

State Of Maryland

2023 Bond Initiative Fact Sheet

1. Name Of Project		
Comprehensive Community Wellness Resource and Services Center		
2. Senate Sponsor	3. House Sponsor	
Griffith	Charles	
4. Jurisdiction (County or Baltimore City)	5. Requested Amount	
Prince George's County	\$575,000	
6. Purpose of Bond Initiative		
the acquisition, planning, design, construction, repair, renovation, reconstruction, site improvement, and capital equipping of the Food 4 Thought Comprehensive Community Wellness, Resource & Services Center		
7. Matching Fund		
Requirements:	Type:	
Grant		
8. Special Provisions		
<input type="checkbox"/> Historical Easement	<input checked="" type="checkbox"/> Non-Sectarian	
9. Contact Name and Title	Contact Ph#	Email Address
Delegate Nick Charles		nick.charles@house.state.md.us
Steven W. Walls		(301)873-3684
10. Description and Purpose of Organization (Limit length to visible area)		

11. Description and Purpose of Project (Limit length to visible area)

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Round all amounts to the nearest \$1,000. The totals in Items 12 (Estimated Capital Costs) and 13 (Proposed Funding Sources) must match. The proposed funding sources must not include the value of real property unless an equivalent value is shown under Estimated Capital Costs.

12. Estimated Capital Costs

Acquisition	
Design	
Construction	
Equipment	
Total	\$0

13. Proposed Funding Sources - (List all funding sources and amounts.)

Total	\$0

14. Project Schedule (Enter a date or one of the following in each box. N/A, TBD or Complete)			
Begin Design	Complete Design	Begin Construction	Complete Construction
15. Total Private Funds and Pledges Raised	16. Current Number of People Served Annually at Project Site	17. Number of People to be Served Annually After the Project is Complete	
18. Other State Capital Grants to Recipients in the Past 15 Years			
Legislative Session	Amount	Purpose	
19. Legal Name and Address of Grantee		Project Address (If Different)	
20. Legislative District in Which Project is Located	25 - Prince George's County		
21. Legal Status of Grantee (Please Check One)			
Local Govt.	For Profit	Non Profit	Federal
[]	[]	[]	[]
22. Grantee Legal Representative		23. If Match Includes Real Property:	
Name:		Has An Appraisal Been Done?	Yes/No
Phone:			
Address:		If Yes, List Appraisal Dates and Value	

24. Impact of Project on Staffing and Operating Cost at Project Site			
Current # of Employees	Projected # of Employees	Current Operating Budget	Projected Operating Budget
25. Ownership of Property (Info Requested by Treasurer's Office for bond purposes)			
A. Will the grantee own or lease (pick one) the property to be improved?			
B. If owned, does the grantee plan to sell within 15 years?			
C. Does the grantee intend to lease any portion of the property to others?			
D. If property is owned by grantee any space is to be leased, provide the following:			
Lessee	Terms of Lease	Cost Covered by Lease	Square Footage Leased
E. If property is leased by grantee - Provide the following:			
Name of Leaser	Length of Lease	Options to Renew	
26. Building Square Footage:			
Current Space GSF			
Space to be Renovated GSF			
New GSF			

27. Year of Construction of Any Structures Proposed for Renovation, Restoration or Conversion	
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28. Comments	