGNIFICANT BUILDING.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

STATEN ISLAND CHAMBER MUSIC PLAYERS, INC.
27 STORER AVENUE
STATEN ISLAND, NY 10301
(718) 365-2094

Name of Project Director:

ELIZABETH LACAUSE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE ADMISSION FREE, COMMUNITY BASED CONCERTS OF CHAMBER MUSIC.

Funded Amount:

$3,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

STATEN ISLAND CHILDREN'S MUSEUM
1000 RICHMOND TERRACE
STATEN ISLAND, NY 10301
(718) 273-2060

Name of Project Director:

DINA ROSENTHAL

Purpose of Project:

FUNDS WILL BE USED FOR EXPENSES ASSOCIATED WITH THE MUSEUM’S SCHOOL BASED AND AFTER SCHOOL PROGRAMS, PROGRAM DEVELOPMENT, AND THE MATERIALS CHILDREN USE IN THE COURSE OF THE PROGRAMS.

Funded Amount:

$5,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

STATEN ISLAND CHILDREN’S MUSEUM
1000 RICHMOND TERRACE
STATEN ISLAND, NY 10301-1181
(718) 273-2060

Name of Project Director:

DINA ROSENTHAL

Purpose of Project:

FUNDS WILL BE USED FOR EXPENSES ASSOCIATED WITH THE MUSEUM’S SCHOOL-BASED AND AFTER-SCHOOL PROGRAMS; PROGRAM DEVELOPMENT; HIRING AND TRAINING EDUCATORS TO IMPLEMENT THE PROGRAMS; AND FOR THE MATERIALS CHILDREN USE IN THE COURSE OF THE PROGRAMS.

Funded Amount:

$10,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

STATEN ISLAND SPORTS HALL OF FAME, INC.
6451 HYLAN BOULEVARD
STATEN ISLAND, NY  10309
(718) 317-2810

Name of Project Director:

LAWRENCE G. ANDERSON

Purpose of Project:

FUNDS WILL BE USED FOR IMPROVEMENTS TO THE PUBLIC MUSEUM, INCLUDING RESTORATION OF MEMORABILIA, THE PURCHASE OF NEW DISPLAY CASES, MATERIALS CREATED BY HAVOC MEDIA DESIGN AND EXPENSES FOR 2007 INDUCTION CEREMONY.

Funded Amount:

$3,000

Requested By:

CUSICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

STERLING HISTORICAL SOCIETY
14352 WOODS ROAD
STERLING, NY 13156
(315) 947-6461

Name of Project Director:

H. RICHARDSON

Purpose of Project:

FUNDS WILL BE USED FOR MOVING HISTORIC RAILROAD STRUCTURE FROM ITS PRESENT LOCATION IN STERLING STATION TO STERLING HERITAGE PARK

Funded Amount:

$12,500

Requested By:

OAKS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

STUDIO MUSEUM IN HARLEM, INC.
144 WEST 125TH STREET
NEW YORK, NY 10027
(212) 864-4500

Name of Project Director:

THELMA GOLDEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE FREE FAMILY PROGRAMS ABOUT ART AND ART-PRODUCTION.

Funded Amount:

$10,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

STUYVESANT COVE PARK ASSOCIATION, INC.
P.O. BOX 178
NEW YORK, NY 10009
(212) 673-7506

Name of Project Director:

JON GARLAND

Purpose of Project:

FUNDS WILL BE USED TO HELP SUPPORT AN AMERICAN INDIAN HARVEST FESTIVAL.

Funded Amount:

$1,000

Requested By:

KAVANAGH

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SUFFOLK COUNTY ARCHAEOLOGICAL ASSOCIATION  
P.O. BOX 1542  
STONY BROOK, NY  11790  
(631) 929-8785

Name of Project Director:

GAYNELL STONE

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MULTIMEDIA TO SHOWCASE FINDINGS OF ASSOCIATION.

Funded Amount:

$2,500

Requested By:

ALESSI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SUFFOLK SPORTS HALL OF FAME
62 SOUTH OCEAN AVENUE
PATCHOGUE, NY 11772
(631) 758-7463

EDWARD MORRIS

FUNDS WILL BE USED FOR ONGOING RENOVATIONS TO THE SPORTS HALL OF FAME MUSEUM AND EDUCATION CENTER

$10,000

FITZPATRICK

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SULLIVAN COUNTY HISTORICAL SOCIETY, INC.
265 MAIN STREET, P.O. BOX 247
HURLEYVILLE, NY 12747
(845) 434-8044 3072

Name of Project Director:

KRISTEN PORTER

Purpose of Project:

FUNDS WILL BE USED FOR REPAIRS/RENOVATIONS OF THE OLD ST. MARYS BUILDING, NOW PROPERTY OF SULLIVAN COUNTY.

Funded Amount:

$5,000

Requested By:

GUNTER-A

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SUNNYSIDE UNITED NEIGHBORHOOD NETWORK, INC.
39-18 48TH STREET
SUNNYSIDE, NY 11104
(718) 482-0443

Name of Project Director:

JULIE STORY

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SUPPLIES AND EQUIPMENT TO COMBAT GRAFFITI SUCH AS PAINT, CLEANER, MACHINERY AND OTHER SUPPLIES.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

SYMPHONY SPACE, INC.
2537 BROADWAY
NEW YORK, NY 10025
(212) 864-1414

Name of Project Director:

CYNTHIA ELLIOTT

Purpose of Project:

FUNDS WILL BE USED FOR THE UPPER WEST FEST, A THREE WEEK ARTS FESTIVAL THAT SHOWCASES THE UPPER WEST SIDE OF MANHATTAN AS A CULTURAL DESTINATION.

Funded Amount:

$3,000

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

TADA (TWIRLING AND DANCE ASSOCIATION)
675 EVERDELL AVENUE
WEST ISLIP, NY 11795
(631) 422-2453

Name of Project Director:

MARIE POLICASTRO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE NECESSITIES FOR A SUCCESSFUL PROGRAM (I.E. COSTUMES, PROPS, LIGHTING)

Funded Amount:

$5,000

Requested By:

BOYLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

TAIWANESE AMERICAN CULTURAL SOCIETY OF THE CAPITAL DISTRICT, INC.
4 FLICKER DRIVE
LATHAM, NY  12110
(518) 785-5964

Name of Project Director:

CHUNGCHIN CHEN

Purpose of Project:

FUNDS WILL BE USED FOR OUTREACH AND TO IMPROVE CULTURAL PROGRAMS TO ENHANCE THE REGION’S ATTRACTIVENESS.

Funded Amount:

$3,000

Requested By:

REILLY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TEATRO CIRCULO, LTD
134 EAST 22ND STREET, SUITE 314
NEW YORK, NY  10010
(212) 242-4460

Name of Project Director:

JOSE OLIVERAS

Purpose of Project:

FUNDS WILL BE USED TO PRODUCE CULTURAL PLAYS FOR PRESENTATIONS TO STUDENTS, BOTH DURING THE DAY AND AFTER SCHOOL, AND THE ELDERLY AT SENIOR CITIZEN CENTERS.

Funded Amount:

$5,000

Requested By:

ARROYO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

TEATRO EXPERIMENTAL YERBABRUJA, INC.
23 ANNE LANE
CENTRAL ISLIP, NY 11722
(631) 232-6491

Name of Project Director:

MARGARITA ESPADA-SANTOS

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COSTS OF DANCE COSTUMES AND OTHER EXPENSES.

Funded Amount:

$1,500

Requested By:

RAMOS

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

THALIA SPANISH THEATRE, INC.
41-17 GREENPOINT AVENUE
SUNNYSIDE, NY  11104
(718) 729-3880

Name of Project Director:

KATHERINE GIAMO

Purpose of Project:

FUNDS WILL BE USED TO HELP PUBLICIZE PROGRAMS AND EVENTS, HIGH QUALITY PHOTOGRAPHY, POSTAGE FLYERS AND PRESS RELEASES.

Funded Amount:

$2,250

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

THE UTICA ZOO
STEELE HILL ROAD
UTICA, NY 13501
(315) 738-0472

Name of Project Director:

ELIZABETH IRONS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST THE ZOO’S OPERATIONS WHICH WILL ALLOW IT TO CONTINUE TO PROVIDE THE AREA WITH A QUALITY FACILITY OFFERING ENTERTAINMENT AND EDUCATIONAL RESOURCES AND PROGRAMMING

Funded Amount:

$10,000

Requested By:

TOWNSEND

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

THEATER ET AL
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 PROVIDE THEATER ARTS TO THE COMMUNITY.

Funded Amount:

$1,500

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

THEATER FOR THE NEW CITY FOUNDATION, INC.
155 FIRST AVENUE
NEW YORK, NY 10003
(212) 475-0108

Name of Project Director:

ALICIA GRULLON

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE SENIORS WITH FREE TICKETS TO SHOWS AT THE THEATER.

Funded Amount:

$3,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

THEATRE INTERNATIONAL, INC.
1225 BOSTON ROAD
BRONX, NY 10456
(718) 328-1726

Name of Project Director:

REY ALLEN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE AN AFTER SCHOOL THEATRE ARTS PROGRAM. FUNDS WILL ALSO BE USED TO PURCHASE MATERIALS TO RUN THIS PROGRAM FROM RICHARD R. GREEN MIDDLE SCHOOL.

Funded Amount:

$2,000

Requested By:

HEASTIE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

THEATRE MUSEUM
723 7TH AVENUE, 7TH FLOOR
NEW YORK, NY  10019
(212) 764-4112

Name of Project Director:

HELEN GUDITIS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS AND TECHNICAL SUPPORT FOR THE MUSEUM'S VOLUNTEERS AND STAFF.

Funded Amount:

$2,500

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
THOMAS PAINÉ NATIONAL HISTORICAL ASSOCIATION
983 NORTH AVENUE
NEW ROCHELLE, NY  10804
(914) 740-5343

BRIAN MCCARTIN

FUNDS WILL BE USED TO REPAIR AND UPGRADE MUSEUM GROUNDS,
INCLUDING SHRUBS/TREE REMOVAL, ACCESSING MUSEUMS ENTRANCES
INCLUDING INGRESS AND EGRESS EXITS POINTS.

$3,000

LATIMER

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

THREE VILLAGE HISTORICAL SOCIETY
P.O. BOX 76
EAST SETAUKET, NY  11733
(631) 751-3730  12

Name of Project Director:

SARAH ABRUZZI

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PROFESSIONAL STAFF INCLUDING DIRECTOR, COLLECTIONS MANAGER, AND ARCHIVIST TO MAINTAIN AND EXPAND THE HISTORICAL SOCIETY’S PROGRAMMING AND EDUCATIONAL SERVICES.

Funded Amount:

$22,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

THROGGS NECK BENEVOLENT ASSOCIATION, INC.
P.O. BOX 342, THROGGS NECK STATION
BRONX, NY  10465
(718) 931-7749

Name of Project Director:

MATT O’BRIEN

Purpose of Project:

FUNDS WILL BE USED TO CELEBRATE CULTURAL PRIDE AND HELP DEFRAY THE COSTS OF THE ANNUAL PARADE.

Funded Amount:

$5,000

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

TOWN OF MAMARONECK
740 WEST BOSTON POST ROAD
MAMARONECK, NY 10543
(914) 381-7805

Name of Project Director:

STEPHEN ALTIERI

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT AN ON-SITE EVALUATION OF NINE HISTORICAL BURIAL GROUNDS IN TOWN OF MAMARONECK INCLUDING VILLAGES OF LARCHMONT AND MAMARONECK BY PROFESSIONAL CEMETERY HISTORIANS, DEVELOP PLAN FOR RESTORATION AND INVENTORIES OF HISTORICALLY SIGNIFICANT ASPECTS OF SAME.

Funded Amount:

$5,000

Requested By:

LATIMER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

TOWN OF TONAWANDA
2919 DELAWARE AVENUE, #11
KENMORE, NY  14217
(716) 877-8804

Name of Project Director:

DANIEL J. WILES

Purpose of Project:

FUNDS WILL BE USED TO ACQUIRE A PORTABLE BANKSHOT BASKETBALL SYSTEM AND RELATED EQUIPMENT.

Funded Amount:

$10,000

Requested By:

SCHIMMINGER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

TOWN OF WESTERLO
TOWN HALL
WESTERLO, NY  12193
(518) 797-3111

Name of Project Director:

RICHARD RAPP

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE PLAYGROUND AND TOWN PARK EQUIPMENT FOR THE WESTERLO TOWN PARK.

Funded Amount:

$4,000

Requested By:

MCENENY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

TOWN OF YORK HISTORICAL SOCIETY
2431 DOW ROAD
PIFFARD, NY 14533
(585) 314-7439

Name of Project Director:

MARK OCCHIONI

Purpose of Project:

FUNDS WILL BE USED FOR BUILDING REPAIRS

Funded Amount:

$3,000

Requested By:

BURLING

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

TOWN SQUARE, INC.
102 OAK STREET
BROOKLYN, NY  11222
(718) 609-1090

Name of Project Director:

SUSAN ANDERSON

Purpose of Project:

FUNDS WILL BE USED FOR THE ANNUAL SUMMERSTARZ FESTIVAL, A FREE SUMMER FAMILY MUSIC AND FILM FESTIVAL PRESENTED AT MCCARREN PARK, BROOKLYN.

Funded Amount:

$5,000

Requested By:

LENTOL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

TROLLEY MUSEUM OF NEW YORK, INC.
89 EAST STRAND, P.O. BOX 2291
KINGSTON, NY 12402
(845) 331-3399

Name of Project Director:

STEVE LADIN

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN PROPERTY/STRUCTURE IMPROVEMENTS AND UPGRADES/EQUIPMENT FOR THE TROLLEY MUSEUM OF NEW YORK.

Funded Amount:

$5,000

Requested By:

CAHILL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TROY FLAG DAY COMMITTEE, INC.
P.O. BOX 56
TROY, NY  12180
(518) 858-0692

Name of Project Director:

JASON SCHOFIELD

Purpose of Project:

FUNDS WILL BE USED FOR THE 40TH TROY FLAG DAY PARADE.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

TROY SAVINGS BANK MUSIC HALL CORPORATION
30 SECOND STREET
TROY, NY 12180
(518) 273-8945

Name of Project Director:

LAURA KRATT

Purpose of Project:

FUNDS WILL BE USED TO MARKET AND PRESENT CONCERTS AT THE TROY MUSIC HALL. FUNDING WILL HELP KEEP CONCERT TICKETS AFFORDABLE TO THE PUBLIC AND MARKET EVENTS.

Funded Amount:

$5,000

Requested By:

CANESTRARI

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

TURTLE BAY TREE FUND, INC.
208 EAST 51ST STREET, #238
NEW YORK, NY 10022
(212) 661-2605

Name of Project Director:

WILLIAM HUXLEY

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE THE TURTLE BAY NEIGHBORHOOD WITH SEASONAL PLANTINGS AND TO MAINTAIN THE TREES, BEDS AND ENCLOSURES.

Funded Amount:

$2,500

Requested By:

BING

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

UNIONDALE COMMUNITY COUNCIL, INC.
806 JERUSALEM AVENUE
UNIONDALE, NY 11553
(516) 538-9487

Name of Project Director:

MARY ELLEN KREYE

Purpose of Project:

FUNDS WILL BE USED FOR LIGHTING FOR REV. DR. MARTIN LUTHER KING JR. PEACE PARK

Funded Amount:

$850

Requested By:

MCKEVITT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

UNITED VETERANS PARADE COMMITTEE OF GREATER NY
728 WILCOX AVENUE
BRONX, NY 10465
(718) 823-1981

Name of Project Director:

PATRICK DEVINE

Purpose of Project:

FUNDS WILL BE USED TO HELP DEFRAY THE COSTS OF THE ANNUAL VETERANS DAY PARADE.

Funded Amount:

$2,500

Requested By:

BENEDETTO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

UNTERMeyer PERFORMING ARTS COUNCIL
P.O. BOX 49
YONKERS, NY 10702
(914) 375-3435

Name of Project Director:

STEVE SANSONE

Purpose of Project:

FUNDS WILL BE USED FOR SUMMER CONCERT SERIES

Funded Amount:

$10,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

UPTOWN DANCE ACADEMY, INC.
2234 THIRD AVENUE, 2ND FLOOR
NEW YORK, NY 10035
(212) 987-5030

Name of Project Director:

ROBIN WILLIAMS

Purpose of Project:

FUNDS WILL BE USED FOR UNIFORMS AND DANCE SUPPLIES FOR STUDENTS.

Funded Amount:

$2,000

Requested By:

O'DONNELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

VILLAGE OF DOBBS FERRY
112 MAIN STREET
DOBBS FERRY, NY  10522
(914) 693-2203

Name of Project Director:

ANTHONY GIACCIO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE PLAYGROUND EQUIPMENT FOR MEMORIAL PARK.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

VILLAGE OF ELMSFORD
15 SOUTH STONE AVENUE
ELMSFORD, NY  10523
(914) 592-6555

Name of Project Director:

MICHAEL MILLS

Purpose of Project:

FUNDS WILL BE USED TOWARD THE INSTALLATION AND PURCHASE OF SECURITY CAMERAS FOR THE VILLAGE’S DELUCA PARK.

Funded Amount:

$10,000

Requested By:

BRODSKY

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

VILLAGE OF LEWISTON
145 NORTH FOURTH STREET, P.O. BOX 325
LEWISTON, NY  14092
(716) 754-8271

Name of Project Director:

HON. RICHARD SOLURI

Purpose of Project:

FUNDS WILL BE USED TO PAY FOR THE VILLAGE'S SUMMER JAZZ CONCERTS.

Funded Amount:

$2,500

Requested By:

DELMONTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

VILLAGE OF TARRYTOWN
21 WILDEY STREET
TARRYTOWN, NY  10591
(914) 631-7873

Name of Project Director:

STEVE MCCABE

Purpose of Project:

FUNDS WILL BE USED TOWARD THE PURCHASE OF PLAYGROUND EQUIPMENT FOR NEPPERHAN.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

VILLAGE OF WESTFIELD
23 ELM STREET
WESTFIELD, NY 14787
(716) 326-4961

Name of Project Director:

DAVID CARR

Purpose of Project:

FUNDS WILL BE USED TO MAKE VILLAGE PARK IMPROVEMENTS.

Funded Amount:

$15,000

Requested By:

PARMENT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

VILLAGE OF WOODRIDGE
P.O. BOX 655
WOODRIDGE, NY 12789
(845) 434-7447

Name of Project Director:

DIANE GARITT

Purpose of Project:

FUNDS WILL BE USED FOR RAILS TO TRAILS INCLUDING SIGNAGE/MAPS/ENTRANCE LANDSCAPING.

Funded Amount:

$5,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

VILLAGE OF YORKVILLE
30 SIXTH STREET, P.O. BOX 222
YORKVILLE, NY 13495-0222
(315) 736-9391

Name of Project Director:

MAYOR BRUNO A. PETRUCCIONE

Purpose of Project:

FUNDS WILL BE USED FOR THE INSTALLATION OF A FOUNDATION, AS WELL AS SITE IMPROVEMENTS FOR A PLANNED GAZEBO IN THE VILLAGE OF YORKVILLE’S MEMORIAL PARK.

Funded Amount:

$5,000

Requested By:

DESTITO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

VOCAL EASE, INC.
240 WEST 73RD STREET, SUITE 1403
NEW YORK, NY 10023
(212) 579-5386

Name of Project Director:

EVA SWAN

Purpose of Project:

FUNDS WILL BE USED FOR THE PRODUCTION OF CONCERTS FOR SENIORS IN NEW YORK CITY.

Funded Amount:

$2,500

Requested By:

ROSENTHAL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WALTER ELWOOD MUSEUM OF THE MOHAWK VALLEY
300 GUY PARK AVENUE
AMSTERDAM, NY 12010
(518) 843-5151

Name of Project Director:

ANN M. THANE

Purpose of Project:

FUNDS WILL BE USED FOR THE MATERIAL COSTS OF INTERACTIVE ELEMENTS OF A PERMANENT EXHIBIT; FOR CHILDREN, AS WELL AS, AFTER SCHOOL AND SUMMER PROGRAMMING IN THE HUMANITIES AND ARTS.

Funded Amount:

$10,000

Requested By:

TONKO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WASHINGTON HEIGHTS-INWOOD COALITION
652 WEST 187TH STREET
NEW YORK, NY 10033
(212) 781-6722

Name of Project Director:

JOHN SWAUGER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF SPONSORING A LITERACY CONTEST—WRITTEN, VISUAL WORKS AND CULTURAL PROJECTS ON WOMEN'S HISTORY.

Funded Amount:

$2,500

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WASHINGTON HEIGHTS-INWOOD COALITION
652 W. 187TH STREET
NEW YORK, NY 10033
(212) 781-6722

Name of Project Director:

JOHN SWAUGER

Purpose of Project:

FUNDS WILL BE USED TO OFFSET THE COST OF SPONSORING A LITERACY CONTEST – WRITTEN, VISUAL WORKS, AND CULTURAL PROJECTS WILL BE SUBMITTED ON WOMEN’S HISTORY.

Funded Amount:

$5,000

Requested By:

ESPAILLAT, FARRELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WASHINGTON SQUARE ASSOCIATION MUSIC FUND
P.O. BOX 1066, VILLAGE STATION
NEW YORK, NY 10014-0706
(845) 292-8967

Name of Project Director:

PEGGY FRIEDMAN

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE MUSICIANS FOR FOUR FREE SUMMER OUTDOOR CONCERTS IN WASHINGTON SQUARE PARK.

Funded Amount:

$2,000

Requested By:

GLICK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WEST HARLEM ART FUND
P.O. BOX 170, HAMILTON GRANGE STATION
NEW YORK, NY  10031
(212) 690-0867

Name of Project Director:

SAVONA BAILEY-MCCLAIN

Purpose of Project:

FUNDS WILL BE USED TO DEVELOP TWO NEIGHBORHOOD BUS LOOPS TO GET PEOPLE IN AND AROUND NORTHERN MANHATTAN.

Funded Amount:

$10,000

Requested By:

WRIGHT

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WEST ISLIP BEAUTIFICATION SOCIETY
655 MAIN STREET
ISLIP, NY 11751
(631) 224-5450

Name of Project Director:

DAN DOLLMAN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF DECORATIVE LAMPPOSTS

Funded Amount:

$10,000

Requested By:

BOYLE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WESTCHESTER CHAMBER OF ORCHESTRA, INC.
P.O. BOX 207
NEW ROCHELLE, NY 10804
(914) 654-4926

Name of Project Director:

BARRY HOFFMAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE ANNUAL FREE OUTDOOR FAMILY CONCERT IN NEW ROCHELLE.

Funded Amount:

$3,500

Requested By:

PAULIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WESTCO PRODUCTIONS, INC.
9 ROMAR AVENUE
WHITE PLAINS, NY  10605
(914) 761-7463

Name of Project Director:

SUSAN KATZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE TICKETS TO THE THEATER FOR UNDERPRIVILEGED CHILDREN.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WESTERN NEW YORK PUBLIC BROADCASTING ASSOCIATION
HORIZONS PLAZA, 140 LOWER TERRACE
BUFFALO, NY 14202
(716) 845-7000 387

Name of Project Director:

WENDY CEPPAGLIA

Purpose of Project:

FUNDS WILL BE USED TO PROMOTE TOURISM IN ERIE COUNTY THROUGH THE BUFFALO NIAGARA GUITAR FESTIVAL (ADVERTISING).

Funded Amount:

$2,500

Requested By:

GABRYSZAK

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:
WESTHAMPTON BEACH PERFORMING ARTS CENTER
76 MAIN STREET
WESTHAMPTON BEACH, NY 11978
(631) 288-2350

Name of Project Director:
CLARE BISCEGLIA

Purpose of Project:
FUNDS WILL BE USED FOR THEATRICAL PROJECTS

Funded Amount:
$2,000

Requested By:
THIELE

Name of Administering State Agency:
OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WILLIAM FLOYD COMMUNITY SUMMIT
P.O. BOX 191
MASTIC, NY 11950
(631) 399-2639

Name of Project Director:

BETH WAHL

Purpose of Project:

FUNDS WILL BE USED FOR VARIOUS COMMUNITY IMPROVEMENTS

Funded Amount:

$2,000

Requested By:

THIELE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WILLIAMSVILLE JUNIOR FOOTBALL
10100 COUNTY ROAD
CLARENCE CENTER, NY 14032
(716) 866-4970

Name of Project Director:

SCOTT ROETZER

Purpose of Project:

FUNDS WILL BE USED FOR CONSTRUCTION OF A NEW FOOTBALL FIELD

Funded Amount:

$50,000

Requested By:

HAYES

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WINNING BEYOND WINNING
12 SECOND AVENUE
FARMINGDALE, NY 11735
(516) 249-5800

Name of Project Director:

THOMAS SABELLICO

Purpose of Project:

FUNDS WILL BE USED FOR YOUTH LIFE SKILLS PROGRAMS

Funded Amount:

$2,000

Requested By:

SALADINO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WINONA FOREST RECREATION ASSOCIATION
4920 NORTH JEFFERSON STREET, 3R
PULASKI, NY 13142
(315) 298-6569

Name of Project Director:

JAY CHAPMAN

Purpose of Project:

FUNDS WILL BE USED FOR REHABILITATION AND RESTORATION OF A MULTIPLE USE TRAIL SYSTEM

Funded Amount:

$4,000

Requested By:

SCOZZAFAVA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WOMEN OF COLOR QUILTERS NETWORK, INC. - NEW YORK CHAPTER
113 ROGERS AVENUE
BROOKLYN, NY  11216
(718) 756-1922

Name of Project Director:

DR. MYRAH BROWN GREEN

Purpose of Project:

FUNDS WILL BE USED TO MENTOR GIRLS RANGING IN AGE FROM 7-18 BY EXPOSING THEM TO VISUAL ART AND ART HISTORY THROUGH TEACHING A VARIETY OF FINE ARTS AND CRAFTS.

Funded Amount:

$2,500

Requested By:

CAMARA

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WOMEN'S PROJECT AND PRODUCTIONS
55 WEST END AVENUE
NEW YORK, NY 10023
(212) 765-1706 200

Name of Project Director:

JULIE CROSBY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT IMPROVEMENTS TO THE JULIA MILES THEATER FACILITY.

Funded Amount:

$5,000

Requested By:

FARRELL

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WOODLAND CEMETERY, INC.
P.O. BOX 185
BELLPORT, NY  11713
(631) 286-2484

Name of Project Director:

ROBERT WAYLE

Purpose of Project:

FUNDS WILL BE USED TO ASSIST WITH THE COST OF REPAIRING HISTORICAL HEAD STONES.

Funded Amount:

$2,000

Requested By:

EDDINGTON

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WOODSIDE ON THE MOVE, INC.
39-42 59TH STREET, 2ND FLOOR
WOODSIDE, NY 11377
(718) 476-8449

Name of Project Director:

LISETTE MENDEZ

Purpose of Project:

FUNDS WILL BE USED FOR PROGRAMS TO DEVELOP, PRESERVE AND ENHANCE THE COMMUNITY AND NEIGHBORHOOD OF WOODSIDE.

Funded Amount:

$1,000

Requested By:

NOLAN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WOODSIDE ON THE MOVE, INC.
39-42 59TH STREET, 2ND FLOOR
WOODSIDE, NY 11377
(718) 476-8449

Name of Project Director:

MICHAEL MCSWEENEY

Purpose of Project:

FUNDS WILL BE USED TO OFFER CONCERTS AND OTHER CULTURAL ACTIVITIES IN THE WOODSIDE AREA. FUNDS WILL ALSO BE USED TO OFFSET GENERAL OPERATING EXPENSES.

Funded Amount:

$7,000

Requested By:

LAFAYETTE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WORKING HARBOR COMMITTEE, INC.
455 WEST 43RD STREET
NEW YORK, NY  10036
(212) 581-0454

Name of Project Director:

MEG BLACK

Purpose of Project:

FUNDS WILL BE USED TO INTRODUCE HIGH SCHOOL STUDENTS TO THE MARITIME INDUSTRY. WHC WILL ALSO SEEK TO PLACE INTERESTED STUDENTS IN MARITIME INTERNSHIP PROGRAMS.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

WORKMENS CIRCLE
45 EAST 33RD STREET
NEW YORK, NY  10016
(212) 889-6800

Name of Project Director:

MARTIN SCHWARTZ

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE QUEENS FESTIVAL OF YIDDISH MUSIC WHICH IS OPEN TO THE ENTIRE QUEENS COMMUNITY.

Funded Amount:

$1,000

Requested By:

PHEFFER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
LEGAL NAME, ADDRESS, AND TELEPHONE NUMBER:

WORKMENS CIRCLE
45 EAST 33RD STREET
NEW YORK, NY 10016
(212) 889-6800

NAME OF PROJECT DIRECTOR:

ADRIENNE COOPER

PURPOSE OF PROJECT:

FUNDS WILL BE USED FOR MUSIC FESTIVAL CONCERTS IN PUBLIC PARKS.

FUNDED AMOUNT:

$2,500

REQUESTED BY:

ROSENTHAL

NAME OF ADMINISTERING STATE AGENCY:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WORKMENS CIRCLE
574 EAST MEADOW AVENUE
EAST MEADOW, NY  11554
(516) 794-0506

Name of Project Director:

LISA STEIN

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE YIDDISH MUSIC FESTIVAL WHICH PROVIDES CULTURAL ENTERTAINMENT TO SENIOR CITIZENS AND FAMILIES IN THE GREATER LONG ISLAND REGION.

Funded Amount:

$1,000

Requested By:

LAVINE

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WORKMENS CIRCLE
45 EAST 33RD STREET
NEW YORK, NY  10016
(212) 889-6800

Name of Project Director:

GEORGE MANDEL

Purpose of Project:

FUNDS WILL BE USED TO PUBLICIZE A YIDDISH MUSIC AND THEATER FESTIVAL IN WESTCHESTER COUNTY.

Funded Amount:

$10,000

Requested By:

BRADLEY, BRODSKY, LATIMER, PAULIN, PRETLOW

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WORKMENS CIRCLE
45 EAST 33RD STREET
NEW YORK, NY   10016
(212) 889-6800   215

Name of Project Director:

MARTIN SCHWARTZ

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE QUEENS FESTIVAL OF YIDDISH MUSIC WHICH IS OPEN TO THE ENTIRE QUEENS COMMUNITY.

Funded Amount:

$5,000

Requested By:

MAYERSOHN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WORKMENS CIRCLE
45 EAST 33RD STREET
NEW YORK, NY  10016
(212) 889-6800

Name of Project Director:

DANA SCHNEIDER

Purpose of Project:

FUNDS WILL BE USED FOR AN ANNUAL SERIES OF FREE CONCERTS IN NEW YORK CITY PARKS SHOWCASING KLEZMER AND OTHER ASPECTS OF YIDDISH MUSIC AND CULTURE AND ITS CONTRIBUTION TO THE ETHNIC DIVERSITY OF NEW YORK. FUNDS WILL HELP COVER THE COSTS OF PERFORMER’S FEES, MARKETING, AND OUTREACH.

Funded Amount:

$2,500

Requested By:

GOTTFRIED

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

WYCKOFF HOUSE AND ASSOCIATION, INC.
5816 CLARENDON ROAD
BROOKLYN, NY 11203
(718) 629-5400

Name of Project Director:

SEAN SAWYER

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT PUBLIC EDUCATION EVENTS AND WORKSHOPS AT THE MUSEUM.

Funded Amount:

$5,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

YONKERS PHILHARMONIC ORCHESTRA
82 HILLCREST AVENUE
YONKERS, NY 10705
(914) 964-8163

Name of Project Director:

JOYCE HENERY

Purpose of Project:

FUNDS WILL BE USED FOR FREE CONCERT SERIES

Funded Amount:

$5,000

Requested By:

SPANO

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

YOUNG AUDIENCES OF WESTERN NEW YORK, INC.
16 LINWOOD AVENUE
BUFFALO, NY 14209
(716) 881-0917

Name of Project Director:

HELGA MACKINNON

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT VISUAL PERFORMING AND LITERACY ARTS PROGRAMMING FOR CHILDREN THROUGHOUT WNY.

Funded Amount:

$4,000

Requested By:

DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
Legal Name, Address, and Telephone Number:

YOUNG DANCERS IN REPERTORY, INC.
P.O. BOX 205037, SUNSET STATION
BROOKLYN, NY 11220-7037
(718) 567-9620

Name of Project Director:

CRAIG GABRIAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE EDUCATIONAL AND ARTISTIC PROGRAMS AND DANCE PERFORMANCES THROUGHOUT THE YEAR.

Funded Amount:

$5,000

Requested By:

ORTIZ

Name of Administering State Agency:

OFFICE OF PARKS, RECREATION AND HISTORIC PRESERVATION
SFY 2007 – 2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

BUFFALO STATE CTR. FOR EXCELLENCE IN URBAN & RURAL EDUCATION
1300 ELMWOOD AVENUE
BUFFALO, NY 14222 – 1095
(716) 878 – 4312

Name of Project Director:
DAN KING

Purpose of Project:
FUNDS WILL BE USED TO PROVIDE PRESERVICE TRAINING, RECRUITMENT
ASSISTANCE AND PERSONNEL SUPPORT AIMED AT IMPROVING EDUCATION
IN URBAN AND RURAL SCHOOL DISTRICTS.

Funded Amount:
$100,000

Requested By:
DELMONTE, GABRYSZAK, HOYT, PEOPLES, SCHIMMINGER, SCHROEDER

Name of Administering State Agency:
STATE UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

NY LATINO RESEARCH NETWORK (NYLARNET)
C/O LA&CS OFFICE, UNIVERSITY AT ALBANY
1400 WASHINGTON AVE., ALBANY, NY 12222
(518) 442 – 3300

Name of Project Director:

DR. JOSE CRUZ

Purpose of Project:

FUND$ WILL BE USED TO CONTINUE THE WORK OF A MULTI–CAMPUS SPONSORED RESEARCH ON LATINO HEALTH, IMMIGRATION, EDUCATION AND OTHER POLICY ISSUES.

Funded Amount:

$75,000

Requested By:


Name of Administering State Agency:

STATE UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

   PLATTSBURGH STATE UNIVERSITY OF NEW YORK
   211 BEAUMONT HALL, 101 BROAD STREET
   PLATTSBURGH, NY 12901
   (518) 564-3076

Name of Project Director:

   PATRICIA EGAN

Purpose of Project:

   FUNDS WILL BE USED FOR NEXUS PROGRAM FOR AUTISTIC CHILDREN-
   ADDITIONAL CHILDREN PARTICIPATION AND CONFERENCE FOR FAMILIES
   OF AUTISTIC CHILDREN

Funded Amount:

   $10,000

Requested By:

   DUPREY

Name of Administering State Agency:

   STATE UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

RESEARCH FOUNDATION OF STATE UNIVERSITY OF NEW YORK
OFFICE OF RESEARCH SERVICES - SUNY @ STONY BROOK
STONY BROOK, NY 11790
(631) 632-9039

Name of Project Director:

DR. OWEN EVANS

Purpose of Project:

FUNDS WILL BE USED TO EXPAND COOPERATION BETWEEN THE MUSEUM OF LONG ISLAND NATURAL SCIENCES AND OTHER INSTITUTIONS, INCLUDING LOCAL SCHOOL DISTRICTS, IN ORDER TO SERVE THE GENERAL PUBLIC OF LONG ISLAND.

Funded Amount:

$19,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

STATE UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

STATE UNIVERSITY AT STONY BROOK – NY SEA GRANT INSTITUTE
121 DISCOVERY HALL
STONY BROOK, NY 11794 – 5001
(631) 632 – 6905

Name of Project Director:

JACK MATTICE

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT A RESEARCH PROGRAM IN EDUCATION, WHICH WORKS TOWARDS FINDING BETTER WAYS TO PROTECT MARINE AND GREAT LAKES COASTAL RESOURCES IN NEW YORK STATE. FUNDING WILL ALSO BE USED TO MAINTAIN A STAFF FOR THE PROGRAM.

Funded Amount:

$75,000

Requested By:

AUBERTINE

Name of Administering State Agency:

STATE UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

SUNY GENESEO
1 COLLEGE CIRCLE
GENESEO, NY 14454
(585) 245-5501

Name of Project Director:

CHRISTOPHER C. DAHL

Purpose of Project:

FUNDS WILL BE USED FOR GEOLOGICAL SCIENCE INSTRUMENT UPGRADES

Funded Amount:

$7,500

Requested By:

BURLING

Name of Administering State Agency:

STATE UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

SUNY GENESEO CREW CLUB
19 WARD PLACE
GENESEO, NY 14454
(585) 366-6340

Name of Project Director:

JAIMEE PECKHAM

Purpose of Project:

FUNDS WILL BE USED FOR EQUIPMENT

Funded Amount:

$2,000

Requested By:

BURLING

Name of Administering State Agency:

STATE UNIVERSITY OF NEW YORK
SFY 2007-2008 LEGISLATIVE INITIATIVE FORM

Legal Name, Address, and Telephone Number:

SUNY OLD WESTBURY
223 STORE HILL ROAD
OLD WESTBURY, NY 11568
(516) 867-3000

Name of Project Director:

CALVIN BUTTS

Purpose of Project:

FUNDS WILL BE USED FOR A MICROCOMPUTER BASED LABORATORY LEARNING AND TEACHING RESOURCE CENTER

Funded Amount:

$3,000

Requested By:

WALKER

Name of Administering State Agency:

STATE UNIVERSITY OF NEW YORK
Legal Name, Address, and Telephone Number:

SUNY STONY BROOK
310 ADMINISTRATION BUILDING
STONY BROOK, NY 11794
(631) 632-6302

Name of Project Director:

JANICE ROHLF

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATIONS

Funded Amount:

$5,000

Requested By:

THIELE

Name of Administering State Agency:

STATE UNIVERSITY OF NEW YORK