

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

BOYS & GIRLS CLUBS OF THE NORTHTOWNS OF WNY, INC., THE  
54 RIVERDALE AVENUE  
BUFFALO, NY 14207  
(716) 873-9842

**Name of Project Director:**

PHIL PENICHTER

**Purpose of Project:**

FUNDS WILL BE USED FOR RENOVATIONS TO THE FRANKLIN CLUB  
AND TOWN CLUB LOCATIONS, WHICH PROVIDE THE LOCAL YOUTH  
WITH A SAFE AND CONSTRUCTIVE ENVIRONMENT.

**Funded Amount:**

\$50,000

**Requested By:**

SCHIMMINGER

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

BRONX COUNTY HISTORICAL SOCIETY, THE  
3309 BAINBRIDGE AVENUE  
BRONX, NY 10467  
(718) 881-8900

**Name of Project Director:**

DR. GARY HERMALYN

**Purpose of Project:**

FUNDS WILL BE USED TO RENOVATE THE ARCHIVES AND  
ADMINISTRATION OFFICE BUILDING, WHICH SERVES THE  
COMMUNITY BY COLLECTING, PRESERVING, AND DOCUMENTING THE  
HISTORY OF THE BRONX.

**Funded Amount:**

\$50,000

**Requested By:**

DINOWITZ

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

CATSKILL ART SOCIETY, INC.  
256 MAIN STREET  
HURLEYVILLE, NY 12747  
(845) 436-4227

**Name of Project Director:**

RICHARD REEVE

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE FURNITURE, TECHNOLOGY, FIXTURES AND SIGNAGE IN AN EFFORT TO CONTINUE PROVIDING RESOURCES AND A PLACE FOR THE CREATIVE DEVELOPMENT OF ARTISTS AND ART STUDENTS.

**Funded Amount:**

\$50,000

**Requested By:**

GUNTHER-A

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

CENTRAL BROOKLYN COMMUNITY SERVICES CORP.  
1958 FULTON STREET  
BROOKLYN, NY 11233  
(718) 363-2750

**Name of Project Director:**

WILLIE WREN, SR.

**Purpose of Project:**

FUNDS WILL BE USED TO RENOVATE THE BROWNSVILLE MULTI-SERVICE CENTER. THE CENTER HOUSES MULTIPLE NOT-FOR-PROFITS THAT SERVE THE COMMUNITY.

**Funded Amount:**

\$120,000

**Requested By:**

BOYLAND

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

CENTRAL BROOKLYN COMMUNITY SERVICES CORP.  
1958 FULTON STREET  
BROOKLYN, NY 11233  
(718) 363-2750

**Name of Project Director:**

WILLIE WREN, SR.

**Purpose of Project:**

FUNDS WILL BE USED TO RENOVATE THE BEDFORD-STUYVESANT MULTI-SERVICE CENTER. THE CENTER HOUSES MULTIPLE NOT-FOR-PROFITS THAT SERVE THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

ROBINSON

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

CHAI LIFELINE, INC.  
151 WEST 30TH STREET  
NEW YORK, NY 10001  
(212) 465-1300

**Name of Project Director:**

RABBI SIMCHA SCHOLAR

**Purpose of Project:**

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A FACILITY AT CAMP SIMCHA, WHICH WILL SERVE TERMINALLY ILL AND DISABLED CHILDREN AND THEIR FAMILIES BY PROVIDING SUPPORT AND SPECIALIZED PROGRAMS.

**Funded Amount:**

\$100,000

**Requested By:**

MAYERSOHN

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

DOWLING COLLEGE  
IDLE HOUR BOULEVARD  
OAKDALE, NY 11769  
(631) 244-3200

**Name of Project Director:**

DR. ALBERT DONOR

**Purpose of Project:**

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A BUILDING THAT  
WILL BE USED FOR THE EDUCATIONAL AND CULTURAL NEEDS OF  
THE COLLEGE AND THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

FIELDS

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

FORT WASHINGTON HOUSES SERVICES FOR THE ELDERLY, INC.  
99 FORT WASHINGTON AVENUE  
NEW YORK, NY 10032  
(212) 927-5600

**Name of Project Director:**

REBECCA CAREL

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE FURNITURE AND EQUIPMENT FOR "COMMUNITY CAREGIVING", WHICH IS AN ADULT DAY SERVICES PROGRAM THAT PROVIDES CARE TO PEOPLE WITH MEMORY LOSS CAUSED BY ALZHEIMER'S DISEASE AND OTHER CONDITIONS, AS WELL AS SUPPORT FOR THEIR CAREGIVERS.

**Funded Amount:**

\$200,000

**Requested By:**

ESPAILLAT, FARRELL, JR

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY



# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

GLEN COVE CITY SCHOOLS  
THAYER ADMINISTRATION BUILDING, DOSORIS LANE  
GLEN COVE, NY 11542  
(516) 759-7223

**Name of Project Director:**

ROBERT NOETZEL

**Purpose of Project:**

FUNDS WILL BE USED TO RENOVATE FLOORS IN TWENTY-FOUR EDUCATIONAL CLASSROOMS AND REHABILITATE THE OUTSIDE STAIRCASE, WHICH WILL PROVIDE A SAFE LEARNING ENVIRONMENT FOR STUDENTS.

**Funded Amount:**

\$50,000

**Requested By:**

LAVINE

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

GRAND ISLAND CENTRAL SCHOOL DISTRICT  
1100 RANSOM ROAD  
GRAND ISLAND, NY 10472  
(716) 773-8804

**Name of Project Director:**

LORAIN INGRASCI

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE AND INSTALL PLAYGROUND EQUIPMENT AT THE HUTH ROAD PLAYGROUND, AND FOR THE INSTALLATION OF SECURITY SYSTEMS AT THE MIDDLE AND HIGH SCHOOLS IN ORDER TO INCREASE THE SAFETY AND SECURITY OF THE SCHOOL DISTRICT.

**Funded Amount:**

\$50,000

**Requested By:**

HOYT

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

GREATER FIVE TOWNS YM & YWHA, INC., (D/B/A JCC OF THE  
GREATER FIVE TOWNS)  
207 GROVE AVENUE  
CEDARHURST, NY 11516  
(516) 569-6733

**Name of Project Director:**

CATHY BYRNE

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE COMPUTERS AND EQUIPMENT,  
WHICH WILL ASSIST AND SUPPORT THE AGENCY IN PROVIDING  
SERVICES TO THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

WEISENBERG

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

HOMECREST COMMUNITY SERVICES, INC.  
1413 AVENUE T  
BROOKLYN, NY 11229  
(718) 376-4036

**Name of Project Director:**

RICHARD P. KUO

**Purpose of Project:**

FUNDS WILL BE USED FOR THE RENOVATION AND REHABILITATION OF THE HOMECREST SENIOR CENTER, WHICH PROVIDES SERVICES TO SENIOR CITIZENS.

**Funded Amount:**

\$100,000

**Requested By:**

CYMBROWITZ-S, WEINSTEIN

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**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 FOR THE RENOVATION OF THE FACILITY,  
INCLUDING THE INSTALLATION OF AN ELEVATOR IN ORDER TO  
CONTINUE PROVIDING SOCIAL SERVICE PROGRAMS TO THE LOCAL  
COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

PHEFFER

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

LOCH SHELDRAKE FIRE CO. NO. 1 INC.  
1280 ROUTE 52  
LOCH SHELDRAKE, NY 12759  
(845) 434-4880

**Name of Project Director:**

J. LAURENCE KRAMER

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE RADIOS, PAGERS AND TURN OUT GEAR FOR THE VOLUNTEERS OF THE FIRE DEPARTMENT. THIS UPDATED EQUIPMENT WILL PROTECT THE FIREFIGHTERS AS THEY SERVE THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

GUNTHER-A

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

LONG BEACH MEDICAL CENTER  
455 EAST BAY DRIVE  
LONG BEACH, NY 11561  
(516) 897-1208

**Name of Project Director:**

DOUGLAS L. MELZER

**Purpose of Project:**

FUNDS WILL BE USED TO RENOVATE THE FACILITY TO CREATE A  
MEDICALLY MANAGED DRUG AND ALCOHOL DETOXIFICATION UNIT.

**Funded Amount:**

\$50,000

**Requested By:**

WEISENBERG

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

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

**Name of Project Director:**

ROBERT WACHEWSKI

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE OFFICE EQUIPMENT,  
FURNITURE AND COMPUTERS FOR THE BROOKLYN WOMEN'S  
SERVICES OFFICES.

**Funded Amount:**

\$100,000

**Requested By:**

ABBATE

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY



# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

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

**Name of Project Director:**

ROBERT WACHEWSKI

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE A CT SCANNER FOR THE EMERGENCY DEPARTMENT, WHICH WILL ALLOW THE MEDICAL CENTER TO CONTINUE TO PROVIDE HIGH QUALITY PATIENT CARE FOR THE ENTIRE COMMUNITY.

**Funded Amount:**

\$450,000

**Requested By:**

ABBATE, JACOBS, ORTIZ

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

MANHATTAN YOUTH RECREATION AND RESOURCES, INC.  
225 BROADWAY, SUITE 1020  
NEW YORK, NY 10007  
(212) 766-1104

**Name of Project Director:**

BOB TOWNLEY

**Purpose of Project:**

FUNDS WILL BE USED TO INSTALL AN ELEVATOR IN THE DOWNTOWN COMMUNITY CENTER. THE CENTER PROVIDES HIGH QUALITY PROGRAMS AND ACTIVITIES TO THE RESIDENTS OF LOWER MANHATTAN.

**Funded Amount:**

\$50,000

**Requested By:**

GLICK

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

MIDDLE VILLAGE SENIOR CITIZENS CENTER, INC.  
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 RENOVATE THE FOOD PREPARATION AREA,  
IN ORDER TO CONTINUE MEETING THE NUTRITIONAL NEEDS OF THE  
SENIOR CITIZENS IN THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

HEVESI-A

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

MINEOLA UNION FREE SCHOOL DISTRICT  
121 JACKSON AVENUE  
MINEOLA, NY 11501  
(516) 237-2001

**Name of Project Director:**

DR. LORENZO LICOPOLI

**Purpose of Project:**

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A LIBRARY/MEDIA ROOM AT THE MEADOW DRIVE ELEMENTARY SCHOOL.

**Funded Amount:**

\$50,000

**Requested By:**

DINAPOLI

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

MOHAWK AND HUDSON RIVER HUMANE SOCIETY  
3 OAKLAND AVENUE  
MENANDS, NY 12204  
(518) 434-8128

**Name of Project Director:**

BRAD SHEAR

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE AND INSTALL NEW DOG KENNELS TO PROVIDE SAFE AND HEALTHY LIVING CONDITIONS FOR BOARDED ANIMALS, AS WELL AS A SAFE ENVIRONMENT FOR THE STAFF AND THE PUBLIC.

**Funded Amount:**

\$50,000

**Requested By:**

REILLY

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

MOHAWK VALLEY COMMUNITY COLLEGE  
1101 SHERMAN DRIVE  
UTICA, NY 13501  
(315) 792-5445

**Name of Project Director:**

RALPH FEOLA

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE EQUIPMENT AND UPGRADE THE SIMULATION LAB FOR THE PART 147 AIRFRAME AND POWERPLANT SCHOOL AT THE GRIFFISS BUSINESS & TECHNOLOGY PARK, WHICH WILL ENHANCE THE CAREER SKILLS OF THE MVCC AIRFRAME AND POWERPLANT STUDENTS.

**Funded Amount:**

\$50,000

**Requested By:**

DESTITO

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

MOLLOY COLLEGE  
1000 HEMPSTEAD AVENUE, P.O. BOX 5002  
ROCKVILLE CENTRE, NY 11571  
(516) 678-5000

**Name of Project Director:**

DR. SHERRY RADOWITZ

**Purpose of Project:**

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A CAREER PLANNING CENTER TO ENCOURAGE GRADUATES TO REMAIN ON LONG ISLAND, BY ASSISTING THEM IN EXPLORING DIFFERENT CAREER OPPORTUNITIES.

**Funded Amount:**

\$50,000

**Requested By:**

HOOPER

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

MOUNT HOPE COMMUNITY CENTER, INC.  
2003-05 WALTON AVENUE  
BRONX, NY 10453  
(718) 583-7017

**Name of Project Director:**

SHAUN M. BELLE

**Purpose of Project:**

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A COMMUNITY CENTER, WHICH WILL PROVIDE SERVICES TO ALL IN THE COMMUNITY.

**Funded Amount:**

\$100,000

**Requested By:**

DIAZ-L

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY



# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

MT. SINAI HERITAGE TRUST INC.  
8 GARDENIA ROAD  
MT. SINAI, NY 11766  
(631) 473-2206

**Name of Project Director:**

LORI BALDASSARE

**Purpose of Project:**

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A COMMUNITY CENTER, WHICH IS OPEN TO ALL IN THE COMMUNITY.

**Funded Amount:**

\$300,000

**Requested By:**

ALESSI, ENGLEBRIGHT

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

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

**Name of Project Director:**

GRAHAM GORDON

**Purpose of Project:**

FUNDS WILL BE USED FOR THE RENOVATION OF THE AUDITORIUM INCLUDING UPGRADES TO THE LIGHTING, AUDIO/VISUAL AND CIRCULATION SYSTEMS AT P.S. 30.

**Funded Amount:**

\$50,000

**Requested By:**

ARROYO

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

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

**Name of Project Director:**

GRAHAM GORDON

**Purpose of Project:**

FUNDS WILL BE USED TO UPGRADE THE WIRING AND INSTALL AIR  
CONDITIONER UNITS IN CLASSROOMS AT P.S. 179 TO ENSURE AN  
ENVIRONMENT CONDUCIVE TO LEARNING.

**Funded Amount:**

\$50,000

**Requested By:**

BRENNAN

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

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

**Name of Project Director:**

GRAHAM GORDON

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR C.S. 66, P.S. 69,  
P.S. 152, AND BANANA KELLY HIGH SCHOOL.

**Funded Amount:**

\$200,000

**Requested By:**

DIAZ-R

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

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

**Name of Project Director:**

GRAHAM GORDON

**Purpose of Project:**

FUNDS WILL BE USED TO UPGRADE THE TECHNOLOGY  
INFRASTRUCTURE AT THE IRWIN ALTMAN MIDDLE SCHOOL 172,  
WHICH WILL ALLOW STUDENTS AND TEACHERS ACCESS TO MODERN  
COMPUTERS.

**Funded Amount:**

\$50,000

**Requested By:**

WEPRIN

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

PORT WASHINGTON UNION FREE SCHOOL DISTRICT  
100 CAMPUS DRIVE  
PORT WASHINGTON, NY 11050  
(516) 767-5011

**Name of Project Director:**

MARY CALLAHAN

**Purpose of Project:**

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A NEW TRACK,  
WHICH WILL ENHANCE THE SPORTS AREA OF THE EDUCATIONAL  
FACILITY.

**Funded Amount:**

\$50,000

**Requested By:**

DINAPOLI

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

QUEENS COMMUNITY HOUSE, INC.  
108-25 62ND DRIVE  
FOREST HILLS, NY 11375  
(718) 592-5757

**Name of Project Director:**

NAOMI ALTMAN

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE TWO SEVEN-PASSENGER MINIVANS, WHICH WILL BE USED TO FACILITATE THE DELIVERY OF MEALS TO HOMEBOUND SENIOR CITIZENS IN THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

HEVESI-A

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

RIVERDALE NEIGHBORHOOD HOUSE, INC.  
5521 MOSHOLU AVENUE  
BRONX, NY 10471  
(718) 549-8100

**Name of Project Director:**

DANIEL EUDENE

**Purpose of Project:**

FUNDS WILL BE USED TO RENOVATE THE TEEN CENTER, WHICH SERVES THE NORTHWEST BRONX COMMUNITY.

**Funded Amount:**

\$250,000

**Requested By:**

DINOWITZ

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY



# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

ROCHESTER MUSEUM OF SCIENCE CENTER, THE  
657 EAST AVENUE  
ROCHESTER, NY 14607  
(585) 271-4552

**Name of Project Director:**

KATE BENNETT

**Purpose of Project:**

FUNDS WILL BE USED FOR RENOVATIONS RELATED TO CREATING THE INNOVATION PLACE EXHIBIT. THIS EXHIBIT WILL CELEBRATE ROCHESTER'S INVENTIVE AND ENTREPRENEURIAL ACCOMPLISHMENTS AND STIMULATE THE NEXT GENERATION OF INVENTORS AND ENTREPRENEURS.

**Funded Amount:**

\$50,000

**Requested By:**

MORELLE

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

SOUTHLINE LITTLE LEAGUE, INC.  
92 WEST CHERBOURG DRIVE  
CHEEKTOWAGA, NY 14227  
(716) 602-7911

**Name of Project Director:**

DARRYL KUMRO

**Purpose of Project:**

FUNDS WILL BE USED FOR THE CONSTRUCTION AND RENOVATION OF HANDICAPPED ACCESSIBLE RESTROOMS, AS WELL AS THE CONSTRUCTION OF A CONCESSION STAND TO BE USED BY ALL IN THE COMMUNITY.

**Funded Amount:**

\$60,000

**Requested By:**

TOKASZ

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

ST. ELIZABETH MEDICAL CENTER  
2209 GENESEE STREET  
UTICA, NY 13501  
(315) 734-3090

**Name of Project Director:**

SISTER M. JOHANNA DELELYS

**Purpose of Project:**

FUNDS WILL BE USED TO RENOVATE, EXPAND AND MODERNIZE THE EMERGENCY/TRAUMA DEPARTMENT, AS WELL AS PURCHASE EQUIPMENT IN ORDER TO BETTER SERVE PATIENTS IN THE COMMUNITY.

**Funded Amount:**

\$100,000

**Requested By:**

DESTITO

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

ST. FRANCIS COLLEGE  
180 REMSEN STREET  
BROOKLYN HEIGHTS, NY 11201  
(718) 489-5466

**Name of Project Director:**

BRENDAN P. CONSIDINE

**Purpose of Project:**

FUNDS WILL BE USED FOR FACILITY RENOVATIONS, AS WELL AS THE PURCHASE OF EQUIPMENT FOR THE PURPOSE OF CREATING A STATE-OF-ART NURSING EDUCATION LABORATORY. THE LAB IS ESSENTIAL TO THE COLLEGE'S EFFORTS IN PREPARING STUDENTS FOR ENTERING THE NURSING PROFESSION.

**Funded Amount:**

\$100,000

**Requested By:**

ABBATE, SEMINERIO

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

ST. PETER'S HOSPITAL FOUNDATION, INC.  
319 S. MANNING BOULEVARD, SUITE 309  
ALBANY, NY 12208  
(518) 482-4433

**Name of Project Director:**

MAUREEN YEE

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE AND INSTALL MEDICAL  
EQUIPMENT TO BETTER SERVE PATIENTS.

**Funded Amount:**

\$250,000

**Requested By:**

CANESTRARI, MCENENY

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

STARLIGHT STARBRIGHT CHILDREN'S FOUNDATION, THE  
1560 BROADWAY, SUITE 600  
NEW YORK, NY 10036  
(212) 354-2878

**Name of Project Director:**

ELAINE SIVER

**Purpose of Project:**

FUNDS WILL BE USED TO DESIGN AND INSTALL A SCULPTURE AT THE  
ENTRANCE OF ELMHURST PEDIATRIC EMERGENCY AND TRAUMA  
CENTER.

**Funded Amount:**

\$50,000

**Requested By:**

CYMBROWITZ-S

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

STATE UNIVERSITY OF NEW YORK, COLLEGE AT OLD WESTBURY  
223 STORE HILL ROAD  
OLD WESTBURY, NY 11568  
(516) 876-3160

**Name of Project Director:**

MONA RANKIN

**Purpose of Project:**

FUNDS WILL BE USED FOR THE PURCHASE OF COMPUTERS, EQUIPMENT, AND FURNITURE FOR THE CURRICULUM MATERIALS CENTER. THE CENTER PROVIDES A COLLECTION OF LIBRARY RESOURCES AND SERVICES TO SUPPORT STUDENTS FROM PRE-K TO COLLEGE ALUMNI, AS WELL AS MEMBERS OF THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

DINAPOLI

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

TORDIK, DIEDERICH, DUFFIELD POST NUMBER 4927, VETERANS OF  
FOREIGN WARS OF THE UNITED STATES, INCORPORATED  
31 HORSEBLOCK ROAD  
CENTEREACH, NY 11720  
(631) 585-7390

**Name of Project Director:**

DENNIS SULLIVAN

**Purpose of Project:**

FUNDS WILL BE USED TO REPLACE THE HVAC UNIT AND ROOF AT  
THIS FACILITY, WHICH PROVIDES SERVICES TO WAR VETERANS, AS  
WELL AS TO ALL IN THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

FIELDS

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY



# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

TOWN OF BRIGHTON  
2300 ELMWOOD AVENUE  
ROCHESTER, NY 14618  
(585) 784-5225

**Name of Project Director:**

THOMAS A. LOW

**Purpose of Project:**

FUNDS WILL BE USED FOR RESTORATION OF THE BUCKLAND FARMHOUSE, A HISTORIC SITE COMMEMORATING THE AGRICULTURAL AND BRICK MAKING TRADITIONS OF THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

MORELLE

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

TOWN OF HALFMOON  
111 ROUTE 236  
HALFMOON, NY 12065  
(518) 371-7410

**Name of Project Director:**

NELSON RONSVALLE

**Purpose of Project:**

FUNDS WILL BE USED FOR CONSTRUCTION AND INSTALLATION OF A SANITARY SEWER, A PUMPING STATION, AND AN ODOR CONTROL/GENERATOR BUILDING, WHICH WILL IMPROVE THE QUALITY OF LIFE FOR THE RESIDENTS OF THE COMMUNITY.

**Funded Amount:**

\$75,000

**Requested By:**

REILLY

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

TOWN OF HALFMOON  
111 ROUTE 236  
HALFMOON, NY 10265  
(518) 371-7410

**Name of Project Director:**

NELSON RONSVALLE

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE AND REFURBISH SIGNS THAT  
WILL DESIGNATE THE PHYSICAL TOWN LIMITS.

**Funded Amount:**

\$50,000

**Requested By:**

REILLY

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

TOWN OF PENFIELD  
3100 ATLANTIC AVENUE  
PENFIELD, NY 14526  
(585) 340-8647

**Name of Project Director:**

GEORGE C. WIEDEMER

**Purpose of Project:**

FUNDS WILL BE USED TO CONSTRUCT A ROAD, THAT WILL CONNECT PENFIELD ROAD/ROUTE 441 AND FIVE MILE LINE ROAD. THIS NEW ROAD WILL PROVIDE A SAFE, ALTERNATE ACCESS FOR THE RESIDENTS OF PENFIELD'S BUSIEST INTERSECTIONS.

**Funded Amount:**

\$50,000

**Requested By:**

KOON

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

TOWN OF WEBSTER  
1000 RIDGE ROAD  
WEBSTER, NY 14580  
(585) 872-1216

**Name of Project Director:**

MICHAEL J. CHIAPPERINI

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE A SPECIALIZED PATROL VEHICLE AND EQUIPMENT FOR THE POLICE DEPARTMENT. THE NEW EQUIPMENT WILL ENHANCE THE ABILITY OF THE POLICE DEPARTMENT TO PROVIDE SAFETY AND SECURITY TO THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

KOON

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

UNDERGROUND RAILROAD HISTORY PROJECT OF THE CAPITAL  
REGION, INC.  
54 BERTHA STREET  
ALBANY, NY 12209  
(518) 432-4432

**Name of Project Director:**

PAUL STEWART

**Purpose of Project:**

FUNDS WILL BE USED FOR THE RESTORATION AND RENOVATION OF  
THE STEPHEN AND HARRIET MYERS RESIDENCE, WHICH WILL BE  
USED AS A COMMUNITY HISTORIC SITE AND FOR EDUCATIONAL  
PURPOSES.

**Funded Amount:**

\$50,000

**Requested By:**

CANESTRARI, MCENENY

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER NEW YORK  
333 7TH AVENUE, 15TH FLOOR  
NEW YORK, NY 10001  
(212) 630-9633

**Name of Project Director:**

DENISE ZIMMER

**Purpose of Project:**

FUNDS WILL BE USED TO UPGRADE THE HVAC SYSTEM, AS WELL AS  
INSTALL A FIRE DETECTION SYSTEM AT THE GROSVENOR  
NEIGHBORHOOD HOUSE YMCA, WHICH PROVIDES YEAR-ROUND  
EDUCATIONAL, CAREER, CULTURAL AND COUNSELING SERVICES.

**Funded Amount:**

\$50,000

**Requested By:**

O'DONNELL

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER NEW YORK,  
THE  
333 SEVENTH AVENUE, 15TH FLOOR  
NEW YORK, NY 10001  
(212) 630-9633

**Name of Project Director:**

DENISE ZIMMER

**Purpose of Project:**

FUNDS WILL BE USED FOR THE ACQUISITION OF A NEW FACILITY FOR THE ROCKAWAY BRANCH, WHICH WILL INCLUDE A CHILDCARE AND TEEN CENTER TO SERVE THE COMMUNITY.

**Funded Amount:**

\$500,000

**Requested By:**

PHEFFER, TITUS

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY



# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

YOUNG MEN'S CHRISTIAN ASSOCIATION OF THE CAPITAL DISTRICT  
465 NEW KARNER ROAD  
ALBANY, NY 12205  
(518) 869-3500

**Name of Project Director:**

REGINA M. LAGATTA

**Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE EQUIPMENT FOR THE NORTH ALBANY YMCA. THIS NEW FACILITY WILL PROVIDE THE COMMUNITY WITH A HEALTHY ENVIRONMENT.

**Funded Amount:**

\$75,000

**Requested By:**

CANESTRARI, MCENENY

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY

# PROJECT INFORMATION

**Legal Name, Address, and Telephone Number:**

YOUNG, COL., CHARLES, POST NO. 398, OF THE AMERICAN LEGION,  
DEPARTMENT OF NEW YORK, INC.  
248 WEST 132ND STREET  
NEW YORK, NY 10027  
(212) 283-9701

**Name of Project Director:**

ELWOOD DUPREE

**Purpose of Project:**

FUNDS WILL BE USED TO RENOVATE THE BUILDING, AS WELL AS  
PURCHASE EQUIPMENT IN ORDER TO BETTER SERVE THE VETERANS  
OF THE COMMUNITY.

**Funded Amount:**

\$50,000

**Requested By:**

WRIGHT

**Name of Administering State Agency:**

NYS DORMITORY AUTHORITY