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

AFRIKAN POETRY THEATRE, INC., THE 176-03 JAMAICA AVENUE JAMAICA, NY 11432 (718) 523-3312

#### Name of Project Director:

JOHN WATUSI BRANCH

#### **Purpose of Project:**

FUNDS WILL BE USED FOR THE RENOVATIONS TO THE BUILDING'S FACADE.

#### **Funded Amount:**

\$100,000

#### Requested By:

SCARBOROUGH

#### Name of Administering State Agency:

Legal	Name.	, Address	, and '	Telep	hone	Numb	er:

AMERICAN RED CROSS IN GREATER NEW YORK 520 WEST 49TH STREET NEW YORK, NY 10019 (212) 875–2332

## Name of Project Director:

PAUL VITALE

#### **Purpose of Project:**

FUNDS WILL BE USED FOR THE INSTALLATION OF TWO-WAY RADIO ANTENNAS AND THE PURCHASE OF EQUIPMENT FOR A MASS CARE PREPARATION STATION TO ASSIST DISASTER SERVICE RESPONDERS.

#### **Funded Amount:**

\$100,000

#### Requested By:

**GOTTFRIED** 

#### Name of Administering State Agency:

# Legal Name, Address, and Telephone Number:

BUFFALO PHILHARMONIC ORCHESTRA SOCIETY, INC. 499 FRANKLIN STREET BUFFALO, NY 14202 (716) 885-0331

#### Name of Project Director:

MARGARET PHILLIPS

#### **Purpose of Project:**

FUNDS WILL BE USED TO UPGRADE THE SOCIETY'S COMPUTER TECHNOLOGY, INCLUDING THE PURCHASE OF HARDWARE AND SOFTWARE.

#### **Funded Amount:**

\$50,000

#### Requested By:

**TOKASZ** 

## Name of Administering State Agency:

Legal Name, A	ddress, and Telephone Number:
	CANTON-POTSDAM HOSPITAL 50 LEROY STREET POTSDAM, NY 13676 (315) 261-6001
Name of Project	ct Director:
	MARLINDA LAVALLEY
Purpose of Pro	oject:
	FUNDS WILL BE USED TO PURCHASE CARDIAC MONITORS AND UPGRADE THE INFORMATION TECHNOLOGY INFRASTRUCTURE IN THE EMERGENCY DEPARTMENT.
Funded Amou	nt:
	\$250,000
Requested By:	
	AUBERTINE

Name of Administering State Agency:

Legal Name, Ad	Legal Name, Address, and Telephone Number:		
	CITY OF ROCHESTER – ROCHESTER POLICE DEPARTMENT 185 EXCHANGE BOULEVARD ROCHESTER, NY 14614 (585) 428–7296		
Name of Project	t Director:		
	TONY PEREZ		
Purpose of Proj	ect:		
	FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF SECURITY CAMERAS IN THE NORTHWEST QUADRANT OF THE CITY.		
Funded Amount	t:		
	\$250,000		
Requested By:			
	JOHN		
Name of Administering State Agency:			

# Legal Name, Address, and Telephone Number: GREAT NECK CENTER FOR THE VISUAL & PERFORMING ARTS, INC., THE 113 MIDDLE NECK ROAD GREAT NECK, NY 11021 (516) 829-2570 Name of Project Director: **REGINA GIL Purpose of Project:** FUNDS WILL BE USED TO REPLACE THE FACILITY'S ROOF. **Funded Amount:** \$50,000 Requested By: DINAPOLI Name of Administering State Agency:

Legal Name, Ad	Legal Name, Address, and Telephone Number:			
	GREATER WOODHAVEN DEVELOPMENT CORPORATION 84–01 JAMAICA AVENUE WOODHAVEN, NY 11421 (718) 805–0202			
Name of Project	et Director:			
	MARIA A. THOMSON			
Purpose of Pro	ject:			
	FUNDS WILL BE USED TO MAKE RENOVATIONS TO THE MAIN OFFICE INCLUDING UPGRADING THE ELECTRICAL WIRING SYSTEM.			
Funded Amoun	nt:			
	\$50,000			
Requested By:				
	SEMINERIO			
Name of Administering State Agency:				

Legal Name,	Address.	, and Tele	phone I	Number:

HANDS ACROSS LONG ISLAND, INCORPORATED 159 BRIGHTSIDE AVENUE CENTRAL ISLIP, NY 11722 (631) 234–1925

#### Name of Project Director:

**ELLEN M. HEALION** 

#### **Purpose of Project:**

FUNDS WILL BE USED TO RENOVATE AN APARTMENT BUILDING WHOSE TENANTS INCLUDE INDIVIDUALS WITH DISABILITIES AND LOW INCOME FAMILIES.

#### **Funded Amount:**

\$50,000

#### Requested By:

**SWEENEY** 

#### Name of Administering State Agency:

JEFFERSONVILLE FIRE DISTRICT 4903 STATE ROUTE 52 JEFFERSONVILLE, NY 12748 (845) 482–4202

#### Name of Project Director:

THOMAS PUERSCHNER

#### **Purpose of Project:**

FUNDS WILL BE USED TO INSTALL A NEW ROOF AND UPGRADE THE HEATING SYSTEM.

#### **Funded Amount:**

\$50,000

#### Requested By:

**GUNTHER-A** 

## Name of Administering State Agency:

Legal	Name.	, Address	, and '	Telep	hone	Numb	er:

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 FOR RENOVATIONS OF THE GYM AND ADMINISTRATIVE OFFICES, INCLUDING ROOF AND RESTROOM REPAIRS. FUNDS WILL ALSO BE USED FOR THE PURCHASE OF EQUIPMENT.

#### **Funded Amount:**

\$72,000

#### Requested By:

WEINSTEIN

#### Name of Administering State Agency:

Legal Name,	Address.	and T	elepho	ne N	umber:

LYNCOURT UNION FREE SCHOOL DISTRICT 2707 COURT STREET SYRACUSE, NY 13208 (315) 455–7571

#### Name of Project Director:

MICHAEL SANDORE

#### **Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE MUSICAL INSTRUMENTS AND EQUIPMENT, AS WELL AS TO UPGRADE THE SCHOOL AUDITORIUM'S SOUND AND LIGHTING SYSTEM.

#### **Funded Amount:**

\$50,000

#### Requested By:

CHRISTENSEN

#### Name of Administering State Agency:

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	t Director:		
	CAROLE MORRIS		
Purpose of Proj	ect:		
	FUNDS WILL BE USED FOR THE PURCHASE OF MEDICAL EQUIPMENT FOR THE GREENBURGH HEALTH CENTER.		
Funded Amount	t:		
:	\$50,000		
Requested By:			
	BRODSKY		
Name of Administering State Agency:			

# **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 PURCHASE AND INSTALLATION OF AIR CONDITIONER UNITS AT THE MADISON HIGH SCHOOL. **Funded Amount:** \$50,000 Requested By: WEINSTEIN Name of Administering State Agency:

Legal Name, Address, and Telephone Number:				
4 C	IEW YORK HALL OF SCIENCE 701 111TH STREET CORONA, NY 11368 718) 699–0005			
Name of Project I	Director:			
D	OAN WEMPA			
Purpose of Proje	ect:			
C T	FUNDS WILL BE USED TO EXPAND THE "PRESCHOOL PLACE" EARLY CHILDHOOD EXHIBITION, WHICH INCLUDES LAB REFURBISHMENTS, ECHNOLOGY PURCHASES, AS WELL AS THE PURCHASE OF EQUIPMENT AND FURNITURE.			
Funded Amount:				
\$	50,000			
Requested By:				
А	NUBRY			
Name of Administering State Agency:				

Legal Name,	Address.	, and Tele	phone I	Number:

NYSARC, INC. 189 WHEATLEY ROAD BROOKVILLE, NY 11545 (516) 626–1000

#### Name of Project Director:

JOHANNA M. RICHMAN

#### **Purpose of Project:**

FUNDS WILL BE USED TO RENOVATE THE SEVERAL BUILDINGS AT CAMP LOYALTOWN TO MAKE THEM ACCESSIBLE TO INDIVIDUALS WITH PHYSICAL CHALLENGES.

#### **Funded Amount:**

\$50,000

#### Requested By:

WEISENBERG

#### Name of Administering State Agency:

Legal Name, Address, and Telephone Number:			
	POLICE ATHLETIC LEAGUE, INC. 34 1/2 EAST 12TH STREET NEW YORK, NY 10003 (212) 477–9450		
Name of Project	ct Director:		
	RICH NAPOLITANO		
Purpose of Project:			
	FUNDS WILL BE USED FOR THE RENOVATION OF KITCHEN FACILITIES, UPGRADE OF THE AIR CONDITIONING SYSTEM, AND THE PURCHASE OF EQUIPMENT.		
Funded Amou	nt:		
	\$178,000		
Requested By:			
	CLARK		
Name of Administering State Agency:			

# Legal Name, Address, and Telephone Number: QUEENS THEATRE IN THE PARK, INC. FLUSHING MEADOWS CORONA PARK CORONA, NY 11368 (718) 760-0686 Name of Project Director: ROBERT L. KAPLAN **Purpose of Project:** FUNDS WILL BE USED TO PURCHASE FURNITURE AND MODULAR RISERS. **Funded Amount:** \$50,000 Requested By: **SEMINERIO** Name of Administering State Agency:

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

ROCK HILL FIRE DISTRICT 61 GLEN WILD ROAD, P.O. BOX 52 ROCK HILL, NY 12775 (845) 292–4300

#### Name of Project Director:

STEVEN GOTTLIEB

#### **Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE A RESCUE BOAT AND AN EMERGENCY GENERATOR.

#### **Funded Amount:**

\$50,000

#### Requested By:

**GUNTHER-A** 

#### Name of Administering State Agency:

Legal Name, Address, and Telephone Number:				
	ROCKLAND FAMILY SHELTER, INC. 2 CONGERS ROAD NEW CITY, NY (845) 634–3391			
Name of Project Director:				
	CAROLYN FISH			
Purpose of Project:				
	FUNDS WILL BE USED TO PURCHASE FURNITURE FOR THE SHELTER.			
Funded Amount:				
	\$50,000			
Requested By:				
	ZEBROWSKI-K			
Name of Administering State Agency:				
	NYS DORMITORY AUTHORITY			

Legal Name,	Address.	, and Tele	phone I	Number:

S.L.E. LUPUS FOUNDATION, INC., THE 330 SEVENTH AVENUE, SUITE 1701 NEW YORK, NY 10001 (212) 685–4118

#### Name of Project Director:

KATE ANASTASIA

#### **Purpose of Project:**

FUNDS WILL BE USED TO PURCHASE COMPUTERS, OFFICE EQUIPMENT, AND FURNITURE FOR THE ORGANIZATION'S EDUCATION AND OUTREACH EFFORTS IN PELHAM PARKWAY, MORRIS PARK, AND EASTCHESTER GARDENS.

#### **Funded Amount:**

\$50,000

#### Requested By:

RIVERA-N

#### Name of Administering State Agency:

Legal Name, Address, and Telephone Number:				
	TOWN OF EASTCHESTER 40 MILL ROAD EASTCHESTER, NY 10709 (914) 771–3304			
Name of Project Director:				
	MICHELLE LISCIO			
Purpose of Project:				
	FUNDS WILL BE USED FOR THE CONSTRUCTION OF A FIELD HOUSE AT HAINDL FIELD.			
Funded Amount:				
	\$50,000			
Requested By:				
	PAULIN			
Name of Administering State Agency:				
	NYS DORMITORY AUTHORITY			

Legal Name, Address, and Telephone Number:			
	VILLAGE OF CLAYTON 425 MARY STREET CLAYTON, NY 13624 (315) 686–5552		
Name of Project Director:			
	GENEVA PHELPS MILLER		
Purpose of Project:			
	FUNDS WILL BE USED FOR THE CONSTRUCTION OF AN OBSERVATION DECK, INCLUDING THE PURCHASE OF AN ALL-WEATHER LIFT.		
Funded Amount:			
	\$50,000		
Requested By:			
	AUBERTINE		

Name of Administering State Agency: